То:	
	 _
	_
From:_	
	_

Notice of Testimony

Notice to Agent is Notice to Principal and Notice to Principal is Notice to Agent

We, ______, People Traveling through or Visiting the state of Rhode Island (as seen in Rhode Island Declaration of Certain Constitutional Rights and Principles Article 1 Section 2) Sui Juris, in this Court of Record, come to you, being trustees of the People, so that you must provide due care. We make the following statements;

Rhode Island Constitution Article 1 Section 2: Laws for Good of Whole--Burdens to Be Equally Distribute--Due Process—Equal Protection—Discrimination—No Right to Abortion Granted;

"All free governments are instituted for the protection, safety, and happiness of the people. All laws, therefore, should be made for the good of the whole; and the burdens of the state ought to be fairly distributed among its citizens. No person shall be deprived of life, liberty or property without due process of law, nor shall any person be denied equal protection of the laws. No otherwise qualified person shall, solely by reason of race, gender or handicap be subject to discrimination by the state, its agents or any person or entity doing business with the state. Nothing in this section shall be construed to grant or secure any right relating to abortion or the funding thereof."

Please notice:	, are
in joint agreement on all decision-making issues.	
As such,	, may
make lawful medical decisions concerning each other's care and treatment.	
Both	, are

in agreement on this matter;

Maxim of Law- Agreements give the law to the contract. *Halk. Max.* 118. **Maxim of Law-** The expressed agreement of the parties overcomes or prevails against the law, because the agreement of the parties makes the law of the contract. Story, *Ag.* s 368; *Dig.* 16, 3, 1, 6; 2 *Coke,* 73.

Please notice: No other entity may interfere with our lawful decision-making process. We have freedom to choose treatment, or to refuse treatment. We may choose to seek another opinion. We may choose to prolong or shorten any suggested treatment without restraint or control from any entity except the laws of nature;

Please notice: Both parties,	, agree
to this Notice and so signify that agreement	by our autographs on this document.
Autograph	Date

Autograph

Date

Verification

I hereby declare, certify, subsci	ribe and affirm that	under the lav	vful laws of the	e United States of
America and by the provisions	of 28 USC § 1746	that all of the	above and for	regoing
representations are true and co	prrect to the best of	my knowledg	ge, informatior	ι, and belief.
Executed in the State of		on this	_ day of	in
the Year of Our Lord Two Thou	isand Twenty			
A	utograph Affiant: _			
A	utograph Affiant: _			
	Notary as JURAT	CERTIFICAT	ſE	
	State	}		
	County	}		
On this day of	202	(date) before	e me,	
a Notary Public, personally app	eared			
(Name of Affiant), who proved t	to me on the basis	of satisfactor	y evidence to	be the man/woman
whose name is sworn and subs	scribed to the withir	n instrument a	and has autog	raph(s) on the
instrument the man/woman exe	ecuted, the instrum	ent. I certify u	nder PENALT	Y OF PERJURY
under the laws of the state of				that the foregoing
paragraph is true and correct.				
WITNESS my hand:				
Signature of Notary/Jurat:				

Seal/Stamp