Complaint Against Dr. De Villa

Schedule "A"

WHAT HAPPENED – Dr. De Villa has, for the last twelve months, implemented lockdown measures that clearly discriminate against and cause harm to myself and my family. These lockdown measures have resulted in gross and overt discrimination against business owners, people not deemed essential, families, children, students and a vast array of other groups. Further to that, they have resulted in my physical and mental decline.

Dr. De Villa has failed to provide full disclosure on all information pertaining to the Covid19 vaccines, thereby hindering my ability to make an informed decision to take the vaccine safely.

WHO WAS INVOLVED -

WHERE AND WHERE DID IT HAPPEN – Over the past year, Dr. De Villa has implemented stringent lockdown measures that have been detrimental to my mental and physical health.

Please explain in more detail how lockdown has impacted you e.g. weight gain, depression, lack of socialisation...and why you need these activities for optimal health.

Dr. De Villa's ongoing advice to the leaders of the province of Ontario to continue with long, harsh and unreasonable lockdowns has not been based on scientific evidence. If there is evidence to support these measures, they have not been shared with the public. Her assumptions have been based on modelling studies which are the lowest type of data. Real time data/hard data collected by Health Canada has shown there to be marginal (if any) cases involved in the spread of Covid19 originating from restaurants, malls, community centres etc. Plus, we now have data from Statistics Canada that claims that other factors including possible indirect impacts of the pandemic (which lockdowns are the mains ones) are now driving "excess deaths". This is a breach in the principle of Altruism.

Dr. De Villa's implementation of the universal masking policy indoors, has resulted in gross and overt discrimination towards myself and many others that have issues breathing with a mask on. It has also resulted in a decline in my health and welfare. I am not able to tolerate wearing a mask for more than a minute or two. I have been denied entry into various grocery stories for the same reason. Unfortunately, due to Dr. De Villa's lack of sensitivity and compassion in not sending a strong and consistent message to the general public about the importance of respecting persons without masks, I have had to deal with repeated violations of my basic human rights over the course of this past year. To date, Dr. De Villa has not provided hard scientific evidence to support the benefit of wearing masks indoors. This strategy continues to have a profound impact my life. This is a major breach in the principle of Compassion and Altruism on individuals like myself who have been significantly impacted by this draconian measure.

With respect to the issue of the Covid19 vaccines, Dr. De Villa has continued to provide incomplete/misinformation about the vaccines. She has continued to strongly advocate for everyone, including adults like myself who may not be suitable to get the vaccine, to go ahead and take the vaccine.

As the public medical officer of health, she is obliged to provide me (and the citizens of Ontario) full disclosure on all information pertaining to the vaccines. The Covid19 vaccines have received Emergency Use Authorization only. They have not been approved by Health Canada/FDA. Some of these vaccines are still at the experimental stage e.g. Pfizer's clinical trial does not end until January 2023. These vaccines will not protect the individual from getting Covid19 or from passing it on to others. They will only help to reduce the symptoms if one was to get Covid19. These vaccines have not been around long enough to determine the safety efficacy/profile of them to determine if they are safe for individuals like me who have multiple health issues.

None of this information has been communicated/made transparent by Dr. De Villa to the general public. This is a significant breach in the principle of Trustworthiness because it has raised huge concerns in the lack of truth/transparency in the advice Dr. De Villa continues to give the general public.

Dr. De Villa has continued to ignore pre-existing treatments such as Vitamin D, Zinc, Hydroxychloroquine and Ivermectin which have long established safety records and significant real world success in the treatment of covid-19.

Dr. De Villa has been quoted as saying "the people of Ontario are my patients". That said, she has failed me and I have suffer gravely as a result of Dr. De Villa's actions. This is a significant breach of the Hippocratic Oath to do no harm. The lockdown measures including mask use continue to do significant harm to myself, my family and my community.

Schedule B

De Villa Vaccine comments

SEPTEMBER 2019

Subject has previously shown a desire to ignore medical/religious exemption for all vaccinations. Subject has claimed vaccines are safe but equally her board's report suggested there should be developing a Vaccine Injury Compensation Program - see attached report 23rd September 2019.

http://app.toronto.ca/tmmis/viewAgendaltemHistory.do?item=2019.HL9.2

FEBRUARY 2021

De Villa continues to recommend Vaccines even in the case of patients who suffer from chronic disease.

CP24: A viewer asks, our 22-year-old daughter has asthma but is otherwise healthy. Do you think she will be included in the phase two vaccine rollout?

De Villa: I believe in phase two, there is some provision for adults who have chronic conditions. How they're going to divvy that up, again, the prioritization and the sequencing is something that's being determined by my provincial counterparts. I don't have specific information on this at this time. But I'm certainly pleased to hear that a young person, albeit with a chronic condition, is interested in getting the vaccine. And I would simply encourage that person and all others in that situation to be ready to take up the vaccine when their turn comes up, which hopefully will be sooner rather than later.

https://www.cp24.com/news/should-you-get-the-vaccine-if-you-ve-already-had-covid-19-q-a-with-toronto-s-top-doctor-1.5323127?cache=yes%3FclipId%3D68597%3FclipId%3D68596

FEBRUARY 2021

CP24: Do you know of any of the long-term side effects, if there are any, of the COVID vaccines? How are we supposed to trust a vaccine that's been rushed without knowing any of the long-term consequences?

De Villa: I recognize that there are some very real and legitimate concerns that people raise about a treatment that's relatively new, like a new vaccine. But I think it's really important that people recognize that all of the safety issues and all of the regulatory processes for every vaccine have been followed with these new COVID-19 vaccines. So yes, they are new vaccines, but every safety mechanism, all the regulatory processes have been followed in respect of these vaccines. I think, in fact, when I look at this issue, I think about what an amazing accomplishment it is that we are able to have these vaccines available, and they're demonstrating effectiveness right now. Millions of doses have been given to people all over the world, and we're actually seeing the benefit of the vaccines. So that tells me that this is one of those miracles of modern science, for which I'm incredibly grateful.

https://www.cp24.com/news/covid-19-q-a-dr-de-villa-on-delaying-reopening-threat-of-covid-variants-double-masking-1.5313328

MARCH 2021

CP24: A viewer asks, do you know if the other vaccines cause blood clots too?

De Villa: The side effects that are most commonly reported with vaccines tend to be those that are locally related. From Pfizer, Moderna or Johnson and Johnson, I've not heard of anything related to blood clots. I would say this, though. There is a significant activity that's called post-marketing surveillance. What it is, is watching over time as vaccines are used in practice to see whether there are any issues that are arising. There is a whole process by which negative unexpected events following immunization are reported. We have an established system for that here in the province and of course, the city participates in that so that all these data are collected so that we can understand on a go forward basis. Are we seeing any unusual side effects or adverse events following the receipt of a vaccine? Those can be assessed properly and determined whether there's a connection to the vaccine. Just because something happens after you get a vaccine doesn't necessarily mean that it's the vaccine that causes it. But I think people should be assured that there is a process for vaccine safety on an ongoing basis while it's being used. It is constantly being followed. https://www.cp24.com/news/covid-19-q-a-dr-de-villa-on-modified-grey-zone-third-wave-race-between-variants-and-vaccines-1.5351595

ALTERNATIVE VACCINE COMMENTARY

NORMAL VACCINE DEVELOPMENT

https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation

JANUARY 2021

Peter Doshi on Vaccine efficacy not be being accurately potrayed.

https://blogs.bmj.com/bmj/2021/01/04/peter-doshi-pfizer-and-modernas-95-effective-vaccines-we-need-more-details-and-the-raw-data/

MARCH 2021

Vaccines are not necessarily safe for those with underlying chronic conditions or allergies.

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/underlying-conditions.html

https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Appendix-B

APRIL 2021

Clear link between blood cloths and Astra Zenacca.

https://torontosun.com/news/world/clear-link-between-astrazeneca-vaccine-and-rare-blood-clots-in-brain-ema-official-tells-paper

De Villa Lockdown comments

NOVEMBER 2020

DeVilla unable answer why small businesses are closed but big box shops are open despite being asked. Big box can also do online not small shops. See from time 2.28 minutes in:-

https://www.youtube.com/watch?v=NX8ACczmW7k

JANUARY 2020

Hospitals 'will be overwhelmed' – no proof plus never were https://www.excal.on.ca/news/2021/01/19/new-measures-in-effect-as-ontario-enters-second-provincial-emergency/

OCTOBER 2020

Mayor John Tory said he "completely" supports de Villa's recommendations. He said the recommendations are time-limited and won't last longer than needed in order to address public health concerns, but acknowledged it will be difficult for some sectors.

"This is strong medicine and I know it will be bitter for the businesses impacted," Tory told reporters Friday afternoon.

"Her advice to date, which we have followed, has saved lives."

ALTERNATE LOCKDOWN COMMENTS

JULY 2020

"Rapid border closures, full lockdowns, and wide-spread testing were not associated with COVID-19 mortality per million people."

https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(20)30208-X/fulltext

AUGUST 2020

"The results... suggest that the lockdowns will end up costing Americans over 10 times as many years of life as they will save from the virus itself."

https://www.revolver.news/2020/08/study-covid-19-lockdowns-deadlier-than-pandemicitself/

NOVEMBER 2020

"A brief look at the cost of stringencies in the United States, and around the world, including stay-at-home orders, closings of business and schools, restrictions on gatherings, shutting of arts and sports, restrictions on medical services, and interventions in the freedom of movement."

https://www.aier.org/article/cost-of-us-lockdowns-a-preliminary-report/

JANUARY 2021

Anthony Furey. Canadian expert's research finds lockdown harms are 10 times greater than benefits.

https://torontosun.com/opinion/columnists/canadian-experts-research-finds-lockdown-harms-are-10-times-greater-than-benefits

JANUARY 2021

Bendavid, E., Oh, C., Bhattacharya, J., Ioannidis, J.P.A.

"We find no clear, significant beneficial effect of most restrictive nonpharmaceutical interventions (mandatory stay-at-home and business closures) on case growth in any country... Lockdowns do 10 times more damage to health of the citizens than they protect." https://onlinelibrary.wiley.com/doi/10.1111/eci.13484

MARCH 2021

"An international study comparing government measures to combat coronavirus in ten countries found lockdowns had no measurable impact on transmission." https://tnc.news/2021/03/04/lockdowns-have-no-significant-benefits-international-study/

De Villa PCR Testing comments

DECEMBER 2020

DeVilla sourcing and not admitting flaw pcr testing. Describing covid at home as 'rough enough' but no mention of how rough lockdown is on everyone. (full video, just 2 minutes) https://www.youtube.com/watch?v=ah0YAJFgb0

ALTERNATE PCR COMMENTS

WHO admit PCR test is flawed

https://thevaccinereaction.org/2021/02/who-issues-new-guidance-on-use-of-pcr-tests/https://www.who.int/news/item/20-01-2021-who-information-notice-for-ivd-users-2020-05

SEPTEMBER 2020

"An investigative piece by the New York Times has raised questions about the validity of the PCR type COVID mass-testing used in countries all around the world to identify COVID cases and to subsequently make policy decisions. This has sparked debate in the US, the UK, and Israel but so far not in Canada, even though we face the same issue."

https://westphaliantimes.com/international-experts-suggest-that-up-to-90-of-canadian-covid-cases-could-be-false-positives/

OCTOBER 2020

"...if a person gets a "positive" PCR test result at a cycle threshold of 35 or higher (as applied in most US labs and many European labs), the chance that the person is infectious is **less than 3%**. The chance that the person received a "false positive" result is 97% or higher." https://www.canadahealthalliance.org/rt-pcr-tests.html

NOVEMBER 2020

"This study looking at PCR test data from nearly 10 million residents in Wuhan city found that not a single one of those who had been in close contact with an asymptomatic individual tested positive. Asymptomatic people do not spread COVID-19." https://www.nature.com/articles/s41467-020-19802-w

NOVEMBER 2020

"The daily barrage of statistics is familiar to us all by this point, but as time goes on the evidence that something may be deeply amiss with the whole foundation of our reaction to this pandemic – the testing regime – continues to mount." https://www.rt.com/op-ed/507937-covid-pcr-test-fail/

DECEMBER 2020

"A vast majority of those testing positive for SARS-CoV-2 are asymptomatic. They simply aren't sick. The PCR test is merely picking up inactive (noninfectious) viral particles." https://articles.mercola.com/sites/articles/archive/2020/12/04/do-asymptomatic-people-spread-coronavirus.aspx

DECEMBER 2020

"Complete live viruses are necessary for transmission, not the fragments identified by PCR. Prospective routine testing of reference and culture specimens and their relationship to symptoms, signs and patient co-factors should be used to define the reliability of PCR for assessing infectious potential. Those with high cycle threshold are unlikely to have infectious potential."

https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1764/6018217

De Villa Lack of Evidence Comments

DECEMBER 2020

De Villa saying cases worse without restrictions but not evidence

"I do not want to contemplate what the case counts might have been had we not entered lockdown," she added. "I am worried about the threat to our own health and I am worried about three real risks manifesting in the health care system."

https://www.680news.com/2020/12/10/ontario-to-issue-new-covid-19-projections-during-afternoon-public-health-briefing/

MARCH 2021

De Villa saying this week throughout the entire pandemic she's 'guided by the facts' (See from time 9.32 minutes). Case counts still being used without qualifying the facts and policy of lockdown based on the data ie inaccurate pcr determined case number (see from 10.05 minutes in)

https://www.youtube.com/watch?v=wy9jcUrAstI

OCTOBER 2020

De Villa admits model used are based on assumptions.

The modelling released on Wednesday is not based on any specific measures being taken to limit the spread of COVID-19 and de Villa conceded that it is largely "premised on assumptions" about the success of those measures in lowering the reproductive rate, which is a technical term that refers to the average number of people that each person infected with COVID-19 passes the virus onto.

"What the models show are what happens at different levels of the reproductive rate. What it takes to get to those different levels isn't specifically named in the models. All we are doing is changing the level, presuming that actions have been taken to achieve those numbers,"

she said. "What specific actions will take something from say 1.2 down to 1.1, I can't say until we actually adopt the action and see what happens."

https://www.cp24.com/news/covid-19-infections-in-toronto-will-exceed-april-peak-in-next-few-weeks-could-get-much-worse-without-new-restrictions-de-villa-1.5136805?cache=emuosurrypzum

FEBRUARY 2021

I've always acted in the best interest of the residents of Toronto. I will continue to do that, applying the best available data and the best available evidence to protect and promote the health of people who live in the city.

https://www.cp24.com/news/covid-19-q-a-dr-de-villa-on-delaying-reopening-threat-of-covid-variants-double-masking-1.5313328

October 2020

Covid death overstated

https://torontosun.com/news/provincial/ontario-death-count-includes-people-who-didnt-die-of-covid-19-but-exactly-how-many-is-unknown

De Villa Masking comments

JUNE 2020 no mask outdoors

Dr. Eileen de Villa @epdevilla

Jun 26, 2020

I encourage everyone to enjoy time outside this weekend, whether getting fresh air & exercise, or dining on a patio. Please keep taking care of each other by practising #PhysicalDistancing with those not in your social circle & wearing a cloth mask in indoor public spaces.

JULY 2020

De Villa Q&A including masks

CP24: There have been reports in the media in the United States about masks and carbon dioxide. We wear masks to protect everyone from COVID-19. However, are we breathing in the carbon dioxide we're supposed to expel when we use masks? Is this a real thing? De Villa: I've told a couple of people about masks, and I know that this is a concern. These masks are not meant to be super tight fitting. We're not talking about N95 masks here when we're talking about the general public. We're talking about cloth masks. Lots of space, lots of room for oxygen to get through to the sides, through the gaps that exist, and they're not supposed to be big gaps. We're talking about tiny molecules here. They can get through the mask as well. I will remind people that in health-care settings, health-care professionals have to wear masks for hours on end. Sometimes some surgical procedures last for a really long time, and they're wearing masks for hours. We want their oxygen levels to be good so that they can continue to do their important work. I don't think that this is something that people need to be concerned about. I recognize that that information is out there on the

Internet, but this is not a concern from my perspective at all. Oxygen will get through. This is in the case that you don't have a medical condition or breathing condition that is involved in the situation

https://www.cp24.com/news/we-must-remain-vigilant-toronto-s-top-doctor-answers-your-covid-19-questions-1.5035202?cache=yes%3FclipId%3D89531%2F5-things-to-know-for-friday-november-22-2019-1.4697438

JANUARY 2021

CP24: Does the cold outside increase our risk of getting COVID? Should we now wear masks outside?

De Villa: When it comes to COVID and the spread of COVID, it's certainly like many other respiratory viruses prefer cold, dry air in terms of spread. It's just easier for many respiratory viruses to spread in this kind of weather and these kinds of conditions. That's why this is cold and flu season. When it comes to protecting oneself, the best thing to do, of course, is to stay home, but if you need to be out and about, whether it's going to the grocery store, or the pharmacy or getting outside for a walk or some exercise, the best thing to do is to wear a mask as much as possible.

https://www.cp24.com/news/toronto-s-medical-officer-of-health-answers-pandemic-related-questions-1.5265846

FEBRUARY 2021

De Villa now saying tight fitting masks good

CP24: Are we supposed to be wearing two masks now? Should we also be wearing a face shield when out getting essentials, especially with these new variants?

De Villa: The science is constantly developing and evolving. That's why the advice does change from time to time when it comes to what are the best protective measures. The one thing that hasn't changed is distance, distance and distance. So, the more you're able to stick at home and apart from others, save and exclude when it's absolutely essential, the better protected you are. When it comes to masks, we have heard studies from the United States, the Centers for Disease Control, in particular, and they talked about the potential of using a second mask. And the reason why they were talking about that was around fit. The current advice in Canada is to use a well-fitting mask to try to minimize the gaps around the face so as to really keep the droplets to yourself as much as possible. That's the importance of fit. The study from the CDC found that putting that second mask, a non-medical mask, over a medical mask really made for a good fit and created the best protection in preventing droplets from spreading. And if we all wear our masks, we're protecting each other as a community.

https://www.cp24.com/news/covid-19-q-a-dr-de-villa-on-delaying-reopening-threat-of-covid-variants-double-masking-1.5313328

ALTERNATE MASK COMMENTS

OCTOBER 2020

John C. Manley. Medical Doctor Warms Bacterial Pneumonias are on the Rise. https://www.globalresearch.ca/medical-doctor-warns-bacterial-pneumonias-rise-mask-wearing/5725848

DECEMBER 2020

"WITH MASK MANDATE: 27 cases per day per 100K people; NO MASK MANDATE: 17 cases per day per 100K people."

https://www.theblaze.com/op-ed/horowitz-comprehensive-analysis-of-50-states-shows-greater-spread-with-mask-mandates

JANUARY 2021

"The fact is, mask mandates were rolled out despite a lack of solid evidence to support their use among the general population. On the contrary, the evidence against them continues to mount."

https://articles.mercola.com/sites/articles/archive/2020/12/31/pandemic-face-mask.aspx

FEBRUARY 2021

A review of the measured and potential harms of face masks imposed on workers, children, and the general population.

https://www.researchgate.net/publication/349518677 Review of scientific reports of harms caused by face masks up to February 2021

FEBRUARY 2021

. "The evidence just is and was not there to support mask use for asymptomatic people to stop viral spread during a pandemic. While the evidence may seem conflicted, the evidence (including the peer-reviewed evidence) actually does not support its use and leans heavily toward masks having no significant impact in stopping spread of the Covid virus." https://www.aier.org/article/masking-a-careful-review-of-the-evidence/

MARCH 2021

Masks may be toxic.

https://www.cbc.ca/news/canada/montreal/masks-early-pulmonary-toxicity-quebec-schools-daycares-

1.5966387?fbclid=IwAR0dYuDgceywgyKb6HWoPshY1ANt9m641Fx4yycdA0HyMQU iPi8m2T fW8U

De Villa Mental Health comments

OCTOBER 2020

Oct 10, 2020

Good mental health is key to our overall health & wellbeing. #COVID19 has been tough on all of us but please know that you are not alone. Whether you are looking for support for yourself or others, resources are available: https://bit.ly/3nwjwUV #WorldMentalHealthDay https://twitter.com/epdevilla/status/1314944348514136069?lang=en

FEBRUARY 2021

CP24: Most sports activities in Toronto have been closed for about a year. Many parents believe the lack of sports is affecting their kids' mental and physical health. What is your position?

De Villa: My position is I'd love to get us back to sports as soon as possible. But to my mind, in-person learning is really first and foremost in the overall health of our children. Let's get that successfully underway. Let's get disease rates in our community lower, let's get vaccine rates up. And then slowly but surely what we've seen in the research is that reopening and moving back towards activities like they are normally if you will, it's something that should be done very gradually and very cautiously in order to protect ourselves and our community as fast as possible.

https://www.cp24.com/news/should-you-get-the-vaccine-if-you-ve-already-had-covid-19-q-a-with-toronto-s-top-doctor-1.5323127

ALTERNATE MENTAL HEALTH COMMENTS

JANUARY 2021

"When we started to see the uptick in children taking their lives, we knew it wasn't just the Covid numbers we need to look at anymore..."

https://www.nytimes.com/2021/01/24/us/politics/student-suicides-nevada-coronavirus.html?referringSource=articleShare

FEBRUARY 2021

Increased suicides. "...young people are suffering overwhelming harm to their mental health in this crisis."

https://childrenshealthdefense.org/defender/covids-deadly-toll-youth-suicides/

BRIBERY AND CORRUPTION

Dr, De Villa's husband Dr. Choi is compensated by the very companies that are offering the "vaccine" and Dr. De Villa has continued to ignore pre-existing treatments such as Vitamin D, Zinc, Hydroxychloroquine and Ivermectin which have long established safety records and significant real world success in the treatment of covid-19. We also require you to launch and investigation into the financial affairs of Dr. De Villa identifying any on shore or off shore payment she and her husband may have received from these companies. As you know both Pfizer and Astra-Zeneca have been convicted of felony offenses, including kickbacks and bribery and I am would like insure that his has not happened here.

Pfizer https://violationtracker.goodjobsfirst.org/parent/pfizer
Astra-Zeneca https://violationtracker.goodjobsfirst.org/industry/pharmaceuticals
(download the CSV file and filter for Astra-Zeneca)

As you know with any criminal activity only a portion is discovered, tried and success

As you know with any criminal activity only a portion is discovered, tried and successfully prosecuted.

See Attached Schedules "A" and "B" for more detail

Astra-Zeneca

https://violationtracker.goodjobsfirst.org/industry/pharmaceuticals

Company	T Parent Company	▼ Penalty Amount ▼	Subtraction From Penal *	Penalty Amount Adjust *	Penalty Year 🔻	Penalty Date	Offense Group	▼ Primary Offense ▼ Secondary Offense
AstraZeneca	AstraZeneca	\$250,000	\$0	\$250,000	2011	20110606	employment-related offenses	employment discrimination
AstraZeneca LP	AstraZeneca	\$520,000,000	\$0	\$520,000,000	2010	20100427	healthcare-related offenses	off-label or unapproved promotion of medical pr
AstraZeneca LP	AstraZeneca	\$46,500,000	\$0	\$46,500,000	2015	20150706	government-contracting-related offenses	False Claims Act and related
AstraZeneca LP	AstraZeneca	\$7,900,000	\$0	\$7,900,000	2015	20150211	government-contracting-related offenses	False Claims Act and relatikickbacks and bribery
AstraZeneca Pharmaceuticals	AstraZeneca	\$2,600,000	\$0	\$2,600,000	2009	20091019	government-contracting-related offenses	False Claims Act and related
AstraZeneca Pharmaceuticals LP	AstraZeneca	\$354,900,000	\$0	\$354,900,000	2003	20030620	government-contracting-related offenses	False Claims Act and related
AstraZeneca PLC	AstraZeneca	\$5,522,000	\$0	\$5,522,000	2016	20160830	competition-related offenses	kickbacks and bribery
AstraZeneca	AstraZeneca	\$350,000	\$0	\$350,000	2008	20080328	employment-related offenses	employment discrimination
AstraZeneca	AstraZeneca	\$807,826	\$0	\$807,826	2004	20040122	government-contracting-related offenses	False Claims Act and related
AstraZeneca	AstraZeneca	\$5,500,000	\$0	\$5,500,000	2013	20130207	healthcare-related offenses	off-label or unapproved promotion of medical p
AstraZeneca	AstraZeneca	\$5,391,000	\$0	\$5,391,000	2010	20100127	consumer-protection-related offenses	consumer protection violation
AstraZeneca	AstraZeneca	\$14,700,000	\$0	\$14,700,000	2009	20091015	government-contracting-related offenses	False Claims Act and related
AstraZeneca	AstraZeneca	\$110,000,000	\$0	\$110,000,000	2018	20180807	government-contracting-related offenses	False Claims Act and relate off-label or unapprove
AstraZeneca LP	AstraZeneca	\$46,500,000	\$46,500,000	\$0	2015	20151104	government-contracting-related offenses	False Claims Act and related
AstraZeneca Pharmaceuticals	AstraZeneca	\$68,500,000	\$0	\$68,500,000	2011	20110310	healthcare-related offenses	off-label or unapproved p drug or medical equip
AstraZeneca Pharmaceuticals LP	AstraZeneca	\$24,900,000	\$24,900,000	\$0	2003	20030630	government-contracting-related offenses	False Claims Act and related
AstraZeneca Pharmaceuticals LP	AstraZeneca	\$2,600,000	\$2,600,000	\$0	2009	20091019	government-contracting-related offenses	False Claims Act and related
AstraZeneca Pharmaceuticals LP	AstraZeneca	\$218,092,993	\$218,092,993	\$0	2010	20100427	healthcare-related offenses	off-label or unapproved promotion of medical p
AstraZeneca Pharmaceuticals LP and	A AstraZeneca	\$2,500,000	\$0	\$2,500,000	2011	20110811	government-contracting-related offenses	False Claims Act and related
AstraZeneca Pharmaceuticals, LP	AstraZeneca	\$3,333,333	\$0	\$3,333,333	2010	20101006	government-contracting-related offenses	False Claims Act and related
							-	

Pfizer

https://violationtracker.goodjobsfirst.org/parent/pfizer

	Company	Parent Co	Penalty Amount	Subtraction Fr	Penalty Amount	Penalty Yo	Penalty D	Offense Group	Primary Offense	Secondary Offense	Description	Level
1	Alpharma Inc.	Pfizer	\$42,500,000	\$0	\$42,500,000	2010	20100316	government-contract	t False Claims Act and related	kickbacks and bribery	Alpharma Inc. agreed to pay \$42.5 million to resolve False Claims Act a	feder
2	Warner-Lambert	Pfizer	\$430,000,000	\$0	\$430,000,000	2004	20040513	healthcare-related of	f off-label or unapproved promotion of m	kickbacks and bribery	Warner-Lambert agreed to plead guilty and pay more than \$430 million	feder
3	Pfizer, Inc.	Pfizer	\$23,850,000	\$0	\$23,850,000	2018	20180524	government-contract	t False Claims Act and related	kickbacks and bribery		feder
4	Alpharma Inc.	Pfizer	\$8,900,000	\$8,900,000	\$0	2010	20100316	government-contract	t False Claims Act and related	kickbacks and bribery	Alpharma Inc. agreed to pay \$8.9 million to settle multistate litigation	state
5	Pfizer, Inc.	Pfizer	\$331,485,170	\$331,485,170	\$0	2009	20090902	competition-related	kickbacks and bribery		Pfizer agreed to pay more than \$331 million to settle multistate litigati	state
6	Alnharma Inc	Pfizer	\$2 500 000	¢n	\$2 500 000	2004	20040812	comnetition-related	nrice-fixing or anti-competitive practice	consumer protection vi	Generic drug manufacturers Alnharma Inc. and Perrigo Comnany agree	feder