

STATE OF WYOMING)
) ss
COUNTY OF JOHNSON)

IN THE DISTRICT COURT
FOURTH JUDICIAL DISTRICT

CASE NO. CR-2020-65

STATE OF WYOMING,)
)
 PLAINTIFF,)
)
 Vs.)
)
 DAVID INGERSOLL,)
)
 DEFENDANT.)

No. _____
Filed in the Office of the Clerk of the
District Court of Sheridan County, WY

APR 5 2021

~~Rene Botten~~ Clerk of Court
By 5/Kim Stagle Deputy

**MOTION TO SET ASIDE JUDGMENT OF DIRECT CONTEMPT AGAINST
APRIL HANSON AND THE COURT'S SENTENCE**

COMES NOW, Petitioner, April Hanson, by and through her counsel, Nick Beduhn, and hereby requests this Court to Set Aside its Judgment of Direct Contempt against April Hanson and Sentence signed by the Court on March 10, 2021. The reasons for this request are set forth below:

1. Counsel for the Petitioner has reviewed the transcripts in the case of *State of Wyoming v. Ziska*, Case No. CR-2020-28 from January 12, 2021 as well as the transcript of *State of Wyoming v. Ingersoll*, Case No. CR-2020-65, as it relates to the Petitioner.
2. The Petitioner seeks that this Court set aside its previous Order of Contempt.

April Hanson - Motion To Set Aside Judgment of Direct Contempt

3. The Petitioner stood her ground in a very polite manner as noted by the Court in the Order of Contempt in paragraph fifteen (15), She simply refused to wear her mask even after being held in a conference room for over three hours, even with her knowledge that she made be held in contempt. It should be noted that prior to entering the Court room, the Petitioner was never offered a mask nor did anyone say anything to her in regards of her not wearing one until she was seated in the Court room. She was asserting her rights.

"The privilege against self-incrimination is neither accorded to the passive resistant, nor to the person who is ignorant of his rights, nor to one indifferent thereto. It is a FIGHTING clause. It's benefits can be retained only by sustained COMBAT. It cannot be claimed by attorney or solicitor. It is valid only when insisted upon by a BELLIGERENT claimant in person." McAlister vs. Henkel, 201 U.S. 90, 26 S.Ct. 385, 50 L.Ed. 671; Commonwealth vs. Shaw, 4 Cush. 594, 50 Am.Dec. 813; Orum vs. State, 38 Ohio App. 171, 175 N.E. 876. The one who is persuaded by honeyed words or moral suasion* to testify or produce documents rather than make a last ditch stand, simply loses the protection. . . . He must refuse to answer or produce, and test the matter in contempt proceedings, or by habeas corpus." States v. Johnson, 76 F. Supp. 538, 539 (D. Pa. 1947), Federal District Court Judge James Alger Fee

4. Petitioner's contention is that the above is not limited to self-incrimination, but applies to the exercise of any and all right and liberties. While Petitioner was not "belligerent" in a literal sense, she clearly stated her position and stood her ground.

5. The Petitioner asserts that pursuant to Wyoming Constitution Article I Section 38, right of healthcare that Petitioner has is a Constitutionally protected right to make her own healthcare decisions pursuant to section (a). Article I Section 38 states:

(a) Each competent adult shall have the right to make his or her own health care decisions. The parent, guardian or legal representative of any other natural person shall have the right to make health care decisions for that person.

(b) Any person may pay, and a health care provider may accept, direct payment for health care without imposition of penalties or fines for doing so.

(c) The legislature may determine reasonable and necessary restrictions on the rights granted under this section to protect the health and general welfare of the people or to accomplish the other purposes set forth in the Wyoming Constitution.

(d) The state of Wyoming shall act to preserve these rights from undue governmental infringement.

6. Neither the Governor nor any health official can make arbitrary or capricious decisions either outside the statute or decisions that are not based upon known and proven scientific data. When evaluating health emergency authority, public health decisions must be evaluated and justified under a common legal and ethical standard, including: (1) individuals must pose a significant risk of spreading a dangerous, infectious disease; (2) interventions must be likely to

ameliorate risks; (3) actions taken must be narrowly drawn to achieve the stated objective; (4) the action taken must be specific to accomplish a specified outcome; (5) the least-restrictive means necessary to achieve the stated objectives are required; (6) use of coercion should be proportionate to the risk; and (7) decision/actions must be based on the best available scientific evidence. Health emergencies do not warrant coercion that is indiscriminate, overbroad, excessive, or without evidentiary support. (e.g. based upon years of known scientific data, masks do not stop - or even hinder - the spread of any of the seven known corona viruses. As such, wearing a mask does not accomplish the stated objective to stop or slow the spreading of the covid-19 virus.) Arbitrary decisions and actions have no authority; they are as unconstitutional as a statute that is a violation of constitutional limitations, protection and standards.

7. Petitioner is aware of the proceedings that took Place in *State v. Ziska*, and disputes Dr. Hunter's testimony regarding the efficacy of masks helping to prevent the spread of the Corona 19 virus. As early as November 2020, there was a study in China with over 10,000,000 people that showed asymptomatic people do not spread the virus, and this study affirmed the earlier report from

the World Health Organization that Covid-19 is only known to transmit from people who are showing symptoms of the virus. (See exhibit A, B and C).

8. Pursuant to federal law, Title 21 U.S.C. § 360bbb-3(e)(1)(A)(ii)(I-III). Title 21, Section 360bbb-3 of the Federal Food, Drug, and Cosmetic Act (the “FD&C Act”) vests the Secretary of Health and Human Services with the permissive authority to grant Emergency Use Authorizations (“EUAs”). However, the statute requires that:

individuals to whom the product is administered are informed—

- (I) that the Secretary has authorized the emergency use of the product;
- (II) of the significant known and potential benefits and risks of such use, and of the extent to which such benefits and risks are unknown; and
- (III) of the option to accept or refuse administration of the product, of the consequences, if any, of refusing administration of the product, and of the alternatives to the product that are available and of their benefits and risks.

9. It is the assertion of the Petitioner, under the circumstances of the Contempt proceedings, that the Court was the administer of the mask, and the Court should have made the Petitioner aware that she had the option to refuse administration of the mask. Further, the Petitioner has the option to refuse the mask pursuant to Federal Law.

10. Additionally, in a letter from the Wyoming Department of Health signed by the State Health Officer to Lily Sharpe, State Court Administrator dated January 25, 2021, (Exhibit D) states,

“Recognizing the unique nature of courtroom proceedings, including the importance of viewing the face of a witness during testimony, as the State Health Officer, I am granting the following exception to Statewide Health Order #4 for municipal, circuit and district courts for Wyoming:
A face covering is not required in a court proceeding where the individual is seated and physically distanced at least six feet from other with permission of the court.”

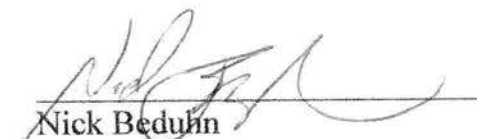
11. The Petitioner notes that permission from the Court was necessary, but she was more than six feet away from next closest juror. The Petitioner arrived for civic duty on March 1, 2021, over a month after the State Health Officer indicated that the six feet requirement was all that is needed in the courtroom.

12. In the proceedings in *State v Ziska*, the Court indicated that face shields were available to potential jurors, and this option was never made to the Petitioner. This could have resolved the issue without a single mother of two being held in Contempt. When Petitioner arrived for her civic duty to serve as juror, no one requested that she wear any face covering before court proceedings had begun.

13. Finally, the Petitioner and her counsel mean absolutely no disrespect to this Court by questioning its decision for Contempt. Petitioner is hoping that the Court sees more accurate information and data versus information that it can potentially consider. The Sheridan County Health Officer possible misinformed the Court, and the Court used this expertise to base its decisions.

WHEREFORE, IT IS REQUESTED that the Court set this matter for hearing for its reconsideration

DATED this 2nd day of April, 2021.

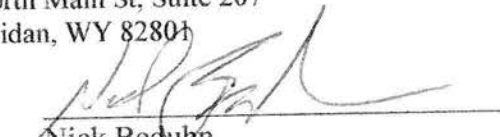

Nick Beduhn
Beduhn Law
P.O. Box 1149
Buffalo, WY 82834
W.S.B. No. 6-3763

CERTIFICATE OF SERVICE

I, the undersigned, do hereby certify that I served a copy of the Motion to Set Aside Direct Contempt Against April Hanson and the Court's Sentence, by regular United States mail, postage prepaid, this 2nd day of April 2021:

County Attorney Diana Bennett
148 Brooks St
Sheridan, WY 82801

Public Defender Anna Malmberg
2 North Main St, Suite 207
Sheridan, WY 82801


Nick Beduhn

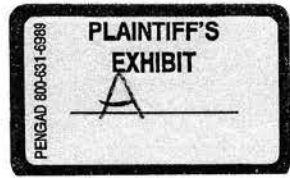
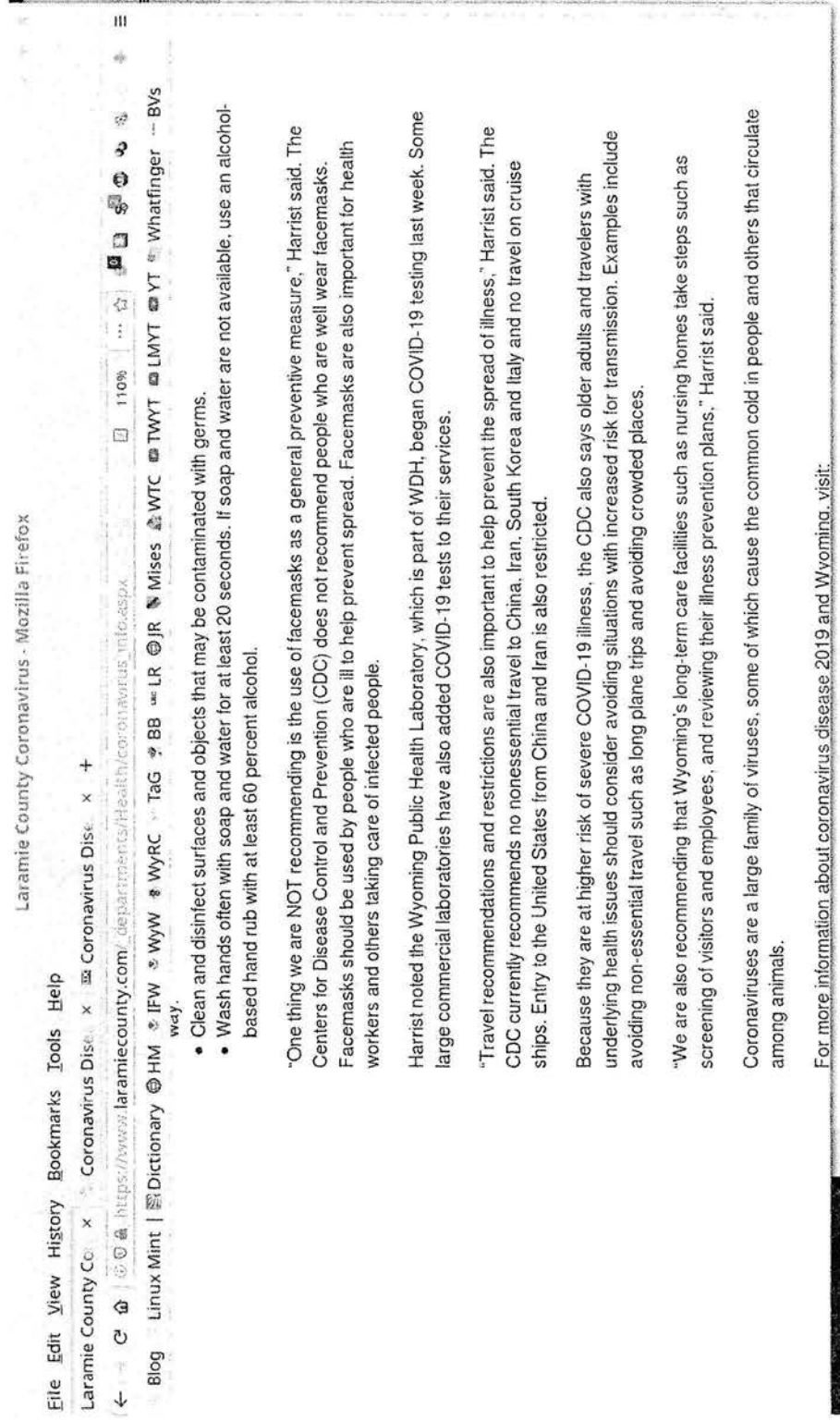
April Hanson - Motion To Set Aside Judgment of Direct Contempt

“One thing we are NOT recommending is the use of facemasks as a general preventive measure,” Harrist said. The Centers for Disease Control and Prevention (CDC) does not recommend people who are well wear facemasks. Facemasks should be used by people who are ill to help prevent spread. Facemasks are also important for health workers and others taking care of infected people.”

https://www.laramiecounty.com/_departments/Health/coronavirus_info.aspx

<https://cdc/coronavirus/2019-ncov/index.html>

<https://healthwyo.gov/publichealth/infectious-disease-epideiology-unit/disease/novel-coronavirus/>



'Masks Are Symbolic,' say Dr Fauci and The New England Journal of Medicine

<https://hennesysview.com/masks-are-symbolic-dr-fauci/>

Bill Hennessy @hennesystl

May 28, 2020

In the past week, Dr. Anthony Fauci and the New England Journal of Medicine have admitted that masks are little more than symbols. Virtue signaling.

For those of you who shout “science” like it’s a Tourette tick, this is from the New England Journal of Medicine on May 21, 2020: (see: Universal Masking in Hospitals in the Covid-19 Era.pdf)

We know that wearing a **mask outside health care facilities offers little, if any, protection from infection**. Public health authorities define a significant exposure to Covid-19 as face-to-face contact within 6 feet with a patient with symptomatic Covid-19 that is sustained for at least a few minutes (and some say more than 10 minutes or even 30 minutes). **The chance of catching Covid-19 from a passing interaction in a public space is therefore minimal**. In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.

So, why are we ordered to wear masks? Symbolism. From the same article in NEJM:

It is also clear that masks serve symbolic roles. Masks are not only tools, they are also talismans that may help increase health care workers’ perceived sense of safety, well-being, and trust in their hospitals.

The Surgeon General was widely mocked and ridiculed for suggesting in March that masks might even increase the spread of the virus. Yet, here, the esteemed New England Journal of Medicine provides the same warning to mask-wearers:

What is clear, however, is that universal masking alone is not a panacea. A mask will not protect providers caring for a patient with active Covid-19 if it’s not accompanied by meticulous hand hygiene, eye protection, gloves, and a gown. A mask alone will not prevent health care workers with early Covid-19 from contaminating their hands and spreading the virus to patients and colleagues. **Focusing on universal masking alone may, paradoxically, lead to more transmission of Covid-19 if it diverts attention from implementing more fundamental infection-control measures.**

Thus, the argument is over. Anyone who advocates universal masking is merely engaging in virtue signaling, not public health.

It’s time to unmask. I, for one, don’t have enough virtue to signal.



COVID-19 Study of Almost Ten Million Finds No Evidence of Asymptomatic Spread, Media Quiet

<https://theconservativetreehouse.com/2020/12/20/covid-19-study-of-almost-ten-million-finds-no-evidence-of-asymptomatic-spread-media-quiet/>

Posted on December 20, 2020 by Sundance

See also: Asymptomatic Spread Revisited.odt; The Evidence that Lockdowns Do Not Control the Coronavirus

An interesting article from the American Institute for Economic Research (AIER) is gaining increased attention as questions about asymptomatic spread of COVID-19, the baseline for all COVID mitigation, is being reconciled with the latest tracing data.

In essence, the larger question being asked is: *can people without coronavirus symptoms spread the COVID-19 virus?* This question is at the heart of all current COVID mitigation efforts. If there is no asymptomatic spread then what is all of this mask wearing nonsense and shut-down mandates all about?

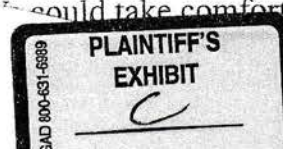
A research paper published on November 20th (see: Post-lockdown SARS-CoV-2 nucleic acid screening in nearly ten million residents.pdf) highlights a case study of almost 10 million people in China. What the study found was there were 300 cases of Coronavirus in the population being carried without any symptoms at all. So the scientists then tracked the asymptomatic carriers. The contact tracing of 1,174 “close contacts” with the asymptomatic carriers showed ZERO transmission. Not a few, not a couple, but zero -none- not a single transmission of Coronavirus from a person without symptoms.

The conclusion is **not** that asymptomatic spread is rare or that the science is uncertain. The study revealed something that hardly ever happens in these kinds of studies. There was not one documented case. Forget rare. Forget even Fauci’s previous suggestion that asymptomatic transmission exists but not does drive the spread. Replace all that with: never. At least not in this study for 10,000,000.

[STUDY] ... Stringent COVID-19 control measures were imposed in Wuhan between January 23 and April 8, 2020. Estimates of the prevalence of infection following the release of restrictions could inform post-lockdown pandemic management. Here, we describe a city-wide SARS-CoV-2 nucleic acid screening programme between May 14 and June 1, 2020 in Wuhan. All city residents aged six years or older were eligible and 9,899,828 (92.9%) participated.

No new symptomatic cases and 300 asymptomatic cases (detection rate 0.303/10,000, 95% CI 0.270–0.339/10,000) were identified. **There were no positive tests amongst 1,174 close contacts of asymptomatic cases.** 107 of 34,424 previously recovered COVID-19 patients tested positive again (re-positive rate 0.31%, 95% CI 0.423–0.574%). The prevalence of SARS-CoV-2 infection in Wuhan was therefore very low five to eight weeks after the end of lockdown.

One might suppose that this would be huge news. It would allow us to open up everything immediately. With the whole basis for post-curve-flattening lockdowns crumbled, we could go back to living a normal life. The fear could evaporate. We could take comfort in our normal



intuition that healthy people can get out and about with no risk to others. We could take off our masks. We could go to movies and sports events.

... We keep hearing about how we should follow the science. The claim is tired by now. We know what's really happening. The lockdown lobby ignores whatever contradicts their narrative, preferring unverified anecdotes over an actual scientific study of 10 million residents in what was the world's first major hotspot for the disease we are trying to manage. You would expect this study to be massive international news. So far as I can tell, it is being ignored.

[More]

In essence, what the study of 10 million people confirmed is what many people, doctors, scientists and World Health Organization already suspected.

Like the common cold and flu when a person is infected with the virus they are only infecting others when they have symptoms: cold, runny nose, coughing, aching, sneezing, fever, congestion etc; hence, when a person has an illness they should isolate to not spread the virus. However, when a person has no external symptoms of the virus, just like the cold and flu, they are not a risk of transmitting the virus to others.

♦ **This is a major issue with massive ramifications** because all of the current COVID-19 mitigation effort is based on the principle that people can carry and spread the virus while having no idea they have it, and no symptoms.

If asymptomatic transmission is not happening, and it appears with scientific certainty it is not, then all of the current lock-down regulations, mask wearing requirements and social distancing rules/decrees are based on a complete fallacy of false assumptions.

The asymptomatic case study published in November affirms the earlier reporting from the World Health Organization that COVID-19 is only known to transmit from people who are showing symptoms of the virus. In June of 2020, Maria Van Kerkhove, head of the World Health Organization's emerging diseases and zoonosis unit, said transmission of the coronavirus by people who aren't showing symptoms is "very rare."

See video: WHO Says Covid-19 Asymptomatic Transmission Is 'Very Rare'
<https://www.youtube.com/watch?v=NQTBlbxlXjs&feature=youtu.be>

As you can see from the video explanation, in June 2020 Ms. Kerkhove could not identify a single study or case that was traced to asymptomatic spread; but scientists still thought it might be possible so she -and others- kept using the "very rare" terminology.

However, with the latest information and a far more lengthy timeline to study the disease, the cumulative 2020 data shows "very rare" actually means "never", asymptomatic spread just doesn't happen – EVER.

So why is the entire world engaged in COVID-19 mitigation processes to block the transmission of a virus that has never, not even once, been identified as occurring?



Public Health Division
122 West 25th Street, 3rd Floor West
Cheyenne, WY 82002
(307) 777-6340 • 866-571-0944
Fax (307) 777-8264 • www.health.wyo.gov



Michael A. Ceballos
Director

Mark Gordon
Governor

January 25, 2021

Ref: AH-2021-002

Lily Sharpe, State Court Administrator
Wyoming Supreme Court
Administrative Office of the Courts
2301 Capitol Ave
Cheyenne, WY 82002

Dear Ms. Sharpe:

Statewide Public Health Order #4 requires persons 12 years of age and older to wear a face covering in the public areas of certain spaces, including state, county, and municipal government facilities, with certain exceptions.

Recognizing the unique nature of courtroom proceedings, including the importance of viewing the face of a witness during testimony, as the State Health Officer, I am granting the following exception to Statewide Public Health Order #4 for municipal, circuit, and district courts for Wyoming:

A face covering is not required in a court proceeding where the individual is seated and physically distanced at least six feet from others and with permission of the court.

Sincerely,

A handwritten signature in black ink, appearing to read "Alexia Harrist".

Alexia Harrist, MD, Ph.D
State Health Officer
Public Health Division

AH/ah

