Claims service Provider

Allied Public Risk LLC aka Allied World Insurance Company

1690 New Britain Avenue, Suite 101

Farmington, CT 06032 USA

Email: noticeofloss@awac.com

State of Arizona Blanket Insurance Policy

Maricopa County

234 Central #530

Phoenix, AZ 85004

Policy Number: IU35X000003-01

Coverage Period: 3/1/2021 – 3/1/2022

Complainant

Name:

Address:

City, State, Zip:

Phone:

Email:

RE: Filing a claim against a State of Arizona; Maricopa County; blanket insurance policy (Risk Placement Services, Insurance Brokers)

Dear

I am a private citizen who has children that attend school in (**name**). The members of the school board are in violation of the contract they have signed with your insurance company and have caused injury and harm to multiple students and teachers in this district. Listed below are the terms and conditions of your insurance policy that cover the damages I am seeking.

I am not an expert in the law however I do know right from wrong. If there is any wo/man damaged by any statements herein, if s/he will inform me by facts I will sincerely make every effort to amend my ways. I hereby and herein reserve the right to amend and make amendments to this document as necessary, in order that the truth may be ascertained and proceedings justly determined. If the parties given notice by means of this document have information that would controvert and overcome this claim, please advise me IN WRITTEN CLAIM FORM within ten (10) days from receipt hereof, providing me with your counter-corrected claim information, proving with particularity by stating all requisite actual evidentiary fact and all requisite actual law, and not merely the ultimate facts or conclusions of law, that this Claim Statement is substantially and materially false sufficiently to change materially my status and factual declarations. Your silence stands as consent to, and tacit approval of, the factual declarations herein being established as fact as a matter of law.

Claim filed against: (**name, position, and address of school board**)

**General Liability - Personal & Advertising Injury Limit: (amount)**

Policy conditions: The insurance applies to “personal” and advertising injury” caused by an offense arising out of your business but only if the offense arising out of your business but only if the offense was committed in the “coverage territory” during the policy period.

With respect to “body injury” or “property damage” an accident, including continuous or repeated exposure to substantially the same general harmful conditions or with respect to “personal and advertising injury” an offense or series of related offenses.

* Each Occurrence Limit: $15,000.00
* Each Employee Limit: $100,000.00
* General Aggregate: $10,000.00
* Self-Insured Retention: $5,000.00

The (**name, title, school or government office)** distributed the following documents to all schools in the district, students, teachers, and parents:

**\*\*You will need to change the list of violations depending on what you are filing against.**

* Toolkit safe return policies for all school districts
* Advertising the COVID vaccine in all schools indicating the vaccine is safe for all children and educators to take.
* Promoting and advertising safe mask wearing for all educators and students.
* Promoting and enforcing social distasting in all schools.
* Promoting and pushing PCR testing for all students and teachers.
* Continue to enforce masking of young children in city schools and advertising this is safe and effective way to stop an illness that has not even been isolated or confirmed.

The school district falsely advertised and promoted masks, PCR tests and vaccines that were not approved by the FDA calling them safe and effective. This has caused a lot of damage to children with increased lung infections due to bacteria and fungus from wearing masks for 8 hours per day.

**Damages sought**: $130,000.00

**Public Official Liability Coverage:**

The policy does not waive or otherwise limit any immunity, defense, or limitation on liability or damages available pursuant to “immunity or Tort Cap Law” or expand or increase the liability of any individual or entity beyond the liability that such individuals or entity would be subject to if you had not procured this insurance.

**Who is insured?**

The “educational institution”, and its board of governors, board of education, school committee, board of trustees, or commission while acting with the scope of their duties as such. Each of the following is also insured for acts within their duties as such: Elected or appointed members of your board of governors, board of education, school committee, board of trustees, or commissions; your employees.

* Each Public Officials Wrongful Act Limit: $100,000.00
* Aggregated Limit: $50,000
* Self-Insured Retention: $100,000.00

(**Name**) was acting outside his scope of duties and is personally responsible for damages for the decision he made. (**name**) has broken the following law(s) that I personally seek damages for myself and my children who attend school in this district.

* 50 USC 1520 “Nuremberg Code” (1947) #’s 1, 4, 5, 6, 7, 9
* The Law of Peace (1979)
* 5 USC S 702 et seq.
* 8 USC SS 1101 (a) (21-23) “national of the United States”
* 10 USC S 1107 +(a) Consent of Notice in Writing for Emergency Use Authorization
* 15 USC S 45 Unfair or Deceptive acts or practices
* 18 USC S 241 - Conspiracy to Deprive Rights
* 18 USC S 242 - Deprivation of Rights Under Color of Law
* 18 USC S 513 – Securities of the States and Private entities
* 18 USC S 878 (c) Threats and extortion against…Internationally protected persons
* 18 USC SS 1545 Safe Conduct
* 18 USC S 2331 SS 802 - Coercing the Public (Felony Domestic Terrorism)
* 21 USC Chapter 1 SS B Unapproved Drugs – written informed consent legally effective to prevent coercion
* 21 USC S 360bbb-3 Authorization for Medical Products for use in Emergencies

Above is a list of the State Laws (**name**) has broken that I personally seek damages for myself and my children who attend school in (**name**).

**Damages Sought**: $250,000.00

**Law Enforcement Liability Coverage**

(Name) was acting as a Law Enforcement officer and had no credentials or jurisdiction to enforce any laws upon anyone. (Name) was acting outside the law 18 USC S 242 - Deprivation of Rights Under Color of Law.

* Each Law enforcement Wrongful Act Limit: $100,000.00
* Aggregate Limit: $50,000.00
* Self-Insured Retention: $100,000.00

**Damages Sought**: $250,000.00

Attached is my Affidavit of Status swearing I understand these laws, the claim I am filing against (**name**) and my personal responsibility if I file a false claim with your insurance company.

Sincerely,