THE OVERSIGHT COMMITTEE

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INTEREST Of Justice

YEAR 2024

ISSUED DOCUMENTS AND REPORTS FOR THE FIRST QUARTER

RE:SERIOUS BREACHES OF INTERNATIONAL OBLIGATIONS UNDER THE WORLD HEALTH ORGANIZATIONS COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE

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(GPW14), 2025–2028
Advancing health equity and health systems resilience in a turbulent world: a global health agenda for 2025–2028

January 12, 2024

My name is Dustin Bryce from IoJ and the collective action of the Global Science Integrity Task Force and Anti corruption unit I'd like to say thank you so much for this opportunity to speak here at this CSO's consultation today and for the GPW working group. we appreciate it for the involvement of CSO's I'll try to make this as quick as possible to allow others,

In the previous meeting we attended on Oct 30, 2023 GPW14, our sister organization free speech association was censored by World Health Organization after posting a video of UN head of communications saying the UN owns the science on climate and works with Google to rig the search results. SDG 13 climate emergency is not scientifically agreed upon and still in dispute.

In order for WHO to meet their obligation of science integrity the WHO must prove and debate the contentious science of climate emergency as well as the SDG 3 which involves the novel gene vaccine science.

We are very concerned that the SDG 3, involving unproven vaccine interventions about the mRNA and Viral vector, are unethical under Nuremberg Code and prohibited for affecting future generations without informed consent. We're callingthe Surgeon General of the State of Florida has issued a global call to action to halt mRNA due to the very real issue of proven DNA integration and WHO has failed to act appropriately by FAILING TO DELIST THE EUL FOR COVID VACCINES.

The WHO should not increase funding to the EUL program because we tried to contact people to delist the EUL yesterday as a matter of fact and the email is broken., there may not be enough staff in regards to this, so there is no way to actually delist the toxic covid vaccines. We cant stop the

global breach of obligations to human rights or protect the health and welfare of humanity because the EUL program is not functional and needs assistance.

We are very concerned that WHOs misinformation programs are censoring and silencing dissenting professionals such as our experts that speak out about this crime against humanity of experimentation on the genome. These WHO information management programs are causing global systematic widespread human rights violations and must be stopped not funded.
We're actually calling on Jeremy Farrar to create a global action and come in to speak to our chief scientists, some of our head chief scientists that we have formed in our collective action that we have created.

WHO's focus must be on the target of funding independent anti corruption actions because WHO refuses…

Would you please conclude?

Definitely

In conclusion,

We believe an independent monitoring, verification and assessment body at arm's length or separate from WHO such as our Global Science Integrity Task Force is crucial to success of the international system for pandemic preparedness and response. Being a primary stakeholder in PPR.

We haven't seen any public portal and we think there should at least be a public portal for them to participate in these events.

Thank you so much for the time to speak and sincerely we appreciate to have a voice and free speech.

Thank you…

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EXHIBIT 2

YEAR 2024

ISSUED DOCUMENTS AND
REPORTS FOR THE 1ST QUARTER

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Freedom of Information Act Appeal

January 21, 2024

TO: William H. Holzerland
Deputy Agency Chief FOIA Officer
U.S. Department of Health and Human Services
Office of the Assistant Secretary for Public Affairs
HHS.ACFO@hhs.gov

RE: Case No. 2023[redacted]FOIA-OS -
Sent via email: Response from HHS FOIA - 10/23/2023 6:21 AM
Dustin Bryce
Public Relations
Interest Of Justice
Entrega General, Lista Correo
San Isidro, San Jose, Perez Zeledon, 11901
Costa Rica
contact@interestofjustice.org

Dear Friends,

This is an appeal under the Freedom of Information Act. The request was assigned the following identification number: 2023-[redacted]-FOIA-OS. On 10/23/2023 6:21 AM, I received a response to my request in a letter signed by Arianne Perkins, Director, Initial FOIA Requests, FOI/Privacy Acts Division.

I appeal the denial of my information request sent March 10, 2023.

The documents that were "not found" must be disclosed under the FOIA because they are statutorily required reports for initiating DoD & HHS experimentation that must be in existence prior to the human research (experiments) using covid-19 vaccines or exports.

Our organization is not aware of any exemption to these required records, and if the DoD and HHS used an exemption or waiver to evade responsibility for issuing the reports we requested then we would like to know precisely which laws or authorities allow DoD and HHS to not have the requested reports.

Semantics and legal loopholes do not change the fact that under US and international law all clinical and non clinical research on humans are properly labelled as "experimentation" or biomedical research "experiments".

The covid-19 vaccines at the time of rollout were not approved and other than Corminarty which was recklessly and outrageously approved despite unfavorable risk to benefit ratio, all are still not approved, therefore the non approved covid-19 vaccines were and still are investigational under many laws and the word means experimental.

see: https://www.fda.gov/patients/learn-about-expanded-access-and-other-treatment-options/understanding-investigational-drugs#:~:text=An%20investigational%20drug%20can%20also,be%20used%20in%20that%20disease.

An investigational drug can also be called an experimental drug and is being studied to see if your disease or medical condition improves while taking it. Scientists are trying to prove in clinical trials:

- If the drug is safe and effective.
- How the drug might be used in that disease.
- How much of the drug is needed.
- Information about the potential benefits and risks of taking the drug.

and see: https://www.fda.gov/news-events/expanded-access/expanded-access-information-physicians#:~:text=Sometimes%20called%20%E2%80%9Ccompassionate%20use%E2%80%9D%2C,trials%20when%20no%20comparable%20or Investigational medical products have not yet been approved or cleared by FDA and FDA has not found these products to be safe and effective for their specific use. Furthermore, the investigational medical product may, or may not, be effective in the treatment of the condition, and use of the product may cause unexpected serious side effects.

HHS exports the experimental products to Costa Rica *(apparently with no* Delegation of Authority on record?), and the law there is clear: 9234: *ARTICLE 1.- Object of the law The purpose of this law is to regulate biomedical research with human beings in health matters, in the public and private sectors. Definitions Article 2: Experimental, clinical or interventional biomedical research: any scientific research in the area of health in which a preventive, diagnostic or therapeutic intervention is applied to human beings, in order to discover or verify the clinical, pharmacological or pharmacodynamic effects of an experimental product, a medical device or a clinical or surgical procedure; or that attempts to identify any adverse reaction to an experimental product, device, or procedure; or study the absorption, distribution, metabolism and excretion of an experimental product, in order to assess its safety and efficacy or assess the outcome of an unproven psychological intervention. For the purposes of this law, all references to clinical research shall be understood as experimental, clinical or interventional biomedical research in human beings in the area of health.*

We write on behalf of our organization Interest of Justice as well as for the best interest of the Comptroller of Costa Rica, who has tasked us the responsibility of investigating the irregularity of the covid-19 vaccine imports and use. We all require the requested information from the US government.

Disclosure of the documents we requested in is in the public interest because the information is likely to contribute significantly to public understanding of the operations or activities of government and is not primarily in any commercial interest.

We kindly request that you locate every item on the list of requested reports and immediately release any withheld documents not withstanding their exempt status, which must be explained in detail with HHS authority and reason for the exempt status.

The public interest in their release outweighs the public interest in withholding them because the Congress intent is to have the required records we requested issued prior to any research/experimentation using biological agents, which covid vaccines meet the exact definition of a biological agent and therefore, the requested reports must exist as a matter of HHS statutory obligations!

We need the records to be located and released or the precise reasons why DoD and HHS are not required to have them.

The information is required by Congress as a way to protect the welfare, safety and human rights of the people using HHS and DoD countermeasure products.

We require the requested reports to be provided promptly, or in the alternative, if they really do not exist *(which is doubtful)* we require HHS to explain point by point why each requested report does not exist in the record as it should be as a matter of law.

For instance, considering the sheer volume of exports of covid-19 vaccines from US to developing countries and COVAX, one would think the delegation of authority to export covid-19 vaccines should be a locatable record, as well as the other reasonable requests.

How could HHS and DoD have no agreement on record to roll out covid-19 vaccines using peacetime authority? Are we in war? The lack of these required records makes no sense and seems like a cover up. HHS cant find a single document out of our 3 simple FOIA requests.

Obviously there is a HUGE legal problem if these records are truly not in existence and HHS would owe detailed explanations why they are exempt from the statutory requirements and records we are requesting. The records are required in order for us to fulfill our mission to defend and protect human rights by holding government to account for their duties.

If you need to discuss this request, I can be reached at +[redacted]. Thank you for your consideration of this appeal.

Respectfully,

Dustin Bryce
Public Relations
Interest Of Justice
Entrega General, Lista Correo
San Isidro, San Jose, Perez Zeledon, 11901
Costa Rica
contact@interestofjustice.org

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EXHIBIT 3

YEAR 2024

ISSUED DOCUMENTS AND
REPORTS FOR THE 1ST QUARTER

INTEREST OF JUSTICE

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Interest of Justice speech:

January 22, 2024

Ladies and Gentlemen of the United Nations and Member States,

We are a coalition of hundreds of CSO's known as the Alliance for Ethical Governance for Future Generations. We comprise key constituencies and partner CSO members of WHO and HHS OGA, such as Interest of Justice, Free Speech Association, Global Scientific Integrity Task Force, anti-corruption unit and the International Association Of Human Rights Defenders

Today, I stand before you to discuss a matter of great importance: The protection of the human genome in the era of mRNA therapies and viral vectors. As we embrace the marvels of modern medicine, it is our duty to ensure that these advances do not compromise the very essence of our humanity—our genetic blueprint.

mRNA therapies and viral vectors represent a breakthrough in treating diseases by instructing our cells to produce proteins that can fight off illnesses. However, with great power comes great responsibility. We must proceed with caution to safeguard our genetic integrity for future generations.

Firstly, we need to establish strict global regulations that oversee the development and application of mRNA therapies and viral vectors such as the COVID-19 biological agent forced upon our entire globe at a speed of rate which was unbearable to handle. These guidelines should ensure that treatments are thoroughly tested for long-term effects on the human genome. It is essential that we prevent any unintended alterations that could have far-reaching consequences.

Secondly, transparency is key. Pharmaceutical companies must be required to share their research and findings openly. This will allow for independent verification of the safety and efficacy of these therapies, fostering trust and collaboration among nations.

Lastly, we must invest in education and public awareness. People around the world deserve to understand the implications of mRNA therapies on their genetic makeup. Knowledge empowers individuals to make informed decisions about their health and the well-being of their descendants.

To protect the future generations we believe the United Nations needs to enforce upon themselves a better way of protection through the UN procurement programs such as the Emergency Use Listing (EUL). The United Nations is not functional because it's programs are funded by conflicts of interest and waiving human rights protections in research and ethics. The surgeon general of Florida Dr. Ladapo is calling a halt on the COVID-vaccines due to many reasons 1 being there is evidence of the mRNA biological agent integrating into the DNA.

In conclusion, while we stand at the cusp of a medical revolution, let us move forward with wisdom and foresight. Protecting the human genome is not just a scientific obligation; it is a moral imperative. Together, we can pave the way for a future where medical innovation and genetic preservation go hand in hand and in order to do this the United Nations should stop censoring scientists and our sister organization free speech association through the Trusted News Initiative global censorship for vaccine uptake programs

The future generations deserve a responsive United Nations and if this is not checked then the United Nations doesn't deserve to have the entire globe in their hands to protect the future generations.

Thank you.
Dustin Bryce

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EXHIBIT 4

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ISSUED DOCUMENTS AND
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INTEREST OF JUSTICE

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United Nations for the Declaration of Future Generations United Nations

January 22, 2024,

On behalf of Free Speech Association, stop global censorship and The Oversight Committee we express our deep concerns regarding the UN information campaigns that are currently being promoted about novel vaccine platforms. I believe that there is an element of **censorship and biased disinformation** occurring, which prevents the dissemination of potentially crucial information about the safety and long-term effects of these vaccines.

It has come to the attention of the Florida Attorney General, the former VP of Pfizer Mike Yeadon and The Global Science Integrity Task Force working with Interest of Justice that these novel platforms may not be entirely safe and could likely affect the human genome for future generations, in a manner similar to gene therapy. The Surgeon General of Florida has recently issued a global call to halt covid vaccines and yet WHO is not issuing a precautionary measure to even attempt to mitigate any issues of DNA integration which may impermissibly affect future generations without their informed consent in the decision making process. The possibility that these vaccines could integrate into our DNA causing serious unpredictable long term effects and increase cancers is a serious concern that requires thorough investigation and open discussion.

Rather than foster open debate and scientific integrity, the UN unethically spends exorbitant money to censor these new novel gene vaccine scientific integrity disputes and any scientific questioning of climate alarmism being over exaggerated or based on bad science. Free Speech Association was censored by WHO on October 30, 2023 in the GPW14 CSO consultation for giving a link to UN saying they own and essentially rig climate science.

The essence of true science relies on transparent analysis and the unbiased pursuit of knowledge. When information is censored or controlled, it hinders the ability of individuals and communities to make informed decisions based on all available data. This is especially pertinent when it concerns our health and the genetic legacy we pass on to subsequent generations.

Therefore, we urge the United Nations to consider the implications of promoting one-sided information programs and to support initiatives that allow for a full exploration of the truth. It is

imperative that we uphold the principles of freedom of information and scientific integrity, especially when the stakes are as high as they are with novel vaccine technologies which are likely affecting the rights of future generations to an in tact genome. The future generations deserve a far more responsible and ethical governance than the UN and WHO provide.

Their right to be free of novel synthetic scientific experimentation on their genome which is the very heritage of humanity is at serious risk from todays actions and INACTIONS.

UN and WHO should stop censoring the experts and victims of the experimental interventions and instead gain humility, listen to Dr. Ladapo, and step in to delist the EUL and stop covid vaccines NOW to protect the future of humanity.

Thank you
Free Speech Association

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EXHIBIT 5

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ISSUED DOCUMENTS AND
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INTEREST OF JUSTICE

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Written Comment Re: Implications of Access and Benefit Sharing (ABS) Commitments/Regimes and Other Proposed Commitments in the WHO Pandemic Agreement

Please find IOJ's comments on any and all issues raised by the negotiating text, including potential vehicles and means for implementation of commitments to which the U.S. may subscribe.

First, The States are overly burdened by the two processes of IHR Amendments and Pandemic Treaty at same time. Its too rushed and leaves us accountability CSO's no time for due process to protest or negotiate better text.

Second, The Pandemic Treaty is unnecessary and we require a hearing to explain in great detail why.

Third, There are serious issues of WHO serious breaches of international obligations and unanswered criminal charges in WHO ethics department that we keep raising to HHS OGAm which so far are not addressed. The issues in our particular case of a 2 year record of WHO malfeasance needs to be recognized and addressed because it is cause to force US top EXIT the WHO, not further fund and get in bed with the corrupt, decrepit and failing WHO.

Fourth, There are serious issues of absolute nullity of the text which mistakenly presumes the truth of climate emergency, despite the presumption of climate alarmism being based on material facts of climate change being man made that are still in dispute. The fraudulent nature of the UN based climate alarmism funding scam and alleged state obligations to fund the unproven intervention of a decarbonization experiment is cause for absolute nullity.

Fifth, The text calls mRNA a critical health product while its still experimental and long term effects are still unknown, but presumed catastrophic. This is worse than Nazi Germany. It's criminal and we mean it, we are suing for delicts. Don't you dare fund mRNA as a vaccine platform, it is not a vaccine, its gene therapy and unlawful experimentation on the human genome in violation of Nuremberg Code, given with no informed consent of identified risks or the experimental genome altering nature.

Sixth, The WHO has proffered many concepts and strategies for managing global health, almost all are scientifically unsound and cause more harm than good. We protest all ***potential vehicles and means for implementation of commitments to which the U.S. may subscribe. All involve the centralization of data in WHO as well as the way to hold States accountable. Its a globalist dream and a nation states nightmare.***

Seventh, WHO and HHS are in serious breach of Scientific Integrity and the Pandemic Treaty would allow for censorship and bias, furthering political interference in scientific decision making by the way WHO is set up with sovereign immunity for crimes.

Eighth, in both WHO Pandemic treaty negotiations they failed to consider our speeches, in particular the request to conform to the requirements set forth in the Siracusa Principles. Instead the Siracusa Principles concepts are omitted and breaches of SIRACUSA PRINCIPLES 69(b) would be financed and called a "mRNA critical health product". No it is not. Its an experiment that violates International law and Nuremberg Code.

Ninth, We need a hearing to discuss our extensive record against WHO and WHO Staff that they refuse to answer and HHS refuses to address each time we explain to you all. We have a serious need to be assisted to participate because we are censored, vulnerable, marginalized yet we are the PRIMARY stakeholders. Please help us and contact us to go through our unanswered charges against WHO and their bad science that is causing HHS and USA to be in serious breach of international obligations. We keep trying to warn you of legal issues that mandate we EXIT WHO, or at least wildly reform them (impossible) and we can prove unequivocally as a matter of science, law and ethics why US should not fund the UN or WHO agendas, and sadly we are not being considered while HHS barrels forward as a WHO champion, regardless of their delicts and causing of mass wasteful spending using the COVID–19 Tools-Accelerator (ACT–A).

To answer the direct questions they are below:

Article 9, Research and Development

HHS Q: What approaches or incentives might be provided to governments, research institutions, or the private sector to encourage participation of relevant stakeholders to, as proposed in the Negotiating Text, ''*accelerate innovative research and development, including community-led and cross sector collaboration, for addressing emerging and re-emerging pathogens with pandemic potential"*?

- **IOJ Input: IoJ has assembled an ad hoc Global Science Integrity Task Force which would be perfect for the job and to also make sure human rights mechanisms were in place if there were to be an up and coming pandemic. Please contact us to initiate this critical component of the pandemic preparedness and response agenda.**

HHS Q: What voluntary steps could Research & Development (R&D) stakeholders take that would build capacities and ***promote more inclusive research collaborations and participation from basic science through advanced development and clinical research, addressing the global calls for equity and inclusion?***

- **IOJ Input: Stop funding the UN-WHO-Pharma censoring of experts and be honorable for a change. Make it a law and enforce the Scientific Integrity Policy and WH Task Force Recommendations as enforceable upon HHS to include the "misfit" R&D dissenters basic science at the intersection of policy and science such as our Chief Scientist Dr. Yeadon (former VP Pfizer) who is testifying and will testify to HHS with concrete evidence that the covid vaccines are toxic by design and cant ever help, only hurt! Please do not ignore this! Help us be heard out on the details of why we think this is true.**

HHS Q: What national policies might be developed that (as proposed in the Negotiating Text), *"support the transparent, public sharing of clinical trial protocols and results conducted either within their territories or through partnerships with other Parties, such as through open access publications"*?

- **IOJ Input: The Nations should be having more public participation with it's citizens so they may discuss which policies they choose to abide by**

HHS Q: What are respective pros and cons of, the following proposed language in the Negotiating Text: *"in accordance with national laws and considering the extent of public funding provided,*

publish[ing] the terms of government funded research and development agreements for pandemic-related products, including information on:

- **IOJ Input: There are many pros to publishing the funding data, but many cons to funding the globalist WHO rather than strengthening HHS, nationalism and isolationism.**

(a) research inputs, processes and outputs, including scientific publications and data repositories, with data shared and stored securely in alignment with findability, accessibility, interoperability and reusability principles;

- **IOJ Input: Research data should be public, but not pathogen information.**

(b) the pricing of end products, or pricing policies for end products;

- **IOJ Input:**

(c) licensing to enable the development, manufacturing and distribution of pandemic-related products, especially in developing countries; and

- **IOJ Input: Licensing issues in law can be VERY problematic, and are the subject of lawsuits. These should be private agreements for procurement and never put a profitable and captured platform such as mRNA in a law as required obligation to fund.**

(d) terms regarding affordable, equitable and timely access to pandemic-related products during a pandemic"? In your view, are there alternative recommended actions or commitments that could be considered?

- **IOJ Input: Affordable medicines are always an added value in any emergency situation. Withholding or censoring information and or medicines which can be an alternative in situations is monopolistic and needs oversight in the UN Global Market place as well as the Emergency Use Listing**

HHS Q: What is the appropriate role for WHO in facilitating the R&D process in areas focusing on infectious diseases?

- **IOJ Input: An appropriate role for WHO would be research and public hearings to debate their interpretations, but not binding recommendations. If binding (that would be a disaster) the WHO should be responsible for any damages.**

HHS Q: ***Are there provisions that could reasonably be included*** in government funded research or advanced development agreements, or policies related to licensing of government owned and/or government-funded technology that would promote global access to pandemic-related products, without disincentivizing innovation or partnering with the U.S. government around research and development?

- **IOJ Input: All of this is the communist WHO's path to take over R&D and this will lead to US R&D being valueless, as WHO will insist US owes the world our government-funded technology as an "obligation". US should simply license the innovations and share by allowing low cost purchases of the development.**

Article 10, Sustainable Production

HHS Q: What approaches or incentives might be used to encourage manufacturers and others "*to grant, subject to any existing licensing restrictions, on mutually agreed terms, non-exclusive, royalty-free licenses to any manufacturers, particularly from developing countries, to use their intellectual property and other protected substances, products, technology, know-how, information and knowledge used in the process of pandemic-related product development and production,* ***in particular for pre-pandemic and pandemic diagnostics, vaccines and therapeutics for use in agreed developing countries***"?

- **IOJ Input: Being most likely experimental, this allows an open door for Big Pharma and Big Donors to get away with human rights violations by incentivizing and possibly deceiving developing countries who do not have systems in place to safeguard human rights protections.**

HHS Q: How helpful or ***harmful would the following proposed obligations*** for governments be for public health, business, and innovation interests generally:

- *"(a) encourage research and development institutes and manufacturers, in particular those receiving significant public financing, to waive or manage, for a limited duration, royalties on the use of their technology for the production of pandemic-related products;*
    - **IOJ Input:**
- *(b) promote the publication, by private rights holders, of the terms of licensing agreements or technology transfer agreements for pandemic related products; and*

- **IOJ Input: This would be more transparent in the event of corruptive practices**

- *(c) promote the voluntary licensing and transfer of technology and related know-how for pandemic-related products by private rights holders with established regional or global technology transfer hubs or other multilateral mechanisms or networks.'*

- **IOJ Input:**

HHS Q: How can we work to promote a globally sustainable medical countermeasures (MCM) manufacturing system, including leveraging regional approaches to production and maintaining readiness of facilities between pandemic emergencies?

- **IOJ Input:**

Article 11, Transfer of Technology and Know-How

HHS Q: What measures could be taken, or incentives provided, to "strengthen existing, and develop innovative, multilateral mechanisms [under WHO], including through the pooling of knowledge, intellectual property and data, that promote the transfer of technology and know-how for the production of pandemic-related products, on mutually agreed terms as appropriate, to manufacturers, particularly in developing countries"?

- **IOJ Input:**

HHS Q: What measures could be taken, or incentives provided, to "make available non-exclusive licensing of government owned technologies, on mutually agreed terms as appropriate, for the

development and manufacturing of pandemic-related products, and publish the terms of these licenses"?

- **IOJ Input:**

HHS Q: In your view, is there a lack of transparency concerning information regarding pandemic-related products, their technological specifications, and manufacturing details? If so, could the establishment of a new mechanism at the WHO effectively address this lack of transparency?

- **IOJ Input: There is an extreme lack of transparency. There must be a new mechanism to force transparency and urgent mechanisms to ensure compliance from WHO. We ask HHS especially to stop the mutual confidentiality agreements which are used to hide adverse effects, change the WHO confidentiality rule which outrageously allows for crimes and breaches to be kept secret, and punish WHO in the pocketbook if they fail.**

HHS Q: What net impacts, positive or negative, would you envision arising from commitments presently outlined in Article 11.3, including:

- "(a) commit to agree upon, within the framework of relevant institutions, time-bound waivers of intellectual property rights to accelerate or scale up the manufacturing of pandemic-related products to the extent necessary to increase the availability and adequacy of affordable pandemic-related products;

- **IOJ Input: Good idea. The problem is the choice of products to invest in needs better scientific basis and more safety testing prior to rolling out to masses.**

- (b) encourage all holders of patents related to the production of pandemic related products to waive or manage, as appropriate, for a limited duration, the payment of royalties by developing country manufacturers on the use, during the pandemic, of their technology for the production of pandemic-related products, and shall require, as appropriate, those that have received public financing for the development of pandemic-related products to do so; and
- **IOJ Input: Good idea. The problem is the choice of products to invest in needs better scientific basis and more safety testing prior to rolling out to masses.**
- (c) encourage manufacturers within its jurisdiction to share undisclosed information, in accordance with paragraph 2 of Article 39 of the Trade Related Aspects of Intellectual Property Rights (TRIPS) Agreement, with qualified third-party manufacturers when the withholding of such information prevents or hinders urgent manufacture by qualified third parties of a pharmaceutical product that is necessary to respond to the pandemic"?

- **IOJ Input: Good idea. The problem is the choice of products to invest in needs better scientific basis and more safety testing prior to rolling out to masses.**

Article 12, Access and Benefit Sharing

A key negotiating objective of the United States has been to ensure that all countries share pathogen samples and associated data, including genetic sequence data, from emerging outbreaks quickly and transparently to facilitate response efforts, including the rapid creation of safe and effective vaccines, diagnostic tests, and treatments.

- **IOJ Input: BAD IDEA. REALLY, REALLY BAD IDEA HHS. Call us for a hearing with experts on why.**

HHS Q: What sample and data access impediments have you encountered in the past or what impediments would you envision based on the proposed Pathogen Access and Benefit Sharing (PABS) System in the Negotiating Text that might thwart or delay research efforts?

- **IOJ Input:**

HHS Q: Does implementation of Nagoya Protocol requirements impede the rapid development or deployment of vaccines, diagnostic test, and treatments? Explain.

- **IOJ Input: Something should slow down this unethical warp speed non vaccine gene therapy experiments affecting DNA trainwreck.**

- How important is a commitment by negotiating parties to provide parties with the access to pathogen samples and data that are needed to contribute to rapid creation of safe and effective vaccines, diagnostic tests, and treatments?

- **IOJ Input: Not important because the very concept of "rapid creation" defies ethics, logic, reason and the unequivocal rules of science. Has HHS read their own Scientific Integrity Policy? You cant rush and be in compliance with Scientific Integrity. Slow down the rush for funding and creating emerging technology experiments as if they help. They don't. Sharing the alleged pathogen samples cant help anything because you truly cannot prepare quickly. The best bet is ordinary medicines but HHS is not interested in useful ordinary medicines, only crazy novel technology that is hugely profitable. This needs a hearing. Call us please and thank you.**

- Are alternative strategies for "access" to samples and data available and how do they compare in terms of effectiveness and efficiency?

- **IOJ Input: Yes. Its called ordinary treatments. Wasn't the covid [non]vaccine created in 2 hours without a virus sample - by downloading a synthetic sars cov 2 recipe from China? No real virus sample needed. The problem is the mRNA platform has the alternative to real virus samples and data but its fatally flawed and more dangerous than beneficial because it uses modeling and creates a new synthetic pathogen recipe that never existed and installed it into the vaccine deployment system.**

- How might such commitments impact researchers and institutions?

- **IOJ Input: Humanity should never commit to share pathogens, especially with WHO and China researchers who may use the pathogen in a dual use way which can be weaponized. It's a real concern not being discussed. We once again request a hearing on this with our experts who will explain why sharing pathogens is insane and reckless with little benefit, if any, much better than we can.**

The Article 12 negotiating text envisions parties agreeing to set aside certain percentages of pandemic-related products (proposed in the current negotiating text as a m Depends on the product and situationinimum of 20%) and facilitating their exportability.

HHS Q: What, from your perspective, are the pros and cons of such a requirement?

- **IOJ Input: Its an arbitrary requirement**

HHS Q: Would such a requirement advance or hinder rapid research and development efforts?

- **IOJ Input: Depends on the product and situation. Both ways are possible but being forced to export 20% is dictatorship from afar, socialism and anti American. What if USA needs that 20% we are forced to export?**

The Article 12 negotiating text further envisions required monetary contributions from recipients of shared samples or data, including researchers and manufacturers, for privileges of access.

HHS Q: What in your view is the monetary value of access that would be provided in terms of an annual or percentage-based contribution from your organization?

- **IOJ Input: This is a recipe for major capture of the Health System and conflicts of interest. It also incentivizes the "obligation" for making States share data which could be used for dual use purposes. Its a disaster waiting to happen if we incentivize the sgaring of pathogens with pandemic potential. This really, really needs a hearing. Call us!**

HHS Q: How would requiring monetary contributions from academic, government, or other nonprofit research institutions impact, positive or negative, research?

- **IOJ Input: This is a terrible socialist idea. Do not do it please. It would adversely impact the natural flow of science and corrupt it.**

The Article 12 negotiating text specifies other benefits that should be considered for provision to developing countries, including "(i) *encouraging manufacturers from developed countries to collaborate with manufacturers from developing countries . . . to transfer technology and know-how and strengthen capacities for the timely scale-up of production of pandemic related products; (ii)*

tiered-pricing or other cost-related arrangements, such as no loss/no profit loss arrangements, for purchase of pandemic-related products . . .; and (iii) encouraging of laboratories . . . to actively seek the participation of scientists from developing countries in scientific projects associated with research on WHO PABS Materials.'

HHS Q: How helpful would these additional measures be in advancing the rapid creation and/or production scaleup of safe and effective vaccines, diagnostic tests, and treatments?

- **IOJ Input: Encouraging "no loss/no profit loss" is a bad idea. It would obviously be used as a way for companies to make really horrible products, because there is no incentive of loss to keep them honorable and striving for creating the best product.**

HHS Q: ***What are the risks or potential negative impacts could come from including such provisions?***

- **IOJ Input: Capture of the global R&D market with WHO pressuring all States, and even developing countries to conform to WHO's disputed science and help WHO PABS which is reckless and unnecessary and should be shut down in our opinion.**

HHS Q: What incentives might be provided to stakeholders to encourage/assure participation in such voluntary measures?

- **IOJ Input: Incentives to participate is like a bribe and therefore not voluntary.**

HHS Q: What provisions might companies, academic research institutions, and other industry stakeholders look for when assessing voluntary participation in such a proposed Access and Benefit Sharing system?

- **IOJ Input: This is crazy how much effort is being put into this PABS system. We are seriously asking for a hearing to debate the necessity, proportionality, reasonableness, legality and scientific basis, as well as risks for the PABS system.**

HHS Q: What samples/data are needed the most and how could such a system improve access to needed resources?

- **IOJ Input: None. Stop playing God. We have top scientists who will explain why. Please give us a hearing and contact us prior to any decision making on this.**

HHS Q: What provisions are missing that would incentivize broad participation in the system that Member States should consider?

IOJ Input: We suggest there is not a broad participation in the PABS program, and there is no program to incentivize wide use.

Article 13, Global Supply Chain and Logistics (SCL) Network

The WHO SCL Network proposed in Article 13 envisions performing a range of functions ordinarily left to individual governments, institutions, or organizations.

HHS Q: What functions of Access to COVID-19 Tools-Accelerator (ACT-A) should or should not be institutionalized?

- **IOJ Input: Lets talk about the invalidity of the WHO recommended masks, PCR tests and Covid-19 non vaccines. They are all wholly unscientific. WHO is still promoting PCR as a diagnostic which it is not. The** COVID-19 Tools-Accelerator (ACT-A) is making a killing - pun intended - off **covid [non]vaccines with negative efficacy as if it is a preventative or therapeutic. They are defrauding States as to science. Our expert Dr. Yeadon will testify the PCR test is not a diagnostic and creates 97-100% false positives**

for covid as used and the covid vaccines are not vaccines and toxic killing people in excess numbers since the rollout began. Give us a hearing please for the love of God.

HHS Q: Should the U.S. consider incentives to encourage U.S. stakeholders' participation in such an effort and what would compelling incentives be?

- **IOJ Input: YES. Our input as stakeholders with a unique role to oversee science integrity, human rights, ethics and anti corruption in public private partnerships in particular should be incentivized and funded. We will write a separate proposal to partner with HHS as the Global Science Integrity Task Force (GSITF) and Anti Corruption Unit will call you to follow up until we can work together to clean up this mess. We want HHS to fund our UN Global Compact anti corruption collective action which will be an enormous assistance to HHS and is a mandate by the White House Science Task Force as well as a global request by UN to help them monitor themselves which HHS is incapable of without us dissenters at the intersection of science and policy. We are certified in Diplomatic law: privileges and immunities as well as Science Diplomacy SDG's, Multilateral and public Diplomacy by Diplo. We do not want to waste the precious time or resources of HHS. Our experts at GSITF have a lot to offer HHS which would greatly assist HHS and WHO to meet their international human rights and ethics obligations.**

Our organization has a long history with HHS OGA and the WHO ignoring us and our experts scientific integrity disputes and it is not fair to barrel forward without giving us a detailed hearing on these and other pertinent and urgent issues that affect USA as well as the world.

IoJ spoke at every public meeting in WHO & HHS OGA (7 total) regarding IHR Amendments and Treaty

- April 12, 2022 - Spoke at WHO 1st treaty hearing - [https://rumble.com/v10s1rx-interest-of-justice-establishes-strict-limits-for-the-who-pandemic-treaty-p.html](https://rumble.com/v10s1rx-interest-of-justice-establishes-strict-limits-for-

the-who-pandemic-treaty-p.html)Wrote WHO's head attorney Kennith Piercey to complain that he gave no reason why he wrote to tell us we could not talk a second time.

- We complained that WHO was not providing meaningful participation by limiting our speech to 2 minutes and not allowing more time to speak despite ending early. IOJ confirms no response was received from WHO's Head Attorney Piercey. Relevant and valuable information was not able to be shared by IOJ.

- May 2, 2022, September 9, 2022 Wrote the WHO and Costa Rica Ministry of Foreign Affairs many times to ask how to get on Annex E - non response (Annex E in the WHO is for civil society Organizations to participate.
- May 3, 2022 - Stakeholder engagement packet sent to WHO DG Tedros, Swaminathan, Piercey
- May 13, 2022 - Spoke HHS OGA Stakeholder Listening Session
- May 13, 2022 - IoJ's Stakeholder engagement packet sent to HHS OGA (Health and Human Services, Office Of Global Affairs
- May, 2022 - sent CR Ministry Foreign Affairs letter with Xavier, etc not to adopt IHR Amendments, reasons why to rebut, and included WHO is communist proof they still need to rebut
- 50,000 demands sent to HHS OGA to withdraw IHR Amendments submitted by Loyce Pace - May 22-28, 2022 - success at 75th WHA (12 of 13 IHR Amendments withdrawn)
- IOJ made sure to formally Protest the WHA May 22-28, 2022 VOTE that allowed the remainder IHR Amendments - protests for cause, and demanded rebuttals (no response)
- September 13, 2022 - we wrote Ministry of foreign Affairs Costa Rica for the request of whom is the delegate of the WHO?
- Sept 29,30, 2022 - Spoke WHO 2nd treaty hearing, made video IoJ [https://rumble.com/v1jkrh4-interest-of-justice-90-second-video-to-the-whoinb-

pandemic-treaty-september.html](https://rumble.com/v1jkrh4-interest-of-justice-90-second-video-to-the-whoinb-pandemic-treaty-september.html) Interest Of Justice 90 second video to the WHO/INB on the "New international instrument on pandemic prevention, preparedness and response: contributing to the second round of public hearings at the WHO/INB"

- Wrote FOIA many times to get INB deadline to answer us WGIHR info how give effect law,Superiors, relevant departments - we received 1 irrelevant response not duly motivated or pertinent
- October 12, 2022 - IoJ sent a FOIA request to the Costa Rica Ministry of foreign affairs as a "Petición" Request for mere non-technical administrative reports. Requested all contracts from PAHO WHO WEF IMF ETC... Judges ordered the documents which re still withheld and subject of criminal disobedience charges.
- October 31, 2022 - (WHO) World Health Organization, WGIHR and IHRRC
- January 23, 2023 - Rule number 1130 we sent Ethics Dept. of the WHO NOTIFICATION OF CHARGES AND REPLY (How to get on Annex E request for assistance again)
- February 19, 2023 - IoJ sent notifications to the Second meeting of the Working Group on IHR to GBS-INDICO

- Another of numerous requests to attend IHR meetings and know the secret information being discussed
- March 2023 - Comptroller costa rica opens investigation for Pfizer contract irregularities of the contracts, export to CR and imports *(turns out HHS has no DOA to export?)*
- May 21, 2023 - We sent a petition/demand called WHA must terminate WHO DG Tedros Contract for reasons of exceptional gravity likely to prejudice the interests of the organization Petition posted https://noticeanddemand.org/petition/terminatetedros/ Notice of claim email WHO staff rule 1130 Notice of claim for responsibility to "The Health Monopoly": United States And Other Wrongdoer States, Covid Action Platform (WHO, WEF, Wellcome), WHO Vaccine Pre qualification EUL Program (WHO, FDA-CBER, EMA et al), UN Procurement including pharmaceutical Sponsors and Investors or Funders of WHO and all

challenged programs and funds including Agenda 2030 SDG's Not Backed By Science and violate Jus Cogens - NO response as usual.

- July 24, 2023 Announced Writ of Prohibition & Demand for Global Referendum to Terminate UN Programs - no response
- Open call for hearing & served by email to all delegates, WGIHR, INB, WHO DG, WHO Head Attorney - no response

- Prohibition on Treaty, IHR and UN Programs issued until hearing for WHO to show us the science, ethics and law https://noticeanddemand.org/petition/writ-of-prohibition/
- July 2023 INVALIDITY Report - The Oversight Committee (project by IoJ) issues IHR Invalidity Report https://interestofjustice.substack.com/p/invalidity-report-on-the-ihr-2005
- November 2023 INVALIDITY Report - The Oversight Committee issues Pandemic Treaty (CA+) Invalidity Report http://www.theoversightcommittee.org/reports
- August 29, 2022 email Formal Letter to Department of Exterior of Costa Rica Politics, requesting delegate for WHO Treaty * August 29, 2022 Dept. Polit. Exterior Costa Rica - no response
- September 19, 2023 email to UN political SDG Summit IoJ protested the United Nations Political Declaration SDG Summit for Climate Change
- IoJ started communications with the United Nations SDG summit in regards to the invalidity of the UN political Declaration and the funding of the SDG's on Climate change https://interestofjustice.substack.com/p/8-days-until-leaders-adopt-permanent
- November 10, 2023 Global Science compact Sent to INB, and 13 others 1, Protest IHR and Request to support our science task force starting December 1st, 2023

- Nov 11, 2023 - Letter to WHO, Costa Rica foreign affairs, etc - Objected to IHR Amendments, UN Political Declaration, Treaty and request to support Science Task Force.

- November 14, 2023 Wrote Costa Rica Legislators to ask for help to stop the IHR in CR
- A series of FOIAS in 2023 to HHS and DoD - HHS has NO records on covid vaccines we requested?
- IOJ FOIA DOD March 6, 2023 Experimental Vaccine rollouts to DOD and HHS
- October 20, 2023 FOIA request in regards to OTA DOD - still no response? Why?
- October 20, 2023 - FOIA in regards to HHS DOD Dual Use Bio agent C-19 - no records? Why?
- October 30, 2023 Spoke at WHO GPW14 CSO "consultation" and was censored. see:

  https://interestofjustice.substack.com/p/who-censored-free-speech-associations

- December 6, 2023 Interest of Justice World Health Organization GPW14 CSO Participation written comment
- Comment to Office of Research Integrity ORI HHS January 4 _2024
- January 12, 2024, A Zoom With WHO Chief Scientist Jeremy Farrar & Asked Him To Set Up A Scientific Integrity Dispute Hearing With Our Experts On mRNA DNA Integration & Climate Alarmism For WHO's GPW14
- January 16, 2024 United Nations CSO declaration future Gen. IoJ was cut off from speaking along with many others

Interest of Justice and GSITF are directly requesting a consultation in private using science diplomacy to discuss these URGENT and critical matters. The whole pandemic accord treaty is based on flawed presumptions that can easily be disputed if you will just provide us the opportunity to consult and have a private or public hearing with our world class experts.

Thank you for your prompt assistance in this serious matter and appreciate all of your help working with us to provide the requested information and communications in order to protect the public health and safety.

Cordially,
Interest Of Justice,

Dustin Bryce,
contact@interestofjustice.org
www.interestofjustice.org

THE OVERSIGHT COMMITTEE

WWW.INTERESTOFJUSTICE.ORG

EXHIBIT 6

YEAR 2024

ISSUED DOCUMENTS AND
REPORTS FOR THE 1ST QUARTER

INTEREST OF JUSTICE

WWW.THEOVERSIGHTCOMMITTEE.ORG

Comment To Public Health Service Policies on Research Misconduct

To: (ORI) Office of Research Integrity/(HHS) Health and Human Services
Regulatory Information Number: (RIN) 0937–AA12 Comment

January 4, 2024

Dear Friends,

1. Implementation Timeline ORI proposes to release the final rule in summer of 2024, with implementation to begin a minimum of 4 months afterwards, and an effective date of January 1, 2025. This implementation timeframe is not sufficient for institutions to conduct a substantial policy revision process, which requires input and approval from many constituents across the institution and should include a public hearing with a wider range of views. We specifically request more time for due process and the ability to have a public consultation or hearing to hash out details in a debate like setting with a wide variety of legal, ethical and scientific integrity experts. We just learned of this and are up late trying to help ORI but we need more time for due process and so does the greater scientific community who should also be alerted and have the chance to provide input. Our Global Science Integrity Task Force www.gsitf.org is formally requesting a hearing with worlds top scientists and opportunity to be involved in this process past Jan 4, 2024. Please and thank you.

2. "Accepted Practices of the Relevant Research Community" (§ 93.200) Research misconduct determinations require a finding of a significant departure from the "accepted practices of the

relevant research community." These practices vary depending on the discipline. The practices used to document and analyze genomic research are different from those used in basic biochemistry, clinical trials or social and behavioral research, all of which may be funded by PHS. If ORI changes the law to narrowly define "Accepted Practices of the Relevant Research Community" in a way tied to PHS funding, or any type of funding it undermines the very spirit of independent and dissenting science as absolutely required. see: https://www.whitehouse.gov/ostp/news-updates/2022/01/11/white-house-office-of-science-technology-policy-releases-scientific-integrity-task-force-report/ JANUARY 11, 2022 White House Office of Science & Technology Policy Releases Scientific Integrity Task Force Report

In 2009, the Obama Administration identified six principles of scientific integrity. To not only restore, but to strengthen the integrity of Federal science beyond the efforts of any previous Administration, the Task Force makes five additional recommendations to guide policymaking and foster a culture of scientific integrity in Federal agencies:

- All Federal agencies—not just those that fund and conduct scientific research—should develop, implement, and periodically update scientific integrity policies. Protecting scientific integrity is essential for any Federal agency or entity that communicates or makes use of scientific and technical information in decision-making.
- Scientific integrity policies should apply to all those in Federal agencies who manage, communicate, or use science, not just to scientists and engineers who conduct research, and not just to career employees, but contractors and political appointees as well. All must be trained in scientific integrity and their roles in upholding it.

- Scientific integrity policies should be modernized to address important, emergent issues of our time. They must advance diversity, equity, inclusion, and accessibility; address new concerns arising from the use of emerging technologies such as artificial intelligence and machine learning; and apply to emerging modes of science, such as citizen science and community-engaged research with Federal involvement.
- There should be broader dissemination and adoption of good scientific integrity practices across the Federal Government, a task that could be facilitated by more formalized interagency collaboration.
- There should be widespread training for agency scientists so they can communicate scientific findings effectively to nonscientists in their agencies and to lay audiences, with the idea of helping ensure that policies and actions are based on an accurate understanding of the science.

In the coming months, OSTP will draw upon the findings of the Task Force to develop a plan for the regular assessment and iterative improvement of scientific-integrity policies and practices. In addition, agency leadership, working closely with OSTP, will deploy this framework to ensure that their scientific-integrity policies are informed by the Task Force report and adhere to scientific-integrity principles.

ORI must draft any changes in a way which includes protections for dissenter scientists and their scientific integrity dispute claims and confidentiality for whistleblowers who are up against serious imbalance of power.

Any change to "Accepted Practices of the Relevant Research Community" (§ 93.200), if needed at all, which is debatable, must consider the relevance of dissenter scientists who are marginalized

and who expose corruption, therefore cannot apply for and receive PHS grants which are withheld due to imbalance of power and corrupt practices which exclude dissent. **ORI's proposed changes need to ensure the definition specifically includes the "legitimate concerns and dissent of the greater scientific community" as being part of "Accepted Practices of the Relevant Research Community".**

There are some proposed rules which may further create an imbalance of power, and this is a chilling situation which requires a hearing to further hear from the relevant dissenter scientific community of whistleblowers who are the type that file research misconduct charges, and whom these proposed changes may actually affect in a way which may limit or expose their capability to act as protected whistleblowers.

We are running out of time to submit this, and have had to skip important issues. For that reason, we kindly request ORI extend their completion date of 2024 by at least a year, and extend an invitation to a hearing or consultation on the ORI proposed changes in order to best help ORI in the mission of strengthening the regulations for research misconduct.

Thank you to your attention to strengthen regulations of research misconduct of scientific integrity and appreciate all of you working with us so we are able to provide a written comment and have participation in order to protect the public health and safety.

Thank you and looking forward,

Cordially,
Interest Of Justice,

Dustin Bryce,
contact@interestofjustice.org
www.interestofjustice.org