



This **2024 Candidate Survey** was completed by _____,
seeking election to the office of _____ in the state of Indiana,
District number _____, as a member of the _____ party.

Please return the completed and signed survey no later than March 6th, 2024

Failure to circle T or F will be considered a negative response.

Circle
one:

T F I agree, Hoosiers deserve the right to opt-in rather than opt-out of health record registries and will vote in accordance.

T F I agree, Hoosiers have the right to bodily integrity, defined as the ability to refuse intrusions upon the body that interfere with being whole and intact, including the right to refuse medical prophylaxis, test, treatment, or vaccination. Those exercising their right to bodily integrity should be free of discrimination. The right to bodily integrity applies to the *refusal* of treatment, it does not grant an individual the right to *demand* treatment.

T F I agree, the denial of medical care to Hoosiers based on vaccination status should be a punishable offense and will vote in accordance with this statement.

T F I agree, segregation based on vaccination status is unacceptable and should be a punishable offense and will vote in accordance.

T F I agree, due to a lack of manufacturer liability, medical professionals have a responsibility to ensure vaccine safety through accurate and appropriate reporting of adverse events to VAERS even if they don't believe the adverse event is related to the vaccine. I will support legislation creating state laws to ensure this essential function is carried out, including penalties for failure, refusal, or interference with making a report. I will vote in accordance with this statement.

T F I agree to serve as an Author/Sponsor or Co-Author/Co-Sponsor, and to motion for or second a roll call vote in the IGA, for legislation proposed by Hoosiers for Medical Liberty that ends medical mandates and protects the individual's right to accept or decline a vaccination or medical treatment even in direct opposition to Republican leadership.

Signature _____ Date _____

Candidate Authorization: my signature affirms that the answers above accurately represent my beliefs as a candidate.

Printed Name _____

