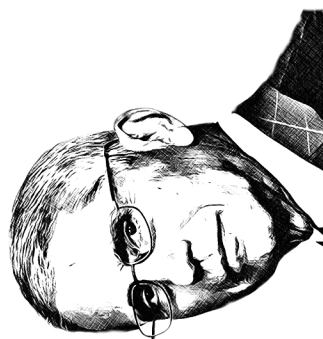




PAPERS PLEASE




NOT MY KING



NOT MY SAVIOR



***SPOILER ALERT!**

**YOU SIGNED
UP FOR AT
LEAST 4
OF THESE
SHOTS**

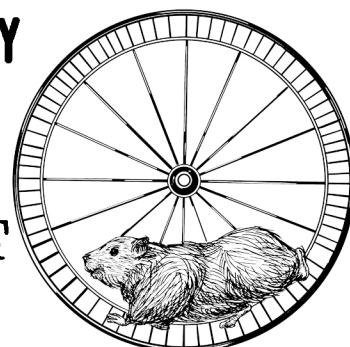
COVID-19 Vaccination Record Card
Please keep this record card, which includes medical information about the vaccines you have received.
Por favor, guarde esta tarjeta de registros, que incluye información médica sobre las vacunas que ha recibido.

Last Name: _____ First Name: _____ SSN: _____
Date of birth: _____

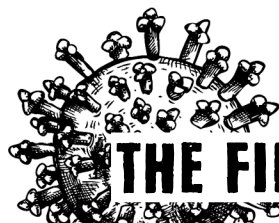
Vaccine	Product Name/Manufacturer	Date	Healthcare Professional or Clinic Site
1 st Dose COVID-19	Lot Number: _____	mm dd yy	
2 nd Dose COVID-19	Lot Number: _____	mm dd yy	
Other	Lot Number: _____	mm dd yy	
Other	Lot Number: _____	mm dd yy	



**VACCINE INJURY
IS A NEVER
ENDING,
PHARMA
DEPENDENT
CYCLE.**



**VACCINE INJURED
CHILDREN ARE
LIFELONG
BIG PHARMA
CUSTOMERS**



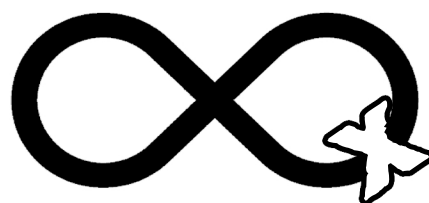
THE FINAL VARIANT IS...

COMMUNISM

**A FREE DEMOCRACY
REQUIRES THAT WE LOVE
OUR FREEDOM MORE
THAN WE FEAR A VIRUS.**



THE WAR ON COVID



**YOU
ARE
HERE**

**IF YOU THINK THE COVID
VACCINES ARE SAFE
YOU AREN'T
PAYING ATTENTION**



**BIG PHARMA
PUTS PROFITS
BEFORE PEOPLE**



100% PROFIT, 0% LIABILITY