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 NATIONAL ABORTION FEDERATION (NAF)

8  
 9 UNITED STATES DISTRICT COURT  
 10 NORTHERN DISTRICT OF CALIFORNIA

11  
 12 NATIONAL ABORTION FEDERATION (NAF),

13 Plaintiff,

14 v.

15 THE CENTER FOR MEDICAL PROGRESS;  
 BIOMAX PROCUREMENT SERVICES LLC;  
 16 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 AND TROY NEWMAN,

17 Defendant.  
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Case No. 3:15-cv-3522

Judge:

**NATIONAL ABORTION  
 FEDERATION (NAF)'S EX  
 PARTE MOTION FOR A  
 TEMPORARY RESTRAINING  
 ORDER; FOR AN ORDER TO  
 SHOW CAUSE REGARDING A  
 PRELIMINARY INJUNCTION;  
 FOR A MOTION FOR  
 PRELIMINARY INJUNCTION;  
 AND MEMORANDUM OF  
 POINTS AND AUTHORITIES**

Hearing Date:

Time:

Location:

**APPLICATION****TO DEFENDANTS AND THEIR ATTORNEYS OF RECORD:**

**PLEASE TAKE NOTICE** that on July 31, 2015, or as soon thereafter as the matter may be heard, in Courtroom \_\_\_\_\_ of the Honorable \_\_\_\_\_ at the United States District Court for the Northern District of California, \_\_\_th Floor, 450 Golden Gate Ave, San Francisco, CA 94102, Plaintiff National Abortion Federation (“NAF”) shall and hereby does move the Court pursuant to Federal Rule of Civil Procedure 65 for **an ex parte temporary restraining order**, an order to show cause regarding a preliminary injunction, and **a preliminary injunction** against Defendants The Center for Medical Progress (“CMP”), Biomax Procurement Services LLC (“Biomax”), David Daleiden (aka “Robert Sarkis”) (“Daleiden”), and Troy Newman (“Newman”) (collectively “Defendants”), and their officers, agents, servants, employees, and attorneys, and any other persons who are in active concert or participation with them (collectively “the Enjoined Individuals”) to:

- (1) prohibit the Enjoined Individuals from publishing or otherwise disclosing to any third party any video, audio, photographic, or other recordings taken, or any confidential information learned, at any NAF annual meetings;
- (2) prohibit the Enjoined Individuals from publishing or otherwise disclosing to any third party the dates or locations of any future NAF meetings;
- (3) prohibit the Enjoined Individuals from publishing or otherwise disclosing to any third party the names or addresses of any NAF members learned at any NAF annual meetings; and
- (4) prohibit the Enjoined Individuals from attempting to gain access to any future NAF meetings.

This motion is based on this notice of motion and supporting memorandum of points and authorities; the supporting affidavits of Vicki Saporta, Mark Mellor, Jennifer Dunn, Matthew Reeves, and Derek Foran; and any other written or oral evidence or argument as may be presented at or before the time this motion is taken under submission by the Court.

Absent an *ex parte* temporary restraining order, NAF, its employees, and its members will suffer irreparable harm in the form of harassment, intimidation, violence, invasion of privacy, and injury to reputation, as further outlined in NAF’s supporting memorandum of points and

1 authorities. For the same reasons, NAF, its employees, and its members will suffer the same  
2 irreparable harms absent a preliminary injunction following an order to show cause and expedited  
3 briefing on the merits.

#### 4 NOTICE OF APPLICATION

5 Notice of the ex parte temporary restraining order was given in accordance with Civil  
6 Local Rule 65-1(b), which states that, unless relieved by the Court for good cause shown, “on or  
7 before the day of an ex parte motion for a temporary restraining order, counsel applying for the  
8 temporary restraining order must deliver notice of such motion to opposing counsel or party.”

9 As set forth in the Declaration of Derek Foran in Support of a Temporary Restraining  
10 Order and Preliminary Injunction (“Foran Decl.”), NAF took the following steps to notify each of  
11 the Defendants that NAF would be applying for a temporary restraining order in the United States  
12 District Court for the Northern District of California, San Francisco, on Friday, July 31, 2015:

- 13 (1) A letter was sent via email to the attorney identified as the registered agent for  
14 service of process (Catherine Short) for CMP. (Foran Decl. ¶¶ 2-3, Ex.1.)
- 15 (2) A voicemail was left for the attorney identified as the registered agent for service  
16 of process (Catherine Short) for CMP. (*Id.* ¶ 5.)
- 17 (3) Emails were sent to email addresses associated with CMP  
18 (info@centerformedicalprogress.org), Biomax (info@biomaxps.com), Daleiden  
19 (info@centerformedicalprogress.org, david@centerformedicalprogress.org), and  
20 Newman (info.operationrescue@gmail.com). (*Id.* ¶¶ 2-3, Ex. 1.)
- 21 (4) An email was sent to the email address of the lawyer (Paul N. Jonna, Esq.) who  
22 made a special appearance on behalf of CMP in response to an application for  
23 temporary restraining order filed in the matter of *StemExpress, LLC et al. versus*  
24 *The Center for Medical Progress et al.* (Jul. 28, 2015), Case No. BC589145, in the  
25 Superior Court of the State of California, County of Los Angeles, Central District.  
26 (*Id.* ¶¶ 2-3, Ex. 1.)
- 27 (5) A voicemail was left for the lawyer (Paul N. Jonna, Esq.) who appeared specially  
28 on behalf of CMP in response to an application for temporary restraining order.  
(*Id.* ¶ 5.)

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1 **I. INTRODUCTION**

2 Plaintiff National Abortion Federation (“NAF”) brings this emergency application for an  
3 *ex parte* temporary restraining order, an order to show cause, and a preliminary injunction. The  
4 situation could not be more urgent. This motion presents an essential, and time sensitive matter,  
5 for both NAF and its members, who will be irreparably harmed if relief is not granted.

6 NAF is a not-for-profit professional association of abortion providers. One of NAF’s  
7 most important roles is the responsibility to protect the safety and security of its members. This is  
8 so because, despite the legality of abortion care, abortion providers are relentlessly targeted by  
9 anti-abortion extremists. Many of the physicians and clinic staff at NAF meetings have been  
10 stalked, threatened, and intimidated, simply for ensuring the constitutional right of women in this  
11 country to make their own reproductive choices. The harassment NAF members endure includes  
12 being picketed at their homes, churches, and children’s schools. Some NAF members have had  
13 death threats made against them, and bomb threats made against their clinics. NAF members who  
14 attend NAF meetings have had their names put on threatening “wanted” posters and websites  
15 featuring their photos and personal information that are intended to incite violence against them.  
16 Given the hostile climate and the history of violence, some NAF members go to great lengths to  
17 preserve their privacy and identity. Many NAF members have security protocols in place to try  
18 and protect the identity of their physicians. NAF’s annual meetings – which are strictly  
19 confidential and highly secure – represent one of the only places where NAF members can come  
20 together to learn about the latest research in the field and network without fear or harassment.

21 Posing as representatives of a legitimate procurement organization, the Defendants in this  
22 case engaged in a fraudulent campaign to gain access to NAF’s annual meetings. Daleiden and  
23 his co-conspirators invented a fake company (“Biomax Procurement Services”), manufactured  
24 fake marketing materials, a fake website, and fake driver’s licenses and business cards. They  
25 fraudulently gained access to NAF annual meetings and breached confidentiality agreements to  
26 invade NAF’s and its members’ privacy. Having illegally gained access, Defendants mingled  
27 freely with attendees, gathering identifying information and secretly recording members. Their  
28 purpose: to attack women’s reproductive rights and smear all those who support these rights.

1 On July 14, Defendants went public with their conspiracy. They have openly boasted  
2 about manufacturing a fake company in order to secretly videotape providers of abortion care,  
3 tapes that are then heavily edited to purposely make it look as if these physicians are profiting  
4 from lawful fetal tissue donation programs – programs that have led to life-saving medical  
5 research breakthroughs – when in fact the exact opposite is true. The victims of this campaign  
6 have had their professional reputations trashed. They have been called “evil,” “vile,” “inhuman,”  
7 “baby butchers,” and “a vicious demonic force” who deserve “no mercy” and “the hangman’s  
8 noose.” Death threats have been leveled against them. One post stated: “I’ll pay ten large to  
9 whomever kills Dr. Deborah Nucatola. Anyone go for it.” And the CEO of StemExpress, a  
10 lawful tissue procurement company, has been labeled “a death-profitteer” who “should be hung by  
11 the neck using piano wire and propped up on the lawn in front of the building with a note attached  
12 . . . .” The person posting went on to identify where the CEO lives and stated: “I’m going there . .  
13 . I’ll pay ten grand to whomever beats me to [CEO] . . . [CEO] must die to save the innocents.”  
14 Three days ago, on July 28, 2015, lawyers for StemExpress sought and received a TRO in Los  
15 Angeles County Superior Court enjoining Defendants from releasing any illegal video tapes of  
16 meetings with StemExpress officials.

17 Defendants’ brutally dishonest and illegal campaign to smear abortion providers and place  
18 them in harm’s way has only just begun. Daleiden has promised “a lot more to come.”  
19 Defendants claim to have hundreds if not thousands of hours of illegally taken tape. This week,  
20 they released two more tapes, both of which include secret recordings from Planned Parenthood  
21 conferences, similar to the NAF annual meetings Defendants fraudulently crashed. NAF’s annual  
22 meetings have already been referenced in the tapes released thus far, including references to  
23 conversations the conspirators had with Dr. Matthew Reeves, NAF’s Medical Director.  
24 Numerous individual NAF members have been “outed,” by name, in these videos. If Defendants  
25 release tapes of NAF’s annual meetings, NAF and its members will be the target of the same  
26 smear campaign directed towards Defendants’ victims thus far. Even more, Defendants know  
27 about the dates and locations of NAF’s next meetings, information that for safety reasons is not  
28 disclosed publicly. NAF security has notified the locations that security has been compromised.

1 NAF now seeks immediate, emergency relief, enjoining Defendants from releasing to the  
2 public any video or audio tapes, or any other information illegally obtained at NAF’s annual  
3 meetings in 2014 and 2015, from releasing to any third party the dates and locations of NAF’s  
4 future meetings, and from publishing or disclosing the names and addresses of its members  
5 learned by Defendants at NAF’s annual meetings. NAF respectfully urges the Court to act.  
6 Absent immediate injunctive relief, and continued preliminary injunctive relief through trial on  
7 the merits, Defendants’ conduct will cause irreversible harm to NAF, its employees’, and NAF  
8 members’ safety, security, privacy, and reputations.

9 **II. STATEMENT OF FACTS**

10 NAF is the professional association of abortion providers and plays a critical role in  
11 promoting and preserving women’s access to safe, legal abortion care. (Decl. of Vicki Saporta  
12 ISO NAF’s Mot. for TRO and PI (“Saporta Decl.”), ¶¶ 2-3.) NAF members include individuals,  
13 private and non-profit clinics, Planned Parenthood affiliates, women’s health centers, physicians’  
14 offices, and hospitals. (*Id.*) NAF’s mission is to ensure safe, legal, and accessible abortion care,  
15 which promotes health and justice for women. (*Id.*)

16 **A. The History of Violence, Intimidation, and Harassment Perpetrated Against**  
17 **NAF’s Members.**

18 A critical but unfortunately necessary part of NAF’s work is to assist its members in  
19 preventing and coping with harassment, intimidation, and violence perpetrated by anti-abortion  
20 extremists. (*Id.* ¶ 4.) For more than the last 30 years, anti-abortion extremists have perpetrated  
21 tens of thousands of acts of violence and other criminal activities against NAF members and other  
22 abortion providers, including murder, shootings, arson, bombings, chemical and acid attacks,  
23 anthrax and bioterrorism threats, kidnapping, death threats, and other forms of violence. NAF  
24 compiles statistics on the violence against abortion providers, and those statistics are staggering.  
25 (Foran Decl. ¶ 6, Ex. 2.) Since 1977 there have been over **60,000** recorded instances of  
26 harassment, intimidation, and violence perpetrated against abortion providers in this country.  
27 (*Id.*) Those figures, which are likely underreported, include the most heinous crimes imaginable.

28 One prominent example of the decades long hate campaign perpetrated against abortion

1 provider is the murder of Dr. George Tiller on May 29, 2009. (Saporta Decl. ¶ 6; *see also* Decl.  
2 of Dr. Matthew Reeves ISO NAF’s Mot. for TRO and PI (“Reeves Decl.”), ¶ 18; Foran Decl. ¶ 7,  
3 Ex. 3.) Dr. Tiller was gunned down by an anti-abortion extremist while attending church services  
4 in Wichita, Kansas. (Saporta Decl. ¶ 6; Foran Decl., Ex. 3.) In the years leading up to his  
5 assassination, Dr. Tiller had been the subject of a relentless campaign of harassment and  
6 intimidation. (Foran Decl. ¶ 8, Ex. 4.) Since Dr. Tiller’s murder, other anti-abortionist  
7 extremists have attempted similar acts of violence against abortion providers. In May 2011, for  
8 example, Ralph Lang was arrested in his hotel room in Wisconsin after he accidentally fired his  
9 gun while cleaning it. (Saporta Decl. ¶ 7.) When questioned by police, he revealed that he had  
10 planned to go to two Planned Parenthood clinics and shoot the doctors. He also said he wished he  
11 could line up the rest of the clinic staff and “mow them down” with a machine gun. (*Id.*)

12 Even today, there remains a part of the extreme anti-abortion movement who believe that  
13 it is justifiable to use deadly force to stop abortion. (*Id.* ¶ 9.) The man convicted of murdering  
14 Dr. Tiller tried to use a so-called “necessity defense” as justification for the crime. (*Id.*) And  
15 Troy Newman—a Defendant in this action and the head of Operation Rescue and a Center for  
16 Medical Progress (CMP) Board Member—has called the murder of an abortion provider a  
17 “justifiable defensive action.” (*Id.*)

18 In light of this terrible reality, the safety and security of NAF’s members is of the utmost  
19 importance to the organization. Many of NAF’s members have themselves been targeted by anti-  
20 abortion extremists. (*Id.* ¶ 15.) They have been stalked, threatened, and intimidated, including  
21 being picketed at their homes, churches, and their children’s schools. (*Id.*) Some NAF members  
22 have had death threats made against them, and bomb threats made against their clinics. (*Id.*)  
23 Others are forced to wear bullet-proof vests to work. (*Id.*) NAF members who attend its  
24 meetings have had their names put on threatening “wanted” posters and websites featuring their  
25 photos and personal information that are intended to incite violence against them. (*Id.*) A  
26 number of NAF’s members try to remain under the radar in their communities, and do not speak  
27 publicly about their work out of fear for their personal safety or the safety of their families. (*Id.*)  
28

1           **B.     NAF’s Extensive Measures to Protect Its Members at Annual Meetings.**

2           NAF’s annual meetings, which it has held every year since 1977, are one of the only  
3 places where abortion providers can come together to learn about the latest medical research and  
4 network without fear of harassment or intimidation. (Saporta Decl. ¶ 16.) The annual meeting  
5 draws approximately 700-850 professional attendees each year, some of whom are high-profile  
6 targets of extremists. (*Id.* ¶ 11.) Because of the extreme violence perpetrated against it and its  
7 members, NAF has been forced to adopt extensive security and privacy measures at its annual  
8 meetings. (*Id.* ¶ 12.)

9           This was not always the case. (*Id.*) In the early years, before the violence against  
10 providers had escalated, NAF had no security to speak of, and in fact, NAF allowed known anti-  
11 abortion protesters to attend its meetings. (*Id.*) However, by the early 1990s, with the escalation  
12 in violence and intimidation perpetrated against its members, NAF was forced to hire security  
13 professionals as well as off-duty police officers to secure its annual meetings and keep its  
14 members safe. (*Id.* ¶ 12; *see also* Decl. of Mark Mellor ISO NAF’s Mot. for TRO and PI  
15 (“Mellor Decl.”), ¶ 6.)

16           These security measures begin long before the meeting itself. (*Id.* ¶ 6.) NAF’s full-time  
17 security staff is involved in the selection process for hotels in order to ensure that conference sites  
18 meet their strict security guidelines. (*Id.*) Upon selection, NAF security staff meet with hotel  
19 staff, as well as local police officials, FBI and/or ATF agents, and fire and rescue personnel, to  
20 review security issues, potential threats, and the security needs of NAF members. (*Id.* ¶ 8.) NAF  
21 security staff then arrive prior to the beginning of each meeting to set up the security team and  
22 their assignments; orient security staff about procedures and protocols; arrange for the safe receipt  
23 of mail and packages at the hotel; and finalize the involvement of K-9 teams. (*Id.* ¶ 9.) During  
24 the conferences they supervise the security team and remain available on a 24/7 basis for any  
25 issues that occur. (*Id.* ¶ 10.)

26           Throughout the entire conference, there are security officers posted at strategic locations  
27 throughout the meeting areas and outside entrances to meeting rooms. (*Id.* ¶ 11.) Security is  
28 primarily charged with ensuring that everyone entering a meeting room is wearing a NAF badge.

1 (Mellor Decl. ¶ 11.) Security staff restrict access for anyone without a visible NAF badge. (*Id.*)  
2 K-9 security personnel patrol NAF's meeting space and exhibit hall with explosive-detector dogs.  
3 (*Id.* ¶ 10.)

4 NAF also goes to great lengths to make sure that the dates and locations of their meetings  
5 do not fall into the wrong hands. (*Id.* ¶ 7.) Unlike most organizations, NAF does not post  
6 information about its annual meetings on its public website: it only gives meeting information to  
7 members and trusted others. (*Id.*) All emails about the conference remind recipients to: "Please  
8 be mindful of security concerns and do not forward this email or share information about NAF  
9 meetings." (*Id.*) During the conference, all signage must use a version of the NAF logo that  
10 omits the words "National Abortion Federation" so that non-meeting attendees in the hotel are not  
11 alerted to NAF's presence. (*Id.* ¶ 12.) Attendees and staff are advised to remove their conference  
12 badges when they leave the meeting areas, including in elevators, in order to decrease the chances  
13 of non-meeting attendees learning about the meeting. (*Id.*)

14 NAF has had to continually increase precautions to secure a safe and intimidation-free  
15 environment for annual meeting attendees. (Saporta Decl. ¶ 11-12.) After anti-abortion  
16 extremists attempted to infiltrate NAF's meetings to identify providers in the late 1990s, NAF  
17 was forced to begin labeling all annual meeting packets and materials as confidential, and started  
18 requiring all meeting attendees to sign confidentiality agreements. (*Id.* ¶ 13.)

19 **First**, exhibitors who wish to attend NAF's annual meeting must submit an Exhibitor  
20 Agreement, which requires the proposed exhibitor to identify itself, its representatives, and the  
21 products or services it wants to exhibit at the annual meeting. (*See, e.g.*, Foran Decl. ¶ 9, Ex. 5.)  
22 Moreover, as a condition of attending NAF's annual meeting, all exhibitors must: (1) promise  
23 and represent that they have a legitimate business interest in reaching reproductive health care  
24 professionals (*id.* at p. 1 ¶ 1); (2) that they will "truthfully and accurately" represent their business  
25 at NAF's meetings (*id.* at p. 1 ¶¶ 15, 19); and (3) that they will keep all information learned at the  
26 meetings in confidence, and will not disclose that information to any third parties absent NAF's  
27 consent. (*Id.* at p. 1 ¶ 17.)

28 **Second**, all attendees must sign a non-disclosure agreement (NDA) to gain admittance to

1 the meeting. (Saporta Decl. ¶ 13). Under the terms of the NDA (Foran Decl. ¶ 10, Ex. 6):  
2 (1) *attendees must not videotape or record at the meeting* (*id.* ¶ 1); (2) all information distributed  
3 or otherwise made available at the meeting is confidential and may only be used “to help enhance  
4 the quality and safety of services provided by NAF members and other participants” (*id.* ¶ 2);  
5 (3) attendees “may not use NAF Conference Information in any manner inconsistent with these  
6 purposes,” (*id.*); and (4) attendees may not disclose any information learned at the meetings to  
7 third parties, without NAF’s consent. (*Id.* ¶ 3.) These practices and agreements are regrettable.  
8 NAF’s members cannot and should not be vilified simply for working to ensure the constitutional  
9 right of women in this country to make their own reproductive choices. Nevertheless, given the  
10 decades long campaign of harassment and violence perpetrated against them, these practices and  
11 agreements are vitally important to NAF’s ability to protect the privacy, identity, and security of  
12 its members. (Saporta Decl. ¶ 13.)

13 **C. Defendants Defrauded NAF and Infiltrated Its Annual Meetings**  
14 **in 2014 and 2015.**

15 In 2013, an organization holding itself out as “Biomax Procurement Services,”  
16 approached NAF and sought access to NAF’s annual meeting in San Francisco in 2014. While  
17 we now know Biomax was just a front for The Center for Medical Progress (CMP) and the  
18 fraudsters behind it, including David Daleiden and Troy Newman, at the time it held itself out as  
19 a legitimate fetal tissue procurement organization. According to its website (now locked), the  
20 company “provides tissue and specimen procurement for academic and private bioscience  
21 researchers.” (Foran Decl. ¶¶ 11-12, Exs. 7, 8) Daleiden – who has admitted publicly to  
22 orchestrating this fraud – has stated that he worked with actors and “investigators” to carry out his  
23 and Biomax’s ends. (*Id.* ¶ 13, Ex. 9.)

24 Individuals purporting to represent “Biomax” assumed fake names. Biomax’s CEO  
25 adopted the fake name “Susan Tennenbaum.” (*Id.* ¶ 17, Ex. 13.) Biomax’s website described  
26 “Tennenbaum,” as “a passionate patient advocate and entrepreneur with a vision to bridge the gap  
27 between routine medical practice and cutting-edge medical research.” (*Id.* ¶ 11, Ex. 7.)  
28 “Tennenbaum’s” supposed assistant assumed the fake name “Brianna Allen,” “Rebecca Wagner”

1 signed contracts on Biomax's behalf, and "Adrian Lopez" claimed to be Biomax's "Procurement  
2 Technician." (Foran Decl. ¶¶ 14-16, Exs. 10, 11, 12.)

3 Biomax officially contacted NAF on November 27, 2013, when "Brianna Allen" sent an  
4 email to NAF, using a biomaxprocurementservices@gmail.com address, and introduced herself  
5 as "assistant for Susan Tennenbaum at Biomax" (susan@biomaxps.com is cc'd), and highlighted  
6 that she had met two members of the NAF staff at a previous professional meeting. (*Id.*, Ex. 10.)  
7 "Allen" stated that Biomax wanted to "reserv[e] exhibitor space at the conference your  
8 organization will have in San Francisco" in 2014. (*Id.*) Several communications, all of which  
9 were designed to and did defraud and mislead NAF followed thereafter, (*id.*), and on February 5,  
10 2014, "Biomax" entered into an Exhibitor Agreement with NAF, allowing Biomax the right to  
11 exhibit at the upcoming annual meeting in San Francisco. (*Id.*, Ex. 5) In that agreement, Biomax  
12 falsely represented that it was a "biological specimen procurement [and] stem cell research"  
13 organization. (*Id.* at p. 2.) It further falsely represented that it had "an intended business interest"  
14 in reaching reproductive healthcare professionals, including NAF provider members" that it  
15 would display its business, products, or services "truthfully" and "accurately" at the meeting, and  
16 that it would not disclose any information learned at the meeting to third parties absent NAF's  
17 consent. (*Id.* at p. 1 ¶ 15.)

18 On April 5, 2014, the first day of the annual meeting in San Francisco, three individuals  
19 presented themselves at registration as representatives of Biomax: "Robert Sarkis," "Susan  
20 Tennenbaum," and "Brianna Allen." Robert Sarkis is the fake name Defendant David Daleiden  
21 used. They presented fake California drivers' licenses to NAF's registration staff. (*Id.* ¶ 17, Ex.  
22 13 ), and they all signed NDAs in which they promised: (1) not to make video or audio recordings  
23 of the meetings or discussions; (2) to use information learned at the Annual Meeting only to  
24 "enhance the quality and safety of services provided by NAF members and other participants,";  
25 and (3) not to disclose information learned at the meeting to third parties without NAF's consent.  
26 (*Id.*, Ex. 6.)

27 Once they fraudulently gained access to NAF's annual meeting, Biomax's agents set up a  
28 "Biomax" booth replete with signage and brochures, touting itself to attendees and NAF staff as a

1 legitimate tissue procurement service organization. (Foran Decl. ¶ 18, Ex. 14.) Biomax agents  
2 freely roamed the exhibit hall, mingling with attendees – among them high-profile targets of anti-  
3 abortion extremists – and handed out their fake business cards. (*Id.* ¶ 19, Ex. 15.)

4 There is also ample evidence to suggest that they surreptitiously taped conversations with  
5 annual meeting attendees and NAF staff, and embarked on a campaign to collect identifying  
6 information concerning NAF members who provide abortion care. (*See, e.g.*, Reeves Decl. ¶¶ 8,  
7 10; Decl. of Jennifer Dunn ISO NAF’s Mot. for TRO and PI (“Dunn Decl.”), ¶ 9.) Certainly,  
8 they were not at the meeting for any proper purpose. Moreover, “Tennenbaum” and “Allen”  
9 wore loose fitting scarves around their shoulders, scarves that could easily conceal recording  
10 equipment. (Foran Decl., Ex. 14.) Dr. Matthew Reeves, NAF’s Medical Director since April  
11 2013, specifically remembers being approached by Daleiden at the annual meeting in San  
12 Francisco. (Reeves Decl. ¶ 8.) Dr. Reeves remembers Daleiden being “pushy” and asking  
13 “leading questions.” (*Id.* ¶¶ 8, 16.) According to Dr. Reeves, Daleiden had an “unusual stiff  
14 posture” and a “lack of movement,” as well as a “strange face-forward stiffness when speaking,”  
15 which Dr. Reeves attributed to a personality quirk at the time, but now realizes was likely because  
16 Daleiden was carrying hidden equipment for recording their discussion. (*Id.* ¶ 8.)

17 Daleiden and his cohorts repeated the same pattern of illegal conduct the following year,  
18 at NAF’s annual meeting in Baltimore, Maryland (in between the 2014 and 2015 annual  
19 meetings, Biomax was busy perpetrating fraud against Planned Parenthood clinics and illegally  
20 taping conversations with physicians). Yet again, using emails, Daleiden and his cohorts  
21 conspired to approach—and did approach—NAF to gain admittance. (Foran Decl., Ex. 11.)  
22 After Biomax agents issued multiple communications to NAF staff using the same aliases as in  
23 2014, the parties ultimately entered into an Exhibitor Agreement that allowed Biomax to exhibit  
24 at the upcoming annual meeting. (*Id.*, Ex. 12.) The 2015 Exhibitor Agreement contains the same  
25 false and fraudulent promises and representations as the 2014 Agreement, i.e., that: Biomax was  
26 in the business of “fetal tissue procurement” and “human biospecimen procurement,” (*id.* at 2);  
27 that it would represent its business “truthfully” and “accurately” at the annual meeting (*id.* at p. 3  
28 ¶¶ 15, 19), and that it would refrain from disclosing information learned at the meeting absent

1 NAF's written consent. (Foran Decl., Ex. 12 at p. 3 ¶ 17.)

2 On the first day of the meeting, four Biomax representatives—including Daleiden (again  
3 using the “Sarkis” alias) showed up and presented fake IDs to gain admittance. (Foran Decl., Ex.  
4 13.) As in the prior year, they also signed NDAs in which they promised: (1) they would not  
5 make video or audio recordings of the meetings or discussions; (2) they would use information  
6 learned at the annual meeting only to “enhance the quality and safety of services provided by  
7 NAF members and other participants,”; and (3) would not disclose information learned at the  
8 meeting to third parties without NAF's consent. (*Id.* ¶ 20, Ex. 16.)

9 As in 2014, once inside the exhibit hall, Daleiden and his co-conspirators set up a  
10 “Biomax” booth that again falsely touted the organization as a legitimate tissue procurement  
11 service. (*Id.*, Exs. 12, 14.) And, consistent, with their previous behavior, Daleiden and his  
12 cohorts roamed the exhibit hall, attempting to speak with meeting attendees, gathering  
13 information about names and locations of abortion providers, and, as NAF now believes,  
14 surreptitiously recording conversations at the meeting. Multiple NAF staff recall Biomax's  
15 agents approaching them.

16 **D. Defendants' Campaign to Harass and Intimidate NAF Members Goes Public.**

17 On July 14, 2015 (one week after its registered agent for service of process resigned),  
18 Biomax went public with its fraud. Daleiden and The Center for Medical Progress publicly took  
19 credit for the scheme. (*See, e.g., Id.*, Ex. 9.) Daleiden has given multiple press interviews in  
20 which he openly admitted to the conspiracy, a conspiracy he labeled the “Human Capital  
21 Project.” (*See e.g., Id.* ¶ 21, Ex. 17.) In an interview with Bill O'Reilly on Fox News, he stated  
22 that he and his co-conspirators had “spent three years with actors” who “pos[ed] as  
23 representatives of a middleman biotech company” (i.e., Biomax) in order to fraudulently infiltrate  
24 NAF members. (*Id.*, Ex. 9.)

25 Also on July 14, Defendants began releasing secretly taped and highly misleading  
26 videotapes of Planned Parenthood physicians. (*Id.* ¶ 22, Ex. 18.) Those videos – taken in  
27 violation of law – are purposely edited to make it appear as if the physicians in question are  
28 profiting from lawful fetal tissue donation programs and practices – practices that have led to life-

1 saving medical breakthroughs – when in fact the exact opposite is true. (Reeves Decl. ¶ 11.) The  
2 videos have incited a campaign of vitriol and bile against the victims in question. (Saporta Decl.  
3 ¶ 19; Foran Decl. ¶ 23, Ex. 19.)

4 The first victim was Dr. Deborah Nucatola, the Senior Director of Medical Services for  
5 Planned Parenthood Federation of America (PPFA), which is itself an organizational member of  
6 NAF. (Foran Decl., Ex. 18; Saporta Decl. ¶ 2.) The video was secretly taken over lunch at a  
7 restaurant in California in July 2014 (just three months after Defendants infiltrated NAF’s annual  
8 meeting). (Foran Decl., Ex. 18.) The “interviewer” (Daleiden), expressly references NAF’s  
9 annual meeting, including specific meetings and panel presentations, multiple times, and *twelve*  
10 *separate NAF members are identified, by name, in the tape.* (*Id.*) Daleiden also *on multiple*  
11 *occasions references his conversations with NAF’s Medical Director, Dr. Matthew Reeves, in*  
12 *the tape.* (*See, e.g., Id.* at pp. 17, 22; Reeves Decl. ¶¶ 14-15.) Moreover, Defendants selectively  
13 edited the tape to make it look as if Dr. Nucatola was “selling” fetal tissue, when in fact the  
14 opposite was true. During the illegally taped conversation, for example, Dr. Nucatola expressly  
15 stated that “nobody should be selling tissue. That’s just not the goal here.” (Foran Decl., Ex. 18  
16 at p. 34.) This statement was omitted by Defendants from their excerpted tape. And ten times  
17 during the conversation Dr. Nucatola said Planned Parenthood would not sell tissue or profit in  
18 any way from tissue donations. All ten instances were cut out of the video released by the  
19 Defendants.

20 But the damage to Dr. Nucatola’s professional reputation was already done before the  
21 truth could be told. Within an hour and a half of the posting, Dr. Nucatola was forced to shut  
22 down her Twitter account. (*Id.* ¶ 24, Ex. 20.) Inflammatory online comments directed to Dr.  
23 Nucatola have since proliferated. (*See e.g., Id.* ¶ 25, Ex. 21.) Comments like “she deserves  
24 everything she has coming at her” and that she will “suffer for eternity in a roasting pit” are  
25 commonly directed to her. (*Id.*)

26 One week later, Defendants’ victimized another physician, this time Dr. Mary Gatter,  
27 Medical Director for Planned Parenthood Los Angeles. (*Id.* ¶ 26, Ex. 22.) In this conversation,  
28 *two NAF members are outed, by name.* (*Id.*, Ex. 22.) And as with Dr. Nucatola, Defendants’

1 excerpted tape also painted Dr. Gatter in a grossly false light, making it appear as if Dr. Gatter  
2 was discussing the sale of fetal tissue for profit, when the opposite is true. (Foran Decl., Ex. 22.)  
3 In the unedited version, Dr. Gatter clearly states that any tissue donation program would have to  
4 comply with federal law: “[I]t’s absolutely a requirement that we use only the official federal  
5 government form for tissue donation, that we don’t modify it in any way.” (*Id.* at p. 6.) She also  
6 explained in the unedited version that tissue donation was not about profit, but “about people  
7 wanting to see something good come out” of their situations, “they want to see a silver lining...”  
8 (*Id.* at p. 17.) These and other highly relevant statements were omitted by Defendants from the  
9 selectively excerpted tape.

10 Once again, however, the damage was done before the truth could be told. Dr. Gatter has  
11 since been called a “baby butcher,” “evil,” and “a vicious demonic force” who deserves “no  
12 mercy” and “the hangman’s noose.” (*Id.*, Ex. 19.)

13 The hate campaign spawned by Defendants’ videos is not limited to offensive name-  
14 calling. Since Defendants released the videos, cowardly and anonymous internet posts have  
15 leveled death threats against Dr. Nucatola on right-wing internet comment threads: “I’ll pay ten  
16 large to whomever kills Dr. Deborah Nucatola. Anyone go for it.” (Saporta Decl. ¶ 19.) The  
17 same poster is also personally threatening to murder the executive of a lawful tissue procurement  
18 organization, StemExpress, named in the Nucatola video, stating that the person in question is a  
19 “a death-profiteer” who “should be hung by the neck using piano wire and propped up on the  
20 lawn in front of the building with a note attached . . .” (*Id.*) The person posting went on to  
21 identify where the CEO lives and stated: “I’m going there . . . I’ll pay ten grand to whomever  
22 beats me to [CEO] . . . [CEO] must die to save the innocents.” (*Id.*) On July 29, 2015,  
23 StemExpress sought and received a TRO in Los Angeles County Superior Court enjoining  
24 Defendants from releasing video tapes of meetings with StemExpress. (Foran Decl. ¶ 27, Ex. 23.)

25 Defendants’ brutally dishonest and illegal campaign to smear abortion providers has only  
26 just begun. Daleiden has promised “a lot more to come.” (*Id.*, Ex. 24.) A cynical manipulator of  
27 the news cycle, his stated goal is to release one selectively edited video per week. (*Id.*, Ex. 17.)  
28 Daleiden has boasted that he and his cohorts at CMP “probably have hundreds to even thousands

1 of hours total of videotape over the past two-and-a-half years,” which would “continue to be  
2 released in the days and months to come.” (Foran Decl. ¶ 29, Ex. 25 at p. 7.) Two more videos  
3 were released this week, one on July 28 and another just yesterday, on July 30. (*Id.* ¶¶ 30-31,  
4 Exs. 26, 27.) The third video Defendants released includes video of a national conference. (*Id.*,  
5 Ex. 26.)

6 When confronted by the *New York Times* about the fraud and illegal conduct that he and  
7 CMP orchestrated against Planned Parenthood, NAF, and others, he dismissed those concerns,  
8 saying “only Planned Parenthood or its supporters would object.” (*Id.*, Ex. 17.) On Monday, July  
9 20, 2015, CMP issued a press release stating that “The Center for Medical Progress follows all  
10 applicable laws in the course of” what it describes as “investigative journalism.” (*Id.* ¶ 32, Ex.  
11 28.) Nothing could be further from the truth.

12 **E. The Effect of Defendants’ Illegal Campaign on NAF and Its Members.**

13 Needless to say, the extraordinary invasion perpetrated by Defendants at NAF’s annual  
14 meetings – meetings that are supposed to be secure and confidential – has shaken NAF and its  
15 members. NAF’s security staff has seen an increase in “off hour” requests for security advice  
16 from its members, and NAF security personnel have advised members to be on heightened alert  
17 and to contact NAF’s Security Department with any concerns. (Mellor Decl. ¶ 15.) Even more  
18 troubling, Defendants also know about the dates, times, and locations of NAF’s next two  
19 meetings—information that NAF does not release publicly. (Saporta Decl. ¶ 18.) They learned  
20 of this information because NAF sends out save-the-date reminders to participants at prior  
21 meetings. (*Id.*) NAF is already in contact with the hotel management and hotel security staff for  
22 its next two meetings to alert them NAF’s annual meeting dates and locations have been  
23 compromised. (*Id.*) NAF has a very legitimate concern that members will not feel safe and  
24 secure at these meetings.

25 But worse still, as a result of Defendants’ extraordinarily callous conduct, NAF and its  
26 members now fear Defendants will release illegal video or audio tape of the annual meetings they  
27 fraudulently infiltrated, which will in turn render the organization and its members subject to the  
28 same hate campaign that has been waged against Drs. Nucatola and Gatter, and now Dr. Ginde.

1 Dr. Reeves, who was approached by Daleiden and his cohorts several times, is convinced he was  
 2 taped. (Reeves Decl. ¶ 16.) Daleiden *specifically referenced Dr. Reeves, by name, in the illegal*  
 3 *Nucatola tape.* (Id. ¶¶ 14-15.) NAF security personnel have conducted a site visit to his home,  
 4 and Dr. Reeves has been forced to hire a professional security firm to install a system at his home,  
 5 to protect himself and his family. (Id. ¶ 19.) If the Defendants are not stopped, he is terribly  
 6 concerned that he too will be smeared and vilified by Defendants, and that his professional  
 7 reputation will be trashed, and even he and his family’s safety will be placed in jeopardy. (Id. ¶¶  
 8 17-19.)

9 Another example is Professor Jennifer Dunn, a member of UC Hastings faculty and  
 10 Lecturer in Law. (Dunn Decl. ¶ 2.) She is a member of NAF, and a faculty panel member on  
 11 Fetal Disposal Choices and Restrictions at NAF’s 2014 Annual Meeting in San Francisco, *a*  
 12 *panel discussion that Defendants’ attended, and which is specifically referenced in the*  
 13 *videotaped conversation with Dr. Nucatola.* (Id. ¶¶ 8-9.) Professor Dunn understandably  
 14 believes Defendants carried on their illegal videotaping scheme during the 2014 annual meeting,  
 15 and she is now concerned that Defendants will do the same thing that they did to Drs. Nucatola  
 16 and Gatter and now Dr. Ginde –release a videotape of her discussion that will portray her and  
 17 NAF in a false light, exposing her to the same character assassination, vitriol, and bile that have  
 18 been leveled at Defendants’ victims thus far. (Id. ¶ 10.)

19 To prevent terrible harm to its members’ reputation and safety, NAF sent a letter to  
 20 Defendants, on July 30, 2015, in which NAF demanded that Defendants provide an accounting of  
 21 any information in their possession – including any video or audio tapes that they obtained at  
 22 NAF’s annual meetings as a result of their fraud and in violation of the Exhibitor Agreements and  
 23 NDAs. (Foran Decl. ¶ 2, Ex. 1.) As of the finalization of these papers, Defendants have ignored  
 24 that demand and otherwise failed to respond. (Id. ¶ 4.) NAF now seeks emergency relief from  
 25 the Court.

### 26 **III. ARGUMENT**

27 As the Court is aware, “the standard for issuing a temporary restraining order is identical  
 28 to the standard for issuing a preliminary injunction.” *Johnson v. Bank of Am., N.A.*, No.15-CV-

1 03181-LHK, 2015 U.S. Dist. LEXIS 90765, at \*6 (N.D. Cal. July 10, 2015). “A plaintiff seeking  
2 a preliminary injunction must establish that he is likely to succeed on the merits, that he is likely  
3 to suffer irreparable harm in the absence of preliminary relief, that the balance of equities tips in  
4 his favor, and that an injunction is in the public interest.” *Winter v. NRDC Inc.*, 555 U.S. 7, 20  
5 (2008). NAF more than meets that standard here.

6 **A. There Is a High Degree of Likelihood that NAF Will Succeed on the Merits.**

7 NAF is very likely to succeed on the merits of its claims against Defendants. In fact, this  
8 is an understatement, because the fraud, breaches, and invasions that lie at the heart of NAF’s  
9 claims are largely admitted. Daleiden has given press interviews where he has openly boasted  
10 about setting up a fake company (Biomax) and having “spent three years with actors” who  
11 “pos[ed] as representatives of a middleman biotech company” to perpetrate his fraud. When  
12 confronted by the *New York Times* about the fraud and illegal conduct that he and CMP  
13 orchestrated against Planned Parenthood, NAF, and others, Daleiden dismissed those concerns,  
14 saying “only Planned Parenthood or its supporters would object.” Defendants outrageous  
15 conspiratorial conduct gives rise to a host of federal and state legal claims against them, but for  
16 present purposes, NAF need only show that it will succeed on any of three claims: breach of  
17 contract, violation of Penal Code § 632, and violation of common law privacy.

18 **First**, Defendants have already breached their contracts. To establish breach of contract,  
19 NAF must prove “(1) the contract, (2) [NAF’s] performance or excuse for nonperformance, (3)  
20 [Defendants’] breach, and (4) the resulting damages to [NAF].” *Reichert v. Gen. Ins. Co.*, 68 Cal.  
21 2d 822, 830 (1968). Here, Biomax entered into Exhibitor Agreements with NAF which required  
22 Biomax to “truthfully and accurately” represent its business at NAF’s meetings, and which  
23 required Biomax to keep all information learned at the meetings in confidence. Daleiden and his  
24 cohorts at Biomax also signed NDAs in which they promised (1) not to videotape, (2) to only use  
25 information learned at the meeting “to help enhance the quality and safety of services provided by  
26 NAF members and other participants”; (3) to not disclose any information learned at the meetings  
27 to third parties. Defendants have clearly already breached these agreements. Obviously, Biomax  
28 misrepresented itself and its true purpose in attending the annual meeting. Moreover, there are

1 multiple express references to NAF’s annual meeting in the first video released, including  
 2 passages where in Daleiden describes meetings and panel discussions he attended, and  
 3 conversations he had with Dr. Matthew Reeves, NAF’s Medical Director. Defendants have  
 4 ***already disclosed*** information that they promised to keep confidential.

5 That Biomax was a sham and that the agreements were entered into fraudulently, is of no  
 6 moment. While the fraudulent contracts are voidable at NAF’s election, the law is clear that  
 7 NAF also has the right to enforce them against the individuals behind the fraud. *See also Rowe v.*  
 8 *Exline*, 153 Cal. App. 4th 1276, 1284 (2007) (trial court erred in refusing to enforce arbitration  
 9 clause against nonsignatory corporate directors where signatory company “was not intended to  
 10 have any true corporate existence”); *Still v. Norfolk & W. Ry. Co.*, 368 U.S. 35, 38-39 (1961)  
 11 (noting that use of a fictitious name would render an employment contract voidable rather than  
 12 void); Restatement 2d, Contracts § 7, comment b (1981) (“[t]ypical examples of voidable  
 13 contracts include those in which ... the contract was induced by fraud”). On top of that, Biomax  
 14 was the alter ego of CMP and Daleiden – a fact Daleiden openly boasts about in press releases,  
 15 and the contracts may therefore be enforced against them on that basis too. *Monaco v. Liberty*  
 16 *Life Assur. Co.*, No. C06-07021 MJJ, 2007 U.S. Dist. LEXIS 31298, \*12 (N.D. Cal. Apr. 17,  
 17 2007) (denying motion to dismiss contract claim against nonsignatories based on alter ego and  
 18 agency theories).

19 And critically, Defendants in their fraudulently-executed Exhibitor Agreements ***have***  
 20 ***already agreed that money damages would not be a sufficient remedy for their breaches, and***  
 21 ***that NAF would be “entitled to specific performance and injunctive relief as remedies for any***  
 22 ***such breach.”***<sup>1</sup> It is almost certainly the case that Defendants also breached their agreements by

23 \_\_\_\_\_  
 24 <sup>1</sup> Any potential argument based on the First Amendment is a nonstarter for Defendants.  
 25 ***First***, they voluntarily and explicitly committed to be subject to an injunction to enforce a breach  
 26 of their contractual confidentiality obligations. *See Boddie v. Connecticut*, 401 U.S. 371, 379  
 27 (1971) (constitutional rights are subject to waiver); *Perricone v. Perricone*, 292 Conn. 187 (2009)  
 28 (“private parties who voluntarily enter into an agreement to restrict their own speech thereby  
 waive their first amendment rights”); *ITT Telecom Prods. Corp. v. Dooley*, 214 Cal. App. 3d 307,  
 319 (1989) (First Amendment rights may be waived by contract); *Brooks v. Vallejo City Unified*  
*Sch. Dist.*, 2009 U.S. Dist. LEXIS 101262, \*13 (E.D. Cal. Oct. 29, 2009) (individual claimants  
 “were entitled to bargain away their free speech rights by agreeing to confidentiality provisions”  
 in a settlement agreement with defendant). ***Second***, enforcement of private confidentiality

1 unlawfully videotaping or recording NAF's annual meetings. "Biomax" and Daleiden were not  
2 there for any proper purpose. Daleiden and CMP have proclaimed that they have hundreds if not  
3 thousands of hours of secretly procured videotape, and that there is "more to come." Daleiden  
4 expressly referenced NAF's annual meetings in tapes already released. He has outed his  
5 conversations with NAF's Medical Director, Dr. Matthew Reeves, in the tapes released thus far,  
6 and he has identified NAF attendees *by name*, in those same tapes. And the third and fourth tapes  
7 released this week include edited clips from a Planned Parenthood conference, similar to NAF's  
8 annual meetings. NAF has demanded that Defendants account for their conduct and to turn over  
9 any surreptitious records. As of the finalization of these papers, Defendants have not responded  
10 to that request. The facts, very simply, speak for themselves.

11 **Second**, largely for the same reasons outline above, NAF and its members are also likely  
12 to succeed on the merits of their claim for violation of California's Invasion of Privacy Act. *See*  
13 Cal. Pen. Code § 632. The Act criminalizes the recording of a "confidential communication"  
14 without the consent of all parties to the communication. Cal. Pen. Code § 632(a). Courts must  
15 "liberally construe" the Act to effectuate California's important interest in protecting individual  
16 privacy rights. *Kight v. CashCall, Inc.*, 231 Cal. App. 4th 112, 130 (2014). The Act authorizes  
17 any person injured by a violation of Section 632 to bring "an action to *enjoin and restrain* any  
18 violation." Cal. Pen. Code§ 637.2(b) (emphasis added). A "confidential communication" is one  
19 in which "a party to that conversation has an objectively reasonable expectation that the  
20 conversation is not being overheard or recorded." *Flanagan v. Flanagan*, 27 Cal. 4th 766, 768  
21 (2002).

22 NAF and its members had an objectively reasonable expectation that conversations and  
23 discussions at NAF annual meetings would not be surreptitiously recorded. The meetings are

24  
25 agreements does not involve "state action" giving rise to First Amendment concerns because the  
26 state is not imposing obligations on the parties beyond those they voluntarily assumed. *See*  
27 *Cohen v. Cowles Media Co.*, 501 U.S. 663, 668 (1991) (holding that a promissory estoppel claim  
28 gave rise to "state action" because "if [plaintiff] could recover at all, it would be on the theory of  
promissory estoppel, a state law doctrine which, *in the absence of a contract*, creates obligations  
never explicitly assumed by the parties") (emphasis added).

1 subject to intense security, and every one gaining access must sign an NDA promising not to  
2 video or audiotape and to hold information learned in confidence. These measures are necessary  
3 *precisely* to defend against the type of outrageous invasion mounted by Defendants in this case.  
4 The whole point of the NAF annual meeting is to create a safe and secure environment for its  
5 members, so that they may network and learn without fear of vilification or harassment.

6 **Third**, NAF and its members will also succeed on its common law tort claims for  
7 invasion of privacy (intrusion), which it pleads on behalf of its members. A common law  
8 intrusion tort “has two elements: (1) intrusion into a private place, conversation or matter, (2) in a  
9 manner highly offensive to a reasonable person.” *Sanders v. Am. Broadcasting Co., Inc.*, 20 Cal.  
10 4th 907, 914 (1999); *see also Mitchell v. Balt. Sun Co.*, 164 Md. App. 497, 522 (2005) (same  
11 under Maryland law).

12 Here, Defendants clearly and obviously intruded into a private place that they had no right  
13 to enter. They gained access to NAF’s annual meetings by false pretenses, and have since  
14 published videos documenting, among other things, their fraudulent attendance at NAF’s annual  
15 meetings, including specific conversations at these meetings with NAF’s Medical Director,  
16 Dr. Reeves. And as explained above, given the heightened security and the confidentiality  
17 agreements in place with attendees, NAF and its members unquestionably had a reasonable  
18 expectation of privacy in their attendance and discussions at the meetings. *See Sanders*, 20 Cal.  
19 4th at 914 (“[A] person who lacks a reasonable expectation of complete privacy in a conversation,  
20 because it could be seen and overheard by coworkers (but not the general public), may  
21 nevertheless have a claim for invasion of privacy by intrusion based on a television reporter’s  
22 covert videotaping of that conversation.”).

23 Nor is there any question that Defendants’ conduct was “highly offensive.”  
24 “[D]etermining offensiveness requires consideration of all the circumstances of the intrusion,  
25 including its degree and setting and the intruder’s ‘motives and objectives.’” *Shulman v. Grp. W*  
26 *Productions, Inc.*, 18 Cal. 4th 200, 236 (1998). Defendants broke multiple state and federal laws  
27 in infiltrating NAF, setting up sham companies and using fake names and fake government  
28 identification cards. NAF’s Medical Director Dr. Reeves now fears for himself and his family.

1 And Professor Jennifer Dunn – who was a member of a panel discussion Daleiden attended and  
2 that is expressly mentioned in the first tape Defendants released – is concerned that her reputation  
3 will be trashed by Daleiden and CMP. There is no question here that Defendants’ intrusion into a  
4 national meeting of 700-850 professionals – some of whom fear for their safety and are forced to  
5 wear bullet-proof vests to work – was an outrageous intrusion.

6 Because Defendants’ improper conduct is largely admitted, NAF and its members will  
7 prevail on their legal claims against them.

8 **B. NAF Will Suffer Irreparable Harm Without Immediate Temporary and**  
9 **Preliminary Injunctive Relief.**

10 NAF and its members will suffer irreparable harm if the Court does not grant this request.

11 The Court need look no further than the extraordinary hate campaign directed to  
12 Defendants’ victims thus far. Dr. Deborah Nucatola and Dr. Mary Gatter have been smeared.  
13 They have been called “evil,” “vile,” “inhuman,” “baby butchers,” and “a vicious demonic force”  
14 who deserves “no mercy” and “the hangman’s noose.” And death threats have been leveled  
15 against them. One poster stated: “I’ll pay ten large to whomever kills Dr. Deborah Nucatola.  
16 Anyone go for it.” (Saporta Decl. ¶ 19.) And the CEO of StemExpress, a lawful tissue  
17 procurement company, has been labeled “a death-profiteer” who “should be hung by the neck  
18 using piano wire and propped up on the lawn in front of the building with a note attached . . . .”  
19 The person posting went on to identify where the CEO lives and stated: “I’m going there . . . I’ll  
20 pay ten grand to whomever beats me to [CEO] . . . [CEO] must die to save the innocents.” (*Id.*)

21 NAF, its employees, and its members fear the same vitriolic campaign will be waged  
22 against them if Defendants were to release tapes of conversations that took place at NAF’s annual  
23 meetings. Release of a video of Dr. Reeves, for example, would constitute a gross invasion of his  
24 privacy, smear his reputation, and even endanger his safety and the safety of his family. (*See*  
25 *Reeves Decl.* ¶¶ 19-21.) Since Defendants went public with their campaign, Dr. Reeves has been  
26 forced to hire a professional security firm to install a system at his home. And Professor Dunn is  
27 concerned that she too will be smeared and her professional reputation tarnished if Defendants  
28 were to release a tape of her from the 2014 NAF annual meeting. The pace with which

1 Defendants are releasing tapes is increasing. They released two more this week and a fifth is  
2 expected *next Tuesday, if not sooner*. The situation is urgent.

3 Injunctive relief is designed precisely to prevent “intangible injuries” such as physical  
4 harm pain, suffering, death, and injury to reputation. *Arizona Dream Act Coal. v. Brewer*, 757  
5 F.3d 1053, 1068 (9th Cir. 2014) (because they lack adequate remedies, “intangible injuries”  
6 constitute irreparable harm); *Harris v. Bd. of Supervisors, Los Angeles Cnty.*, 366 F.3d 754, 766  
7 (9th Cir. 2004) (physical harm including pain, suffering and death constitute irreparable injury for  
8 purposes of injunctive relief); *Regents of Univ. of California v. Am. Broad. Companies, Inc.*, 747  
9 F.2d 511, 520 (9th Cir. 1984) (harm to reputation is irreparable injury). The Los Angeles County  
10 Superior Court has already entered a TRO enjoining Defendants from releasing any secretly  
11 recorded videotapes of meetings they had with StemExpress, a lawful tissue procurement  
12 organization. NAF respectfully asks this Court to do the same thing here, to protect the integrity  
13 and confidentiality of its annual meetings, and those who attend them.

14 **C. The Balance of Hardships Tips Heavily in NAF’s Favor.**

15 “It is an accepted equitable principle that a court does not balance the equities in a case  
16 where the defendant’s conduct has been willful.” *United States EPA v. Environmental Waste*  
17 *Control, Inc.*, 917 F.2d 327, 332 (7th Cir. 1990) (affirming grant of injunctive relief) (citing  
18 *Guam Scottish Rite Bodies v. Flores*, 486 F.2d 748, 749 (9th Cir. 1973)). The Court therefore  
19 need not even reach the balance of hardships issue.

20 In any event, the potential injuries NAF and its employees and members may imminently  
21 suffer at the hands of Defendants far outweighs any harm a preliminary injunction might cause  
22 Defendants. *Earth Island Inst. v. Carlton*, 626 F.3d 462, 475 (9th Cir. 2010). As explained  
23 above, those injuries include grave reputational harm – reputational harm Defendants have  
24 already visited upon their initial victims – and even bodily injury. Moreover, NAF seeks to  
25 enjoin the release of tapes and other information taken in violation of law and the agreements  
26 Defendants signed or are otherwise responsible for. Defendants would therefore “suffer no  
27 cognizable hardship” because they are “merely being prevented from engaging in unlawful  
28 activity.” *DISH Network L.L.C. v. Rios*, No. 2:14-cv-2549-WBS-KJN, 2015 U.S. Dist. LEXIS

1 18285, \*17 (E.D. Cal. Feb. 13, 2015) (granting injunctive relief).

2 Further, Defendants cannot claim an overriding interest in publicizing material that they  
3 obtained through fraud, deceit, breach of contract, and privacy violations for multiple reasons.  
4 **First**, Defendants committed fraudulent and illegal acts to make the recordings, and they have no  
5 right to distribute content that was “acquired by improper means.” *See, e.g., DVD Copy Control*  
6 *Assn., Inc. v. Bunner*, 31 Cal. 4th 864, 887 (2003) (approving injunction enjoining defendant from  
7 distributing content that was “acquired by improper means”); *see also Dietemann v. Time, Inc.*,  
8 449 F.2d 245, 249 (9th Cir. 1971) (“The First Amendment is not a license to trespass, to steal, or  
9 to intrude by electronic means into the precincts of another’s home or office.”); *Shulman v. Grp.*  
10 *W Prods., Inc.*, 18 Cal. 4th 200, 242 (1998) (“[N]o constitutional precedent or principle . . . gives  
11 a reporter general license to intrude in an objectively offensive manner into private places,  
12 conversations or matters merely because the reporter thinks he or she may thereby find something  
13 that will warrant publication or broadcast.”). **Second**, Defendants have no legitimate interest in  
14 engaging in conduct that results in direct, foreseeable, and imminent threats to the safety and  
15 security of NAF’s members – like the death threats and harassment that would directly result  
16 from the conduct Plaintiffs seeks to enjoin. *Planned Parenthood of the Columbia/Willamette,*  
17 *Inc. v. Am. Coalition of Life Activists*, 290 F.3d 1058, 1085-86 (9th Cir. 2002) (en banc) (conduct  
18 is “without First Amendment protection” where it targets specific abortion providers, foreseeably  
19 elicits the need for “extraordinary security measures,” and makes it so providers “can no longer  
20 participate in the debate”). **Third**, as noted above, Defendants voluntarily waived any interest  
21 they could possibly claim in disseminating this private and confidential material when they  
22 voluntarily agreed to restrict their own speech in the parties’ confidentiality agreements.

23 **D. The Public Interest Favors Injunctive Relief.**

24 “[T]he public interest is a factor which courts must consider in any injunctive action in  
25 which the public interest is affected.” *Am. Motorcyclist Ass’n v. Watt*, 714 F.2d 962, 967 (9th  
26 Cir. 1983).

27 Here, the challenged conduct poses significant reputational harm and potential safety risks  
28 to NAF employees and members which, in turn, would adversely affect the general public. Both

1 state and federal law recognize a robust public policy in favor of protecting abortion providers  
2 from harassment, invasion of privacy, and threats to their safety. For example, the Freedom of  
3 Access to Clinic Entrances Act of 1994 (FACE) prohibits using or threatening to use force to  
4 interfere with the provision of reproductive health services, and was adopted as a means to  
5 address “the systematic and nationwide assault that is being waged against health care providers  
6 and patients.” *See, e.g.*, Sen. Rep. No. 117, 103d Cong., 1st Sess., pp. 7, 14 (1993); 18 U.S.C.  
7 § 248; *see also* Cal. Civ. Code § 3427.3 (directing courts to “take all steps reasonably necessary  
8 to safeguard the individual privacy and prevent harassment of a . . . licensed health practitioner,  
9 or employee . . . of a health care facility” in cases involving access restrictions to abortion  
10 clinics).

11 The death threats against Dr. Nucatola are but the latest attack in Defendants systematic  
12 and nationwide assault on abortion providers. The broader public interest can be served by  
13 preventing Defendants from harassing, intimidating, and inciting violence against NAF, its  
14 employees, and its members by enjoining the publication of video and audio recordings taken at  
15 NAF’s annual meetings in violation of contract and privacy rights, and ordering other relief as  
16 necessary to safeguard NAF members from public ridicule, humiliation, and death-threats.

17 Further, NAF’s proposed injunctive relief favors the “legitimate and compelling” public  
18 interest in enforcing privacy laws and maintaining “a business climate free of fraud and deceptive  
19 practices.” *Diamond Multimedia Systems, Inc. v. Superior Court*, 19 Cal. 4th 1036, 1064 (1999);  
20 *see also Robinson Helicopter Co., Inc. v. Dana Corp.*, 34 Cal. 4th 979, 992 (“[F]raudulent  
21 conduct cannot be considered a ‘socially useful business practice[.]’” (alteration in original)).  
22 Daleiden has admitted to Defendants’ fraud in a televised interview. He makes no secret about  
23 Defendants’ intent to release hundreds of hours of unlawfully recorded video content about the  
24 work of NAF and others, in express violation of their prior agreement with NAF. To permit this  
25 behavior to continue, unchecked, would be contrary to the public interest.

26 **E. NAF Should Not Be Required to Post a Bond.**

27 Last, whether to impose a bond rests in the Court’s sound discretion, and none should be  
28 required in this instance. Courts in the Ninth Circuit have imposed only a nominal bond, or

1 dispensed with the requirement altogether, where, as here, there is little or no likelihood of harm  
 2 to the party enjoined. *See, e.g., Barahona-Gomez v. Reno*, 167 F.3d 1228, 1237 (9th Cir. 1999)  
 3 (recognizing that Rule 65(c) “invest[s] the district court with discretion as to the amount of  
 4 security required, if any”); Civil L.R. 65-1(a) (a bond is required only “[u]pon demand of any  
 5 party, where authorized by law and for good cause shown). Likewise, courts have declined to  
 6 require a security where the litigation serves a public interest. *Barahona-Gomez*, 167 F.3d at  
 7 1237. NAF’s proposed injunction would only prevent Defendants from disseminating  
 8 unauthorized recordings or information unlawfully obtained at NAF’s meetings. Defendants  
 9 cannot show that any harm would result from enjoining their unlawful activity. Accordingly, no  
 10 bond should be imposed on NAF.

11 **IV. CONCLUSION**

12 For the foregoing reasons, NAF’s motion for an ex parte temporary restraining order  
 13 should be granted, and an order to show cause why a preliminary injunction should not issue  
 14 should be set for hearing on an expedited schedule, but no later than the expiration of the  
 15 temporary restraining order. A preliminary injunction should then issue to protect NAF from  
 16 irreparable harm through a trial on the merits.

18 Dated: July 31, 2015

DEREK F. FORAN  
 MORRISON & FOERSTER LLP

21 By: /s/ Derek F. Foran  
 DEREK F. FORAN

Attorneys for Plaintiff  
 NATIONAL ABORTION FEDERATION  
 (NAF)

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UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

NATIONAL ABORTION FEDERATION (NAF),

Plaintiff,

v.

THE CENTER FOR MEDICAL PROGRESS,  
BIOMAX PROCUREMENT SERVICES LLC,  
DAVID DALEIDEN (aka "ROBERT SARKIS"),  
and TROY NEWMAN,

Defendants.

Case No. 3:15-cv-3522

Judge:

**[PROPOSED] TEMPORARY  
RESTRAINING ORDER AND  
ORDER TO SHOW CAUSE IN  
SUPPORT OF PLAINTIFF'S  
APPLICATION FOR TEMPORARY  
RESTRAINING ORDER**

Hearing Date

Hearing Judge:

Time:

Place: Dept.

Date Action Filed: July 31, 2015

Trial Date:

1 TO DEFENDANTS THE CENTER FOR MEDICAL PROGRESS, BIOMAX  
2 PROCUREMENT SERVICES LLC, DAVID DALEIDEN (aka "ROBERT SARKIS"), and  
3 TROY NEWMAN:

4 This matter comes before the Court on Plaintiff National Abortion Federation's (NAF")  
5 *Ex Parte* Motion for a Temporary Restraining Order and for an Order to Show Cause Regarding a  
6 Preliminary Injunction, Memorandum of Points and Authorities, and supporting papers.

7 Having considered the arguments and papers submitted, and finding good cause, the Court  
8 hereby GRANTS NAF's *Ex Parte* Motion. The Court finds that NAF is likely to prevail on the  
9 merits of its claims, the balance of hardships tips in its favor, NAF would be likely to suffer  
10 irreparable injury, absent an *ex parte* temporary restraining order, in the form of harassment,  
11 intimidation, violence, invasion of privacy, and injury to reputation, and the requested relief is in  
12 the public interest.

13 YOU ARE HEREBY ORDERED TO SHOW CAUSE on \_\_\_\_\_, 2015  
14 at \_\_\_\_\_ a.m./p.m., or as soon thereafter as the matter may be heard in the Courtroom of the  
15 Honorable \_\_\_\_\_, located at \_\_\_\_\_

16 \_\_\_\_\_, why you, your officers, agents, servants,  
17 employees, and attorneys, and any other persons who are in active concert or participation with  
18 you, should not be enjoined and restrained from engaging in, committing, or performing, directly  
19 and indirectly, any and all of the following acts:

- 20 (1) publishing or otherwise disclosing to any third party any video, audio,  
21 photographic, or other recordings taken, or any confidential information learned, at  
22 any NAF annual meetings;
- 23 (2) publishing or otherwise disclosing to any third party the dates or locations of any  
24 future NAF meetings;
- 25 (3) publishing or otherwise disclosing to any third party the names or addresses of any  
26 NAF members learned at any NAF annual meetings; and
- 27 (4) attempting to gain access to any future NAF meetings.

28 Pending hearing on the above Order to Show Cause you, your officers, agents, servants,  
employees, and attorneys, and any other persons who are in active concert or participation with

1 you ARE HEREBY RESTRAINED AND ENJOINED from:

- 2 (1) publishing or otherwise disclosing to any third party any video, audio,  
3 photographic, or other recordings taken, or any confidential information learned, at  
4 any NAF annual meetings;
- 5 (2) publishing or otherwise disclosing to any third party the dates or locations of any  
6 future NAF meetings;
- 7 (3) publishing or otherwise disclosing to any third party the names or addresses of any  
8 NAF members learned at any NAF annual meetings; and
- 9 (4) attempting to gain access to any future NAF meetings.

10 NAF shall not be required to post a bond for issuance of the Temporary Restraining  
11 Order.

12 This Order and supporting papers must be served on Defendants no later than  
13 \_\_\_\_\_, 2015. Any response or opposition to this Order to Show Cause must be  
14 filed and served on NAF's counsel no later than \_\_\_\_\_, 2015.

15 **IT IS SO ORDERED.**

16 Dated: \_\_\_\_\_, 2015 By: \_\_\_\_\_

17 Time: \_\_\_\_\_ Honorable \_\_\_\_\_  
18 United States District Court Judge

19 TRO Expires: \_\_\_\_\_ (14 days)

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7 Attorneys for Plaintiff  
 NATIONAL ABORTION FEDERATION (NAF)

9 UNITED STATES DISTRICT COURT  
 10 NORTHERN DISTRICT OF CALIFORNIA

12 NATIONAL ABORTION FEDERATION (NAF),  
 13 Plaintiff,  
 14 v.  
 15 THE CENTER FOR MEDICAL PROGRESS,  
 BIOMAX PROCUREMENT SERVICES LLC,  
 16 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 and TROY NEWMAN,  
 17 Defendants.

Case No. 3:15-cv-3522

Judge:

**DECLARATION OF DEREK F.  
 FORAN IN SUPPORT OF  
 NATIONAL ABORTION  
 FEDERATION (NAF)'S MOTION  
 FOR A TEMPORARY  
 RESTRAINING ORDER AND  
 PRELIMINARY INJUNCTION**

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1 I, DEREK F. FORAN, declare as follows:

2 1. I am a partner with the law firm of Morrison & Foerster LLP, attorneys of record  
3 in this action for Plaintiff National Abortion Federation (NAF). I submit this declaration in  
4 support of Plaintiff National Abortion Federation (NAF)'s concurrently filed *Ex Parte* Motion for  
5 a Temporary Restraining Order and for other relief. Except where expressly stated on  
6 information and belief, I have personal knowledge of the matters set forth below, and if called as  
7 a witness I could and would testify competently as follows:

8 **Notice of Application of Ex Parte Temporary Restraining Order**

9 2. On July 30, 2015, at about 10:02 p.m., I caused a letter to be sent via email to  
10 Catherine Short (lldfojai@earthlink.net), who is the attorney identified as the registered agent for  
11 service of process for The Center for Medical Progress (CMP) on the California Secretary of  
12 State website. I caused the same letter to be sent via the same email to Paul N. Jonna, Esq.  
13 (pjonna@ConscienceDefense.org), who I understand made a special appearance on behalf of  
14 CMP in response to an application for a temporary restraining order filed in the matter titled  
15 *StemExpress, LLC et al. versus The Center for Medical Progress et al.* (Jul. 28, 2015), Case No.  
16 BC589145, in the Superior Court of the State of California, County of Los Angeles, Central  
17 District. I caused the same letter to be sent via the same email to email addresses associated with  
18 Biomax Procurement Services LLC ([info@biomaxps.com](mailto:info@biomaxps.com)), David Daleiden  
19 ([david@centerformedicalprogress.org](mailto:david@centerformedicalprogress.org)), and Troy Newman ([info.operationrescue@gmail.com](mailto:info.operationrescue@gmail.com)).  
20 Attached as Exhibit 1 hereto is a true and correct copy of letter that I caused to be sent via email  
21 to these persons.

22 3. The letter notified CMP, Biomax, Daleiden and Newman ("Defendants") that NAF  
23 would be filing an application on July 31, 2015, in the United States District Court for the  
24 Northern District of California, San Francisco, for an *ex parte* temporary restraining order, order  
25 to show cause, preliminary injunction, and expedited discovery. The letter also stated that NAF  
26 would be seeking a hearing on its application for that same day, and asked whether the  
27 Defendants intended to appear at the hearing and/or oppose NAF's application.

28 4. As of the time of filing, Defendants have not responded to the letter.

1           5.       I asked an associate working under my direction, Christopher Robinson, to try to  
2 make contact with the Defendants by telephone on the morning of July 31, 2015, and prepare a  
3 declaration to be filed separately in support of this motion describing his activities.

4       **Exhibits**

5           6.       Attached as Exhibit 2 hereto is a true and correct copy of a table from the *National*  
6 *Abortion Federation* entitled “NAF Violence and Disruption Statistics” covering 1977-2014.  
7 This document was obtained by downloading it from the NAF website, at: [http://prochoice.org/](http://prochoice.org/education-and-advocacy/violence/violence-statistics-and-history/)  
8 [education-and-advocacy/violence/violence-statistics-and-history/](http://prochoice.org/education-and-advocacy/violence/violence-statistics-and-history/)

9           7.       Attached as Exhibit 3 hereto is a true and correct copy of an article from the *New*  
10 *York Times* entitled “Abortion Doctor Shot to Death in Kansas Church” by Joe Stumpe and  
11 Monica Davey, dated May 31, 2009. This document was obtained by downloading it from *The*  
12 *New York Times*’ website, at: [http://www.nytimes.com/2009/06/01/us/01tiller.html?](http://www.nytimes.com/2009/06/01/us/01tiller.html?pagewanted=all)  
13 [pagewanted=all](http://www.nytimes.com/2009/06/01/us/01tiller.html?pagewanted=all).

14           8.       Attached as Exhibit 4 hereto is a true and correct copy of an article from the  
15 *Guardian* entitled “For years anti-abortionists tried to stop Doctor Tiller. Finally a bullet did” by  
16 Ed Pilkington, dated June 1, 2009. This document was obtained by downloading it from the  
17 *Guardian* website, at: [http://www.theguardian.com/world/2009/jun/01/us-doctor-tiller-killing-](http://www.theguardian.com/world/2009/jun/01/us-doctor-tiller-killing-abortions)  
18 [abortions](http://www.theguardian.com/world/2009/jun/01/us-doctor-tiller-killing-abortions).

19           9.       Attached as Exhibit 5 hereto is (on information and belief) a true and correct copy  
20 of Biomax’s “NAF Application and Agreement for Exhibit Space,” “Exhibit Rules and  
21 Regulations”, and NAF “Annual Meeting Registration Form” for the NAF Annual meeting held  
22 in San Francisco, CA, between April 5-8, 2014, with all personal and credit card information  
23 redacted. The Application and Agreement for Exhibit Space lists “Brianna Allen” (Procurement  
24 Assistant), “Susan Tennenbaum” (CEO), and “Robert Sarkis” (VP of Operations). The NAF  
25 “Exhibit Rules and Regulations” is signed by “Susan Tennenbaum” (CEO) representing Biomax  
26 Procurement Services, dated February 5, 2014. The Annual Meeting Registration Form is signed  
27 by Phil Cronin. The names and contact information of NAF staff have been redacted for their  
28 protection.

1           10.     Attached as Exhibit 6 hereto are (on information and belief) true and correct copies  
2 of Confidentiality Agreements for NAF Annual Meeting signed by “Brianna Allen” (representing  
3 Biomax), “Susan Tennebaum” (CEO of Biomax), and “Robert Sarkis” (Procurement Manager of  
4 Biomax/VP of Operations) dated April 5, 2014. The signature is dated April 5, 2013; the  
5 confidentiality agreement states that it is a 2014 document on its face.

6           11.     Attached as Exhibit 7 hereto is a true and correct copy of the Biomax Company  
7 page as it appeared on July 8, 2015. This document was obtained by downloading it from  
8 [http://webcache.googleusercontent.com/search?q=cache:SxAA3Tk6xS0J:www.biomaxps.com/co](http://webcache.googleusercontent.com/search?q=cache:SxAA3Tk6xS0J:www.biomaxps.com/company/+&cd=2&hl=en&ct=clnk&gl=us)  
9 [mpany/+&cd=2&hl=en&ct=clnk&gl=us](http://webcache.googleusercontent.com/search?q=cache:SxAA3Tk6xS0J:www.biomaxps.com/company/+&cd=2&hl=en&ct=clnk&gl=us).

10           12.     Attached as Exhibit 8 hereto is a true and correct copy of the Biomax website  
11 accessed July 30, 2015. This document was obtained by downloading it from  
12 [www.biomaxps.com](http://www.biomaxps.com).

13           13.     Attached as Exhibit 9 hereto is a true and correct copy of a transcript from a July  
14 15, 2015, *The O'Reilly Factor* television program. This transcript was downloaded from Lexis  
15 Nexis.

16           14.     Attached as Exhibit 10 hereto is (on information and belief) a true and correct  
17 copy of an email exchange that took place between December 2013 and March 2014 between  
18 Jennifer A. Hart (Director of Training and Education for NAF), Nichelle Davis, and “Brianna  
19 Allen.” “Brianna Allen” is a representative of Biomax and copies “Susan Tennenbaum” and  
20 “Robert Sarkis.” The names and contact information of NAF staff have been redacted for their  
21 protection.

22           15.     Attached as Exhibit 11 hereto is (on information and belief) a true and correct  
23 copy of an email exchange of an email exchange that took place in 2015 between “Brianna Allen”  
24 and Nichelle Davis. “Brianna Allen” is a representative of Biomax and copies “Susan  
25 Tennenbaum” and “Robert Sarkis.” Biomax’s “NAF Application and Agreement for Exhibit  
26 Space” with a deadline of February 23, 2015, with Biomax representatives listed as “Susan  
27 Tennenbaum” (CEO), “Robert Sarkis” (Procurement Manager), “Adrian Lopez” (Procurement  
28 Technician). Also attached are (on information and belief) true and correct copies of the NAF

1 “Exhibit Rules and Regulations” signed by “Susan Tennenbaum” (CEO) of Biomax and dated  
2 March 25, 2015”, and the NAF Annual Meeting Registration Form signed by “Rebecca Wagner”  
3 representing Biomax, with all personal and credit card information redacted. The names and  
4 contact information of NAF staff have been redacted for their protection.

5 16. Attached as Exhibit 12 hereto is (on information and belief) a true and correct  
6 copy of Biomax’s “NAF Application and Agreement for Exhibit Space” with a deadline of  
7 February 23, 2015, with Biomax representatives listed as “Susan Tennenbaum” (CEO), “Robert  
8 Sarkis” (Procurement Manager), “Adrian Lopez” (Procurement Technician). Also attached are  
9 (on information and belief) true and correct copies of the NAF “Exhibit Rules and Regulations”  
10 signed by “Susan Tennenbaum” (CEO) of Biomax and dated March 25, 2015”, and the NAF  
11 Annual Meeting Registration Form signed by “Rebecca Wagner” representing Biomax, with all  
12 personal and credit card information redacted. The names and contact information of NAF staff  
13 have been redacted for their protection.

14 17. On information and belief, attached as Exhibit 13 is a photocopy of a driver’s  
15 license purporting to be for “Robert Daoud Sarkis.” Also on information and belief, Exhibit 13  
16 also contains a photocopy of an identification purportedly belonging to “Susan Sarah  
17 Tennenbaum.”

18 18. On information and belief, Exhibit 14 contains photos taken by NAF staff during  
19 an annual NAF conference.

20 19. Attached as Exhibit 15 hereto are (on information and belief) true and correct  
21 copies of documents that purport to be the Biomax business cards of “Susan Tennenbaum”  
22 (Founder and CEO), “Robert Daoud Sarkis” (Procurement Manager/VP Operations), and  
23 “Brianna Allen” (Procurement Assistant).

24 20. Attached as Exhibit 16 hereto is (on information and belief) a true and correct  
25 copy of a Confidentiality Agreement for an NAF Annual Meeting signed by “Adrian Lopez”  
26 (Biomax Procurement Tech), dated April 18, 2015.

27 21. Attached as Exhibit 17 hereto is a true and correct copy of an article from the *New*  
28 *York Times* entitled “With Planned Parenthood videos, Activist Ignites Abortion Issue” by Jackie

1 Clames, dated July 21, 2015. This document was obtained by downloading it from the *New York*  
2 *Times*' website, at: [http://www.nytimes.com/2015/07/22/us/with-planned-parenthood-videos-](http://www.nytimes.com/2015/07/22/us/with-planned-parenthood-videos-activist-ignites-abortion-issue.html?_r=0)  
3 [activist-ignites-abortion-issue.html?\\_r=0](http://www.nytimes.com/2015/07/22/us/with-planned-parenthood-videos-activist-ignites-abortion-issue.html?_r=0).

4 22. Attached as Exhibit 18 hereto is a true and correct copy of a transcript of a video  
5 released by the Center for Medical Progress on July 14, 2015. This document was obtained by  
6 downloading it from the Center for Medical Progress website, at: [http://www.centerformedical](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFAtranscript072514_final.pdf)  
7 [progress.org/wp-content/uploads/2015/05/PPFAtranscript072514\\_final.pdf](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFAtranscript072514_final.pdf).

8 23. Attached as Exhibit 19 hereto is a true and correct copy of an article from *The Last*  
9 *Refuge* entitled "Yet Another Disturbing 'For Profit' Planned Parenthood Baby Harvest Video  
10 Surfaces" by "sundance" dated July 21, 2015. This document was obtained by downloading it  
11 from *TheConservativeTreeHouse* website, at: [http://theconservativetreehouse.com/2015/07/21/](http://theconservativetreehouse.com/2015/07/21/yes-another-disturbing-for-profit-planned-parenthood-baby-harvest-video-surfaces/)  
12 [yet-another-disturbing-for-profit-planned-parenthood-baby-harvest-video-surfaces/](http://theconservativetreehouse.com/2015/07/21/yes-another-disturbing-for-profit-planned-parenthood-baby-harvest-video-surfaces/).

13 24. Attached as Exhibit 20 hereto is a true and correct copy of an article from  
14 *LifeNews.com* entitled "Planned Parenthood Doc Deletes Twitter Account After Exposed Selling  
15 Aborted Baby Body Parts" by Steven Ertelt, dated July 14, 2015. This document was obtained by  
16 downloading it from LifeNews.com, at: [http://www.lifenews.com/2015/07/14/planned-](http://www.lifenews.com/2015/07/14/planned-parenthood-doc-deletes-twitter-account-after-exposed-selling-aborted-baby-body-parts/)  
17 [parenthood-doc-deletes-twitter-account-after-exposed-selling-aborted-baby-body-parts/](http://www.lifenews.com/2015/07/14/planned-parenthood-doc-deletes-twitter-account-after-exposed-selling-aborted-baby-body-parts/).

18 25. Attached as Exhibit 21 hereto is a true and correct copy of an article from *Heavy*  
19 entitled "Dr. Deborah Nucatola: 5 Fast Facts You need to Know" by Paul Farrell, dated July 14,  
20 2015. This document was obtained by downloading it from Heavy.com, at: [http://heavy.com/](http://heavy.com/news/2015/07/deborah-nucatola-planned-parenthood-doctor-center-for-medical-progress/)  
21 [news/2015/07/deborah-nucatola-planned-parenthood-doctor-center-for-medical-progress/](http://heavy.com/news/2015/07/deborah-nucatola-planned-parenthood-doctor-center-for-medical-progress/).

22 26. Attached as Exhibit 22 hereto is a true and correct copy of a transcript of a video  
23 released by the Center for Medical Progress on July 21, 2015. This document was obtained by  
24 downloading it from the Center for Medical Progress website, at: [http://www.centerformedical](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFA020615_transcript.pdf)  
25 [progress.org/wp-content/uploads/2015/05/PPFA020615\\_transcript.pdf](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFA020615_transcript.pdf).

26 27. Attached as Exhibit 23 hereto is a true and correct copy of a Temporary  
27 Restraining Order, Order To Show Cause Re: Preliminary Injunction, and Expedited Discovery  
28 Order granted July 28, 2015 by Hon. Joanne O'Donnell of the Los Angeles County Superior

1 Court in Case No. BC589145, *StemExpress, LLC, and Catherine Dyer v. The Center For Medical*  
2 *Progress, Biomax Procurement Services, LLC, David Daleiden (aka "Robert Sarkis"), Doe 1*  
3 *(aka "Susan Tennenbaum"), and Does 2 through 100, inclusive.*

4 28. Attached as Exhibit 24 hereto is a true and correct copy of an article from  
5 *LifeNews.com* entitled "A Dozen Very 'Shocking' Videos of Planned Parenthood Selling Aborted  
6 Babies Still to Come" by Steven Ertelt, dated July 24, 2015. This document was obtained by  
7 downloading it from LifeNews.com, at: [http://www.lifenews.com/2015/07/24/a-dozen-very-](http://www.lifenews.com/2015/07/24/a-dozen-very-shocking-videos-of-planned-parenthood-selling-aborted-babies-still-to-come/)  
8 [shocking-videos-of-planned-parenthood-selling-aborted-babies-still-to-come/](http://www.lifenews.com/2015/07/24/a-dozen-very-shocking-videos-of-planned-parenthood-selling-aborted-babies-still-to-come/).

9 29. Attached as Exhibit 25 hereto is a true and correct copy of a transcript from a July  
10 22, 2015 *Hannity* television program. This transcript was downloaded from Lexis Nexis.

11 30. Attached as Exhibit 26 hereto is a true and correct copy of a press release from  
12 The Center for Medical Progress entitled "Human Capital – Episode 1: Planned Parenthood's  
13 Black Market in Baby Parts" dated July 28, 2015. This document was obtained by downloading  
14 it from The Center for Medical Progress' website, at: [http://www.centerformedicalprogress.](http://www.centerformedicalprogress.org/2015/07/human-capital-episode-1/)  
15 [org/2015/07/human-capital-episode-1/](http://www.centerformedicalprogress.org/2015/07/human-capital-episode-1/).

16 31. Attached as Exhibit 27 hereto is a true and correct copy of a press release from the  
17 Center for Medical Progress entitled "Planned Parenthood VP says Fetuses May Come Out Intact,  
18 Agrees Payments Specific to the Specimen" dated July 30, 2015. This document was obtained by  
19 downloading it from The Center for Medical Progress website, at: [http://www.centerformedical](http://www.centerformedicalprogress.org/2015/07/planned-parenthood-vp-says-fetuses-may-come-out-intact-agrees-payments-specific-to-the-specimen/)  
20 [progress.org/2015/07/planned-parenthood-vp-says-fetuses-may-come-out-intact-agrees-](http://www.centerformedicalprogress.org/2015/07/planned-parenthood-vp-says-fetuses-may-come-out-intact-agrees-payments-specific-to-the-specimen/)  
21 [payments-specific-to-the-specimen/](http://www.centerformedicalprogress.org/2015/07/planned-parenthood-vp-says-fetuses-may-come-out-intact-agrees-payments-specific-to-the-specimen/).

22 32. Attached as Exhibit 28 hereto is a true and correct copy of a press release from  
23 The Center for Medical Progress entitled "CMP Statement on Planned Parenthood's Refusal to  
24 Produce Senior Director of Medical Services for House Committee" dated July 20, 2015. This  
25 document was obtained by downloading it from The Center for Medical Progress' website, at:  
26 [http://www.centerformedicalprogress.org/2015/07/cmp-statement-on-planned-parenthoods-](http://www.centerformedicalprogress.org/2015/07/cmp-statement-on-planned-parenthoods-refusal-to-produce-senior-director-of-medical-services-for-house-committee/)  
27 [refusal-to-produce-senior-director-of-medical-services-for-house-committee/](http://www.centerformedicalprogress.org/2015/07/cmp-statement-on-planned-parenthoods-refusal-to-produce-senior-director-of-medical-services-for-house-committee/).

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I declare under penalty of perjury that the foregoing is true and correct. Executed this 31st day of July, 2015 at San Francisco, California.

/s/ Derek F. Foran  
DEREK F. FORAN

Exhibit 1

**From:** Robinson, Christopher  
**Sent:** Thursday, July 30, 2015 10:02 PM  
**To:** 'lldfojai@earthlink.net'; 'david@centerformedicalprogress.org';  
'pjonna@ConscienceDefense.org'; 'info@biomaxps.com';  
'info.operationrescue@gmail.com'  
**Cc:** Foran, Derek F.  
**Subject:** NAF v. CMP et al. -- Notice of Application for Ex Parte Temporary Restraining Order  
**Attachments:** 2015-07-30 Letter re Notice of Ex Parte TRO.pdf

To The Center for Medical Progress, Biomax Procurement Services LLC, David Daleiden, and Troy Newman:

Please see the attached letter from Derek Foran.

Thank you,

**Christopher Robinson**  
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July 30, 2015

Writer's Direct Contact

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*Via email*

**NOTICE OF APPLICATION FOR *EX PARTE* TEMPORARY  
RESTRAINING ORDER, ORDER TO SHOW CAUSE, PRELIMINARY  
INJUNCTION, AND EXPEDITED DISCOVERY**

**To The Center for Medical Progress, Biomax Procurement Services LLC, David Daleiden, and Troy Newman:**

I am outside litigation counsel for the National Abortion Federation (NAF). I have been retained on behalf of NAF to pursue federal and state claims against each of you, collectively and individually. I have included Mr. Jonna in this correspondence because I understand he is outside counsel for The Center for Medical Progress (CMP).

**MORRISON** | **FOERSTER**

The Center for Medical Progress  
July 30, 2015  
Page Two

As is now clear from numerous interviews given by Mr. Daleiden, and from press releases issued by CMP and Mr. Newman's Operation Rescue, each of you engaged in a long-running illegal conspiracy to defraud NAF. You accomplished that fraud by setting up a fake company ("Biomax Procurement Services, LLC") and by sending fake employees of that company with fake identities to gain access to NAF's annual meetings in 2014 and 2015. Mr. Daleiden, for example, assumed the fake name "Robert Sarkis" for this purpose.

As you know, NAF takes security around its annual meetings extremely seriously given the decades-long campaign of intimidation, harassment, and physical violence perpetrated by anti-abortion extremists against abortion providers in the United States. No one outside of NAF membership is permitted to enter NAF's annual meetings unless they register in advance. Everyone, including NAF members, must make truthful, complete, and non-misleading representations about their businesses; present valid photo identification; and sign confidentiality agreements promising (among other things) not to make video, audio, photographic, or other recordings at the meetings, to hold in trust and confidence any information received at the meetings, and to refrain from reproducing or disclosing any such information without NAF's express permission. These precautions are regrettably necessary to protect NAF and its members from harassment, intimidation, violence, intrusion of privacy, and injury to reputation by anti-abortion extremists.

To circumvent NAF's security measures and gain access to NAF's annual meetings, Mr. Daleiden and his co-conspirators misrepresented the nature of their business, misrepresented their names and identifications, and signed confidentiality agreements with NAF that they had no intention of honoring. Their illegal conspiracy had one aim: to vilify abortion providers, including NAF members, in the national media by releasing surreptitiously taken, selectively-edited, and highly misleading video and audio recordings taken in violation of numerous state and federal laws. CMP and Daleiden boast of having hundreds if not thousands of hours of such recordings, and have threatened to release one every week going forward. In the tapes you have released to date, NAF's annual meetings are expressly referenced, as are the names of numerous NAF members. You have acted without any regard for the law, and without any regard for the safety, security, and privacy of NAF's members.

The public release of any recordings taken at NAF's annual meetings would be a flagrant violation of your confidentiality agreements with NAF, as would the disclosure or misuse of any confidential information you obtained at NAF's annual meetings. Such an irresponsible course of action would expose NAF's members to the same vitriolic and hateful rhetoric currently directed to the initial victims of your conspiracy, and would cause irreversible harm to their privacy, their reputations, and could even incite acts of violence against their persons.

**MORRISON** | **FOERSTER**

The Center for Medical Progress  
July 30, 2015  
Page Three

We cannot permit this to happen. We demand that you, your officers, agents, servants, employees, and attorneys, and any other persons who are in active concert or participation with them, refrain from:

1. publishing or otherwise disclosing to any third party any video, audio, photographic, or other recordings taken, or any confidential information learned, at any NAF annual meetings;
2. publishing or otherwise disclosing to any third party the dates or locations of any future NAF meetings;
3. publishing or otherwise disclosing to any third party the names or addresses of any NAF members learned at any NAF annual meetings;
4. attempting to gain access to any future NAF meetings.

We also demand that you immediately return to NAF all information — including audio, video, or photographic recordings — that you and your co-conspirators illegally obtained at NAF's annual meetings, and immediately destroy all copies (whether electronic or otherwise) in your possession, custody, or control.

If you fail to provide us with adequate assurances that you have taken these steps, which would include your stipulation to a court order agreeing to be bound by the above provisions, we will have no choice but to obtain **an ex parte temporary restraining order, order to show cause, and preliminary injunction** seeking any or all of the relief outlined above.

We intend to move for an *ex parte* temporary restraining order, order to show cause, and preliminary injunction **on Friday, July 31, 2015**, in the United States District Court for the Northern District of California, San Francisco. We also intend to request a hearing on that same day on our application. In addition, we intend to file a motion to shorten time and a motion for expedited discovery to be heard by the Court at the same time.

Please let me know right away whether you intend to appear at the hearing and/or oppose the *ex parte* motion for a temporary restraining order, or if you will stipulate to the relief sought. Please also let me know if you will stipulate to our motion to shorten time in connection with our motion for expedited discovery.

NAF reserves all rights and remedies available under the law.

**MORRISON** | **FOERSTER**

The Center for Medical Progress  
July 30, 2015  
Page Four

Sincerely,

A handwritten signature in blue ink, appearing to read 'Derek F. Foran', with a long horizontal flourish extending to the right.

Derek F. Foran

Exhibit 2



## NAF VIOLENCE AND DISRUPTION STATISTICS

INCIDENTS OF VIOLENCE & DISRUPTION AGAINST ABORTION PROVIDERS

	1977-94	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	TOTAL
<b>VIOLENCE</b>																						
Murder <sup>1</sup>	5	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	8
Attempted Murder	11	1	1	2	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	17
Bombing <sup>1</sup>	29	1	2	6	1	1	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	42
Arson <sup>1</sup>	124	14	3	8	4	8	2	2	1	3	2	2	0	2	0	0	0	1	5	0	1	182
Attempted Bomb/Arson <sup>1</sup>	64	1	4	2	5	1	3	2	0	0	1	6	4	2	1	1	1	1	0	0	0	99
Invasion	347	4	0	7	5	3	4	2	1	0	0	0	4	7	6	1	0	0	0	8	1	400
Vandalism	585	31	29	105	46	63	56	58	60	48	49	83	72	59	45	40	22	27	12	5	12	1507
Trespassing	0	0	0	0	0	193	81	144	163	66	67	633	336	122	148	104	45	69	47	264	78	2560
Butyric Acid Attacks	80	0	1	0	19	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	100
Anthrax/Bioterrorism Threats	0	0	0	0	12	35	30	554	23	0	1	0	0	1	3	2	1	1	0	0	0	663
Assault & Battery	95	2	1	9	4	2	7	2	1	7	8	8	11	12	6	9	4	3	7	0	1	199
Death Threats	225	41	13	11	25	13	9	14	3	7	4	10	10	13	2	16	2	2	6	2	1	429
Kidnapping	2	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	4
Burglary	34	3	6	6	6	4	5	6	1	9	5	11	30	12	7	12	13	8	5	0	1	184
Stalking <sup>2</sup>	200	61	52	67	13	13	17	10	12	3	15	8	6	19	19	1	7	1	6	20	4	554
<b>TOTAL</b>	<b>1801</b>	<b>159</b>	<b>112</b>	<b>223</b>	<b>144</b>	<b>336</b>	<b>215</b>	<b>795</b>	<b>265</b>	<b>143</b>	<b>152</b>	<b>761</b>	<b>474</b>	<b>249</b>	<b>237</b>	<b>187</b>	<b>95</b>	<b>114</b>	<b>88</b>	<b>299</b>	<b>99</b>	<b>6948</b>
<b>DISRUPTION</b>																						
Hate Mail/Harassing Calls	1833	255	605	2829	915	1646	1011	404	230	432	453	515	548	522	396	1699	404	365	452	420	367	16301
Email/Internet Harassment	0	0	0	0	0	0	0	0	24	70	51	77	25	38	44	16	44	17	41	88	91	626
Hoax Device/Susp. Package	0	0	0	0	0	0	0	0	41	13	9	16	17	23	24	17	8	2	7	2	9	188
Bomb Threats	311	41	13	79	31	39	20	31	7	17	13	11	7	6	13	4	12	1	1	4	1	662
Picketing <sup>4</sup>	7768	1356	3932	7518	8402	8727	8478	9969	10241	11348	11640	13415	13505	11113	12503	8388	6347	4780	5706	5574	5402	176112
Obstruction <sup>5</sup>																			79	396	251	726
<b>TOTAL</b>	<b>9912</b>	<b>1652</b>	<b>4550</b>	<b>10426</b>	<b>9348</b>	<b>10412</b>	<b>9509</b>	<b>10404</b>	<b>10543</b>	<b>11880</b>	<b>12166</b>	<b>14034</b>	<b>14102</b>	<b>11702</b>	<b>12980</b>	<b>10124</b>	<b>6815</b>	<b>5165</b>	<b>6286</b>	<b>6484</b>	<b>6121</b>	<b>194615</b>
<b>CLINIC BLOCKADES</b>																						
Number of Incidents	634	5	7	25	2	3	4	2	4	10	34	4	13	7	8	1	1	5	6	3	23	801
Number of Arrests <sup>3</sup>	33661	54	65	29	16	5	0	0	0	0	0	0	0	3	1	0	0	0	4	1	0	33839

All numbers represent incidents reported to or obtained by NAF. Actual incidents are likely much higher. Tabulation of trespassing began in 1999 and tabulation of email harassment and hoax devices began in 2002. Numbers prior to 2013 represent the U.S. and Canada only. Numbers from 2013 and 2014 represent the U.S., Canada, and Colombia.

1. Incidents recorded are those classified as such by the appropriate law enforcement agency. Incidents that were ruled inconclusive or accidental are not included.

2. Stalking is defined as the persistent following, threatening, and harassing of an abortion provider, staff member, or patient away from the clinic. Tabulation of stalking incidents began in 1993.

3. The "number of arrests" represents the total number of arrests, not the total number of persons arrested. Many blockaders are arrested multiple times.

4. NAF changed its method of collecting this data in 2011.

5. Tabulation of Obstruction began in 2012. Obstruction is defined as the act of causing a delay or an attempt to cause a delay in the conduct of business or prevent persons from entering or exiting an area. This would apply to violations of the FACE Act.

Exhibit 3

## Abortion Doctor Shot to Death in Kansas Church

By JOE STUMPE and MONICA DAVEY  
Published: May 31, 2009

WICHITA, Kan. — [George Tiller](#), one of only a few doctors in the nation who performed abortions late in pregnancy, was shot to death here Sunday in the foyer of his longtime church as he handed out the church bulletin.

Enlarge This Image



Mike Hurnacher/The Wichita Eagle, via Associated Press  
Dr. George Tiller, one of the nation's few late-term-abortion providers, was killed Sunday in church.

The authorities said they took a man into custody later in the day after pulling him over about 170 miles away on Interstate 35 near Kansas City. They said they expected to charge him with murder on Monday.

The Wichita police said there were several witnesses to the killing, but law enforcement officials would not say what had been said, if anything, inside the foyer. Officials offered little insight into the motive, saying that they believed it was “the act of an isolated individual” but that they were also looking into “his history, his family, his associates.”

A provider of abortions for more than three decades, Dr. Tiller, 67, had become a focal point for those around the country who opposed it. In addition to protests outside his clinic, his house and his church, Dr. Tiller had once seen his clinic bombed; in 1993, an abortion opponent shot him in both arms. He was also the defendant in a series of legal challenges intended to shut down his operations, including two grand juries that were convened after citizen-led petition drives.

On Sunday morning, moments after services had begun at [Reformation Lutheran Church](#), Dr. Tiller, who was acting as an usher, was shot once with a handgun, the authorities said. The gunman pointed the weapon at two people who tried to stop him, the police said, then drove off in a powder-blue Taurus. Dr. Tiller's wife, Jeanne, a member of the church choir, was inside the sanctuary at the time of the shooting.

The police in Wichita described the man who was detained as a 51-year-old from Merriam, a Kansas City suburb, but declined to give his name until he was charged. The Associated Press reported that a sheriff's official from Johnson County, Kan., where the man was taken into custody, identified him as Scott Roeder.

The killing of Dr. Tiller is likely to return the issue of abortion to center stage in the nation's political debate. Until recently, [President Obama](#), who supports abortion rights, had largely sought to avoid the debate. Last month, he confronted the issue in a commencement speech at the [University of Notre Dame](#), an appearance that drew protests because of his views. During the speech, he appealed to each side to respect one another's basic decency and to work together to reduce the number of unwanted pregnancies.

Mr. Obama issued a statement after Dr. Tiller's killing, saying, “However profound our differences as Americans over difficult issues such as abortion, they cannot be resolved by heinous acts of violence.”

Advocates of abortion rights denounced the killing, saying it would send a renewed, frightening signal to others who provide abortions or work in clinics and to women who may consider abortions. Some described Dr. Tiller as one of about only three doctors in the country who had, under certain circumstances, provided abortions to women in their third trimester of pregnancy, and said his death would mean that women, particularly in

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the central United States, would have few if any options in such cases.

“This is a tremendous loss on so many levels,” said Peter B. Brownlie, president of [Planned Parenthood of Kansas and Mid-Missouri](#), who had known Dr. Tiller for years.

Opponents of abortion, including those here who have been most vociferous in their protests of Dr. Tiller and his work, also expressed outrage at the shooting and said they feared that their groups might be wrongly judged by the act.

Troy Newman, the president of [Operation Rescue](#), an anti-abortion group based in Wichita, said he had always sought out “nonviolent” measures to challenge Dr. Tiller, including efforts in recent years to have him prosecuted for crimes or investigated by state health authorities.

“Operation Rescue has worked tirelessly on peaceful, nonviolent measures to bring him to justice through the legal system, the legislative system,” Mr. Newman said, adding, “We are pro-life, and this act was antithetical to what we believe.”

By late Sunday, Mr. Newman said, some were already suggesting that there were links between the suspect and Operation Rescue. Someone named Scott Roeder had made posts to the group’s blog in the past, Mr. Newman said, but “he is not a friend, not a contributor, not a volunteer.”

Dr. Tiller’s death is the first such killing of an abortion provider in this country since 1998, when Dr. [Barnett Slepian](#) was shot by a sniper in his home in the Buffalo area. Dr. Tiller was the fourth doctor in the United States who performed abortions to be killed in such circumstances since 1993, [statistics from abortion rights’ groups show](#).

Although most of the deadly violence occurred in the 1990s, advocates said, abortion clinics and doctors have continued to be the targets of intense, sometimes threatening protests. Some said they feared that Dr. Tiller’s death might signal a return to the earlier level of violence. At some clinics on Sunday, administrators were reviewing their security precautions.

1 | 2 | [NEXT PAGE »](#)

*Joe Stumpe reported from Wichita, Kan., and Monica Davey from Chicago.*

A version of this article appeared in print on June 1, 2009, on page A1 of the New York edition.

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- [Jurors Acquit Kansas Doctor In a Late-Term Abortion Case \(March 28, 2009\)](#)
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Abortion

# For years anti-abortionists tried to stop Doctor Tiller. Finally a bullet did

Ed Pilkington

@edpilkington

Monday 1 June 2009  
16.51 EDT



Shares  
1

The clinic is low-rise and cream coloured. There are no windows. Video cameras are posted on all corners. The walls bear large "No trespassing" posters warning violators they will be prosecuted. A police car idles at the entrance day and night, and the back fence is patrolled by armed guards. As patients enter the facility, they pass through a metal detector.

The building is a medical centre in Wichita, Kansas, one of only three in America that serve women seeking abortions in late stages of pregnancy. But it doesn't look like that. It looks like a fortress, or a high-security prison. Inside, it is designed to help patients. Outside, it is custom-built to thwart an ever present threat.

But its hi-tech security measures were not enough to save George Tiller. His name is still printed above the front entrance of the clinic alongside the words "Women's health care". But after 30 years of almost constant harassment, intimidation and death threats, on Sunday he finally succumbed.

He was gunned down at his place of worship a mile from the clinic. He was attending morning service at Reformation Lutheran church, which had accepted him as a member after he was expelled from his previous church.

At 10.03 am, Tiller was standing just inside the church. He was taking his turn to be an usher, and was handing out leaflets on church events. The service had just started inside where his wife, Jeanne, was sitting.

A man, identified after his arrest as Scott Roeder, 51, allegedly walked up to Tiller as he stood alongside three or four others and aimed a gun at his head. He shot once. Worshipers described the sound as like a balloon popping.

Reverend Lowell Michelson had begun to take the service when he heard the shot. He'd known Tiller for many years and had come to respect his calm endurance. They had talked about the dangers he faced, though Michelson declined to reveal the details of their conversations on pastor confidentiality grounds. "He endured so much. He was committed to women's health issues. He made that a priority in his life even though he knew of the risks," Michelson said.

A fellow congregant, who asked not to be named in order to protect his wife who worked with Tiller at the abortion clinic, said people were shocked and startled. "He believed in what he did. He really believed it, and that's what gave him strength," he said, crying silently outside the church.

He said those who attacked Tiller over the years had misunderstood his work. "He saw many women who had tried so hard for children, but then suffered the agony of having foetuses with terrible deformities. The picture the anti-abortionists show is always of a perfect beautiful baby, but that's not what he was dealing with. He did what he did out of love."

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Sarah Coe was one of the 250 to 300 women with late-stage pregnancies who seek help every year at Tiller's fortress-clinic. Coe, who talked to the Guardian using a pseudonym, had an abortion in Wichita two years ago this week. The confluence of the anniversary of her baby's and Tiller's death was, she said, very hard to bear.

At 22 weeks of gestation it was discovered through ultrasound and other tests that the foetus of her first child had hydrocephalus - an excess of fluid on the brain. Its head was enlarged, and Coe and her husband were told that it would be born without brain function and would have no conscious life.

"We made a difficult decision that that wasn't the life we wanted for our child," she said. No doctor on the entire east coast of the US would accept her as the baby was beyond the 20 weeks needed for a foetus generally to become viable outside the womb. They were referred to Wichita and to Tiller.

She says the care they received at the clinic was exceptional. There was counselling and support. "We were able to see our little boy after he was delivered, no longer alive, and to touch him and say goodbye. They handled the cremation for us and we have his ashes in our home. It was the worst experience in our lives and they made it so much easier to bear."

The process took four days. During that time Coe and her husband ran the gauntlet of anti-abortion protesters. "We were mobbed. They were banging on our car window. My husband wanted to explain and tried to talk to them but quickly backed off. Just by winding down the car window he was putting himself at jeopardy."

Tiller knew intimately about that sense of jeopardy. His father had a medical practice at the same spot the clinic now occupies, and George entered the family business, studying at the University of Kansas school of medicine in the 1960s. Graduating, he took up a medical internship in the US navy and served as a flight surgeon in California. The training stuck with him: he retained the look of a military man, with close cropped hair and rimless glasses, until his death on Sunday aged 67.

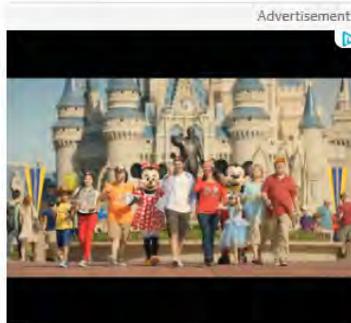
It was just as well: practising medicine for Tiller had many of the features of combat. His clinic was bombed in June 1986. In 1991 anti-abortionists descended on Wichita from all over the country to picket it. During the course of that summer, some 2,700 protesters were arrested and federal troops were sent in to keep the mob under control.

Two years later, Tiller was leaving the clinic in his car when a woman, Rachelle Shannon, shot at him. He was hit in both arms, but survived. As she walked away, Shannon looked back and said: "Did I get him?" She is still in prison, serving time for the shooting and for having fire-bombed other clinics across the US. The next day Tiller was back at work. "I'm a healthcare provider, we had patients to take care of. Really, I feel very good," was all he would say of the incident.

In 1998, after a doctor in New York state was killed by a gunman in his home, Tiller was told by the FBI that he was No 1 on the violent anti-abortionists' hit-lists. That did not deter him either. His only concession was to wear a flak jacket to and from work. He was wearing one such jacket on Sunday when he was shot in the head.

Protesters continued to gather outside the clinic every day, though from 1994 they were forbidden by federal law from blocking the entrance. They would hurl obscenities at anyone entering. Sometimes they would follow pregnant women and nurses to their hotel rooms or homes and push leaflets under the door. The leaflets showed gruesome pictures of aborted fetuses - their severed limbs and heads prominently displayed.

Most Sundays protesters would gather outside the Reformation Lutheran church, heckling him and other worshippers as they assembled for prayer. Every day large crowds would appear outside his abortion clinic, chanting "Killer Tiller!" "Babies Killed Here!" and "Tiller's Slaughter House!"



On top of all that, there were almost incessant prosecutions. In March this year Tiller was put on trial in a case brought by anti-abortionists who claimed he had broken Kansas state law that requires all terminations beyond 22 weeks to be approved by two "independent" doctors. Tiller was charged with having used an employee to provide the second opinion, but the jury rejected the claims and he was acquitted on all charges. Within moments of the verdict, the state's health board announced that it was launching its own prosecution - a case still ongoing when Tiller was killed.

Over the years, Tiller gave very little away. He would turn down requests for interview, saying he did not want to inflame the situation. "He was a quiet man," says Ruth, who lives around the corner from the clinic. "He rarely talked about his problems." In March, he gave a tiny insight into how he coped with such extraordinary pressure. He told the jury at his trial that: "Quit is not something I like to do." He said his wife, Jeanne, his three daughters - two of whom are doctors - a son and 10 grandchildren were all sources of comfort.

Then he recounted to the jury one particular conversation that he said had given him great succour. "My daughters came into my study. I was reading. And they said: 'Daddy, if not now, when? If not you, who? Who is going to stand up for women with unexpected and badly damaged babies?' I had the support of my family, and we were able to proceed ahead."

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Exhibit 5

# EXHIBIT RULES AND REGULATIONS

The following Rules and Regulations are expressly incorporated as part of this Agreement. Exhibitors, their officers, employees, and agents agree to abide and be bound by these Rules and Regulations.

1. Eligibility to Exhibit — Companies with an intended business interest in reaching reproductive health care professionals, including NAF provider members, are invited to participate in the National Abortion Federation's (NAF) Annual Meeting.

2. Exhibitor expressly acknowledges NAF's right to accept or reject applications for exhibit space for any reason, including (without limitation), at NAF's sole discretion, that the proposed exhibit or the exhibitor's business, products, services, or performance in the field are not consistent with NAF's purposes and objectives. NAF also reserves the right to request further information from any Exhibitor and/or persons or entities that have done business with Exhibitor in order to evaluate its application. Exhibitor expressly agrees to provide further information promptly if requested by NAF.

3. Refunds of the application fee and/or exhibit fee are made only as follows: the full amount of the exhibit fee paid will be refunded if the application is not accepted. A \$100.00 service charge will be deducted from each refund requested before March 21, 2014. No refunds will be made after March 21, 2014.

4. Arrangements for shipment of materials and equipment and other set up requirements are at the Exhibitor's sole expense.

5. Use of Space - No Exhibitor shall assign, sublet, or share the space allotted without the advance knowledge and consent of NAF. Exhibitors must show only products provided by them in the regular course of their business. All demonstrations or other sales and promotional activities must be confined to the limits of each exhibitors contracted exhibit space. Assigned areas of the conference venue remain strictly under control of NAF and signage, banners, or other advertising materials shall not be displayed. It is the Exhibitor's responsibility to bring a display that fits within the contracted space.

6. For the integrity of the tradeshow, all exhibits must be fully erected by 5:00 pm on Sunday, April 6. No exhibit shall be dismantled prior to 2:30 pm on Tuesday, April 8. Exhibits not installed by 5:00 pm on Sunday, April 6, may forfeit space at the exhibitor's expense. NAF reserves the right to make changes to the Exhibit dates and hours stated. NAF will inform each Exhibitor in advance if such schedule changes are made.

7. Care of Premises & Compliance/Exhibit Facility Regulations — No part of the exhibit nor signs or other materials may be pasted, nailed or otherwise affixed to walls, doors, or other surfaces in a way that might mar or deface the premises or exhibit furnishings. Nothing may be rigged, suspended from, or attached to any Westin St. Francis Avenue mechanical system. Damage from failure to observe this notice is payable by the Exhibitor.

8. All exhibiting company representatives must be registered for the NAF Annual Meeting, and must wear identifying badges as requested by NAF. Such identification will be required to gain entry to the exhibit area and all meeting rooms. Exhibiting companies are limited to two (2) additional representatives per 8' x 8' exhibit booth.

9. Exhibitors shall comply fully with all applicable national, state, county, city, hotel fire and safety regulations, and any relevant labor contracts as well as any further rules and regulations NAF adopts.

10. Security will be provided by NAF for the conference period, including set up and dismantling. However, NAF makes no warranties and Exhibitors are responsible for any loss, damage, or injury to their exhibits, other property, or persons and/or any claims in any way arising out of their exhibiting at the Annual Meeting. Exhibitors expressly release NAF from any such responsibility or liability.

11. All insurance, including (without limitation) business interruption and public liability coverage are the sole responsibility of the Exhibitor. NAF does not maintain insurance covering Exhibitors, and Exhibitors expressly release NAF from any such responsibility or liability.

12. The Exhibitor agrees to indemnify and hold NAF harmless for any claims for loss, damage, or injury, including reasonable attorneys' fees, connected with the Exhibitor's exhibit at the Annual Meeting and expressly releases NAF from any such responsibility or liability.

13. Photography of exhibits by anyone other than NAF or the assigned Exhibitor of the space being photographed is strictly prohibited.

14. Exhibitor agrees to display and/or represent their products and/or services in a dignified and decorous manner. Any display or conduct that, at NAF's sole discretion, is not in keeping with the general decorum of the Annual Meeting and/or purposes and objectives of NAF, is grounds for removal of the exhibit, by the Exhibitor, at the Exhibitor's expense, promptly upon notification by NAF. Prohibited activities by Exhibitors include, but are not limited to, any conduct or attention-getting devices of any kind that annoy, disturb, or in any way interfere with other exhibits.

15. Exhibitor agrees to identify, display, and/or represent their businesses, products, and/or services truthfully, accurately, and consistently with the information provided in the Application. Any display, conduct, or offer of any information of any kind that, at NAF's sole discretion, is determined to be incomplete, inaccurate, misleading, or inconsistent with the information provided in this Application is grounds for cancellation of this Agreement and/or removal of the exhibit by the Exhibitor, at the Exhibitor's expense, promptly upon notification from NAF. Exhibit staff who purchase an educational pass to attend educational content are not to engage in promotional activities within the CME activity or in any space outside the exhibit hall.

16. No refunds of fees will be made in the case of cancellations or removal of exhibits pursuant to paragraphs 14 and 15 of these Rules and Regulations. Additionally, Exhibitors agree to reimburse NAF for all costs incurred by NAF, including reasonable attorneys' fees, in handling or responding to any violations of any provision of this entire Agreement.

17. In connection with NAF's Annual Meeting, Exhibitor understands that any information NAF may furnish is confidential and not available to the public. Exhibitor agrees that all written information provided by NAF, or any information which is disclosed orally or visually to Exhibitor, or any other exhibitor or attendee, will be used solely in conjunction with Exhibitor's business and will be made available only to Exhibitor's officers, employees, and agents. Unless authorized in writing by NAF, all information is confidential and should not be disclosed to any other individual or third parties.

18. It is further understood and agreed by Exhibitor that no failure or delay by NAF in exercising any right, power, or privilege hereunder shall operate as a waiver hereof, nor shall any single or partial exercise thereof preclude any other or further exercise of any right, power, or privilege hereunder. Exhibitor also understands and agrees that monetary damages would not be a sufficient remedy for any breach of this agreement by Exhibitor or Exhibitor's officers, employees, or agents and that NAF will be entitled to specific performance and injunctive relief as remedies for any such breach. Such remedies shall not be deemed to be exclusive remedies for breach of this Agreement by Exhibitor or Exhibitor's officers, employees, or agents, but shall be in addition to all other remedies available at law or equity.

19. By signing this Agreement, the Exhibitor affirms that all information contained herein, contained in any past and future correspondence with either NAF and/or in any publication, advertisements, and/or exhibits displayed at, or in connection with, NAF's Annual Meeting, is truthful, accurate, complete, and not misleading.

20. Changes in the information provided to NAF are permitted only upon NAF's written approval. Exhibitors agree to notify NAF of any such proposed changes at least 10 days prior to the commencement of the exhibit. NAF, at its sole discretion, may cancel this agreement, if (1) NAF does not approve the changes or (2) notification of the changes is less than 10 days before the exhibit.

*I agree to comply with Exhibitor Rules and Regulations 1-20. I also agree to hold in trust and confidence any confidential information received in the course of exhibiting at the NAF Annual Meeting and agree not to reproduce or disclose confidential information without express permission from NAF. Violation of this paragraph could result in civil and/or criminal penalties.*

Company Name BioMax Procurement Services  
 Signature [Signature]  
 Print Name Susan Tenneybaum  
 Title CEO  
 Date 2/5/14

Submit contract and payment or payment information by mail or fax to:

National Abortion Federation  
 Attn: [Redacted]  
 1660 L Street, NW, Suite 450  
 Washington, DC 20036  
 Phone: 202-667-5881 [Redacted]  
 Fax: 202-667-5890

ACCEPTED: NATIONAL ABORTION FEDERATION

Signature: \_\_\_\_\_

Print Name: [Redacted]

Title: Group Purchasing Manager

Date: \_\_\_\_\_

Exhibit Assignment: \_\_\_\_\_



# APPLICATION AND AGREEMENT FOR EXHIBIT SPACE

NAF ANNUAL MEETING San Francisco, CA · April 5-8, 2014

**Instructions:** Please complete all information. Complete and sign the application form. Return the completed application with credit card information or a check payable to NAF for the full cost of exhibiting and registration for educational sessions. Each exhibitor attending pre-conference educational sessions or purchasing optional ticketed events must fill out a separate Annual Meeting registration form. **A unique email address is required for each exhibitor personnel—registration will not be processed without this information.** When countersigned by NAF, this serves as a contract for exhibit space and the following Rules and Regulations are expressly incorporated herein. Confirmation notices will be emailed within **five** business days of receipt.

**Deadline:** Application and fees must be received in the NAF office by **Monday, February 17, 2014.**

1. The exact information for the list of exhibitors in the conference

Final Program:

Company/Organization Name: BioMax Procurement Services  
 Address: 10929 Firestone Blvd, #246  
 City: Norwalk State/Prov: CA  
 Zip/Postal Code: 90650 Country: U.S.A.  
 Contact Name: Brianna Allen  
 Telephone: 562-281-5041 Fax: \_\_\_\_\_  
 Email: procurement@biomaxps.com  
 Website URL: www.biomaxps.com

5. List the products or services to be exhibited:

biological specimen procurement, stem cell research

6. Exhibit Placement:

(NAF reserves the right to determine the final placement of all exhibiting companies)

Colleagues/companies you wish to be positioned near:

Competitors:

A.B.R., StemExpress, Lonza, All Cells

7. Exhibiting Fees:

\$2,100 Commercial Firms  \$1,900 NAF Group Purchasing Vendor  
 \$1,220 NAF Member  \$1,400 Non-member, Nonprofit Organizations

8. Sponsorship Opportunities:

<input type="checkbox"/> \$8,000 Gold Level	\$ _____
<input type="checkbox"/> \$5,000 Silver Level	\$ _____
<input type="checkbox"/> \$5,000 Welcome Reception	\$ _____
<input type="checkbox"/> \$3,000 Breakfast Reception	\$ _____
<input type="checkbox"/> \$1,500 Refreshment Break(s)	\$ _____
<input type="checkbox"/> \$1,000 Registration Bag Insert	\$ _____
<input type="checkbox"/> Other _____	\$ _____
<b>Total:</b>	<b>\$ _____</b>

9. To advertise in NAF's Annual Meeting Final Program,

submit camera-ready artwork in the following acceptable formats: PDF, TIF, JPG. Artwork must be submitted by Monday, February 17, 2014.

Full-page 8.5" x 11" advertisement - \$1,000  
 Half-page 8.5" x 5.5" advertisement - \$600

10. Payment: Payment should accompany this application, NAF will notify

exhibitor of acceptance of this application within **five** business days of receipt.

Additional Exhibit Representatives: \$300 x _____	\$ _____
Additional Reps w/Educational Pass: \$395 x <u>2</u>	\$ <u>790</u>
Exhibit Booths: <u>\$2100</u> Booths x <u>1</u>	\$ <u>2100</u>
Sponsorship:	\$ _____
Advertisement:	\$ _____
<b>Total fees:</b>	<b>\$ <u>2890</u></b>

2. Exhibiting Company or Organization Information: (If different from above)

Company/Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Prov: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_

3. Exact wording for your exhibit booth identification sign:

BioMax Procurement Services

4. Name and title of exhibitor representative(s):

Primary Representative (included in exhibit fee):

Brianna Allen  
 First Last  
 Title Procurement Assistant Email (required) brianna@biomaxps.com

Additional Representative:

(Maximum of two (2) additional exhibitor personnel per purchased exhibit booth)

Susan Tennenbaum  
 First Last  
 Title C.E.O. Email (required) susan@biomaxps.com

Requires educational pass

Additional Representative:

Robert Sarkis  
 First Last  
 Title V.P. Operations Email (required) bob@biomaxps.com

Requires educational pass

Are you interested in membership?

Yes  No

For more information about NAF membership, contact Melissa Fowler at (202) 667-5881 ext. 217 or mfowler@prochoice.org.

*MSJ*

# ANNUAL MEETING REGISTRATION FORM

Each exhibitor attending pre-conference educational sessions or purchasing optional ticketed events must fill out a separate Annual Meeting registration form

## NAF Pre-Conference Events

## NAF Annual Meeting

SATURDAY, APRIL 5, 2014

MONDAY AND TUESDAY, APRIL 7-8, 2014

(Breakfast included; box lunches available for purchase on Tuesday)

### Full-Day Sessions *Check only one*

(Breakfast and Lunch included)

- |  | Early Bird Rate | Standard Rate |               |
|--|-----------------|---------------|---------------|
| <input checked="" type="checkbox"/> Second-Trimester Abortion Workshop | \$345           | \$370         | \$ <u>345</u> |
| <input type="checkbox"/> NAF Independent Providers' Meeting            | \$245           | \$270         | \$ _____      |
| <input type="checkbox"/> NAF Canadian Providers' Meeting               | \$175           | \$195         | \$ _____      |

### Half-Day Sessions

(Breakfast included for morning session, box lunches for purchase)

- |  |       |       |          |
|--|-------|-------|----------|
| Basics of First-Trimester Abortion Workshop, 9:00am - 1:00pm   |       |       |          |
| <input type="checkbox"/> Standard Registration                 | \$175 | \$200 | \$ _____ |
| <input type="checkbox"/> Medical, Nursing, or Clinical Student | \$100 | \$125 | \$ _____ |
| Clinicians for Choice Day, 1:00pm - 5:30pm                     |       |       |          |
| <input type="checkbox"/> NP, CNM, PA, or Nurse                 | \$135 | \$160 | \$ _____ |
| <input type="checkbox"/> NP, CNM, PA, or Nursing Student       | \$80  | \$105 | \$ _____ |
| Full-Day Combo Registration, 1:00pm - 5:30pm                   |       |       |          |
| <input type="checkbox"/> Standard Registration                 | \$275 | \$300 | \$ _____ |
| <input type="checkbox"/> NP, CNM, PA, or Nurse                 | \$150 | \$175 | \$ _____ |
| Latin American Providers' Meeting, 1:00pm - 5:00pm             |       |       |          |
| <input type="checkbox"/> Standard Registration                 | \$50  | \$65  | \$ _____ |
| <input type="checkbox"/> Box Lunch for Saturday                |       | \$66  | \$ _____ |

APRIL 6, 2014

### Full-Day Sessions *Check only one*

(Breakfast included; box lunches for purchase)

- |  | Early Bird Rate | Standard Rate |          |
|--|-----------------|---------------|----------|
| Counseling Skills Workshop   |                 |               |          |
| <input type="checkbox"/> Standard Registration   | \$275           | \$325         | \$ _____ |
| <input type="checkbox"/> Medical, Nursing, or Clinical Student                               | \$150           | \$200         | \$ _____ |
| Post-Graduate Seminar: Pre-Procedure Preparation and Evaluation                              |                 |               |          |
| <input type="checkbox"/> NAF Member, Physician   | \$335           | \$385         | \$ _____ |
| <input type="checkbox"/> NAF Member, Non-physician   | \$285           | \$335         | \$ _____ |
| <input type="checkbox"/> Third or more <b>non-physician</b> from the same NAF facility site* | \$255           | \$305         | \$ _____ |
| <input type="checkbox"/> NAF Retiree Member  | \$170           | \$220         | \$ _____ |
| <input type="checkbox"/> Non-member, Physician   | \$560           | \$610         | \$ _____ |
| <input type="checkbox"/> Non-member, Non-physician   | \$435           | \$485         | \$ _____ |
| <input type="checkbox"/> Resident  | \$200           | \$250         | \$ _____ |
| <input type="checkbox"/> Medical, Nursing, Clinical, or Law Student                          | \$150           | \$200         | \$ _____ |

### Half-Day Session

- |  |      |      |          |
|--|------|------|----------|
| Social Scientists' Research Meeting, 1:00pm - 5:00pm |      |      |          |
| <input type="checkbox"/> I plan to attend            | \$50 | \$65 | \$ _____ |
| <input type="checkbox"/> Box Lunch for Sunday        |      | \$66 | \$ _____ |

### Welcome Reception

No charge to Annual Meeting registrants. Please indicate if you plan to bring a guest.

- I will bring a guest(s) Number: \_\_\_\_\_ x \$60 each \$ \_\_\_\_\_

Guest(s) Name, Affiliation, and Title (for badges):

\_\_\_\_\_

Cost of attendance is for both days

Early Bird Rate Standard Rate

- |  |       |         |          |
|--|-------|---------|----------|
| <input type="checkbox"/> NAF Member, Physician   | \$525 | \$575   | \$ _____ |
| <input type="checkbox"/> NAF Member, Non-physician   | \$445 | \$495   | \$ _____ |
| <input type="checkbox"/> Third or more <b>non-physician</b> from the same NAF facility site* | \$395 | \$445   | \$ _____ |
| <input type="checkbox"/> NAF Retiree Member  | \$310 | \$360   | \$ _____ |
| <input type="checkbox"/> Non-member, Physician   | \$975 | \$1,025 | \$ _____ |
| <input type="checkbox"/> Non-member, Non-physician   | \$745 | \$795   | \$ _____ |
| <input type="checkbox"/> Resident  | \$385 | \$435   | \$ _____ |
| <input type="checkbox"/> Medical, Nursing, Clinical, or Law Student                          | \$225 | \$275   | \$ _____ |

### MONDAY SPECIAL EVENTS

#### Membership Luncheon

- |  |      |          |
|--|------|----------|
| <input type="checkbox"/> I plan to attend                    | \$70 | \$ _____ |
| <input type="checkbox"/> Number of guests _____ x \$105 each |      | \$ _____ |

Guest(s) Name, Affiliation, and Title (for badges):

\_\_\_\_\_

- |  |      |          |
|--|------|----------|
| <input type="checkbox"/> Box Lunch for Tuesday | \$66 | \$ _____ |
|--|------|----------|

### MEDICAL & NURSING STUDENTS' SCHOLARSHIP FUND

Your generosity subsidizes reduced registration fees for medical and clinical students attending the conference.

- |   |                |
|---|----------------|
| <input type="checkbox"/> I wish to donate the following amount: | \$ _____       |
|   | Total \$ _____ |

### TOTAL FEES

NAF Reserves the right to recalculate incorrect totals.

- |  |                |
|--|----------------|
| Total fees for Exhibitor Space             | \$ <u>2890</u> |
| Total fees for Annual Meeting Registration | \$ <u>345</u>  |
| Total Due NAF:                             | \$ <u>3235</u> |

- Enclosed is my check for \$ \_\_\_\_\_

Charge total fees to my:

- VISA  MasterCard  American Express

Card number

Expiration date

CID

Name of card holder

Signature of card holder

\*Third or more registrations must be received at the same time.

All prices are in U.S. dollars.

Exhibit 6



**CONFIDENTIALITY AGREEMENT FOR NAF ANNUAL MEETING  
APRIL 5 – 8, 2014**

It is NAF policy that all people attending its conferences (Attendees) sign this confidentiality agreement. The terms of attendance are as follows:

1. **Videotaping or Other Recording Prohibited:** Attendees are prohibited from making video, audio, photographic, or other recordings of the meetings or discussions at this conference.
2. **Use of NAF Conference Information:** NAF Conference Information includes all information distributed or otherwise made available at this conference by NAF or any conference participants through all written materials, discussions, workshops, or other means. NAF Conference Information is provided to Attendees to help enhance the quality and safety of services provided by NAF members and other participants. Attendees may not use NAF Conference Information in any manner inconsistent with these purposes.
3. **Disclosure of NAF Materials to Third Parties:** Attendees may not disclose any NAF Conference Information to third parties without first obtaining NAF's express written consent, which will not be unreasonably withheld. An Attendee may distribute NAF Conference Information to the Attendee's employees without written consent, provided that the Attendee instructs each such employee concerning the Attendee's obligations under this Agreement. Attendees are responsible for ensuring that any third party (including employees) to whom it discloses NAF Conference Information complies with the terms of this Agreement, and are subject to enforcement, as described below, if any such third party (including employees) fails to comply.
4. **Requests for disclosure of NAF Conference Information:** Upon learning that NAF Conference Materials are or are likely to become the subject of a discovery request in a judicial, legislative, administrative, or other legal proceeding or investigation, Attendees must: (a) immediately notify NAF, (b) cooperate with NAF (if NAF so requests) in taking all lawful steps to resist or narrow the request or requirement, and (c) if disclosure is required or deemed advisable by NAF, cooperate with NAF in obtaining a protective order or other reliable assurance that the NAF Conference Information will receive confidential treatment.
5. **Inadvertent Disclosure of NAF Conference Information:** In the event that an Attendee discovers that he or she has inadvertently disclosed any NAF Conference Information to any third party without having first obtained NAF's express written permission, the Attendee must immediately notify NAF and shall cooperate with NAF in retrieving the NAF Conference Information or taking other reasonable steps to prevent further unauthorized disclosure.
6. **Enforcement:** NAF reserves the right to terminate the membership (where applicable) of any Attendee found to violate this agreement and/or take legal action to seek redress for any violations of this Agreement.

By signing below, you hereby agree to comply with all of the terms of this Agreement:

Brianna Allen  
Name (Please print clearly.)

[Handwritten Signature]  
Signature

4/5/14  
Date

B:O Max  
Name of Organization

\_\_\_\_\_  
Professional Title



CONFIDENTIALITY AGREEMENT FOR NAF ANNUAL MEETING  
APRIL 5 – 8, 2014

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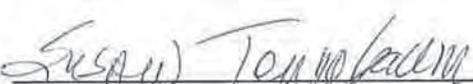
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Exhibit 7

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## Company

BioMax Procurement Services, LLC is a biological specimen procurement organization headquartered in Norwalk, CA. BioMax provides tissue and specimen procurement for academic and private bioscience researchers. Our commitment is to provide the highest-quality specimens with efficient, professional service to facilitate world-changing discoveries.

## About our CEO

Susan Tennenbaum is a passionate patient advocate and entrepreneur with a vision to bridge the gap between routine medical practice and cutting-edge medical research. She has worked in surgical offices and patient advocacy. She founded BioMax Procurement Services to help give patients and providers an opportunity to give back and to connect medical researchers with critical biospecimens.

Exhibit 8

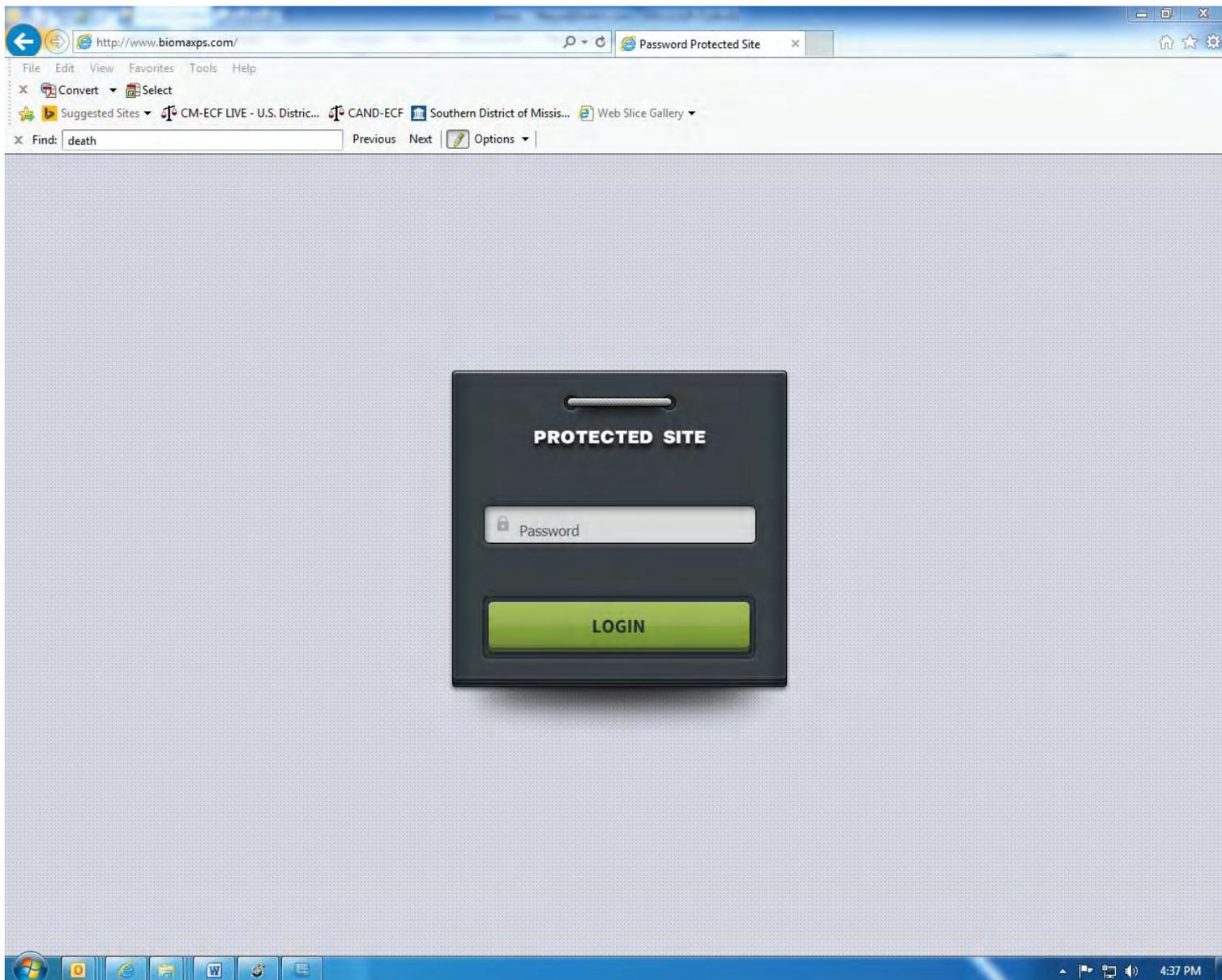


Exhibit 9



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**SHOW:** THE O'REILLY FACTOR 8:00 PM EST

July 15, 2015 Wednesday

**TRANSCRIPT:** 071501cb.256

**SECTION:** NEWS; Domestic

**LENGTH:** 7599 words

**HEADLINE:** Obama Defending the Iranian Nuke Deal; Kate's Law; Planned Parenthood Under Fire

**BYLINE:** Bill O'Reilly

**GUESTS:** Jessica Tarlov, Adam Goodman, Jessica Ehrlich

**BODY:**

BILL O'REILLY, FOX NEWS HOST: THE O'REILLY FACTOR is on. Tonight.

(BEGIN VIDEO CLIP)

BARACK OBAMA, PRESIDENT OF THE UNITED STATES: Is it possible that Iran decides to try to cheat despite having this entire inspection verification mechanism? It's possible.

(END VIDEO CLIP)

O'REILLY: President Obama under fire for the Iranian nuke deal and illegal immigration. Tonight, the question, is the President looking out for the country or himself? Talking Points will address it.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: I would say a lot of other people want liver for that reason, most providers will do this case under ultrasound guidance so they'll know where they're putting their forceps.

(END VIDEO CLIP)

Obama Defending the Iranian Nuke Deal; Kate's Law; Planned Parenthood Under Fire Fox News Network July 15, 2015 Wednesday

O'REILLY: A shocking undercover report showing Planned Parenthood discussing selling organs of aborted babies. We will show you the tape.

(BEGIN VIDEO CLIP)

UNIDENTIFIED MALE: With this tragic murder has come a national focus on the sanctuary city policies of San Francisco.

(END VIDEO CLIP)

O'REILLY: Also tonight, the city of San Francisco under enormous pressure to crack down on criminal aliens. We will continue our reporting this evening.

Caution, you are about to enter the No Spin Zone. THE FACTOR begins right now.

Hi, I'm Bill O'Reilly. Thanks for watching us tonight.

President Obama defending the Iranian nuke deal and other controversial issues. That is the subject of this evening's "Talking Points Memo".

After reading details of the nuke deal I can tell you that Iran got the better of the negotiations. The undeniable fact is that the Iranians do not have to submit to snap inspections, so they can cheat if they want to and they may get away with it. 24 days -- a long time to wait before inspectors can examine suspicious activities.

Now, it is true some Americans and the Israeli government would oppose a nuke deal with Iran no matter what. The only thing that would win them over would be a total cessation of nuclear activity in that country to which the mullahs would never agree.

It is also true that President Obama sees the issue in stark terms. Either you make a deal or Iran develops a nuke and war breaks out.

But here the President makes a mistake. He could have held on a bit longer and upped the sanctions against Iran. That would have given the U.S.A. more leverage. Mr. Obama's press coverage today -- press conference today, I should say, was very instructive. He took a few questions and answered them as a college professor would, with long explanations full of asides. There were no follow-ups, no challenges to his answers.

So that's what Talking Points will do right now. Here's the toughest moment of the press conference.

(BEGIN VIDEO CLIP)

MAJOR GARRETT, CBS CORRESPONDENT: As you well know, there are four Americans in Iran -- three held on trumped up charges, according to your administration, one whereabouts unknown. Can you tell the country, sir, why you are content with all the fanfare around this deal to leave the conscience of this nation, the strength of this nation unaccounted for in relation to these four Americans?

And last week the chairman of the joint chiefs of staff said under no circumstances should there be any relief for Iran in terms of ballistic missiles or conventional weapons. It is perceived that that was a last-minute capitulation in these negotiations making the Pentagon feel you've left the chairman of the joint chiefs of staff hang out to dry. Could you comment.

OBAMA: I have to give you credit, Major, how you craft those questions. The notion that I am content, as I celebrate with American citizens languishing in Iranian jails, Major, that's nonsense. And you should know better.

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(END VIDEO CLIP)

O'REILLY: Mr. Obama went on to give a long, windy answer that made two points. The four American hostages being held in Iran could not be part of the negotiation according to him because that would have empowered Iran. And the U.S.A. will closely monitor any missiles and weapons to make sure Iran doesn't give them to terrorists.

On the first point, the President certainly could have asked for the Americans to be released and should have. Maybe he is working behind the scenes -- maybe.

On the weapons front, the Iranians will get them in five to eight years and will likely use them, including ballistic missiles. By that time Mr. Obama will be making millions lecturing.

But all of that is small ball to the President. Here's the crux of his argument.

(BEGIN VIDEO CLIP)

OBAMA: The point I have repeatedly made and is I believe is hard to dispute is that it will be a lot easier for us to check Iran's nefarious activities, to push back against the other areas where they operate contrary to our interests or our ally's interests if they don't have a bomb.

(END VIDEO CLIP)

O'REILLY: It's the old keep your enemies closer philosophy. Now, to address the very large concern that 24 days to inspect is absurd the President said this about confronting Iran's ability to cheat.

(BEGIN VIDEO CLIP)

OBAMA: In the agreement, we have set it up so we can override Iran's objection. And we don't need Russia or China in order for us to get that override. As for the fact that it may take 24 days to finally get access to the site, the nature of nuclear programs and facilities is such, this is not something you hide in a closet.

(END VIDEO CLIP)

O'REILLY: Maybe. But there is no question that if Iran decides to cheat, it will have breathing room to obscure the situation all over the place. It will take months.

In the press conference today, Barack Obama demonstrated once again that he is a true believer in himself. His demeanor clearly showed he has no doubts that he did the right thing and once again diffused conflict overseas. That has been his foreign policy from the very beginning -- avoiding armed confrontation. And, we can see the result of that as the world absorbs a tremendous amount of instability and violence.

Talking Points is not a knee jerk platform. War with Iran would be a disaster but this nuke deal is a gamble. One that like the total pullout from Iraq could lead to terrible consequences.

President Obama, the gambler, believes he knows when to fold them. He did that for a deal that has delighted the mullahs and divided Americans. A deal that will clearly define itself only in years to come. And that's the memo.

Next on the rundown, "Factor Investigation". Will the Presidential contenders support tough action against illegal alien felons? Kate's Law - - will they do that? Right back.

O'REILLY: And in the "Impact Segment" tonight: how the Presidential contenders see Kate's Law. As you may know, we are encouraging Congress to pass new legislation that would mandate that any illegal alien who has a felony conviction and is deported would be sentenced to a mandatory five- year federal prison term if that criminal comes back

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to the U.S.A. No wiggle room. And if the local authorities like the San Francisco folks refuse to arrest the felons they themselves could be arrested.

We asked all the declared presidential contenders if they would support such as law. Those who said yes they would support Kate's Law are: Senator Ted Cruz, Senator Lindsey Graham, Governor Rick Perry, Governor Bobby Jindal, Dr. Ben Carson and Donald Trump.

Senator Marco Rubio and Governor Jeb Bush would not tell us if they would support Kate's Law -- that surprised me. This is a vital issue and to sit it out doesn't seem to be in the interest of the public. If you oppose Kate's Law, tell the folks why, guys. To say nothing, disturbing to me.

Senator Rand Paul also noncommittal saying he does not take a position on legislation not yet written.

Governor Mike Huckabee says he would support a law that would call for immediate deportation of illegal alien felons. The problem with that, Governor, they come back as we have proven in our reporting of the Kate Steinle murder.

Hillary Clinton and Bernie Sanders ignored our request -- not unusual for Mrs. Clinton.

On the senate side though, there is some very good news. Senator Chuck Grassley chairman of the judiciary committee has scheduled a hearing on illegal alien crimes for next Tuesday. Parents of Kate Steinle have been invited. We are hoping they will attend.

Summing up, if the United States congress cannot pass a law as simple as Kate's Law that would imprison alien felons who come back after deportation. If Congress can't do that, this country is in big trouble.

Joining us now from Tampa, Adam Goodman, Republican strategist; here in New York City Jessica Tarlov, a Democratic strategist. Do you think Kate's Law will pass?

JESSICA TARLOV, DEMOCRATIC STRATEGIST: I don't think it will pass. I think that it will spark a ton of great discussion and I'm hopeful the Democrats will come out in support of tougher rules for illegal aliens who are in this country and have been convicted of felonies prior. But I think the mandatory sentencing five years is just going to be too harsh.

O'REILLY: Too harsh?

TARLOV: I do. I'm not justifying what has happened but I think the argument will go that we are lumping everyone together into one pod.

O'REILLY: We're only lumping all the felons together into one pod.

TARLOV: Right. But there are different levels of felonies that we are dealing with here.

O'REILLY: Of course there are but there aren't different levels of deportation. Once you are deported, if you come back --

TARLOV: Absolutely.

O'REILLY: -- and you are a felon, you are in jail.

Now, you say you don't think it's going to pass. The Republicans control the Senate and the House. You don't think most Republicans are going to vote for this.

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TARLOV: I mean we saw Jeb Bush and Marco Rubio aren't coming out about it right now.

O'REILLY: No, they're sitting it out.

TARLOV: I mean they don't want to alienate the Hispanic population.

O'REILLY: Do you really think the think the Hispanic population is going to be alienated by deporting criminal felons?

TARLOV: I think that there's been a population or some segments of it will feel that there are variations within this pool and they will say that there is a difference between someone like a Francisco Sanchez who did this terrible thing and --

O'REILLY: He's the alleged murderer of Kate Steinle.

TARLOV: Exactly -- sorry. And a mother who was deported for a felony but is coming back to be with her children or to take care of her mother.

O'REILLY: It's a special circumstance but you can't have a carve out on a law like this. This is designed to protect Americans on the street.

How about you, Mr. Goodman, do you think it's going to pass?

ADAM GOODMAN, REPUBLICAN STRATEGIST: Bill, first of all -- I want to thank you for leading this effort. Let me begin by saying there is nothing intolerant about refusing to tolerate illegal immigration -- nothing. It's wrong and people are getting hurt. And it's a travesty to imagine that the last three words that Jim Steinle will ever hear from his daughter Kate are "Help me, dad."

We have got to do something about this. And I think if congress does nothing else this year, to show they have conscience and resolve, they pass Kate's Law.

O'REILLY: But do you think they will?

GOODMAN: You know, Washington works in very mysterious ways. The question is should they? The answer is absolutely.

O'REILLY: Well, yes. I mean look -- that isn't the question. The logistical question is are there enough Republican votes in both the Senate and the House to pass it?

Now where we are right now is the Judiciary Committee in the Senate which is big and Grassley is behind this is going to discuss it next Tuesday. There's going to be a big hearing, especially if Kate Steinle's parents show up. It's going to be huge -- all right.

Everybody is going to get the message that hey something has got to be done about this. That's step number one.

Step number two is then writing the law that's very specific that it doesn't punish low level people, just felons. A felony is a serious crime. All right? No matter what it is.

And step number three then is getting the votes and you still don't think, you know, that the Republicans are going to rally around this? I would be stunned if they don't.

TARLOV: Well, I'm hopeful that they will rally around making changes to our system. I think and as I said before.

O'REILLY: They have to make specific changes. You can't do comprehensive immigration reform.

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TARLOV: Well, I think that this could be attached to comprehensive reform?

O'REILLY: It can't. It's never going to get done.

(CROSSTALK)

O'REILLY: Not in a campaign year it will not get done and then President Obama has got to sign it then, Mr. Goodman. Do you think he would sign a law like this if it gets passed?

GOODMAN: Well thank God we have a presidential campaign because I think the focus now is really squarely on this issue. The biggest thing, Bill, that people are really angry about, upset about is nothing seems to be working in America the right way anymore.

O'REILLY: It isn't working.

GOODMAN: Immigration right now -- and you are right, immigration is like Exhibit A.

O'REILLY: Yes, I mean -- the myth that the border is secure has just blown up by this murder in San Francisco where the guy came back six times and another one in Spokane nine times. So we all know that.

Were you surprised when Jeb Bush and Marco Rubio -- two, you know, serious contenders on the Republican side wouldn't support Kate's Law when we asked them yes or no? They wouldn't say anything. Were you surprised?

GOODMAN: I do think that both of them -- I think every Republican contender, Bill is in favor of securing the border.

O'REILLY: But that's not the question.

GOODMAN: I think they should.

O'REILLY: That's not the question.

GOODMAN: I understand your question. I understand your question. I think they should support Kate's Law.

O'REILLY: No, were you surprised? You are a Floridian. They're from Florida. Are you surprised they didn't?

GOODMAN: Yes I am surprised they didn't support.

O'REILLY: So am I.

Now, you yourself -- if you were a congress person, Jessica, would you vote for Kate's Law?

TARLOV: I would vote for some variation on it.

O'REILLY: No, there isn't going to be a variation. This is the way it's going to be.

TARLOV: For five years. I would not vote for five years mandatory sentencing.

O'REILLY: That's too harsh.

TARLOV: I think it is. I think it also --

O'REILLY: No, no, no. Let me get your thinking here. A man or woman who comes from the United States from a foreign country -- it doesn't have to be Mexico -- commits a felon and is convicted which is not an easy thing to get,

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conviction. Deported and then comes back again, five years is too harsh?

TARLOV: Well, I think it depends on what they came back to do.

O'REILLY: They came back illegally.

TARLOV: Yes, I understand they came back illegally and I totally respect that side the argument. It is a crime to do that. But if they came here to be with their family, if they came here for opportunity.

O'REILLY: If they have family members here they can come legally.

TARLOV: Well, not if there's long procedures to get that to happen.

O'REILLY: Oh so because it's a long procedure they can jump the border.

TARLOV: I'm not trying to encourage illegal immigration. I'm trying to encourage legal immigration.

O'REILLY: I'll tell you what. Did you see the interview with the Steinles?

TARLOV: I did. It was very moving.

O'REILLY: Ok. All right.

Now, this is going to happen again. It's going to happen again. Unless congress does something it's going to happen again. We have very bad people in here from foreign countries who have committed felony after felony after felony and you wouldn't put them away? That frightens me.

So I think he think it's going to pass. I'm going to be optimistic. It's a good debate you guys. We appreciate you coming in.

We'll have a brand new BillOReilly.com poll question for you. Do you believe -- do you believe Congress will pass Kate's Law? Yes or no. BillOReilly.com.

Directly ahead, shocking undercover video showing a doctor working for Planned Parenthood discussing selling the organs of aborted babies.

Then later, apparently Mexico doesn't want America's help in finding escaped drug king pin Joaquin Guzman. what does that tell you?

THE FACTOR's coming right back.

O'REILLY: "Unresolved Problem Segment" tonight: Planned Parenthood. The organization has been under fire for telling minors how to avoid statutory rape, for promoting questionable abortions, for taking public funding when it advocates a strong pro-choice position. A group called the Center for Medical Progress, a pro-life concern, has been investigating Planned Parenthood for three years. About a year ago they performed an undercover sting on Dr. Deborah Nucatola, the senior director of medical services at Planned Parenthood.

During the secretly taped conversation, Dr. Nucatola talked about selling the body parts of aborted babies.

(BEGIN VIDEO CLIP)

DR. DEBORAH NUCATOLA, PLANNED PARENTHOOD: I would say a lot of other people want liver. And for that reason, most providers will do this case under ultrasound guidance, so they'll know where they're putting their forceps. We've been very good at getting heart, lung, liver because we know that so I'm not going to crush that part. I'm

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going to basically crush below, I'm going to crush above and I'm going to see if I can get it all intact.

At the national office we have a litigation and law department which just really doesn't want us to be the middle people for the issue right now. But I will tell you that behind closed doors these conversations are happening with the affiliates.

(END VIDEO CLIP)

O'REILLY: Wow. Joining us now from Los Angeles, David Daleiden, leader of the undercover investigation. First of all, what was the premise of talking to the doctor, Mr. Daleiden? What were you trying to accomplish there? What did you tell her about why you wanted to speak with her?

DAVID DALEIDEN, CENTER FOR MEDICAL PROGRESS: Sure. So, our investigators, and thanks for having me on the show, Bill. Our investigators from CMP were posing as representatives of a middle man biotech company that was wanting to partner with Planned Parenthood clinics in order to purchase the body parts of the babies that they abort. And in doing that we were modeling ourselves after real life middleman biotech companies -- multiple ones that are partnered with Planned Parenthood clinics across the country.

O'REILLY: All right. So biotech companies need body parts for research -- all right. And the body parts in question were exclusively going to be taken from babies or fetuses depending on your point of view, which were aborted but they would have had to have been aborted late term because the body parts aren't formed until the third trimester. Isn't that correct?

DALEIDEN: Well, actually most of the body parts are there in the first trimester. But the reason that the requests come in for late second trimester body parts is partly for practical considerations that it's a lot easier to identify the body parts when the baby is bigger.

O'REILLY: Yes, that's what I'm getting at. It's not of use to a bio firm unless they are defined and the body parts can be used. Now, the doctor didn't say she would sell or Planned Parenthood would sell body parts, did she?

DALEIDEN: That's not entirely correct. If you look at the full footage of the entire conversation, she actually describes the current biotech company that the Planned Parenthood Clinic she works on in Los Angeles is partnered with a company called Novagenics Laboratories (ph). And Planned Parenthood Los Angeles routinely and for many years actually has been supplying their aborted fetal parts to that company.

O'REILLY: Is that legal to do?

DALEIDEN: It is legal to donate human organs under current law. It is not legal to sell human body parts whether they are adult or fetal any age. But Planned Parenthood has been involved in selling the body parts of the babies that they abort for decades now at this point.

O'REILLY: Are you saying they are doing something illegal?

DALEIDEN: Absolutely.

O'REILLY: Have you reported this to the authorities?

DALEIDEN: Bringing our information in front of law enforcement was always a goal that CMP had from the beginning of this project. And as we can see in the news out of Texas and Louisiana just recently in the past 24 hours, the entire state governments of both of those states are taking this very seriously and have opened up their own investigations into Planned Parenthood's sale of baby parts as have two congressional committees now.

O'REILLY: Is that because of your information to Texas and Louisiana?

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DALEIDEN: My understanding is that it's a direct result of the video that we posted yesterday.

O'REILLY: Ok. So you firmly believe that for years, and these are your words, Planned Parenthood has been violating the law and selling body parts to companies. Is that what you firmly believe?

DALEIDEN: Absolutely. We spent three years with our actors and investigators undercover deeply embedded with Planned Parenthood affiliates and top level executives. We have heard from their own mouths many, many times over that they sell the body parts and that they make money off of doing so and they have the profit motive in doing so.

O'REILLY: Is there a federal law against it or just state law?

DALEIDEN: There is both federal and state laws against the trafficking of aborted fetal body parts. It's a big story. It's a huge story?

O'REILLY: This could destroy Planned Parenthood if true and if there are indictments coming from the Justice Department, which is always dicey but certainly the FBI should be involved. And you say the states of Louisiana and Texas are now opening their investigations, correct?

DALEIDEN: Exactly.

O'REILLY: Any other action being taken? Any civil action? Anything like that?

DALEIDEN: Not that I'm aware of. Like I said, there are two state governments currently that have announced that they are investigating Planned Parenthood for sale of aborted fetal tissue and two congressional committees have now also announced today that they're taking the allegations very seriously and opening up their own investigation.

O'REILLY: All right Mr. Daleiden, keep us posted. We appreciate you appearing tonight.

Plenty more ahead as THE FACTOR moves along this evening.

A father in California saving his 12-year-old daughter from a sexual predator. Frightening situation we will bring to your attention.

Also, why did a bill to ban sanctuary cities in Texas, a conservative state, fail. Why did the bill fail there?

Our "Truth Serum" correspondent is on the case. We hope you stay tuned for those reports.

O'REILLY: "Truth Serum" segment tonight, two hot topics in New York falling apart. And the state of Texas failing to pass a law banning sanctuary cities.

With us now here in New York City, Eric Shawn and from Washington Shannon Bream both a FOX News correspondent. So, Shannon I'll begin with you. Tell me about the proposed law in Texas. What did it say and why did it go down?

SHANNON BREAM, FOX NEWS ANCHOR AND SENIOR CORRESPONDENT: Bill, basically what it would have said and it got through committee, it would have said that local cities, local counties, they have to comply with federal immigration laws basically telling them they couldn't just decide they were going to be sanctuary cities. The reason it didn't pass is because it couldn't even get to a vote on the Texas Senate floor and that's because two Republicans joined all of the Democrats in saying they wouldn't vote for it so they couldn't get it to the floor. And those Republicans had a lot of different reasons about why they took that path.

O'REILLY: Tell me, I mean, there they are. Senator Estes and Senator -- he is from Wichita Falls. And Kevin Eltife. I don't even know where he is from. Do we know? Anyway, why did these Republicans vote against cancelling

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the sanctuary cities?

BREAM: Well, there are couple of arguments. First of all, they were those who've said that it took away local control. They didn't want to be telling localities what to do, that's a not the state's role.

O'REILLY: Okay. That's absurd. Because they're saying, you know, look, El Paso, Dallas, Houston, I believe. Austin, big cities, big concerns, and they are saying blank you to the federal government. So these Republicans bought into that? That's hard to believe.

BREAM: Yes, they said we don't want to put the extra cost on local police to have to do anything.

O'REILLY: The cost?

BREAM: And so, we don't think we should support it. We shouldn't tell localities what to do and we should make them pay for it. And there were a lot of accusations by Democrats that the Republicans were racist. There were a lot of public charges.

O'REILLY: Of course.

BREAM: And so, of course there were the perception issues and there were other Republicans who said, listen, I don't think this is a good path for the party to go down. It doesn't help us with voters. And they worried that it would be seen as specifically targeting Latinos whether they were here illegally or not.

O'REILLY: All right. There you go. All right. New York City, we have a terrible prison here Rikers Island, it's a local prison. It's an awful situation, always has been. And the liberal mayor of the town de Blasio doesn't like it. Wants to reform. It hasn't been able to reform it in 18 months. Hasn't improve it at all. He is a big talk guy. But now the city says they are not going to charge low level offenders with crimes and throw them over to Rikers if they can't make bail, right?

ERIC SHAWN, FOX NEWS AND SENIOR CORRESPONDENT: Well, they are not going to be given bail. There is a problem in Rikers Island. Some people cannot afford bail so they sit there for months.

O'REILLY: They sit there. Right.

SHAWN: And a couple of years in fact. And there is a tragic case of a 16-year-old young man named Kalief Browder. He allegedly stole a backpack, so they give them \$3,000 bail.

O'REILLY: He can't make it.

SHAWN: If the family can't make it he sits there, Bill, for three years, he is he beaten by some of the inmates, he's puts in solitary. He gets out. The poor young man.

O'REILLY: Because he stole a backpack.

SHAWN: Allegedly but the charges were dropped. They get dropped.

O'REILLY: Right. But he sit there for three years.

SHAWN: Yes. And he committed suicide last month. Tragedy.

O'REILLY: All right. And you can't justify that on any level, all right? But to react to that now, no bail for who?

SHAWN: Well, they say it's misdemeanors and low level --

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O'REILLY: Felons.

SHAWN: Felonies. Nonviolent felonies.

O'REILLY: That means dope dealers.

SHAWN: Well, they don't say that. They say --

O'REILLY: But that's what it means.

SHAWN: But they don't say that, they say computer tampering, for example.

O'REILLY: That's not a felony.

SHAWN: Well, they say that's what it is.

O'REILLY: Okay.

SHAWN: The nonviolent --

O'REILLY: You know what it is though. Shawn and I came up with local news here reporting in New York City. I was on Channel 2, he was on channel 5, you know what that is.

SHAWN: We worked at Channel 11 together.

O'REILLY: Just for a brief time. But we know the streets.

SHAWN: Yes, sure.

O'REILLY: If you don't have a gun and you are selling heroin, you are a nonviolent offender. If you have a knife it's okay. Because that's what Obama is doing. And we're going to have investigation tomorrow on who President Obama is letting out of prison, who he is pardoning, all big time drug dealers. But they didn't weren't violent when apprehended.

SHAWN: Let me point out, they don't say that these are drug offenders.

O'REILLY: They don't say that. Correct.

SHAWN: Correct. And there is a pilot program they are starting, and see how it goes.

O'REILLY: All right. I know how it's going to go. More chaos.

When we come right back, Mexico doesn't want the U.S.A. to help catch escaped drug cartel leader Joaquin Guzman. We are investigating that.

And Martha MacCallum on a father who saves his 12-year-old daughter from possible rape and how that all went down. Those reports after these messages.

O'REILLY: Thanks for staying with us. I'm Bill O'Reilly in the "Personal Story" segment tonight. As you may know Mexico has been accused of being extremely corrupt. The video released by the Mexican government shows Joaquin Guzman perhaps the biggest narcotics trafficker in the world escaping from a Mexican prison last Saturday night. There were cameras in Guzman's cell but somehow prison authorities did not see him shimmering down into an elaborate underground tunnel. Right now Guzman remains at large. Apparently the U.S.A. has offered to help Mexico track him down but the Mexicans have not responded.

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Joining us now from Tampa, Jessica Ehrlich, democratic strategist and here in New York City Andrea Tantaros, co-host of "Outnumbered." So, how you read this story?

ANDREA TANTAROS, FOX NEWS CO-HOST, "OUTNUMBERED": I think it's Mexican politics. And I also think that despite what our administration says, we don't have the greatest relationship with the Mexican government. Now, there is a lot of belief, I think in Latin-American countries, especially Mexico, that if you work with the U.S., you are seen as their lackey. I do. I think that there is inferiority complex that the Mexican government has.

O'REILLY: Uh-mm.

TANTAROS: And look, Bill, this escape was so high profile and so humiliating to the Mexican government.

O'REILLY: Particularly the President Nieto.

TANTAROS: That's right. But the last thing they want to do is look like they are relying on the U.S. for help.

O'REILLY: I mean, look, if you catch him and Americans help and they would help quietly, I guess, if you wanted to, with satellite imaging maybe drop a drone on this guy's head.

TANTAROS: Well, you know, if you read the reporting on this story, I do think there is some cooperation behind the scenes. But the Mexican government does not want you to know that. They do not want to see that they are the lackey of the United States. And culturally this El Chapo, especially in Mexican culture is viewed almost like a Robinhood. They created jobs --

O'REILLY: He murdered thousands of people.

TANTAROS: You know, what Bill, they have different perception because he creates jobs. There's sort of this "People" magazine Robin Hoodesque figure into society.

O'REILLY: That's how Hitler got created. He created thousands of jobs.

TANTAROS: That's how Americans look at him. But in Mexican culture is slightly different.

O'REILLY: Okay. What do you say? Do you think the Mexican government is corrupt, Jessica?

JESSICA EHRLICH, DEMOCRATIC STRATEGIST: Well, I definitely think we are seeing a pattern of corruption that's going on. You know, I don't know about a particular instance here but it just seems highly unlikely that this would have taken place if there wasn't corruption at the highest levels all the way down through the prison guards.

O'REILLY: Yes. There haven't been any arrests at the prison yet.

EHRLICH: Right.

O'REILLY: You know, really, I hate to do this but it is a joke. It is a joke.

EHRLICH: Yes.

O'REILLY: But it's a dangerous joke. And thousands of people, mostly Mexicans, are getting killed by El Chapo, okay? And the cartels down there, which run the country, the cartels run Mexico. Nieto doesn't run Mexico. The gangsters run Mexico.

EHRLICH: Uh-mm.

O'REILLY: And that of course believes over pardon upon to the United States. And that is the genesis of border

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problems. The narcotics coming from El Chapo's gang and all the people-smuggling run by the cartels as well. So, this all ties in. And President Nieto is just like all the other Mexican presidents powerless to stop it. He is powerless to stop it. Okay, Jessica, I want to ask you a couple of questions here about the United States.

EHRlich: Okay.

O'REILLY: Obama economy, are you happy with the Obama economy?

EHRlich: I think we have definitely made improvements for sure.

O'REILLY: So we are improving, all right, in your opinion.

EHRlich: Yes.

O'REILLY: And you would say that Americans are prospering, most of us? They are prospering now after six-and-a-half years of the President's tenure? Are we prospering?

EHRlich: I think we are getting there but there is a lot more that needs to go on and certainly, you know.

O'REILLY: Okay. But things are looking up here, right?

EHRlich: We haven't fully recovered.

O'REILLY: Okay.

EHRlich: Things are starting to look up.

O'REILLY: Did you know that when President Obama took office there were 32 million Americans on food stamps. Right now there are 46 million, 46 million. All right. That is an increase of 43 percent. And it has not declined in the improving economy. In fact, it's going up. Can you explain that?

EHRlich: Yes. I mean, I'm not surprised at all, actually. I mean, we have seen a small drop month over month in the past year. But really what we are looking at is the problem that's been happening in terms of yes, we have had a few more jobs but the wages have remained stagnant. And we have seen this hitting not only the middle class all the way down to the poorest.

O'REILLY: Okay. But that doesn't mean that the economy after six- and-a-half years isn't really good if wages are stagnant and this welfare state that we are setting up here.

EHRlich: It's not a welfare state. You have corporations that are making record profits. So there are -- and the markets have been turning and making profits but the money is not making it down. Wages have not increased because the company --

O'REILLY: That's because competition, there is no competition.

EHRlich: Still holding on to the money.

O'REILLY: Okay.

EHRlich: There needs to be more competition but there also needs to be a change in the Fed's I think in terms of the rate and companies start spending.

O'REILLY: Look, that's what happens in a capitalistic culture that Bernie Sanders and perhaps Hillary Clinton want to change. I think that President Obama is kind of happy with the welfare state because it creates dependence on his

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party. Its simplistic may not be fair but I think that's what's going on.

TANTAROS: Oh, yes. Because when you are dependent on the government, then the government can control you even more and then you can use that to get more votes.

O'REILLY: Well, you have to vote for the party that's going to give you --

TANTAROS: That's right.

EHRlich: I mean, I totally. I have to disagree because --

O'REILLY: Wait Jessica, let Andrea --

TANTAROS: But the food standpoint is very important because, Bill, it's a key economic indicator that more people can't put food on their table. And so even though you can talk about corporate profits, the poor are getting poorer and as the Associated Press reported, a lot of --

EHRlich: And the rich get richer.

TANTAROS: -- ObamaCare under President Obama.

EHRlich: Also, we're talking about -- we want to raise the minimum wage and if you want to raise --

TANTAROS: It would make everything worse, Jessica, it would make everything worse.

(CROSSTALK)

EHRlich: The cost of living has increased and they can't put food on the table.

O'REILLY: Look, I got to wrap it up here. I'm for raising the minimum wage. So, I want people to work and not take the dole. However if you raise minimum wage, then the jobs will go down. All right. There will be fewer jobs.

Ladies, thank you. Martha MacCallum on deck. Eighteen-year-old girl runs down four other women with her car.

(INAUDIBLE) (SHOUTING)

We will tell you what happened in just a few moments.

O'REILLY: "Back of the Book" segment tonight, did you see that? We have two very disturbing situations. First one in Southern California where a father noticed that his 12-year-old daughter disappeared from the house at 2:00 a.m.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: Tim Leblanc happened to be up around 2:00 Monday morning and noticed his 12-year-old's daughter's bedroom window open and she wasn't home.

TIM LEBLANC, 12-YEAR-OLD DAUGHTER MISSING: I was scared to death. Everybody tells me that I'm overprotective and apparently I'm under-protective.

UNIDENTIFIED FEMALE: Tim and his older son looked around their Nuevo neighborhood and found her nearby with a man she met on social media.

LEBLANC: Well, he had this door open about this wide right here and had his arm around my daughter and was kind of, you know, sweeping her in, putting her into the truck. I pulled up right here.

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The dad says he used self-defense to knock the man to the ground and took this photo. Police later arrested 27-year-old Scott Stilwell from San Diego County.

(END VIDEO CLIP)

O'REILLY: Here now to explain further. FOX News anchor Martha MacCallum. So, who is the perp?

MARTHA MACCALLUM, FOX NEWS ANCHOR: Scott Stillwell is his name. He's 27-years-old. He told this girl that he was 16 when he was talking to her online. She is 12-years-old. The father -- they had a few words before he knocked him out and he said it was clear to him that this guy was about to take his child and never bring her back.

O'REILLY: Sure, 2:00 a.m. with a 12-year-old. Does this guy have a record, Stilwell?

MACCALLUM: He does not have a record --

O'REILLY: Really?

MACCALLUM: But he's being held without bail.

O'REILLY: Right.

MACCALLUM: Twenty five thousand dollars.

O'REILLY: Right.

MACCALLUM: Twenty five thousand dollar bail, he's being held right now. He's up on three charges of a lewd act, intention to commit a lewd act and showing her bad material online. But, you know, the extraordinary other part of this story is what you said in the beginning, if this man had been one minute later --

O'REILLY: Look, if he didn't wake up --

MACCALLUM: If he didn't woke up in the middle of the night at 2 a.m. in the morning happens to see that she is gone and happens to catch her on the corner. This is actually a good story in the end. Because one minute later and this would be an entirely different story.

O'REILLY: Right. The guy, it is almost miraculous he woke up anyway and he goes in and he checks on his daughter as he should if you're up in the middle of the night. But this social media business is out of control. Everybody should know it is out of control. The children have access to this thing. No matter what the parents do. It's almost impossible unless you take the machines away and then you ruin their social lives. This guy, this father, he knocked this guy out. I mean, and again, he is not being charged with anything.

MACCALLUM: He did everything right in my opinion.

O'REILLY: Right. He's not being charged of anything.

MACCALLUM: Absolutely. He says it was self-defense. And you know, every parent should show this story to their child. You have to show these scary stories.

O'REILLY: Right.

MACCALLUM: Because they need to understand --

O'REILLY: That's why we're doing it. That's why we're doing it. All right. The culture is declining all throughout America. And there is an underclass being developed in bad neighborhoods across the country. East St. Louis is one of

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the worst neighborhoods in the United States. There was another girl fight there. And this is what happened. Roll the tape.

(BEGIN VIDEO CLIP)

(INAUDIBLE)

(SCREAMS)

UNIDENTIFIED MALE: East St. Louis Police tell me a feud fueled a rage that pushed the teenage girl to plow a car into a crowd. Watch as the impact sends four girls flying. Police believe the person behind the wheel was 18-year-old Moesha Allen, it happened June 27th at Lincoln Park. After the collision the cars quickly left the scene. Amazingly the four women weren't seriously hurt. Police say Allen and the women had an ongoing feud that led to a vicious fight at the park and the hit-and-run moments later.

(END VIDEO CLIP)

O'REILLY: All right. The girl who is charged is how old and what he's charged with?

MACCALLUM: She's 18-years-old, Moesha Allen, she's charged with mowing these people down. It's an assault charge with a vehicle. But she -- they have been in contact with her, the police. And she says and her family says that when she comes in they are going to hear a different story. I mean, there are two different videotapes of this. Obviously, you have cell phones all over the place. So, it was caught by two angles. She needs to come in and she needs to talk to the police and they are waiting for her to do that.

O'REILLY: She has been charged?

MACCALLUM: No, not yet. She hasn't been brought in yet.

O'REILLY: Really? She is still at large.

MACCALLUM: She is still at large --

O'REILLY: They know who she is --

MACCALLUM: They know who she is, they have spoken to her and they want her very much --

O'REILLY: Why don't they just go out and arrest her?

MACCALLUM: I don't know. They are waiting for her to --

O'REILLY: They are waiting for her.

MACCALLUM: She is going to show up. They spoke with her on the phone. And she claims that there's another side of this story.

O'REILLY: Well, then she gets an attorney, then tells the other side of the story. But the police are waiting for her to come in?

MACCALLUM: Yes.

O'REILLY: Something wrong there. All right?

MACCALLUM: There's something wrong there.

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O'REILLY: Something wrong there. You don't wait for someone if you have tape that shows an assault, you go out and you arrest the alleged assailant. This is what -- this are coming to. But the genesis of this thing is a feud, right? A feud between this girl and other girls.

MACCALLUM: A girl fight that's started in a park and it moved over to this area. They used mace and tasers on each other before this girl according to this video used the car and plow into four of them.

O'REILLY: Now we know why East St. Louis is out of control.

MACCALLUM: Yes.

O'REILLY: Martha MacCallum, everybody. Thanks for coming in. FACTOR tip of the day, we have received so many e-mails on Kate Steinle and the illegal alien criminals, we have an extended mail segment which will be the tip moments away.

O'REILLY: FACTOR tip of the day is incorporated into the mail segment tonight. Because so many of you have written us about the murder of Kate Steinle in sanctuary cities.

Thomas Homes, Westfield, New Jersey. "O'Reilly, you allow your passion over Kate Steinle's murder to poison what could have been a good debate with Kirsten Powers. She made some good points about ICE and you were bombastic. Apologize to her."

Yes, I'll apologize to her. Get some fresh hair.

Jonathan Verlin, Philadelphia. "Bill you were spectacular debating Kirsten. I'm at a loss to explain the point of view. But your questioning made things clear. It could not have been easy."

Alfredo Reyes, Hayward, California. "It is appalling that Kirsten Powers condones felonious illegal aliens prowling the streets of America. That is unconscionable. We support Kate's law."

Jo Johnson, Sanger, California. "I love Kirsten Powers but I am very disappointed she does not support Kate's law."

Kay Tonious, Anchorage, Alaska. "San Francisco supervisor Scott Wiener says, FOX is not real news. Mr. Weiner does not appear to be a real American."

Jessie Prichman, Austin, Texas. "I want to sign Kate's law petition but why do I have to provide my e-mail?"

Because we don't want the petition slammed by special interest concerns, Jessie. We want individual Americans to weigh in out of conscious, not ideological pressure. So, we are verifying the signatures. More than a half million people have signed the petition so far. If you'd like to add your name, please go to [BilloReilly.com](http://BilloReilly.com).

Matt Fist, Hillsboro, Oregon. "I am struck by inability of liberal commentators to acknowledge problems with the policies they support. They won't even acknowledged the personal loss of the Kate's Steinle's murder."

I disagree slightly Matt. The Left does understand the pain of the situation, but it isn't enough to deter their ideological desire. Someone opened waters for political gain. Others want no scrutiny on poor folks no matter who they are or what they do. I believe the system is a powerful thing and often overrides common sense and public safety. It is my job to point that out.

Mike Paresi, Reno, Nevada. O'Reilly, I have watched you for years and just became a Premium Member because of your coverage of Kate's murder."

Well, thousands of folks have signed up on [BilloReilly.com](http://BilloReilly.com) for pm status. And I hope you enjoy it, Mike.

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Allen Spaventa, Edison, New Jersey. "Bill, I am reading Hitler's Last Days with my ten-year-old grandson Brandon. He doesn't understand all the words but he is learning a lot. Great book."

You know, you are a good granddad, Allen. Hitler's last days actually building in sales currently number one in this category for kids, 10 to 16. Word of mouth extremely strong.

Grienne Officer, Invercargill, New Zealand. "Bill, I'm constantly amazed at the lack of knowledge some Americans show during the Watters' World segments. What is happening to patriotism in America?"

Like the rest of the world Grienne, we're becoming a self-centered people. The decline of public schools, the rise of the machines contribute to this, so does rank laziness.

Finally, a very happy birthday to Eleanor Lukner (ph) in Rochester, New York and Jeb Cheney (ph) El Dorado, Arkansas, both of whom turned 100 years old today. Way to go, guys.

And that is it for us tonight. Please check out the FOX News FACTOR website different from Billo'Reilly.com. Also, we would like you to spout off about THE FACTOR from anywhere in the world. O'Reilly@FOXNews.com O'Reilly@FOXNews.com Name and town if you wish to opine. Word of the day, do not be an anathema when writing to THE FACTOR. All right.

And please sign a petition for Kate's law if you believe in it, if you believe in it. We will probably deliver to the Senate's Judiciary Committee which opens hearings on this terrible situation on Tuesday.

This coming Tuesday, we'll be all over that. Again, thanks for watching us tonight. Ms. Megyn is next. I am Bill O'Reilly. Please remember the spin stops here. We're definitely looking out for you.

**LOAD-DATE:** July 16, 2015

**Exhibit 10**

Melissa Fowler

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**From:** [REDACTED]  
**Sent:** Monday, December 02, 2013 6:52 AM  
**To:** Brianna Allen; [REDACTED]  
**Cc:** susan@biomaxps.com; [REDACTED]  
**Subject:** RE: Exhibitor Information for SF Conference

Hi Brianna,

Thank you so much for writing! I have included [REDACTED] on this email, who is our new Group Purchasing Manager, in charge of our Exhibit Hall. She can give you all the information you need to register for an exhibit booth. Registration will open in mid-late December.

Best,

[REDACTED]  
[REDACTED]  
Director of Training and Education



National Abortion Federation  
1660 L St. NW Suite 450  
Washington, DC 20036  
[www.prochoice.org](http://www.prochoice.org)

202.667.5881 [REDACTED]  
[jhart@prochoice.org](mailto:jhart@prochoice.org)

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**From:** biomaxprocurementservices@gmail.com [mailto:biomaxprocurementservices@gmail.com] **On Behalf Of** Brianna Allen  
**Sent:** Wednesday, November 27, 2013 6:08 PM  
**To:** [REDACTED]  
**Cc:** susan@biomaxps.com  
**Subject:** Exhibitor Information for SF Conference

Hi [REDACTED]

This is Brianna, the assistant for Susan Tennenbaum at BioMax. Susan and I really enjoyed meeting both of you at the ARHP conference in September.

I was hoping to catch you before all the Thanksgiving/holiday craziness starts here about reserving exhibitor space at the conference your organization will have in San Francisco. We were too late to reserve space for ARHP, and I feel like you mentioned something about an end-of-the-year deadline?

Thanks!

Brianna Allen  
Procurement Assistant, *BioMax, LLC*

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Tuesday, January 07, 2014 8:39 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Thanks [REDACTED] I hope you had a fun New Year too (I got a little sick =( ...). I'll show this to Susan and let you know what she's thinking.

-Brianna

Sent from my iPhone

On Thu, Jan 2, 2014 at 12:23 PM, [REDACTED] wrote:

Hi Brianna,

Happy New Year! I have attached the exhibitor prospectus for the upcoming Annual Meeting in April. Please let me know if you have any questions. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]

**Sent:** Monday, December 16, 2013 3:19 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED],

[REDACTED] said to get in touch with you around mid-December about Exhibit Hall registration for the April meeting. Can you tell us about pricing and location availability?

Thanks!

Brianna Allen

Procurement Assistant, *BioMax, LLC*

Sent from my iPhone

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Monday, January 13, 2014 8:30 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED]

Susan and I talked about this today and we're having a little trouble understanding the format/agenda of the meeting in terms of which sessions are included in the Exhibitor registration and what additional registrations to purchase. I expect to be at the booth full-time, but I know that Susan really likes to be able to attend sessions and mingle with attendees.

Could you tell us if all the "conference educational sessions" are the same as the pre-conference workshops or are they something different on Mon/Tues? Is the \$395 exhibitor personnel registration the same as registering for the Monday and Tuesday sessions? If there is a preliminary agenda ready that would really help.

Thank you so much,

Brianna

Brianna Allen,  
Procurement Assistant, *BioMax, LLC*

On Wed, Jan 8, 2014 at 6:28 AM, [REDACTED] wrote:

Hi Brianna,

Sounds great. Again, please feel free to reach out to me with any questions. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
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**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

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-Brianna

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Tuesday, January 14, 2014 4:29 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Thanks [REDACTED] That makes it a lot clearer, actually. I think we'll probably end up doing that. =>

Brianna

On Tue, Jan 14, 2014 at 8:50 AM, [REDACTED] wrote:

Hi Brianna,

The pre-conference workshops are on Saturday, April 5 and Sunday, April 6. The pre-conference educational sessions and the luncheon on Monday are ticket items and priced out separately as listed in the exhibitor prospectus.

As an exhibitor, you receive 1 complimentary conference registration providing access to the exhibit hall and sessions on Monday and Tuesday. The \$395 for an additional person would cover access to the exhibit hall and educational sessions held on Monday, April 7 and Tuesday, April 8. The \$300 fee for an additional person grants access to the exhibit hall only, none of the conference sessions or other ticketed activities are included. So if Susan is wanting to attend the sessions on Monday and Tuesday plus be in the exhibit hall, than I would recommend listing her name as the primary contact on the exhibitor registration. Then add yourself under the additional exhibitor registration for \$300.

The preliminary agenda is in the final stages and should be sent out shortly.

I hope this helps. If not, please feel free to call me at 202-667-5881 [REDACTED] Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Monday, January 13, 2014 8:30 PM

**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

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**To:** [REDACTED]

**Cc:** Susan Tennenbaum

**Subject:** Re: Exhibitor Information for SF Conference

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Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Friday, February 07, 2014 8:19 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] TGIF!

I'm going to mail out our exhibitor registration form Monday afternoon--I just wanted to make sure I'm not leaving anything out. We are registering for 1 commercial firm exhibit booth (\$2100). Susan is not sure about her travel plans yet but we will most likely arrive separately, so I will be the primary representative. We would like 2 additional representatives with the session access (\$395), one for Susan and one for our new VP for Operations, Robert Sarkis. Susan is also interested in the Second-Trimester Abortion Workshop (\$345). So I believe the total comes to \$3235?

Thanks so much! See you soon,

-Brianna

Brianna Allen  
Procurement Assistant, *BioMax, LLC*

On Tue, Jan 14, 2014 at 1:28 PM, Brianna Allen <brianna@biomaxps.com> wrote:

Thanks [REDACTED] That makes it a lot clearer, actually. I think we'll probably end up doing that. =)

Brianna

On Tue, Jan 14, 2014 at 8:50 AM, [REDACTED] wrote:

Hi Brianna,

The pre-conference workshops are on Saturday, April 5 and Sunday, April 6. The pre-conference educational sessions and the luncheon on Monday are ticket items and priced out separately as listed in the exhibitor prospectus.

As an exhibitor, you receive 1 complimentary conference registration providing access to the exhibit hall and sessions on Monday and Tuesday. The \$395 for an additional person would cover access to the exhibit hall and educational sessions held on Monday, April 7 and Tuesday, April 8. The \$300 fee for an additional person grants access to the exhibit hall only, none of the conference sessions or other ticketed activities are included. So if Susan is wanting to attend the sessions on Monday and Tuesday plus be in the exhibit hall, than I would recommend listing her name as the primary contact on the exhibitor registration. Then add yourself under the additional exhibitor registration for \$300.

The preliminary agenda is in the final stages and should be sent out shortly.

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Tuesday, February 11, 2014 12:53 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis  
**Subject:** Re: Exhibitor Information for SF Conference

Great! I sent it out yesterday afternoon, I think it will arrive by Thursday.  
-Brianna

Sent from my iPhone

On Mon, Feb 10, 2014 at 5:06 AM, [REDACTED] wrote:

Hi Brianna,

Yes, that is correct. Thanks

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**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Friday, February 07, 2014 8:19 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis

**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] TGIF!

I'm going to mail out our exhibitor registration form Monday afternoon--I just wanted to make sure I'm not leaving anything out. We are registering for 1 commercial firm exhibit booth (\$2100). Susan is not sure about her travel plans yet but we will most likely arrive separately, so I will be the primary representative. We would like 2 additional representatives with the session access (\$395), one for Susan and one for our new VP for Operations, Robert Sarkis. Susan is also interested in the Second-Trimester Abortion Workshop (\$345). So I believe the total comes to \$3235?

Thanks so much! See you soon,

-Brianna

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Friday, February 21, 2014 2:53 PM  
**To:** [REDACTED]  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED]--just left you a voicemail, wanted to make sure you received all of our registration material. Susan was asking me about it. Thanks!

-Brianna

Sent from my iPhone

On Tue, Feb 11, 2014 at 9:53 AM, Brianna Allen <brianna@biomaxps.com> wrote:  
Great! I sent it out yesterday afternoon, I think it will arrive by Thursday.

-Brianna

Sent from my iPhone

On Mon, Feb 10, 2014 at 5:06 AM, [REDACTED] wrote:

Hi Brianna,

Yes, that is correct. Thanks

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**From:** Brianna Allen [mailto:brianna@biomaxps.com]

**Sent:** Friday, February 07, 2014 8:19 PM

**To:** [REDACTED]

**Cc:** Susan Tennenbaum; Robert Sarkis

**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] TGIF!

I'm going to mail out our exhibitor registration form Monday afternoon--I just wanted to make sure I'm not leaving anything out. We are registering for 1 commercial firm exhibit booth (\$2100). Susan is not sure about her travel plans yet but we will most likely arrive separately, so I will be the primary representative. We would like 2 additional representatives with the session access (\$395), one for Susan and one for our new VP for Operations, Robert Sarkis. Susan is also interested in the Second-Trimester Abortion Workshop (\$345). So I believe the total comes to \$3235?

Thanks so much! See you soon,

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Friday, March 14, 2014 3:49 PM  
**To:** [REDACTED]  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED], Can you tell me where we're going to be placed in the exhibit hall? We are ordering our custom signage from the printers and it would be helpful to know the exact setting we'll be working with!  
Thanks,

Brianna

Sent from my iPhone

On Fri, Feb 21, 2014 at 12:04 PM, [REDACTED] wrote:

Hi Brianna,

Yes, I received your paperwork. Once our registration team enters it into our system, you will receive a confirmation email. Please let me know if you have any other questions. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Friday, February 21, 2014 2:53 PM  
**To:** [REDACTED]

**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED]--just left you a voicemail, wanted to make sure you received all of our registration material. Susan was asking me about it. Thanks!

-Brianna

Sent from my iPhone

On Tue, Feb 11, 2014 at 9:53 AM, Brianna Allen <[brianna@biomaxps.com](mailto:brianna@biomaxps.com)> wrote:

Great! I sent it out yesterday afternoon, I think it will arrive by Thursday.

-Brianna

Melissa Fowler

---

**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Wednesday, March 19, 2014 3:26 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] -If you could get us that information today, that would be great! Also, will we have an electrical outlet at the booth?

Thanks!

-Brianna

On Fri, Mar 14, 2014 at 1:00 PM, [REDACTED] wrote:

Hi Brianna,

I am out of the office today and do not access to that information. I will send it to you on Monday.

Thanks,  
[REDACTED]

Sent from my iPhone

On Mar 14, 2014, at 3:49 PM, "Brianna Allen" <[brianna@biomaxps.com](mailto:brianna@biomaxps.com)> wrote:

Hi [REDACTED]. Can you tell me where we're going to be placed in the exhibit hall? We are ordering our custom signage from the printers and it would be helpful to know the exact setting we'll be working with!

Thanks,

Brianna

Sent from my iPhone

On Fri, Feb 21, 2014 at 12:04 PM, [REDACTED] wrote:

Hi Brianna,

Yes, I received your paperwork. Once our registration team enters it into our system, you will receive a confirmation email. Please let me know if you have any other questions. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Friday, February 21, 2014 2:53 PM  
**To:** [REDACTED]

**Subject:** Re: Exhibitor Information for SF Conference

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Thursday, March 27, 2014 4:29 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] I'm sure you are entering crunch-time, but do you have the final program available? We have not received the exhibitor kit either.

Thanks.  
-Brianna

Sent from my iPhone

On Wed, Mar 19, 2014 at 1:00 PM, [REDACTED] wrote:

Hi Brianna,

I do apologize for the delay however my layout was just approved today. Your booth number is 306. Please let me know if you have any other questions. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Wednesday, March 19, 2014 3:26 PM

**To:** [REDACTED]  
**Cc:** Susan Tennenbaum  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] -If you could get us that information today, that would be great! Also, will we have an electrical outlet at the booth?

Thanks!

-Brianna

On Fri, Mar 14, 2014 at 1:00 PM, [REDACTED] wrote:

Hi Brianna,

I am out of the office today and do not access to that information. I will send it to you on Monday.

Melissa Fowler

---

**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Monday, March 31, 2014 2:15 PM  
**To:** [REDACTED]  
**Subject:** Re: Exhibitor Information for SF Conference

Thanks [REDACTED] we're out in meetings this morning but I will look at it as soon as I can. See you this weekend!  
Brianna

Sent from my iPhone

On Mon, Mar 31, 2014 at 10:37 AM, [REDACTED] wrote:

Hi Brianna,

The exhibitors kit were sent directly from the Decorator. I have attached one for you.

Please let me know if there is anything else you need. Thanks

---

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Thursday, March 27, 2014 4:29 PM

**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis  
**Subject:** Re: Exhibitor Information for SF Conference

Hi [REDACTED] I'm sure you are entering crunch-time, but do you have the final program available? We have not received the exhibitor kit either.

Thanks.

-Brianna

Sent from my iPhone

On Wed, Mar 19, 2014 at 1:00 PM, [REDACTED] wrote:

Hi Brianna,

Exhibit 11

Melissa Fowler

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**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Tuesday, February 10, 2015 2:55 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis; NAF Meetings  
**Subject:** Baltimore Exhibitor info

Hi [REDACTED]

Could you please send us the information for exhibiting at the 39th NAF meeting in Baltimore this April? I know we definitely want to have a booth again.

Thanks!

-Brianna

--

**Brianna Allen**  
*Procurement Assistant*  
**BioMax Procurement Services, LLC**  
562.281.5041 (o)  
562.354.1806 (c)



Melissa Fowler

---

**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Monday, March 23, 2015 6:38 PM  
**To:** [REDACTED]  
**Subject:** Re: Baltimore Exhibitor info

Hi [REDACTED] thanks for the reminder. I will get on that tonight!

Sent from my iPhone

On Mon, Mar 23, 2015 at 8:23 AM, [REDACTED] wrote:

Hi Brianna,

I am holding a booth for you however I am showing your registration is still pending. Can you send your registration information today?

Please let me know if you have any questions.

Thanks,

[REDACTED]

**From:** [REDACTED]  
**Sent:** Tuesday, February 10, 2015 3:02 PM  
**To:** 'Brianna Allen'  
**Cc:** Susan Tennenbaum; Robert Sarkis; NAF Meetings  
**Subject:** RE: Baltimore Exhibitor info

Hi Brianna,

Sure thing! We are glad to have you return. The exhibitor prospectus is attached.

Please let me know if you have any questions.

Thanks,

[REDACTED]

**From:** Brianna Allen [<mailto:brianna@biomaxps.com>]  
**Sent:** Tuesday, February 10, 2015 2:55 PM  
**To:** [REDACTED]  
**Cc:** Susan Tennenbaum; Robert Sarkis; NAF Meetings  
**Subject:** Baltimore Exhibitor info

Hi Nichelle,

Could you please send us the information for exhibiting at the 39th NAF meeting in Baltimore this April? I know we definitely want to have a booth again.

Thanks!

-Brianna

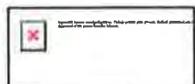
--  
Brianna Allen

*Procurement Assistant*

**BioMax Procurement Services, LLC**

562.281.5041 (o)

562.354.1806 (c)



Melissa Fowler

---

**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Wednesday, March 25, 2015 5:50 PM  
**To:** [REDACTED]  
**Cc:** Robert Sarkis  
**Subject:** Re: Baltimore Exhibitor info

Hi [REDACTED]

Having a little bit of trouble using the online registration portal. I believe our exhibitors are now registered for the conference, but I can't find the option to actually register our booth & organization. Our attendees are:

Susan Tennenbaum, CEO  
Robert Sarkis, Procurement Manager/VP Operations  
Rebecca Wagner, Contract Administrator  
Adrian Lopez, Procurement Technician

Susan, Robert and Adrian should be at the 2nd Tri workshop on Saturday, and we want everyone to be registered for the full conference as well.

Thanks for your help and for keeping an eye out for us! If you can send me the direct link for registration/payment, that would be great. :)

Brianna

On Mon, Mar 23, 2015 at 8:23 AM, [REDACTED] wrote:

Hi Brianna,

I am holding a booth for you however I am showing your registration is still pending. Can you send your registration information today?

Please let me know if you have any questions.

Thanks,

[REDACTED]

**From:** [REDACTED]  
**Sent:** Tuesday, February 10, 2015 3:02 PM  
**To:** 'Brianna Allen'

Melissa Fowler

---

**From:** Brianna Allen <brianna@biomaxps.com>  
**Sent:** Monday, March 30, 2015 2:09 PM  
**To:** [REDACTED]  
**Cc:** Robert Sarkis; Rebecca Wagner; Susan Tennenbaum  
**Subject:** Re: Baltimore Exhibitor info  
**Attachments:** exhibitform.pdf

Hi [REDACTED]

Here is our completed booth registration. Please let Robert Sarkis, our Procurement Manager, or Rebecca Wagner know if there is anything else we can provide. I will be out for the next week or so.

Thank you so much for helping get everything ready for the meeting!

Brianna

On Fri, Mar 27, 2015 at 1:31 PM, [REDACTED] wrote:

Hi Brianna,

The online portal allows you to register for sessions at the conference only. I have to go in to do your booth registration. Send me your completed booth registration form and I will make sure your registration is complete.

Your booth number is 12. I have attached a copy of the exhibitor kit

Please let me know if you have any questions.

Thanks,

[REDACTED]

**From:** Brianna Allen [mailto:[brianna@biomaxps.com](mailto:brianna@biomaxps.com)]  
**Sent:** Wednesday, March 25, 2015 5:50 PM  
**To:** [REDACTED]  
**Cc:** Robert Sarkis  
**Subject:** Re: Baltimore Exhibitor info



# Application Agent for Exhibit Space

Instructions: Please complete all information. Complete and sign the application form. Return the completed application with credit card information or a check payable to NAF for the full cost of exhibiting and registration for educational sessions. A unique email address is required for each exhibitor personnel—registration will not be processed without this information. When countersigned by NAF, this serves as a contract for exhibit space and the following Rules and Regulations are expressly incorporated herein. Confirmation notices will be emailed within five business days of receipt.

Deadline: Application and fees must be received in the NAF office by Monday, February 23, 2015.

1. The exact information for the list of exhibitors in the conference Final Program: (Please print clearly)

Company/Organization Name: BioMax Procurement Services, LLC  
 Address: 644 E Spring St #725  
 City: Long Beach State/Prov: CA  
 Zip/Postal Code: 90815 Country: U.S.A.  
 Contact Name: Brianna Allen  
 Telephone: 562.281.5041 Fax: \_\_\_\_\_  
 Email: procurement@biomaxps.com  
 Website URL: biomaxps.com

2. Exhibiting Company or Organization Information: (If different from above)

Company/Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Prov: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_

3. Exact wording for your exhibit booth identification sign:

BioMax Procurement Services, LLC

4. Name and title of exhibitor representatives:

Primary Representative (included in exhibit fee):  
 First: Susan Last: Tennenbaum  
 Title: C.E.O. Email (required): susan@biomaxps.com

Additional Representative:  
 (Maximum of two (2) additional exhibitor personnel per plus sized exhibit booth)  
 First: Robert Last: Sarkis  
 Title: Procurement Manager Email (required): bob@biomaxps.com

Add educational pass

Additional Representative:  
 First: Adrian Last: Lopez  
 Title: Procurement Technician Email (required): adriane@biomaxps.com

Add educational pass

5. List the products or services to be exhibited:

fetal tissue procurement,  
human biospecimen procurement

6. Exhibit Placement:

(NAF reserves the right to determine the final placement of all exhibiting companies)  
 Colloquies/companies you wish to be positioned near: \_\_\_\_\_

Competitors:

Stem Express, ABR, Novogenix

7. Exhibit Booth Fees:

\$2,500 Commercial Firm \$ 2500  
 \$1,900 NAF Group Purchasing Vendor \$ \_\_\_\_\_  
 \$1,220 NAF Member \$ \_\_\_\_\_  
 \$1,500 Non-Member, Nonprofit Organizations \$ \_\_\_\_\_

8. Sponsorship Opportunities:

Welcome Reception: \$20,000 \$ \_\_\_\_\_  
 Platinum Level, Continental Breakfast: \$15,000 \$ \_\_\_\_\_  
 Gold Level, Treat Break: \$12,000 \$ \_\_\_\_\_  
 Silver Level, Mix and Mingle Lounge: \$10,000 \$ \_\_\_\_\_  
 Hotel Room Drop: \$7,500 \$ \_\_\_\_\_  
 lanyards: \$3,000 \$ \_\_\_\_\_  
 Flash Drives: \$2,500 \$ \_\_\_\_\_  
 Bag Insert: \$1,500 \$ \_\_\_\_\_

9. To advertise in NAF's 39th Annual Meeting Final Program, submit press-ready artwork in the following acceptable formats: PDF, 11", .JPG. Artwork must be submitted by Friday, February 20, 2015.

Full page 8.5" x 11" advertisement - \$1,000 \$ \_\_\_\_\_  
 Half-page 8.5" x 5.5" advertisement - \$600 \$ \_\_\_\_\_

10. Total

Exhibit Booths:	<u>1</u> Booths x <u>\$2500</u>	\$ <u>2500</u>
Additional Exhibit Representatives:	\$300 x _____	\$ _____
Additional Reps w/Educational Pass:	\$395 x <u>2</u>	\$ <u>790</u>
Sponsorship:		\$ _____
Advertisement:		\$ _____
TOTAL FEES:		\$ <u>3290</u>

11. Payment: Payment should accompany this application. NAF will notify exhibitor of acceptance of this application within five business days of receipt.

# Exhibit Rules and Regulations

The following Rules and Regulations are expressly incorporated as part of this Agreement. Exhibitors, their officers, employees, and agents agree to abide and be bound by these Rules and Regulations.

1. **Eligibility to Exhibit** — Companies with an intended business interest in reaching reproductive health care professionals, including NAF provider members, are invited to participate in the National Abortion Federation's (NAF) Annual Meeting.

2. Exhibitor expressly acknowledges NAF's right to accept or reject applications for exhibit space for any reason, including (without limitation) at NAF's sole discretion, that the proposed exhibit or the exhibitor's business, products, services, or performance in the field are not consistent with NAF's purposes and objectives. NAF also reserves the right to request further information from any exhibitor and/or persons or entities that have done business with Exhibitor in order to evaluate its application. Exhibitor expressly agrees to provide further information promptly if requested by NAF.

3. Refunds of the application fee and/or exhibit fee are made only as follows: the full amount of the exhibit fee paid will be refunded if the application is not accepted. A \$100.00 service charge will be deducted from each refund requested before March 16, 2015. No refunds will be made after March 16, 2015.

4. Arrangements for shipment of materials and equipment and other set up requirements are at the Exhibitor's sole expense.

5. **Use of Space** - No Exhibitor shall assign, sublet, or share the space allotted without the advance knowledge and consent of NAF. Exhibitors must show only products provided by them in the regular course of their business. All demonstrations or other sales and promotional activities must be confined to the limits of each exhibitor's contracted exhibit space. Assigned areas of the conference venue remain strictly under control of NAF and signage, banners, or other advertising materials shall not be displayed. It is the Exhibitor's responsibility to bring a display that fits within the contracted space.

6. For the integrity of the tradeshow, all exhibits must be fully erected by 5:00 pm on Sunday, April 19. No exhibit shall be dismantled prior to 2:00 pm on Tuesday, April 21. Exhibits not installed by 5:00 pm on Sunday, April 19, may forfeit space at the exhibitor's expense. NAF reserves the right to make changes to the Exhibit dates and hours stated. NAF will inform each Exhibitor in advance if such schedule changes are made.

7. **Care of Premises & Compliance/Exhibit Facility Regulations** — No part of the exhibit nor signs or other materials may be posted, nailed or otherwise affixed to walls, doors, or other surfaces in a way that might mar or deface the premises or exhibit furnishings. Nothing may be ripped, suspended from, or attached to any Myatt Agency Baltimore mechanical system. Damage from failure to observe this notice is payable by the Exhibitor.

8. All exhibiting company representatives must be registered for the NAF Annual Meeting and must wear identifying badges as requested by NAF. Such identification will be required to gain entry to the exhibit area and all meeting rooms. Exhibiting companies are limited to two (2) additional representatives per 8' x 8' exhibit booth.

9. Exhibitors shall comply fully with all applicable national, state, county, city, hotel, fire and safety regulations, and any relevant labor contracts as well as any further rules and regulations NAF adopts.

10. Security will be provided by NAF for the conference period, including set up and dismantling. However, NAF makes no warranties and Exhibitors are responsible for any loss, damage, or injury to their exhibits, other property, or persons and/or any claims in any way arising out of their exhibiting at the Annual Meeting. Exhibitors expressly release NAF from any such responsibility or liability.

11. All insurance, including (without limitation) business interruption and public liability coverage are the sole responsibility of the Exhibitor. NAF does not maintain insurance covering Exhibitors, and Exhibitors expressly release NAF from any such responsibility or liability.

12. The Exhibitor agrees to indemnify and hold NAF harmless for any claims for loss, damage, or injury, including reasonable attorneys' fees, connected with the Exhibitor's exhibit at the Annual Meeting and expressly releases NAF from any such responsibility or liability.

13. Photography of exhibits by anyone other than NAF or the assigned Exhibitor of the space being photographed is strictly prohibited.

14. Exhibitor agrees to display and/or represent their products and/or services in a dignified and decorous manner. Any display or conduct that, at NAF's sole discretion, is not in keeping with the general decorum of the Annual Meeting and/or purposes and objectives of NAF, is grounds for removal of the exhibit, by the Exhibitor, at the Exhibitor's expense, promptly upon notification by NAF. Prohibited activities by Exhibitors include, but are not limited to, any conduct or attention-getting devices of any kind that annoy, disturb, or in any way interfere with other exhibits.

15. Exhibitor agrees to identify, display, and/or represent their business, products, and/or services truthfully, accurately, and consistently with the information provided in the Application. Any display, conduct, or offer of any information of any kind that, at NAF's sole discretion, is determined to be incomplete, inaccurate, misleading, or inconsistent with the information provided in this Application is grounds for cancellation of this Agreement and/or removal of the exhibit by the Exhibitor, at the Exhibitor's expense, promptly upon notification from NAF. Exhibit staff who purchase an educational pass to attend educational content are not to engage in promotional activities within the CME activity or in any space outside the exhibit hall.

16. No refunds of fees will be made in the case of cancellations or removal of exhibits pursuant to paragraphs 14 and 15 of these Rules and Regulations. Additionally, exhibitors agree to reimburse NAF for all costs incurred by NAF, including reasonable attorneys' fees, in handling or responding to any violation of any provision of this entire Agreement.

17. In connection with NAF's Annual Meeting, Exhibitor understands that any information NAF may furnish is confidential and not available to the public. Exhibitor agrees that all written information provided by NAF, or any information which is disclosed orally or visually to Exhibitor, or any other exhibitor or attendee, will be used solely in conjunction with Exhibitor's business and will be made available only to Exhibitor's officers, employees, and agents. Unless authorized in writing by NAF, all information is confidential and should not be disclosed to any other individual or third parties.

18. It is further understood and agreed by Exhibitor that no failure or delay by NAF in exercising any right, power, or privilege hereunder shall operate as a waiver hereof, nor shall any single or partial exercise thereof preclude any other or further exercise of any right, power, or privilege hereunder. Exhibitor also understands and agrees that monetary damages would not be a sufficient remedy for any breach of this agreement by Exhibitor or Exhibitor's officer, employee, or agents and that NAF will be entitled to specific performance and injunctive relief as remedies for any such breach. Such remedies shall not be deemed to be exclusive remedies for breach of this Agreement by Exhibitor or Exhibitor's officers, employees, or agents, but shall be in addition to all other remedies available at law or equity.

19. By signing this Agreement, the Exhibitor affirms that all information contained herein, contained in any past and future correspondence with either NAF and/or in any public forum, advertisement, and/or exhibits displayed at, or in connection with, NAF's Annual Meeting, is truthful, accurate, complete, and not misleading.

20. Changes in the information provided to NAF are permitted only upon NAF's written approval. Exhibitor agrees to notify NAF of any such proposed changes at least 10 days prior to the commencement of the exhibit. NAF, at its sole discretion, may cancel this agreement, if (1) NAF does not approve the changes or (2) notification of the changes is less than 10 days before the exhibit.

I agree to comply with Exhibitor Rules and Regulations 7-20. I also agree to hold in trust and confidence any confidential information received in the course of exhibiting at the NAF Annual Meeting and agree not to reproduce or disclose confidential information without express permission from NAF. Violation of this paragraph could result in civil and/or criminal penalties.

Company Name: BioMax Procurement Services  
 Signature: [Signature]  
 Print Name: Susan Ternebaum  
 Title: C.E.O.  
 Date: 3-25-15

Submit contract and payment or payment information by mail or fax to:

National Abortion Federation  
 Attn: [Redacted]  
 1600 L Street, NW, Suite 450  
 Washington, DC 20036  
 Phone: 202 667 5881 [Redacted]  
 Fax: 202 667 5890

ACCEPTED: NATIONAL ABORTION FEDERATION

Signature: [Redacted]  
 Print Name: [Redacted]  
 Title: Group Purchasing Manager  
 Date: \_\_\_\_\_  
 Exhibit Assignment: \_\_\_\_\_



# Annual Meeting Registration Form

Register for the NAF Annual Meeting three ways:



ONLINE AT:

<https://members.prochoice.org>

(This is a secure web site. Information entered at this site is not e-mailed. Email addresses will not be shared with any third party.)



FAX TO NAF AT:

202-667-5889



MAIL TO NAF AT:

NAF Training and Education Department  
1600 L Street NW, Suite 450  
Washington, DC 20036

Questions can be directed to NAF's Training and Education Department at 202-667-5881.

Registered attendees will receive a complimentary hotel room with breakfast during the meeting. Registration is required for all attendees. Payment of your registration fee is required. If you do not receive a confirmation within 30 days of registration, please call 202-667-5881.

Early Bird registration deadline: Thursday, March 26, 2015, 11:59pm EDT. Regular registration closes on Thursday, April 2, 2015, 11:59pm EDT. Payment received in the United States will receive a complimentary attendee's meal for registration fee only.

Photocopy this form as needed for additional registrants. Please pay by check in U.S. funds or by credit card.

Please Print Clearly:

Rebecca Wagner  
Name (as it should appear on badge) Suffix or Degree

BioMax Procurement Services  
Affiliation/Institution (as it should appear on badge)

6444 E Spring St 725  
Affiliation Address

Long Beach  
City

CA 90815 U.S.A.  
State/Province Zip/Postal Code Country

562-281-5041  
Telephone Fax

rebecca@biomaxps.com  
Email (A unique email address is required for all registrants.)

Special Needs:

Please register in advance. The hotel is in compliance with the Americans with Disabilities Act.

Assistance Required

Please specify:

Payment Method

To qualify for the Early Bird Rate, your registration must be postmarked by Thursday, March 26, 2015. All registrations received after this date will be subject to standard registration fees.

Check enclosed (payable to NAF)

Checks must include "AM15" and names of registrants in Memo line or separate paper

Charge to my:

VISA  MasterCard  American Express

Card number

Expiration date Security code

BioMax Procurement Services  
Name of card holder

6400 Edinger Ave. #P-107  
Billing Address

Huntington Beach, CA 92647 U.S.A.  
City State/Province Zip/Postal Code Country

[Signature]  
Signature of card holder

Please check all that apply:

NAF Member ID#

Non-member\*

Medical/Clinical/Law student/Resident  
Name of Program or School

\* Non-members who are not PPFA affiliate members must submit a letter of sponsorship from a NAF member or PPFA affiliate member. All non-members must preregister.

Are you interested in NAF membership?  Yes  No

For more information about NAF membership, contact Melissa Fowler at 202-667-5881 ext. 217 or [mfowler@prochoice.org](mailto:mfowler@prochoice.org).

Exhibit 12



# Annual Meeting Registration Form

Register for the NAF Annual Meeting three ways:



ONLINE AT:  
<http://members.prochoice.org>

(This is a secure site. Any information entered at this site is encrypted and transmitted only by NAF.)



FAX TO NAF AT:  
202-667-5889



MAIL TO NAF AT:  
NAF Training and Education Department  
1650 L Street NW, Suite 450  
Washington, DC 20036

Questions can be directed to NAF's Training and Education Department at 202-667-5889.

Registered attendees will receive a confirmation letter sent to your unique email address within 10 business days of NAF's receipt of your registration. Please contact NAF if you do not receive a confirmation within 30 days of submission.

Early Bird registration closes on Thursday, March 26, 2015, 11:59pm EDT. Regular registration closes on Thursday, April 2, 2015, 11:59pm EDT. Forms received after that date will not be processed; attendees will need to register on-site.

*Photocopy this form as needed for additional registrants. Please pay by check in U.S. funds or by credit card.*

Please Print Clearly:

Rebecca Wagner  
Name (as it should appear on badge) Suffix or Degree

BioMax Procurement Services  
Affiliation/Institution (as it should appear on badge)

6444 E Spring St 725  
Affiliation Address

Long Beach  
City

CA 90815 U.S.A.  
State/Province Zip/Postal Code Country

562-281-5041  
Telephone Fax

rebecca@biomaxps.com  
Email (A unique e-mail address is required for all registrants.)

**Special Needs:**

Please register in advance. The hotel is in compliance with the Americans with Disabilities Act.

Assistance Required  
Please specify:

\_\_\_\_\_  
\_\_\_\_\_

**Payment Method**

To qualify for the Early Bird Rate, your registration must be postmarked by Thursday, March 26, 2015. All registrations received after this date will be subject to standard registration fees.

Check enclosed (payable to NAF)  
*Checks must include "AM15" and names of registrants in Memo line or separate paper*

Charge to my:  
 VISA  MasterCard  American Express

\_\_\_\_\_

Card number

\_\_\_\_\_

Expiration date Security code

BioMax Procurement Services  
Name of card holder

8400 Edinger Ave. #P-107  
Billing Address

Hawtington Beach, CA 92647 U.S.A.  
City State/Province Zip/Postal Code Country

[Signature]  
Signature of card holder

Please check all that apply:

- NAF Member ID# \_\_\_\_\_
- Non-member\*
- Medical/Clinical/Law student/Resident  
*Name of Program or School*

\* Non-members who are not PPFA affiliate members must submit a letter of sponsorship from a NAF member or PPFA affiliate member. All non-members must preregister.

Are you interested in NAF membership?  Yes  No

For more information about NAF membership, contact Melissa Fowler at 202-667-5881 ext. 217 or [mfowler@prochoice.org](mailto:mfowler@prochoice.org).



# Application Agent for Exhibit Space

Instructions: Please complete all information. Complete and sign the application form. Return the completed application with credit card information or a check payable to NAF for the full cost of exhibiting and registration for educational sessions. A unique email address is required for each exhibitor personnel—registration will not be processed without this information. When countersigned by NAF, this serves as a contract for exhibit space and the following Rules and Regulations are expressly incorporated herein. Confirmation notices will be emailed within five business days of receipt.

Deadline: Application and fees must be received in the NAF office by Monday, February 23, 2015.

1. The exact information for the list of exhibitors in the conference Final Program: (Please print clearly)

Company/Organization Name: BioMax Procurement Services, LLC  
 Address: 6444 E. Spring St #725  
 City: Long Beach State/Prov: CA  
 Zip/Postal Code: 90815 Country: U.S.A.  
 Contact Name: Brianna Allen  
 Telephone: 562.281.5041 Fax: \_\_\_\_\_  
 Email: procurement@biomaxps.com  
 Website URL: biomaxps.com

2. Exhibiting Company or Organization Information: (If different from above)

Company/Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Prov: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_

3. Exact wording for your exhibit booth identification sign:

BioMax Procurement Services, LLC

4. Name and title of exhibitor representative(s):

Primary Representative (included in exhibit fee):  
 First: Susan Last: Tennenbaum  
 Title: C.E.O. Email (required): susan@biomaxps.com

Additional Representative:  
 (Maximum of two (2) additional exhibitor personnel per purchased exhibit booth)  
 First: Robert Last: Sarkis  
 Title: Procurement Manager Email (required): bob@biomaxps.com

Add educational pass

Additional Representative:  
 First: Adrian Last: Lopez  
 Title: Procurement Technician Email (required): adrian@biomaxps.com

Add educational pass

5. List the products or services to be exhibited:

fetal tissue procurement  
human biospecimen procurement

6. Exhibit Placement:

(NAF reserves the right to determine the final placement of all exhibiting companies)

Colleagues/companies you wish to be positioned near:

Competitors: Stem Express, ABR, Novogenix

7. Exhibit Booth Fees:

\$2,500 Commercial Firms \$ 2500  
 \$1,900 NAF Group Purchasing Vendor \$ \_\_\_\_\_  
 \$1,220 NAF Member \$ \_\_\_\_\_  
 \$1,500 Non-Member, Nonprofit Organizations \$ \_\_\_\_\_

8. Sponsorship Opportunities:

Welcome Reception: \$20,000 \$ \_\_\_\_\_  
 Platinum Level, Continental Breakfast: \$15,000 \$ \_\_\_\_\_  
 Gold Level, Treat Break: \$12,000 \$ \_\_\_\_\_  
 Silver Level, Mix and Mingle Lounge: \$10,000 \$ \_\_\_\_\_  
 Hotel Room Drop: \$7,500 \$ \_\_\_\_\_  
 T-shirts: \$3,000 \$ \_\_\_\_\_  
 Flash Drives: \$2,500 \$ \_\_\_\_\_  
 Bag Inert: \$1,500 \$ \_\_\_\_\_

9. To advertise in NAF's 39th Annual Meeting Final Program, submit press-ready artwork in the following acceptable formats: PDF, TIFF, JPG. Artwork must be submitted by Friday, February 20, 2015.

Full page 8.5" x 11" advertisement - \$1,000 \$ \_\_\_\_\_  
 Half-page 8.5" x 5.5" advertisement - \$600 \$ \_\_\_\_\_

10. Total

Exhibit Booths: 1 Booths x \$2500 \$ 2500  
 Additional Exhibit Representatives: \$300 x \_\_\_\_\_ \$ \_\_\_\_\_  
 Additional Fees w/Educational Pass: \$395 x 2 \$ 790  
 Sponsorship: \$ \_\_\_\_\_  
 Advertisement: \$ \_\_\_\_\_  
**TOTAL FEES: \$ 3290**

11. Payment: Payment should accompany this application. NAF will notify exhibitor of acceptance of this application within five business days of receipt.

# Exhibit Rules and Regulations

The following Rules and Regulations are expressly incorporated as part of this Agreement. Exhibitors, their officers, employees, and agents agree to enter and be bound by these Rules and Regulations.

1. **Eligibility to Exhibit** — Companies with an intended business interest in reaching reproductive health care professionals, including NAF provider members, are invited to participate in the National Abortion Federation's (NAF) Annual Meeting.

2. Exhibitor expressly acknowledges NAF's right to accept or reject applications for exhibit space for any reason, including (without limitation) at NAF's sole discretion, that the proposed exhibit or the exhibitor's business, products, services, or performance in the field are not consistent with NAF's purposes and objectives. NAF also reserves the right to request further information from any exhibitor and/or persons or entities that have done business with Exhibitor in order to evaluate its application. Exhibitor expressly agrees to provide further information promptly if requested by NAF.

3. Refunds of the application fee and/or exhibit fee are made only as follows: the full amount of the exhibit fee paid will be refunded if the application is not accepted. A \$100.00 service charge will be deducted from each refund requested before March 16, 2015. No refunds will be made after March 16, 2015.

4. Arrangements for shipment of materials and equipment and other set up requirements are at the Exhibitor's sole expense.

5. **Use of Space** — No Exhibitor shall occupy, utilize, or show the space allotted without the advance knowledge and consent of NAF. Exhibitors must show only products provided by them in the regular course of their business. All demonstrations or other sales and promotional activities must be confined to the limits of each exhibitor's contracted exhibit space. Assigned areas of the conference venue remain strictly under control of NAF and signage, banners, or other advertising materials shall not be displayed. It is the Exhibitor's responsibility to bring a display manila within the contracted space.

6. For the integrity of the tradeshow, all exhibits must be fully erected by 5:00 pm on Sunday, April 19. No exhibit shall be dismantled prior to 5:00 pm on Tuesday, April 21. Exhibits not installed by 5:00 pm on Sunday, April 19, may forfeit space at the exhibitor's expense. NAF reserves the right to make changes to the Exhibit dates and hours stated. NAF will inform each Exhibitor in advance if such schedule changes are made.

7. **Care of Premises & Compliance/Exhibit Facility Regulations** — No part of the exhibit nor signs or other materials may be posted, nailed, or otherwise affixed to walls, doors, or other surfaces in a way that might mar or deface the premises or exhibit furnishings. Nothing may be rigged, suspended from, or attached to any Must Response Baltimore mechanical system. Damage from Exhibit to damage this notice is payable by the Exhibitor.

8. All exhibiting company representatives must be registered for the NAF Annual Meeting and must wear identifying badges as requested by NAF. Such identification will be required to gain entry to the exhibit area and all meeting rooms. Exhibiting companies are limited to two (2) additional representatives per 2' x 6' exhibit booth.

9. Exhibitors shall comply fully with all applicable national, state, county, city, hotel, fire and safety regulations, and any relevant labor contracts as well as any further rules and regulations NAF adopts.

10. Security will be provided by NAF for the conference period, excluding set up and dismantling. However, NAF makes no warranties and Exhibitors are responsible for any loss, damage, or injury to their exhibits, other property, or persons and/or any claims in any way arising out of their exhibiting at the Annual Meeting. Exhibitors expressly release NAF from any such responsibility or liability.

11. All insurance, including (without limitation) business interruption and public liability coverage are the sole responsibility of the Exhibitor. NAF does not maintain insurance covering Exhibitors and Exhibitors expressly release NAF from any such responsibility or liability.

12. The Exhibitor agrees to indemnify and hold NAF harmless for any claims for loss, damage, or injury, including reasonable attorneys' fees, connected with the Exhibitor's exhibit at the Annual Meeting and expressly releases NAF from any such responsibility or liability.

13. Photography of exhibits by anyone other than NAF or the assigned Exhibitor of the space being photographed is strictly prohibited.

14. Exhibitor agrees to display and/or represent their products and/or services in a dignified and decorous manner. Any display or conduct that at NAF's sole discretion, is not in keeping with the general tenor of the Annual Meeting and/or purposes and objectives of NAF, is grounds for removal of the exhibit by the Exhibitor, at the Exhibitor's expense, promptly upon notification by NAF. Prohibited activities by Exhibitors include, but are not limited to, any conduct or advertising devices of any kind that annoy, disturb, or in any way interfere with other exhibits.

15. Exhibitor agrees to identify, display, and/or represent their businesses, products, and/or services truthfully, accurately, and consistently with the information provided in the Application. Any display, conduct, or offer of any information of any kind that, at NAF's sole discretion, is determined to be incomplete, inaccurate, misleading, or inconsistent with the information provided in the Application is grounds for cancellation of this Agreement and/or removal of the exhibit by the Exhibitor, at the Exhibitor's expense, promptly upon notification from NAF. Exhibit staff who purchase an educational pass to attend educational content are not to engage in promotional activities within the CME activity or in any space outside the exhibit hall.

16. No refunds of fees will be made in the case of cancellations or removal of exhibits pursuant to paragraphs 14 and 15 of these Rules and Regulations. Additionally, Exhibitors agree to reimburse NAF for all costs incurred by NAF, including reasonable attorneys' fees, in handling or responding to any violation of any provision of this entire Agreement.

17. In connection with NAF's Annual Meeting, Exhibitor understands that any information NAF may furnish is confidential and not available to the public. Exhibitor agrees that all written information provided by NAF, or any information which is disclosed orally or visually to Exhibitor, or any other exhibitor or attendee, will be used solely in conjunction with Exhibitor's business and will be made available only to Exhibitor's officers, employees, and agents, unless authorized in writing by NAF. All information is confidential and should not be disclosed to any other individual or third parties.

18. It is further understood and agreed by Exhibitor that no claim or delay by NAF in exercising any right, power, or privilege hereunder shall operate as a waiver hereof, nor shall any single or partial exercise thereof preclude any other or further exercise of any right, power, or privilege hereunder. Exhibitor also understands and agrees that monetary damages would not be a sufficient remedy for any breach of this agreement by Exhibitor or Exhibitor's officers, employees, or agents and that NAF will be entitled to specific performance and injunctive relief as remedies for any such breach. Such remedies shall not be deemed to be exclusive remedies for breach of this agreement by Exhibitor or Exhibitor's officers, employees, or agents, but shall be in addition to all other remedies available at law or equity.

19. By signing this Agreement, the Exhibitor affirms that all information contained herein, contained in any past and future correspondence with either NAF and/or in any publications, advertisements, and/or exhibits displayed at, or in connection with, NAF's Annual Meeting, is truthful, accurate, complete, and not misleading.

20. Changes in the information provided to NAF are permitted only upon NAF's written approval. Exhibitors agree to notify NAF of any such proposed changes at least 10 days prior to the commencement of the exhibit. NAF, at its sole discretion, may cancel this agreement if (1) NAF does not approve the changes or (2) notification of the changes is less than 10 days before the exhibit.

I agree to comply with Exhibit Rules and Regulations 7-20. I also agree to hold in trust and confidence any confidential information received in the course of exhibiting at the NAF Annual Meeting and agree not to reproduce or disclose confidential information without express permission from NAF. Violation of this paragraph could result in civil and/or criminal penalties.

Company Name: BioMax Procurement Services  
 Signature: [Signature]  
 Print Name: Susan Tennenbaum  
 Title: C.E.O.  
 Date: 3-25-15

Submit contract and payment or payment information by mail or fax to:

National Abortion Federation  
 P.O. Box [redacted]  
 1660 L Street, NW, Suite 450  
 Washington, DC 20036  
 Phone: 202 667 5881 [redacted]  
 Fax: 202 667 5890

ACCEPTED: NATIONAL ABORTION FEDERATION

Signature: [redacted]  
 Print Name: [redacted]  
 Title: Group Purchasing Manager  
 Date: \_\_\_\_\_  
 Exhibit Agreement: \_\_\_\_\_



NATIONAL ABORTION FEDERATION  
 WRITTEN AGREEMENT FOR COMMERCIAL SUPPORT

The National Abortion Federation (NAF) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) credits for our educational activities. As an Accredited Provider, NAF is committed to presenting CME activities that promote improvements or quality in healthcare and are independent of the control of commercial interests. As part of this commitment, NAF has outlined in this written agreement the terms, conditions, and purposes of commercial support for our CME activities. Commercial Support is defined as financial, or in-kind, contributions given by a Commercial Interest, which is used to pay all or part of the costs of a CME activity. The ACCME defines a Commercial Interest as “any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies.” The ACCME does not consider providers of clinical services directly to patients to be commercial interests.

Title of CME Activity		2015 Annual Meeting and related workshops, seminars, and auxiliary meetings	
Activity Location	Baltimore, MD	Activity Date	April 18-21, 2015
Name of Commercial Interest			
BioMax Procurement			
Amount of Educational Grant Support (direct or in-kind)			
Amount of General Support (direct or in-kind)		\$1900	
Support will be used for the following:			
Speaker Honoraria	Speaker Expenses (itemize)	Meeting Expenses (itemize)	Other (list)
		\$1900 Exhibit booth	

## TERMS, CONDITIONS, AND PURPOSES

### Independence

1. This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of the Commercial Interest.
2. The Accredited Provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CME, selection of education methods, and the evaluation of the activity.

### Appropriate Use of Commercial Support

3. The Accredited Provider will make all decisions regarding the disposition and disbursement of the funds from the Commercial Interest.
4. The Commercial Interest will not require the Accredited Provider to accept advice or services concerning teachers, authors, or participants or other education matters, including content, as conditions of receiving this grant.
5. All commercial support associated with this activity will be given with the full knowledge and approval of the Accredited Provider. No other payments shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.
6. The Accredited Provider will upon request, furnish the Commercial Interest documentation detailing the receipt and expenditure of the commercial support.

### Commercial Promotion

7. Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.
8. The Commercial Interest may not be the agent providing the CME activity to the learners.

### Disclosure

9. The Accredited Provider will ensure that the source of support from the Commercial Interest, either direct or "in-kind," is disclosed to the participants, in program brochures, syllabi, and other program materials, and at the time of the activity. This disclosure will not include the use of a trade name or a product-group message. The acknowledgment of commercial support may state the name, mission, and clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature.

The Commercial Supporter and NAF agree to abide by all requirements of the Accreditation Council for Continuing Medical Education (ACCME) *Standards for Commercial Support of Continuing Medical Education* (appended).

Name of Accredited Provider National Abortion Federation

Tax ID Number

43-1097957

Contact Person



Email



Address

Phone Number (202) 667-5881

Fax Number (202) 667-5890

Name of Commercial Interest

Contact Person BioMax Procurement

Email procurement@bioxmaxps.com

Address

Phone Number 562-281-5041

Fax Number

Tax ID

Number

Educational Partner (if applicable)

Address

City, State, Zip

Contact Person

Email

Address

Phone Number

Address

Fax Number

AGREED BY AUTHORIZED REPRESENTATIVES

Commercial Interest

*[Handwritten Signature]*

Signature and Date

*Robert Sarkis*

Print Name

*Procurement Manager*

Title

Accredited Provider



*4-15-15*

Print Name

*Group Purchasing Manager*

Title

Educational Partner (If applicable)

Signature and Date

Print Name

Title

Exhibit 13

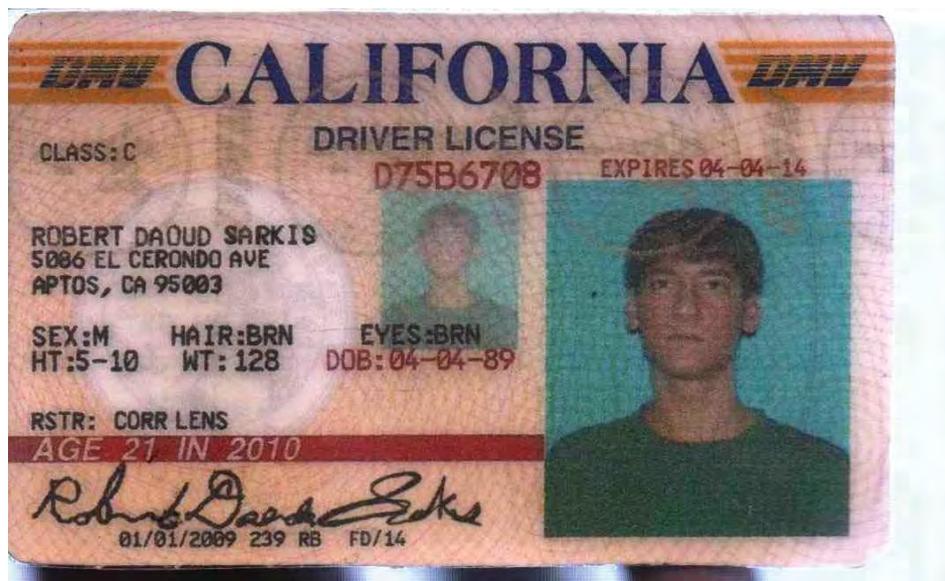




Exhibit 14



Exhibit 15

**Susan Tennenbaum**

**Founder & CEO**

[susan@biomaxps.com](mailto:susan@biomaxps.com)

562.281.5041 o  
562.977.8693 c



**Robert Daoud Sarkis**

**Procurement Manager/VP Operations**

[bob@biomaxps.com](mailto:bob@biomaxps.com)

562.281.5041 o  
408.645.0293 c



**Brianna Allen**

**Procurement Assistant**

[brianna@biomaxps.com](mailto:brianna@biomaxps.com)

562.281.5041 o  
562.354.1806 c



Exhibit 16



NATIONAL  
ABORTION  
FEDERATION

CONFIDENTIALITY AGREEMENT FOR NAF ANNUAL MEETING  
APRIL 18-21, 2015

It is NAF policy that all people attending its conferences (Attendees) sign this confidentiality agreement. The terms of attendance are as follows:

- 1. Videotaping or Other Recording Prohibited:** Attendees are prohibited from making video, audio, photographic, or other recordings of the meetings or discussions at this conference.
- 2. Use of NAF Conference Information:** NAF Conference Information includes all information distributed or otherwise made available at this conference by NAF or any conference participants through all written materials, discussions, workshops, or other means. NAF Conference Information is provided to Attendees to help enhance the quality and safety of services provided by NAF members and other participants. Attendees may not use NAF Conference Information in any manner inconsistent with these purposes.
- 3. Disclosure of NAF Materials to Third Parties:** Attendees may not disclose any NAF Conference Information to third parties without first obtaining NAF's express written consent, which will not be unreasonably withheld. An Attendee may distribute NAF Conference Information to the Attendee's employees without written consent, provided that the Attendee instructs each such employee concerning the Attendee's obligations under this Agreement. Attendees are responsible for ensuring that any third party (including employees) to whom it discloses NAF Conference Information complies with the terms of this Agreement, and are subject to enforcement, as described below, if any such third party (including employees) fails to comply.
- 4. Requests for disclosure of NAF Conference Information:** Upon learning that NAF Conference Materials are or are likely to become the subject of a discovery request in a judicial, legislative, administrative, or other legal proceeding or investigation, Attendees must: (a) immediately notify NAF, (b) cooperate with NAF (if NAF so requests) in taking all lawful steps to resist or narrow the request or requirement, and (c) if disclosure is required or deemed advisable by NAF, cooperate with NAF in obtaining a protective order or other reliable assurance that the NAF Conference Information will receive confidential treatment.
- 5. Inadvertent Disclosure of NAF Conference Information:** In the event that an Attendee discovers that he or she has inadvertently disclosed any NAF Conference Information to any third party without having first obtained NAF's express written permission, the Attendee must immediately notify NAF and shall cooperate with NAF in retrieving the NAF Conference Information or taking other reasonable steps to prevent further unauthorized disclosure.
- 6. Enforcement:** NAF reserves the right to terminate the membership (where applicable) of any Attendee found to violate this Agreement and/or take legal action to seek redress for any violations of this Agreement.

By signing below, you hereby agree to comply with all of the terms of this Agreement:

Adrian Lopez  
Name (Please print clearly)

[Signature] 4/18/15  
Signature Date

BioMax  
Name of Organization

Procurement Techt  
Professional Title

Exhibit 17

mistress  
america  
august 14

**The New York Times** | <http://nyti.ms/1LBNizy>

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U.S.

# With Planned Parenthood Videos, Activist Ignites Abortion Issue

By **JACKIE CALMES** JULY 21, 2015

WASHINGTON — David Daleiden would only reluctantly talk about himself: “I don’t think I’m the story,” he said by phone on Tuesday. But he is the man behind the story and the hidden camera — the anti-abortion activist who has provoked a storm with his video stings alleging that Planned Parenthood clinics are selling tissue from aborted fetuses for profit, a charge the group denies.

On Tuesday, for a second time in two weeks, a video appeared online showing a Planned Parenthood official in California discussing over lunch the price of providing fetal parts to a man and woman who are never shown on camera, but who are posing as buyers from a firm that procures tissue for medical researchers. Once again, Planned Parenthood condemned the scam for deceptively characterizing its handling fees to cover expenses, which are legal, as illegal profiteering.

The man off camera, just as in the first video, is Mr. Daleiden. And, he said in the interview, more episodes are coming. Planned Parenthood’s recent prediction that he must have “thousands of hours of videotape” from infiltrating its clinics for two and a half years is “probably an accurate estimate,” Mr. Daleiden, 26, said. He guessed he had enough recordings for perhaps a dozen videos that he can release at the rate of one a week for the next few months.

The time frame all but ensures political tumult ahead. The videos will coincide with the Republican-controlled Congress’s final weeks of work on spending bills needed to finance the government after the Oct. 1 start of the next fiscal year. The

first videos have already given impetus to conservatives' push to hold those bills hostage unless they are amended to eliminate money for Planned Parenthood and other family planning programs. The risk, as in past years, is a government shutdown.

The videos are also arriving as the large field of Republicans seeking their party's 2016 presidential nomination takes final shape, and televised debates begin next month. Already, the rivals are competing to denounce Planned Parenthood as they seek to appeal to anti-abortion conservatives in the party's base.

"I'm going to do everything I can to stop it," Senator Rand Paul of Kentucky vowed on Fox News. "We should stop all funding for Planned Parenthood."

One House committee, with encouragement from Speaker John A. Boehner, Republican of Ohio, has opened an investigation of the alleged criminal trafficking in fetal tissue, and the Republican leaders from two other committees have written to the Justice Department asking for investigations as well. Seven states are pressing their own inquiries, including two investigations ordered by Gov. Bobby Jindal of Louisiana and Gov. Scott Walker of Wisconsin, both Republican presidential candidates.

The White House and congressional Democrats, who are allies of Planned Parenthood and protective of women's abortion and reproductive rights, have been mostly silent. They say that Planned Parenthood has done a good job in its own defense, and that they do not want to give the story any more oxygen than it already has — especially since some video stings of the past came to be discredited without Democrats' help.

Also, Democrats said they were counting on Republicans to overreach with their attacks — inciting a backlash from women, younger voters and political independents who support Planned Parenthood — and then retreat, as has happened before.

"By Boehner and the Republicans leaping into the middle of this, I think they further demonstrate the political nature of the attack," said Geoff Garin, a Democratic pollster. "And as someone who's done a lot of polling about Planned

Parenthood, I feel reasonably confident that Americans, particularly American women, will see this as about politics, not about health care.”

But Mr. Daleiden expressed confidence that this time is different, and that his videos will change minds.

He wanted to start releasing them a year ago but said he needed to get more material against what he called “the whole world of selling baby parts.”

“When you know that you have something powerful, that’s going to shock a lot of consciences,” Mr. Daleiden said, it is “natural not to want to keep that under wraps.”

He rejected a question about the potential benefits of research using fetal tissue for curing and treating diseases, saying, “Most fetal tissue work is real Frankenstein stuff.” He also dismissed critics of his undercover methods, which included forming a fake company and mysterious tax-exempt advocacy group, saying that only Planned Parenthood or its supporters would object.

Mr. Daleiden said he had been an anti-abortion activist for more than a decade. He formed an anti-abortion group at his high school in Sacramento, a period when he met another young activist named Lila Rose. Until now, Ms. Rose had been better known to Planned Parenthood and other abortion-rights advocates for video stings by her group, Live Action. “Lila and I have been friends for many, many years,” Mr. Daleiden said.

He continued his anti-abortion work as a student at Claremont McKenna College, in Claremont, Calif., where, he said, he got a degree in government and befriended the conservative activist Charles Johnson. Mr. Johnson is a self-described “citizen journalist” whose confrontational posts on Twitter — in particular one that solicited donations to “take out” a civil rights activist — recently got him banned from the website.

Mr. Daleiden worked for Live Action in college and became director of research in 2008. According to a biography retrieved from an archived Live Action web page, Mr. Daleiden participated in a Genocide Awareness Project, displaying in public

large images said to be of aborted fetuses, and he was banned for a time from visiting Pomona College after videotaping a Planned Parenthood official there for proof that the group was covering up statutory rape.

Some liberal websites have suggested that Mr. Daleiden is also a friend and ally of James O’Keefe, who, like Ms. Rose, is a well-known video provocateur, for his campaign that brought down the liberal community organizing group Acorn. “I would consider James a friend,” Mr. Daleiden said. “But in reality, I’ve literally met him once in my life.”

None of the other prominent activists have been involved in his recent 30-month project to uncover evidence of illegal trafficking in aborted fetuses, he said.

In his Live Action biography, Mr. Daleiden attributed his anti-abortion militancy to seeing images of aborted fetuses as a teenager. But in the interview, he also said, “I am the child of a crisis pregnancy.”

Mr. Daleiden said his parents, who are now divorced, were juniors in college when his mother became pregnant. He said he had grown up “culturally Catholic,” that is, not particularly religious. Yet he now calls Pope Francis “my inspiration,” although Mr. Daleiden’s activism long predates the pope’s ascension, and he points to Francis’ “emphasis on just being active, on going outside of yourself to accomplish things.”

In 2013, Mr. Daleiden not only formed an anti-abortion group, the Sacramento-based Center for Medical Progress, but also filed state papers to create a Norwalk, Calif.-based company, BioMax Procurement Services, as part of his undercover ruse. BioMax was described as a company that “provides tissue and specimen procurement for academic and private bioscience researchers,” and that is committed to helping “facilitate world-changing discoveries.”

The Internal Revenue Service granted the Center for Medical Progress tax-exempt status, allowing donors to deduct contributions, as a nonprofit under the agency’s category for “Diseases, Disorders, Medical Disciplines: Biomedicine, Bioengineering.” A separate category applies to anti-abortion groups.

Mr. Daleiden said he had received a total \$120,000 over three years from 12 to 15 “very resourceful, committed individuals” who “believed in the mission and wanted to see it done.” He would not name them, and there is no record that the center filed federal 990 tax forms that might identify donors.

The center’s mission is not the one claimed for BioMax of spurring medical discoveries. Instead, the website defines Mr. Daleiden’s Human Capital Project as a 30-month effort at “documenting Planned Parenthood’s illegal sale of body parts from aborted fetuses.”

Mr. Daleiden also would not name the women who went undercover with him. He said he had worked with five to seven women, some of whom were also anti-abortion activists. Others, he said, were hired “to fill the role.”

A lawyer for Planned Parenthood has raised questions about whether Mr. Daleiden violated state or federal laws by fraudulent corporate and tax filings. On Monday, Mr. Daleiden issued a statement in response: “The Center for Medical Progress follows all applicable laws in the course of our investigative journalism work.”

But the description of the center on its website has changed. Originally it was a nonprofit “dedicated to informing and educating both the lay public and the scientific community about the latest advances in regenerative medicine, cell-based therapies, and related disciplines.” Recently it became “a group of citizen journalists dedicated to monitoring and reporting on medical ethics and advances.”

***Correction: July 21, 2015***

*An earlier version of this article referred incorrectly to David Daleiden’s fake company, BioMax Procurement Services. The company is not tax-exempt; it is his advocacy group, the Center for Medical Progress, that is tax-exempt.*

Kitty Bennett contributed research.

A version of this article appears in print on July 22, 2015, on page A1 of the New York edition with the headline: With 2 Videos, Activist Ignites Abortion Issue.

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Exhibit 18

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**25 July 2014**

**Speakers:**

-Deborah Nucatola, MD, *Senior Director of Medical Services, Planned Parenthood Federation of America* (“**PP**”)

-Two actors posing as Fetal Tissue Procurement Company (“**Buyer**”)

*frame counts are approximate*

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**Buyer:** So, I have a dilemma to ask the doctor.

**PP:** OK.

**Buyer:** I really, after this week was looking forward to a glass of wine, maybe a bottle, to share of course. I have such a sinus headache though, I have advil sinus, not over the counter though. Can I mix them?

**PP:** Uh-huh. Oh yea.

**Buyer:** Please tell me yes. Ok.

**PP:** Absolutely. I recommend that you drink as much water as you do wine, or your headache is going to get worse. But yea, no that should be fine. So, where are you guys based?

**Buyer:** Here we go, Norwalk. Based out of Norwalk.

**PP:** oh. I was sitting here trying to figure out when we ended up where we are. I was like, are you close you close to here?

**Buyer:** You’re based out of Sherman Oaks right?

**PP:** Yes, and I’m actually seeing a patient in Calabasas today.

**Buyer:** So you ok now? Glad to be out of your car?

**PP:** Oh, I’m so happy to out of my car. Luckily I can take Beverly Glen home, so I’m very happy. I won’t have to deal with any freeways after.

**Buyer:** Well, again we appreciate, I give you time to look over the menu.

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**PP:** I'm actually going to talk to the waiter and be annoying. But, I pretty much know what I'm going to do.

**Buyer:** What kind of wines do you like?

**PP:** I'm generally big red fan, myself.

**Buyer:** No. All girls are white.

**PP:** You know, I think what is, I justify the red because it has health benefits. Where the white is purely pleasure. All go for anything, and white's cold and it's ninety degrees outside, so whatever you like.

**Buyer:** Well, I love red, but I was for sure thinking that-

**Waitress:** How are you? Iced water ok to start?

**PP:** I'm well thank you. Iced water fabulous.

**Waitress:** You need an iced tea or anything?

**PP:** No, thank you. Do you still have the wine list?

**Buyer:** They took it. The other folder? They took it.

**PP:** Good we've finally been able to connect, I know it's been difficult.

**Buyer:** Was it a good time for you?

**PP:** Yes, I've been in LA for almost two weeks. I'm leaving again for two weeks on Monday.

**Buyer:** So, I want to pick your brain and make your time as productive as possible. How much time do you have? I want to make sure we're not-

**PP:** I have a meeting at 4.

**Buyer:** At 4. Ok, how long would it take you to get there?

**PP:** I'm going over Beverly Glen. As long as we're done by three I should be fine. I mean, I don't what you guys have planned, but I think we should have time.

**Buyer:** Picking your brain. Picking your brain, and having a glass of wine.

**PP:** What are you guys having?

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**Buyer:** For food? I like the look of the salmon, with the cherry tomato and the basil.

**PP:** Oh then it has to be white. It has to be.

**Buyer:** It does not have to be.

**PP:** It does. We can do a rosé as well. I'll let them pick, I like to do it based on what we're eating.

**Buyer:** I am not picky. But, I like you idea about red. You can justify it right?

**PP:** Of course. It has health benefits.

**Buyer:** If it's a good red wine, the cheap ones, it's mostly coloring, from what I hear.

**PP:** Yes, if it's done well and made well, it has health benefits. That's my uh, that's my line.

**Buyer:** So, the main thing, well, not the main thing that I would like to discuss is, I'd really like to connect with people who feel they don't know we're out there. They don't know there's this opportunity. And that could be a little touchy, for them more for us, and I want to be delicate to any reservations.

**PP:** Yeah, you know, I don't think it's a reservations issue so much as a perception issue, because I think every provider has had patients who want to donate their tissue, and they absolutely want to accommodate them. They just want to do it in a way that is not perceived as, 'This clinic is selling tissue, this clinic is making money off of this.' I know in the Planned Parenthood world they're very very sensitive to that. And before an affiliate is gonna do that, they need to, obviously, they're not—some might do it for free—but they want to come to a number that doesn't look like they're making money. They want to come to a number that looks like it is a reasonable number for the effort that is allotted on their part. I think with private providers, private clinics, they'll have much less of a problem with that.

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**Buyer:** Okay, so, when you are, or the affiliate is determining what that monetary—so that it doesn't create, raising a question of this is what it's about, this is the main—what price range, would you—?

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**PP:** You know, I would throw a number out, I would say it's probably anywhere from \$30 to \$100 [per specimen], depending on the facility and what's involved. It just has to do with space issues, are you sending someone there who's going to be doing everything, is there shipping involved, is somebody gonna have to take it out. You know, I think everybody just wants, it's really just about if anyone were ever to ask them, "What do you do for this \$60? How can you justify that? Or are you basically just doing something completely egregious, that you should be doing for free." So it just needs to be justifiable. And, look, we have 67 affiliates. They all have different practice environments, different staff, and so that number—

**Buyer:** Did you say 67?

**PP:** 67.

**Buyer:** Okay. And so of that number, how much would personality of the personnel in there, would play into it as far as how we're speaking to them—

**PP:** I think for affiliates, at the end of the day, they're a non-profit, they just don't want to—they want to break even. And if they can do a little better than break even, and do so in a way that seems reasonable, they're happy to do that.

Really their bottom line is, they want to break even. Every penny they save is a just pennies they give to another patient. To provide a service the patient wouldn't get.

**Buyer:** Because of the losses in that area.

**PP:** Exactly. So, I don't know your, what you're thinking as far as range. If you're thinking about just California, if you're thinking about just the West Coast, if you're thinking about bigger regions.

**Buyer:** Right now, we're obviously right here in Norwalk, would love to uh-

**Buyer:** Get established locally, I think is kinda the primary concern. Uh, to be established with a collection site for fetal tissue locally, and then ultimately, I think, what I would like to see happen, which would be something very different, as far as the different procurement organizations that exist right now, for example, StemExpress, they cater to researchers across the country but they're sourcing material from just Northern California.

**PP:** Exactly.

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**Buyer:** But when we're talking about stem cell research, cell viability and the amount of time that we're actually looking at from extraction to you know, getting it to the laboratory is critical. So, ideally if what we can provide is to be able to source as locally as possible to where a given research client is, that would be really, a huge competitive advantage for us. And, also I think that's something that researchers would want, that would facilitate the whole thing a lot better.

**PP:** And then, what gestational age range were you thinking? When can you start? Because you know, I've worked with people who start at 9 weeks. I've had the ones who wanted the higher gestational ages.

**Buyer:** There's times depending on the specific project that people want pancreas at 9 weeks, 10 weeks. From my perspective, I think it's not going to be reasonable to be collecting at a site that does not have the capability to go farther up in to the 2nd trimester. It doesn't mean that the facility needs to go all the way up to 24 weeks every time but, to be able to at least say we can go up to 12 and 16, 12 and 18 would probably be better, for the age protocols that require later gestational tissue, 18 weeks is kind of the lowest range, 18 to 20, 24 for certain things. So, if we could get up to 18, that would make it worth it to be operating at that site.

**PP:** Ok, and we have some affiliates that use digoxin or some other feticide and that would basically limit. So, in general, you're probably going to be able to get to twenty weeks, it's going to be very unusual to get a patient that's above twenty weeks. At the Planned Parenthoods in California. New York, doesn't use digoxin at all-

**Buyer:** Not at all.

**PP:** Not at all. There's like a culture war on feticide. People on the west coast seem to prefer feticide, people on the east coast seem to not believe in feticide. Everyone has their own styles.

**Buyer:** Eleanor Drey was telling me that they do not use it as UCSF.

**PP:** That's not Planned Parenthood, Eleanor hates misoprostol and digoxin. That's Eleanor.

**Buyer:** So, that's a personal- ok.

**PP:** It's a data poor zone, I wouldn't say it's a data free zone because there is some limited data and it is up to interpretation as to what you think of that data. I think it also has to do, again, with model of delivery. Eleanor is in a hospital where they can hold patients all day long, if they need, even overnight. In outpatient clinics I think people are trying to do so in a much more efficient way. So, in general what I'm saying you'll probably get up to twenty and then after

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twenty you' getting feticide. But there are three affiliates right now in California that go up to 20 weeks. The other thing is, have you been speaking with Family Planning Associates at all, in California?

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**Buyer:** I was told that FPA- FPA is the same thing right? I was told that they start digging at thirteen weeks, once they go into the second trimester.

**PP:** They're not digging at thirteen weeks.

**Buyer:** That's not true?

**PP:** Not at all, I know they're medical director, I can connect you with their medical director, that's not the case.

**Buyer:** Wow, because I was shocked. When I heard that I thought, wow well- Do you have her name?

**PP:** Her name is Rachel Steward. I'll connect you all via e-mail.

**Buyer:** That would be excellent. I know that we had spoken a couple times about the Orange County affiliate, which I think, is literally the closest to us right now.

**PP:** Yea, and I reached out to their medical director, and they're working with someone, I don't know who it is, but they're just not interested in talking with anyone at the moment. I don't know what's going on with the San Diego and Riverside County affiliates- Orange is Orange and San Bernardino, San Diego is San Diego and Riverside. In L.A. there is the affiliate in Pasadena.

**Buyer:** And how far do they go?

**PP:** I think they only go up to 14 weeks.

**Buyer:** Eh, that's not really-

**PP:** L.A. is working with a partner-

**Buyer:** Novogenix

**PP:** Yea, I guess.

**Buyer:** You don't know for sure, I guess.

**PP:** I know the people, I don't know- I know the staff. I've never actually asked, because that's a decision that's not actually made by me. But, it's an established

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relationship, I don't imagine that it's going to change in the short term. Which, is why I think family planning associates is an option because they go from Bakersfield, all the way down to Orange County, so pretty broad range. They definitely go to 18 weeks, and at some sites, a little higher than 18 weeks.

**Buyer:** When we were talking saying the **\$30-\$100** price range **is per specimen** that were talking about, right?

**PP:** Per specimen. Yes.

**Buyer:** And what does per specimen mean for Planned Parenthood? Is that, you guys consider that, a discrete sample.

**PP:** One case. One patient, and again, there's different steps involved too right? There's who's going to consent the patient to donate. It it's staff, then that's staff time, that gets figured into it, as opposed to if there's someone that's there, then it's just flagging the interested or "eligible" patient and somebody else does the work. It's basically for individual patient. So, if you end up shipping four individual specimens, that's still one patient.

**Buyer:** Yea, that's what I was going to say. If we take kidney, liver, thymus and say bone marrow-

**PP:** Yea, to us it's all just one.

**Buyer:** Because when we charge, that's four different specimens to a researcher but-

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**PP:** That's basically the way that they do their work. The way they budget is by the amount of time they spend on one patient. That's one bunch of tissue, they handle the tissue, they do what they do, you know, in that way, so. But yea, that's the way- It depends, if you're expecting somebody to process, and package, identify tissue for you, it's going to be at the higher end of the range. In all cases, it's really gonna be about staff time, because that's the only cost to the affiliate. And then, if you want space. For example, it is, it's Novogenix is at PPLA, they have a corner of the lab. And they set up, come in with their coolers and everything, and handle all the tissue, but they're taking up space, so I'm sure the affiliate considers that when they come up with what's reasonable. But I don't think anybody's gonna come up with a crazy number, because they're all very sensitive to this too. And at the end of the day, they want to offer this service because patients ask about it.

**Buyer:** I think that's what is most important to me is the patient and how can we serve them, and how can we make this- just the whole experience, well maybe

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just my passion for the patient. So can you give me an idea of what that's like for the patient? I get to them after, but doing that, is there a way to do it in a delicate way so that—

**PP:** Yea, I mean, there are obviously the patients how come in, who are asking about it from the start so it's easy to talk about. **But the others, I mean honestly, there's not going to be one thing that works for every patient. Every patient experiences a whole wide range of emotions about the experience in general, and so you don't know where they're coming at from there. But I think every one of them is happy to know that there's a possibility for them to do "this extra bit of good," in what they do.** And I think patients respond most to knowing the types of outcomes that it might contribute to, so for example Alzheimer's research, Parkinson's research. I think most of these patients have some experience with at least one of these conditions or another. I think the ones that come in asking are the ones who have already had the experience, that's why they come in asking. But um, **I actually think it's an easier conversation to have, than just consenting them for the procedure in general** because at this point, I think it's more important when you have the conversation. I think that a lot of people feel strongly that the conversation shouldn't be had until after they've made their decision to terminate, they know how far along they are, and they know what's going to happen, and when all that is said and done, and they've had time for all of that to sink in, then it's time to basically say, this is how we normally handle the tissue, but if you would be interested here's another opportunity to contribute to research, contribute to science, donate your tissue. Most patients are very motivated. I haven't really seen very many patients that say no. I was in the O.R. yesterday and we had, I'd say, **18 patients, probably half of them were either got digoxin or were under eighteen and the rest of them all donated their tissue.** So, I don't think- I don't think it's a difficult conversation to have because the difficult stuff has already happened, they're kind of prepped for this. **If anything, this is almost a pleasant surprise in a way, you know you've been through the tough stuff, you've made this difficult decision.** Now there is one more opportunity for you to think about. And, I think they appreciate it.

**Buyer:** And, you're even saying that if you can have the conversation earlier, the earlier the better.

**PP:** Well, we like- there's always concerns too about kind of coercion. So you always have to make sure they've made their decision, to actually have the procedure, and then before you start adding on other things, any time we do any research. And Planned Parenthood has very strict protocols or grounds, if we're doing a research study in general, when the different points in the consent happen. This doesn't fall into the research bucket because it's not a specific protocol, it's not specific project. So, if there's not consented for a specific project, it's not going to an I.R.B., but yet there's still certain principles we still think it's most ethical to follow. And that is just to make sure they've made their

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decision and they're comfortable with the decision, then to say ok, now that you're past that point in the process, now there's one other opportunity we wanted to let you know about.

**Buyer:** Well, it can't hurt if I'm in an area that I'm not familiar with, so, I don't even know how to phrase it. If there is a particular organ that we need, would the procedure be any longer?

**PP:** So, that's a whole 'nother issue, and that's kind of an ethical issue too, ideally you shouldn't do the procedure in any other way. You should always do the procedure the same, and that's what the providers try to do. They're not gonna treat these patients any differently than they would treat any other patients, just the disposition of the tissue at the end of the case is different.

**Buyer:** So, would that not be something- I'm thinking of specific requests that we have from our researchers, so would, obviously, 20, 21 weeks, I imagine this, but I don't know, I imagine it would take longer. Does the patient know that, are they willing to go through that?

**PP:** What would take longer?

**Buyer:** Just the procedure—

**Buyer:** So, I guess cell viability is a concern right? So, some of the intactness of the specimens is a pretty big deal.

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**PP:** **Yea, so that's where we kind of get into an ethical situation**, because what I think most providers don't want to have do, they don't want- In terms of the steps and the preparation, and getting them to the actual procedure, you know, if you really want an intact specimen, the more dilation, the better. **Is the clinic gonna you know, put in another set of laminaria to do something different?** I think they'd prefer not to. For example, what I'm dealing with now, **if I know what they're looking for, I'll just keep it in the back of my mind, and try to at least keep that part intact.** But, I generally don't do extra dilation. I won't put in an extra set of laminaria, or add an extra day, **that's going to add significant cost of expense to everybody.** Basically, if you need to add another set of laminaria, and have the patient come back another day, if you provide procedures enough days in a row that you can do that, then you know, that's a whole 'nother consideration. In general, I'd say most people, unless there's a specific research protocol that's been I.R.B. approved, try to avoid that.

**Buyer:** You're saying, on the researcher side, if their I.R.B. has signed off on what- how they want to do it.

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**PP:** Yeah, I mean, what I mean is, in general the standard protocol should apply. So, in general, patient was seen the day before, the goal is to get a minimum number of laminaria, and that's it. And once they've reached, if they get what they think is reasonable with laminaria, the patient goes home and comes back the next day for the procedure, they get misoprostol for the same amount of time as everybody else. Some patients are going to respond very well, some patients aren't. I don't think there are a lot of providers who A, have to opportunity to say, well, they're not really that dilated so let bring in another set, their schedules just don't work that way. And, kind of ethically I don't think they want to do that, they basically want to treat the patient as they would any other, and again, it's just the disposition of the tissue. So, you know, every case, every patient that consents and wants to participate, doesn't always yield the tissue that you're looking for. If it were to go beyond that, if there were patients who were treated in a different way, specifically to maintain, you know, it opens a whole new avenue. I think there's a difference consent that's involved.

**Buyer:** A different consent?

**PP:** Yeah.

**Buyer:** So, if the patient was one who was very happy knowing where it was going, would you have more freedom?

**PP:** You probably would, but they would have to be consented differently right? Because ideally the procedure that they were consented for, they're not going to have the same procedure. The way it's described in their consent form is different. Right now, when they are consenting to tissue donation, they're just consenting to what happens with the tissue after the procedure is done. They would have to have an extra level of consent that would probably say, "I understand that this procedure may take an extra day, or I might be here extra hours. And so it's adds a complexity level for the patient, but also on the staff and the flow of the affiliate to actually accomplish what they're setting out to accomplish.

**Buyer:** So it sounds like, it's more something if you had in the back of your mind-

**PP:** **Yes. So if I know if somebody's in the clinic, and there's something that's specific they're trying to collect, I'll keep it in the back of my mind, but I'm not going to say no, I'm not going to do this case now, I don't have enough dilation to do that. But we do the best we can with the situation that we have. Like I said, it's just a kind of a consent issue, the idea is they're now not getting the standard of care, like everyone else.**

**Buyer:** But from our end I'm just thinking the consent issue, the staffing, the time, it makes it more complex.

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**PP:** Yes.

**Buyer:** Well, that's good to hear.

**Buyer:** What would you say is the degree of a difference I guess you can make, if you have it in the back of your mind-

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**Buyer:** We need liver and we prefer, you know, an actual liver, not a bunch of shredded up—

**PP:** Piece of liver.

**Buyer:** Yeah. Or especially brain is where it's actually a big issue, hemispheres need to be intact, it's a big deal with neural tissue and the progenitors, because those are particularly fragile. If you've got that in the back of your mind, if you're aware of that, technically, how much of a difference can that actually make if you know kind of what's expected or what we need, versus—

**PP:** It makes a huge difference. I'd say a lot of people want liver. And for that reason, most providers will do this case under ultrasound guidance, so they'll know where they're putting their forceps. The kind of rate-limiting step of the procedure is the calvarium, the head is basically the biggest part. Most of the other stuff can come out intact. It's very rare to have a patient that doesn't have enough dilation to evacuate all the other parts intact.

**Buyer:** To bring the body cavity out intact and all that?

**PP:** Exactly. So then you're just kind of cognizant of where you put your graspers, you try to intentionally go above and below the thorax, so that, you know, we've been very good at getting heart, lung, liver, because we know that, so I'm not gonna crush that part, I'm going to basically crush below, I'm gonna crush above, and I'm gonna see if I can get it all intact. And with the calvarium, in general, some people will actually try to change the presentation so that it's not vertex, because when it's vertex presentation, you never have enough dilation at the beginning of the case, unless you have real, huge amount of dilation to deliver an intact calvarium. So if you do it starting from the breech presentation, there's dilation that happens as the case goes on, and often, the last, you can evacuate an intact calvarium at the end. So I mean there are certainly steps that can be taken to try to ensure—

**Buyer:** So they can convert to breach, for example, at the start of the—”

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**PP: Exactly, exactly. Under ultrasound guidance, they can just change the presentation.**

**Buyer: Okay.**

**PP: So the preparation would be exactly the same, it's just the order of the removal of the products is different. And most people see that as not very-**

**Buyer: Yea, we're not talking about it needs to be a hysterotomy or anything, or something crazy like that, in order to- there's probably an easier solution to this problem.**

**PP: And, we've been pretty successful with that. I'd say.**

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**Buyer: So yesterday was a clinic day. So for example, what did you procure?**

**PP: You know I asked her at the beginning of the day what she wanted, yesterday she wanted, she's been asking, a lot of people want intact hearts these days, they're looking for specific nodes. AV nodes, yesterday I was like wow, I didn't even know, good for them. Yesterday was the first time she said people wanted lungs. And then, like I said, always as many intact livers as possible. People just want—**

**Buyer: Yeah, liver is huge right now.**

**PP: Some people want lower extremities too, which, that's simple. That's easy. I don't know what they're doing with it, I guess if they want muscle.**

**Buyer: Yeah. A dime a dozen.**

**PP: Mhm.**

**Buyer: Yeah.**

**PP: You know, I think it's good to have—so this is another consideration to make, because when you do partner with a clinic, you're probably partnering with the manager, the owner, the director, you're not so much having a relationship with the providers, but I think it helps to have a relationship with the provider, because if you do, you can have this conversation with them, and you can say, this is what we're looking for today, and they're more apt to—**

**Buyer: Keep it in the back of their mind.**

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**PP:** Absolutely. Of course I want to help. I'd rather this actually get used for something, so I think, as much as the patients, the providers absolutely want to help.

**Buyer:** And so, if it's something as simple as converting to breech that doesn't require a separate consent? Does that make the procedure take longer? Is that another step for the provider?

**PP:** No, it's just what you grab versus what comes out. It doesn't make anything any different. The other consideration I think you guys need to make, is who does the training. Because when they do the training, you're basically guaranteed to not get anything.

**Buyer:** Oh, you mean when it's a provider who's been training.

**PP:** One who's training, who's basically doing the procedure, it comes out in a thousand- you're not going to get anything intact, so. What we did for a while, and I think it worked pretty well **if there's a trainee, I'd say, any research case, I'll do.** And as you get better, I'll let you do more, but we really need to do this, intact.

**Buyer:** So, you probably did all the procurement cases yesterday.

**PP:** I didn't have a trainee yesterday so, it's a lot, they're just starting.

**Buyer:** When you said training, I thought you meant tissue training, for clinicians. Because that's something that we should talk about, that impacts the contractual relationship with the facility. Is it, does it tend to be more one way, than the other? Are there many affiliates with staff that have tissue training? they know how to handle it, they know what to do with it, they prefer to have their own people doing it. Or because we've been imagining that we would do it, sending techs of our own in. Similar to the Novogenix situation that you have.

**PP:** I would say, baring some bizarre space issue, because some places have very limited space. Some people would be happy to do as little for you as possible. The more you can do for them, the easier it is. That includes consenting the patients-

**Buyer:** Right, because I was imagining would be doing consent a well.

**PP:** That's probably the biggest inconvenience, ugh that's one more thing my staff has to talk about. **They only have so many minutes to talk to the patient.** If you said you're going to do all the consenting, you're going to collect the tissue, I don't know who would really say no. I really don't.

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**Buyer:** That's really what they want to hear.

**PP:** That's what they want to hear, they want to hear you basically say, other than taking up a little bit of space, this is going to be as low impact as possible, on you and your flow. You're going to need a room, somewhere to consent the patients, once the patient is ready to be consented. So, you're going to need space in the lab, you're going to need a place to consent. That's it, otherwise, as long as you don't leave anything behind, they're going to be happy. Their affiliates who have been doing this for so long, they have staff that are so good at it, they may just say, that it's something that staff can do. Especially because you know, they know how to identify some stuff. They probably wouldn't know how to identify the stuff you need. They're looking for basically, all of the limbs a thorax a head, to present them, "We've got it all." That's the only concern.

**Buyer:** How long, right now, is the average amount of time they spend with a patient?

**PP:** I would say about ten minutes.

**Buyer:** Per patient.

**PP:** Per patient. yes. And also contraceptive counseling and all that.

**Buyer:** That's all pre procedure, pre op.

**PP:** The layout of the actual Planned Parenthood is counseling rooms and procedure rooms. So, yea those are just counseling rooms with a desk and a chair.

**Buyer:** Certainly, I'm not an expert in your clinic flow, I don't presume to know where would best fit in. But, I know that what we've done for other practices, for example the cosmetic facilities. We have a clinic float, our tech kind of acts as a float, they have their clipboard, and kind of mark down all the interested patients, you know ahead of time to try to facilitate that. I don't know if that will help or hinder your process.

**PP:** That's how it works with a lot of the researchers, as well. They kind of just identify who is interested. What did you do at the cosmetic centers?

**Buyer:** That's where we get a lot of the adipose tissue because that is a very rich source of multipotent and pluripotent stem cells.

**PP:** There's a private surgical center that I work with in Calabasas, where I was this morning, they have tons of fat. There were six canisters when I get there this morning.

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**Buyer:** It's not the sexiest thing to work with but-

**PP:** It works.

**Buyer:** Yea, and they pay for it, so. It's a good way to start out. As you can imagine, the jokes are not ending.

**PP:** I bet.

**Buyer:** So, you spoke with the medical director of the Orange affiliate, and they have an organization already, they're not interested in changing? Do you know anything- what in particular they are really satisfied with from that relationship, that maybe we can emulate?

**PP:** I didn't probe, I just asked if they were interested, they said they were working with someone. I don't know who it is. I know years ago there was someone they were working with, and they stopped for a little bit, I don't know if they started again.

**Buyer:** And that situation or the one right now, is that a procurement organization they're working with or is it just a laboratory-

**PP:** I don't know. That, I don't know. I'm just trying to think of our affiliates up and down the west coast. Like I said, San Diego/Riverside, I didn't ask.

**Buyer:** From what I understand, ABR is pretty tight with San Diego.

**PP:** Ok. I'm actually going to be having drinks with their medical director next week so, I can ask.

**Buyer:** Ok, yea, yea. That would be good. We were talking about it, and we if we were looking farther up field rather than locally around here, then it makes most sense to be looking at that swath or southwestern United States going east. Ideally we could just be going north, but Northern California is kind of dominated by StemExpress. Whether or not that will continue, is an open question. From what I understand of them, but it looks like it's better to go East into kinda more open territory right now. We're looking at Arizona, New Mexico-

**PP:** Arizona only goes to 20 weeks. There's is a law that says 20 weeks, it was 18, I think it has a stay, but it is definitely a possibility.

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**Buyer:** But, they do go to 20 in Arizona? Because that's as good as we would be getting in Orange right? Because they start dig'ing at 20 weeks.

**PP:** I'm sure they would be interested.

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**Buyer:** In Arizona? Do you know the medical director, or their patient services person? How many surgical locations do they have?

**PP:** They have two. They used to be two separate affiliates, Northern Arizona and Southern Arizona and they partnered. I think it's Phoenix and Tucson.

**Buyer:** Those are big cities though, I imagine, if those are the only two clinics they probably have pretty good volume then.

**PP:** You know, I can't tell you. Off the top of my head, I don't know but they seem to have pretty good volume. But yeah, I think Arizona's good, and they definitely have the gestation—they go as far as the state will allow them to go.

**Buyer:** Do they have any previous experience with providing, procurement or—?

**PP:** No and they have a fairly new medical director also, but their CEO is very business savvy and like I said, I can't imagine he wouldn't be interested.

**Buyer:** You have to talk directly to the CEO as opposed to-

**PP:** I'll reach out to the CEO, and they have two medical directors, one who handles primary care, and one who handles surgical services. I'll reach out to both of them and ask them who's the best person to connect you with.

**Buyer:** I did see online that the Gulf Coast affiliate as well already does donation services-

**PP:** They do a ton of research, so I wouldn't be surprised if-

**Buyer:** So, I don't know if that's in conjunction with a tissue procurement organization or if they work directly with researchers or if they've already got it covered and there is no need for us but-

**PP:** I can ask. Of all the affiliates they have the largest research program, they have a multi-million dollar budget. I think they are very well connected. I'll ask.

**Buyer:** Yea, the research client community in Texas is kind of a hub. Not so much as California or Wisconsin for example. But in terms of the regions of client base we're looking at is basically California, Wisconsin, North Carolina, and Texas are kind of-

**PP:** North Carolina, they don't have your gestational age-

**Buyer:** Is there- apart from New York, is there any where else on the east coast- if we could open up the research triangle area in North Carolina, the Raleigh to Chapel Hill area. That's a huge, huge market.

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**PP:** We have an affiliate in Orlando that goes to 20 weeks right now. I'm pretty sure. We have several affiliates not just in New York city that go to at least 18. I think, I have to see, the southern New England affiliate, Connecticut and Rhode Island and then there's Massachusetts, which is huge, but they also have a very developed research program. I'm sure whatever they are doing, they're doing locally. It's worth reaching out.

**Buyer:** Washington DC? I met Dr.-

**PP:** I think they only go to 14 weeks. Genola Perry is their medical director.

**Buyer:** I didn't meet her, I met the guy who is also the medical director for NAF. Matt Reeves.

**PP:** Matt Reeves, he's a provider there. Yea, I'm pretty sure they only do 1st tri's there. Not positive.

**Buyer:** I know that- He and I spoke about second trimester and he indicated he had good volume. It was an interesting conversation because he's friends with someone, I think it was in Pennsylvania, who was actually a researcher and so he's like: "Oh yea, in the '90s we used to collaborate all the time, it was great."

**PP:** I'm trying to think of the meeting that I had with pretty much all the later 2nd trimester providers.

**Buyer:** Did people talk about this kind of stuff there, was there a good response to it? What was your impression?

**PP:** Just causally, the meeting was for several other purposes. I'm just trying to think of who was there. Like I said, the Southern New England affiliate was there along with Connecticut and Rhode Island. Gulf Coast was there, Minnesota, North Dakota and South Dakota go up to 20 weeks. Middle of the country-

**Buyer:** They're within courier distance though.

**PP:** Yes they are.

**Buyer:** Yea, that might be a good one. That's what I mean by sourcing tissue, as locally as possible to a client. Because if we can get it to a point where it's not a matter of FedExing it over night or delivery or something like that, it's just a matter of somebody couriating it a three or four hour drive. That's kind of the critical that makes a huge difference between us and another organization.

**PP:** Now, is StemExpress just located in Northern California? I don't even know.

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**Buyer:** That's my understanding, they're located in the Sacramento area. Mar Monte, the big Mar Monte affiliate and I think whatever other Southern California affiliates there are.

**PP:** Yea, I know that the Shasta Pacific affiliate works with them. I guess Mar Monte works with them. And many, many years ago there was University of Washington, there was a group at University of Washington that reached out to-

**Buyer:** Yea, University of Washington, that's the NIH they're kind of the official fetal tissue collection service and they- a lot of researchers don't use them- I'm not sure why, I think it's because there's kind of a backlog in their cases. They were the only one around for a long time and the pipeline just doesn't work properly.

**PP:** So I guess my question is, are you guys planning on exhibiting at a Planned Parenthood meeting?

**Buyer:** The one that you mentioned earlier, the one in October, Brianna-

**PP:** Are you going to be in Miami?

**Buyer:** Yea, we're going to barring unforeseen circumstances.

**PP:** That would be a good opportunity, all the medical providers are going to be there, some of the CEO's are going to be there. I mean, you want to talk to the surgical services medical director.

**Buyer:** And the main thing that they're going to want to hear is that we do everything.

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**PP:** Yes. Basically, like I said- Look, **there is not a provider out there, I can't imagine, who I don't know if you talked to Warren Hern at all**, maybe he doesn't care. **But there is not a provider out there, who doesn't want this.** Everybody just sees this as a way to add another layer of good on top of what they're already doing. They already feel that what they're doing is good. Again, the majority of the providers are non-profit organizations like Planned Parenthood or operating on a razor thin budget. So as low impact that you can be on them, the better. I really do think you have a good opportunity with Family Planning Associates in Southern California. As I said, as soon as I get back to my desk I'll connect you guys with Rachel. They're expanding their services in a lot of ways. To my knowledge networking is even easier in California. So, I think that's a fantastic opportunity there. Right now the laws in Texas are crazy, there's two affiliates- there's only seven clinics. Five of them are independent and two are Planned Parenthood.

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**Buyer:** So, low volume [inaudible]

**PP:** High volume, because there isn't anywhere for patients to go. Texas is a huge state and they closed down almost all the clinics. There's a woman named Amy, I'm blanking on her last name. She's from whole woman's health- I'm sure you met her, she got kind of shorter blonde hair, very nice, very outspoken.

**Buyer:** Yea, we spoke with her.

**PP:** She's basically got most the clinics in Texas but then, there's Gulf Coast, like I said, I don't know the specifics of what they're doing, but I'll ask. And then there's Greater Texas, which is Dallas and Austin. I don't think they're working with anyone.

**Buyer:** And, what's their gestational limit?

**PP:** 20 weeks. So I think that, then again, the affiliates in Texas, I think, even if Gulf Coast is working with someone. I think if you can be creative or come up with another way or a better way, **times are hard in TX right now, anything that you can do to make things a little bit easier for them, or a little bit better for everybody**, I think gets your foot in the door. So, I'd be happy to introduce you to both of their medical directors. Paul Fine is Gulf Coast, and Darryl Johnson is Greater Texas. Both Gulf Coast and Greater Texas have pretty well developed structures and pretty independent surgical services, and people in academic research. One other place I would consider, that you're not thinking about possibly is St. Louis.

**Buyer:** Right, Missouri, I think we mentioned that.

**PP:** David Eisenberg is the Medical Director of the St. Louis region. They do 2nd tri's they have a few extensive collaboration with all kinds of research, pretty dynamic medical director, his name is David Eisenberg. I think that's definitely worth your while. And just looking at the map, if there was one place that was untapped, I would say St. Louis.

**Buyer:** And what's the best way- for you to connect us by email?

**PP:** Yea, what I'll do, is kinda reach out and see if any of these folks are interested. Like I mentioned, they all be in Miami in October. I guarantee you, even if I didn't connect you, they would come up to your table, because they're all interested in doing this. To my knowledge, everyone has been looking to do this, but they've only been able to find someone who very local or very small opportunity to do this. If there is an organization that someone is working with that they can make an introduction or connection. I think they would be very open to that. So I think that's a possibility, and like I said, you know, like one thing I think is a big pet peeve for many of them- people kinda just don't understand the

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practice environment. They don't understand the way that patients flow, and how it's going to impact them, so if you can show that you're sensitive to that, that's a breath of fresh air. Just say: "We understand that you're time limited, you have your staff, we want to be as low impact as possible. Just flag the patient that is interested, set some space aside some room for us, we can do the rest. We will handle the tissue, we will do everything, all we're asking for, is your space and consideration." And, I think that- I don't know anyone who would say no.

**Everyone's been looking to do this for a year and a half**, the affiliates in California have been very lucky, because in California there is no shortage of possibilities. That's not the case elsewhere. And definitely saw StemExpress at the NAF meeting but, I don't even know how the connection with Novogenix was made, most affiliates don't even know how to reach out, or who to reach out to, or even how to make this connection.

**Buyer:** Yea. Has the relationship with Novogenix been for the last year and half?

**PP:** I don't know how long it's been, I think it's been about a year or two, yea.

**Buyer:** And what was it about the last year and a half that everybody's talking about? Is StemExpress and the Norcal affiliates?

**PP:** I think it's a variety of things, I think patients are asking more-

**Buyer:** Just more, more people are aware, yea.

**PP:** Patients will call up, make an appointment and say: "I would like to donate my tissue." And the affiliates are really feeling like "Oh wow, I really need to figure out a way to get this done." Because, patients are talking about- you know, in general, in healthcare, a provider is not going to offer a service unless there's demand. And, there is a demand now, I mean, women know that this is something that they can do.

**Buyer:** So, that would be something for us to think about, just women's, making-

**PP:** That's going to be the best money that you spend, it's just word of mouth, it's much better than any ad, or anything you could ever do, if you can get women talking, saying "I want to do this", the providers will then say, "Wow, I need to do this, it's what they think about when scheduling appointments."

**Buyer:** So how many affiliates would you say total, that are actually working with a fetal tissue procurement organization right now?

**PP:** To my knowledge, right now, I only know the California affiliates. When you mentioned Gulf Coast, I didn't even know that, so I don't believe it's—I don't know what it is they're doing, but the Northern California affiliates, and the Southern California affiliates-

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**Buyer:** Because it seemed like kind of a trade off to me, whether to try to focus on affiliates who have experience with doing this, either currently or in the past.

**PP:** Yea.

**Buyer:** But then, if it's somebody who is already involved, then it becomes an issue of competition. Whereas if it's someone who's never done this before, maybe they're interested but how long it's going to take to get started up.

**PP:** Yea, you know, I almost feel like I have to say, California is almost done in this regard-

**Buyer:** Saturated?

**PP:** And it is, the reason that it's saturated too is, Normally, let's say an affiliate, for example, was looking for a lab to work with, to do their pap-smears or their STD tests. They're going to look for someone who gives the best service for the lowest price. This is a little bit different, because they want to do this, but they want to do it in a way that's not going to impact them, and it's much much less about money. You could call them up and say, "I'll pay you double the money," and they're almost more inclined to say no, because it's going to look bad.

**Buyer:** Right.

**PP:** To them, this is not a service they should be making money from, it's something they should be able to offer this to their patients, in a way that doesn't impact them.

**Buyer:** Offsetting their costs.

**PP:** Right. No one's going to see this as a money making thing. The other reason affiliates think this is a good thing is, it's less tissue that they need to worry about, it's taken care of. They have to do something with that tissue, it's hard to find somebody that wants to do something with that tissue, so the fact that there's somebody that's looking for that tissue is-

**Buyer:** And that was a point we were looking into, what if, just taking that from them.

**PP:** That is such a huge service to them, and I just have to say-

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**PP:** -time this came up on a national level, is there are issues with disposal of fetal tissue. Probably, the biggest company in the world that does this, is

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Stericycle. Some anti-choice groups got the names of the board of directors for those companies, and started coming to their houses, making them feel uncomfortable, stop picking up tissue. At the houses of the directors, of a waste management company basically, that just handles biological waste. And, I think that's what's started the conversations with affiliates because they're like: "What am I supposed to do with this tissue?"

**Buyer:** We went to a session on that.

**PP:** Yea, there was a session on that at NAF, because it is a serious issue. That's a service that affiliates need, so I think some affiliates are looking at it as a way- it's not obviously going to account for everything, not everyone is eligible, not everyone is going to donate, you can't take everything, but that has raised an issue so, I don't know if that is ridiculously far-fetched, we'll handle all of you tissue.

**Buyer:** Matt Reeves had actually suggested that to us.

**PP:** Even if you could find a way to do that, can I just tell you? Even if there were people who weren't donating, you'd have huge business just for taking the tissue. People would pay you. They would just say, "Take my tissue!" Then, you could only send off what you wanted to send off, but you would still have to consent the patients though. It's just something to keep in the back of your mind.

**Buyer:** Yea, I was about to suggest that- I mean if it's the situation of, you know, California, so let's say Novogenix is paying \$50 dollars per specimen, and we say we'll do \$60. "Oh, I don't know, it seems a little sketch."

**PP:** That makes it look fishy. Exactly.

**Buyer:** And so, they say, "Alright, well Novogenix is only taking, like, what? They took five samples yesterday-"

**PP:** Yea, we'll take it all.

**Buyer:** Yea, what if we could take it all. That is the better way to negotiate about this.

**PP:** Yea, that's gonna win your business. "We'll take all of your tissue at the end of the day."

**Buyer:** Right. So we're bartering more about services, than money.

**PP:** Yes, and again, affiliates don't - affiliates are not looking to make money by doing this. They're looking to serve their patients and just make it not impact their bottom line. If anything, you can make it even better to their bottom line by giving

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them services in kind instead of money. I think a lot of them will take you up on that. That would definitely get people. Say, **“I’ll give it to you for the same price, AND I’ll do that.”**

**Buyer:** What uh- We only briefly got into it with Matt, what kind of total volume, like, if we’re talking about containers or liters of material, let’s use yesterday as an example, there were 18 cases?

**PP:** 18 cases.

**Buyer:** 18 cases, so for those 18 cases, let’s say it was all boxed up and binned up. What kind of volume of material are we talking about here? Quantitatively?

**PP:** To be on the safe side, let’s say 18 liters.

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**Buyer:** 18 liters. That’s really not a lot.

**Waitress:** Any coffee or tea?

**PP:** No.

**Buyer:** So, normally how are you guys disposing of it when it’s not being donated? Is it going to Stericycle?

**PP:** It goes in a labeled box, and it goes to Stericycle, yes. Stericycle, they handle- this is considered pathologic waste, there’s pathologic waste and biological waste. You know, it has to be labeled in a special way, flagged in a special way. Because apparently, I didn’t know this until this whole issue came up, but apparently- a lot of waste is just steam sterilized and then dumped. If it’s biological waste it has to be incinerated, it has to be tagged for incineration, that adds cost. They only have so many sites that do incineration and they charge those for incineration.

**Buyer:** (inaudible)

**PP:** For everyone. And then when you have less players who are willing to do it, there’s only one price.

**Buyer:** Is there a reason an affiliate just doesn’t have it’s own incinerator? Because that, I mean-

**PP:** I think it’s probably expensive, I think if push came to shove and they had to they probably will. Affiliates are just starting to band together and do certain things, operate labs for example, I wouldn’t be surprised if in the next five or ten

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years, there is somebody who does it, and maybe they take on all of the business- it's still business, they're a non-profit, it's not like they have a lot of money lying around at the start. You have to spend money to do something like that, and they just don't have the money to spend. And, I think they would rather just spend it on helping patients. It's just the right space for it.

**Buyer:** Yea, I mean obviously we're not medical doctors so this is a little far out of our field with that. I'm surprised that incinerations is so expensive. That's it not a- seems like it's just burning up-

**PP:** Yea, it's not just that it's so expensive, especially in California, I mean, I don't know there's emission issues-

**Buyer:** (inaudible)

**PP:** There's gotta be all kinds of regulations that you can police, because you're probably regulated environmentally, you're regulated by OSHA, you're regulated by the state department of health it's just-

**Buyer:** It's not easy.

**PP:** I've said well, can you partner with a hospital across the way- what's the nearest hospital? They have to do something with their waste, they have surgical specimen's and things, what are they supposed to do with everything? Eventually somebody will do it. Eventually it will all make sense. But, no, to take 18 liters of tissue, I mean what do you do at the end of the day? I guess you just ship off your tissue now?

**Buyer:** Oh, you mean when we have access? We collect what researchers want-

**PP:** Yea, and that's it.

**Buyer:** We don't collect- Our tissue procurement really is not based on taking that everything and sorting through it. We're trying to isolate exactly what's needed and move one, Yea. So that was my initial response to Matt Reeves, was like we don't really want to be a disposal service-

**PP:** Yea, nobody does.

**Buyer:** We want the stuff that is actually valuable.

**PP:** Everything just adds another layer of complication to it.

**Buyer:** Yea, interesting.

**PP:** But yea, that would be a huge sell, a huge, huge sell.

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**Buyer:** Yeah. More so than being able to say we'll so \$60 or \$75 per specimen.

**PP:** Yea. For sure. I'm telling you, Family Planning Associates, they may go for their money. Private providers, they are definitely private clinics, and that's why exhibiting at NAF is great. I don't know how their- it depends on the market. In most markets their volume's not going to compare to Planned Parenthood's volume. We have 40 percent of the market in the whole country.

**Buyer:** 40 percent?

**PP:** 40 percent.

**Buyer:** Wow.

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**PP:** Yea. Not that we're trying to, we just do. We're looking now- moving forward as access is getting harder, and laws are changing- to figure out how we can partner so that everybody has access, but the way it turns out, if you look at it today, we have 40 percent because we're the largest provider and we're the target-

**Waitress:** A little more wine, do we split it between the two of you?

**PP:** We should just pour out what's in the bottle. And if we drink it we drink it, and if we don't we don't.

**Waitress:** Yeah.

**PP:** Not gonna throw it away. It'll evaporate. I'm very practical.

**Waitress:** That's good, it's a good way to live.

**PP:** But, because of that, we're the target. And because we're the target, we're not looking to make money from this. Our goal is to keep access available. And if we do something that makes a target, that just removes access for everybody.

**Buyer:** To be sustainable, essentially. Yea, and that's kind of intuitively, I think we've been feeling about the providers we want to partner with, is you know, as far as the Independents, and not to, you know- I think that everyone is doing good work in a really hard situation, not to cast aspersions on that, but a lot of independents don't really seem to have it together, as much as you know, a large center. And-

**PP:** And a lot of them aren't under the scrutiny that we are under.

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**Buyer:** And so just in terms of not only in terms of being able to have a workable relationship, but also having a sustainable relationship down the road. You know, if we partner with a clinic that goes out of business in a year, two years, or whatever, you know, that's no good for us.

**PP:** Well, that's really the fundamentals too, of talking about the cost per specimen. At the end of the day we just want to keep the doors open. And we don't want to let jeopardize keeping the doors open. We just want it to be reasonable for the impact it has on the clinic. This is not a new revenue stream the affiliates are looking at. This is a way to offer the patient the service that they want. Do good for the medical community.

**Buyer:** Right.

**PP:** And still have access at the end of the day. That's really where people-

**Buyer:** And we just want to make sure that we can maintain our access to the stuff and that's why-

**PP:** Absolutely. I'm sure access is critical to you as well as our patients.

**Buyer:** But, that's when those specimen fees come in for us. We want to make sure establish a relationship and keep it, um whatever's the best way to.

**Buyer:** I think just as important though is the volume, knowing that we have it, that we're not making empty promises to people, making sure we have a secure access to a high volume.

**PP:** Absolutely, you know, PPLA for example, probably about 3,000 2nd tri's, 12,000 total. But what you're going to see, and see more of is, the Planned Parenthood affiliates who do go to 20 weeks, their volume is going to go up, it's not going down. Because what's happening is, the laws, the legal environment, is not shutting us down. They're shutting everyone else down, who just don't have their act together because they're just not under the scrutiny. Um, and there are some groups and some independent providers, but there is only so much independent providers can do to withstand the pressure they're getting. Which is, like I said, why we're trying to partner together, to say, "Look we're not going to be able to go to this community, what can we keep your doors open?" We want everyone to keep their doors open, but we have a little more- I wouldn't even call it a resource, I would call it man power. We have a national office, we have people who are doing work on the advocacy front. We try to do everything we can for, our affiliates still need to do the work on the ground at the end of the day. We try to take as much of the burden off, as we can. The same would extend to you. All the burden we can take off is just one more thing.

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**PP:** You know, I would love to find a way to frame this, too. And maybe you guys can think about this. You know it's all about framing.

**Buyer:** To frame if for affiliates or, you mean publicly.

**PP:** Yes, to frame this publicly, because right now, we're in a position where yes, our patients ask about this, and they feel that this is important, and they feel that they're doing a good thing. But there are a lot of people who think that what we're all doing is bad and they don't want it to happen at all. You know, is there a way to continue to frame this, are there things that we can spotlight, benefits. Because if we can reframe the conversation, it's just a win-win for everybody. More patients will want to do it, more affiliates will want to partner with you, and maybe some of the people who are trying to shut it down on every level will not. I don't know how to do that, if I knew how to do that, I would have done it already.

**Buyer:** But you're making me think of other things that I do, you know, sometimes it doesn't have to be a public conversations. It can just spread by mouth, as you said.

**PP:** But, even a public conversation, a few years ago there was someone in the administration, and I'm blanking on who it was, it'll probably come to me, who was just pushing, even when Christopher Reeves was working- there are people who are trying to elevate this and I think we just need to find the right champion.

**Buyer:** Yea, now that you say that, that's very similar to a conversations that scientists in the stem cell research, the regenerative medicine area have been having for many years now. Ever since it's become a political issue, what ten years ago? However long? I was just at ISSCR, International Society for Stem Cell Research. It's like the major meeting, this is my swag from the meeting. You know, every time they have a session on, "How do we communicate with the public?"

**PP:** Yes.

**Buyer:** "About what we know technically and what we're doing." I don't think they're as sophisticated as framing and reframing and discourse and whatever. It's much more techy and kind of nerdy. It's the same kind of problem. I was at an OC business mixer several months ago, and I was talking to someone who does social media about biotech and about tissue procurement. And he says: "Well, if you guys want to increase your client base, you need to be taking pictures of what you do and putting it on Instagram-

**PP:** No, you don't. He doesn't understand what you do. [laughter]

**Buyer:** And, I was like wait a sec, get this though, and I say that to him. And he says: "No, people are going to see it, they're going to be grossed out and

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offended, but there's that fifteen year old emo kid who's going to think that liver is the coolest thing ever. He's going to like it, he's not even a scientist, he thinks it's gross, he likes it because he's a fifteen year old emo kid. And then his dad sees it, and his dad is a doctor, or his dad is a researcher, and so he knows to go to you or to donate to you." And I say, well, but what if his dad is a pastor? You know-

**PP:** Yea, which happens a lot.

**Buyer:** This guy was very- he doubled down. He said: "Yea, people are going to throw stones-

**PP:** There's always-

**Buyer:** "You just have to be proud of what you do, and know that's them, not you. And stand up and-

**PP:** And, I think-

**Buyer:** It's a bold vision, but I don't know if, you know-

**PP:** It is a bold vision, and the conversation needs to continue, but you're right, we all need to figure out a way to talk about what we do. I'm proud of what I do, I know you guys are proud of what you do. But, are there times when I'm sitting on an airplane thinking I don't know if I want to tell this person what I do, because I don't know anything about this person. I have to sit next to this person for the next four hours. It could be the worst four hours of my life. So uh, you don't know, you have to be a little daring, but I do, I do think that we can figure out a way to talk about this. Look we've got to come up with the statistics, four in ten women have had an abortion in their lifetime, you know, by the time they're forty-five- everybody knows somebody who's done this. Wanna know something else? Even more than that I will say, everybody knows somebody who can benefit from stem cells research. We just need to collectively figure out, what the talking points are, but I know that we all want to be strong partners in this for sure. Like I said, I want to see all of this succeed. So, anything that I can do to work for everybody is a good thing.

031493

**Buyer:** **Would there be a way, in the future maybe, if there's a way rather than having to deal with all the different affiliates, is there a way to partner with PPFA directly? To get some kind of pre clearance or something, so that we have-**

**PP:** **So, we tried to do this, and at the national office we have a Litigation and Law Department that just really doesn't want us to be the middle people for this issue, right now. Because we were actually approached by**

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**StemExpress to do the same thing. One of the California affiliates said, "We're working with these people, we love it, we think every affiliate should work with them." And so we had a conversation, and we said, you know, what if we go out and find everyone who is doing this and present everybody with a menu, and at the end of the day they just decided that right now, it's just too touchy and issue for us to be an official middleman.**

**Buyer:** But, when they say right now, do they see a future?

**PP:** Right now, the way the Supreme Court looks, it doesn't look very good. If you talk to my litigation and law folks they will tell you that anything that goes to the Supreme Court right now, we all lose. There is also the cycle right? There's the time of the year, anything that's going to be heard we usually know by April, so after April it's usually ok to talk because we don't want to incite anyone to take it to that level. So, we're at a pretty crappy time right now. We just heard Hobby Lobby and we knew we were going to lose the buffer zone case. **Unless the composition of the Supreme Court changes anytime soon, we don't want to be raising eyebrows.**

**Buyer:** Uh-huh

**PP: But I will tell you that behind closed doors, these conversations are happening with affiliates.** And your presence- yea, in the future sometime, yes. This is something we need to continue the conversation because this is something we are always re-evaluating. And as I mentioned, the patients want to do this, the affiliates want to do this. We just don't feel like it's the right decision at the time. The timing is not right. Hopefully we'll feel better, maybe we'll feel better after November. Maybe things will look a lot better after November, I'm not so sure, I'm hoping. You know, otherwise I might move up to Canada. I can do my work from Vancouver just as well as I can do it from Los Angeles.

**Buyer:** I was just there for ISSCR. Beautiful place.

**PP:** It is a beautiful place. They have wineries, they have farms, very outdoorsy, a lot of snow in the winter but I'll survive. I'll come down to Southern California, my house.

**Buyer:** Ha ha.

036516

**PP:** Yea, we've asked, and it's just not something we can't commit to right now. That doesn't mean that we're not continuing to have these conversations, that we are not going to continue to provide opportunities for our affiliates to connect. So, I really do think that you guys being there in Miami is important, not just for Planned Parenthood, but for all the academics. So, the forum- the meeting you guys would be exhibiting at is a partnership between Planned Parenthood and

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the Society for Family Planning. The Society for Family Planning, is essentially every training program that trains abortion providers in the country, is at that meeting. So this means you're going to have people who are going on and doing this in their private practice, or their going to come and do it for Planned Parenthood. So with the exception of some of the more cowboyish independent providers, who we love and we're trying to support. This is where everybody is, this is a win-win. And then look on the flip side, there maybe people who want to partner with you to procure tissue for them.

**Buyer:** Right. That's what I was thinking when you said academics.

**PP:** Yea, so there's going to be people from all over the sites, you know, Harvard, name a program the will be there. Wash U, OHSU, University of Maryland. We have twenty-three really strong sites, and many other around the country. So, you will be meeting a lot of academics, who really believe in what you do and good contacts, I mean, you've got Matt. He's got the independent provider side. You've got me who's got the PP side, and hopefully you can make some strong academic contacts. With UCSF? I don't know that their are many academic sites, at the volume and support at UCSF are kind of an anomaly and giant.

**Buyer:** They are saturated though, that was the word Dr. Drey used. They're volume is saturated with being committed their local-

**PP:** What about Cook County? Have you connected with Cook County?

**Buyer:** Where is that? Chicago?

**PP:** Chicago. The largest family planning provider in the Mid-West. Cook County hospital, Stroger Hospital-

**Buyer:** And it's a hospital, not an out patient clinic?

**PP:** Not an out patient, it's a hospital.

**Buyer:** And what is it called?

**PP:** Cook county, Ashlesha Patel is the family planning program director. I'll put her on my list.

**Buyer:** And, what's their limit?

**PP:** 24. 20, 24.

**Buyer:** Do they do dig?

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**PP:** Yea, they dig.

**Buyer:** How late?

**PP:** 20, most people do 20.

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**Buyer:** So that- it's not a PPFA National policy though right?

**PP:** Not a PPFA National policy.

**Buyer:** New York is not using it then.

**PP:** **PPFA National policy is you must comply with the Federal Abortion Act. There are a variety of ways to do that.** In fact, you can't do that before 20 weeks. And there are affiliates who start at 20, there are affiliates that start at 22, and there are affiliates who don't do it at all. New York doesn't do it at all, I don't know if you spoke with them. New York City is- what PPLA is on the west coast, New York City is on the east coast. They don't use dig, so you would have up to 24 weeks, the other thing is, that they're volume is probably as big, if not bigger, they do procedures Tuesday through Saturday.

**Buyer:** Yea.

**PP:** This is the type of setting where they check to see if the dilation is enough, if it's not they put another set, and have them come back the next day because they're doing them five days in a row. There you have probably the best opportunity outside of UCSF to get those larger cases. But Cook County is fabulous, it's in the center of Chicago, two airports, plenty of opportunities there.

**Buyer:** I know that we definitely want to get established somewhere local, and just to have that, it's just more stable. You know? It's kind of a sustainability issue-

**PP:** I'm just trying to think of a way to get good volume in California.

**Buyer:** Right. I would love- If we could sit down and have the same conversation with Orange County. I don't know if PP Orange is more tied to their group or PPLA is more tied to Novogenix, you know, who has the stronger-

**PP:** I don't think anybody is tied to anybody. I think the problem with PPLA right now, is that they're going through a leadership change. So, I don't think anything is going to change anytime soon.

**Buyer:** You guys don't- aren't in a position to-

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**PP:** We have an interim medical director, we don't have an ongoing medical director right now, so they're just not in to make any big shifts until a new senior management has kind of settled in. I'll definitely let you know when there's a new medical director on board. You know, Orange I just don't know, I get the feeling that they were like: "We're good." So I didn't push it-

**Buyer:** Can you find out who the company is that they're working with?

**PP:** Sure.

**Buyer:** Because especially if it's not a procurement organization, but just a biotech lab that happens to be in Orange County. So that, I didn't mean to interrupt you. Sorry.

046735

**PP:** Oh no. I'll ask them, but I'll also push Jennefer Russo to your table. She's the medical director of Orange County. I'll make sure you guys connect with her.

**Buyer:** Because that-

**PP:** You guys can have the conversations with her, she can probably she more than I have any idea. Because I can ask what I can ask her, but I don't know what I'm asking her about.

**Buyer:** Because that makes a huge difference, if there's only a lab, local that they're working with, I'm sure that lab doesn't have the kind of volume where they need all of their second tri cases. I would be surprised, unless it was UC Irvine.

**PP:** I don't even know, and like I said, the Novogenix name came about before, they've had three medical directors since the last medical director resigned, she set that up and nothing has been stable enough for them to re-evaluate that situation.

**Buyer:** (inaudible) That's not normal.

**PP:** No, that's not normal. The change is in senior management, one medical director retired. And after she retired, they haven't been able to find a good fit yet.

**Buyer:** So building a relationship with someone and then-

**PP:** Yea, I just don't feel like there's the opportunity for that right now because everything is so transient that, until I feel we've found something with sticking power, it's not worth your while. I do feel like Family Planning Associates has good possibilities. In fact, I'm going to text her right now to ask the dig question. I can't believe that question.

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**Buyer:** I was shocked, there goes that opportunity.

**PP:** I don't think they do dig, I'm going to double check right now. I don't even think they do it at all.

**Buyer:** They must be really concerned about a sheriff is Bakersfield or something.

**PP:** I would be shocked, and she's usually pretty quick, she might be with patients, but let's see. Oh, we just got an answer. They don't do dig until 18.6.

**Buyer:** Oh, 18.6.

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**Buyer:** Can you ask her if they're working with anyone right now?

**PP:** Look what says! "Are you working with anyone." In exact, actual words.

**Buyer:** Read my mind. Is she in the area? Does she want to come and have a drink?

**PP:** She's downtown. In Koreatown actually, where their headquarters is. I trained her.

**Buyer:** Oh wow. So you think FPA is a good provider, in your book they're legit. They're not flaky like the independent providers.

**PP:** Novogenix is very little potatoes, I feel like its'- Doogie Howser basically runs the company, he's a doc. I don't know how he-

**PP:** You're talking about Novogenix? or FPA?

**PP:** Novogenix. FPA is totally worth working with, with their medical director, for many years, I was apprehensive about FPA because it was basically just kind of like a for profit organization. They have a medical director there- they offer prenatal care now, they're offering- they're really rounding themselves out. They're going to be become quite a competitor to Planned Parenthood in California. I'm not worried about it-

**Buyer:** Friendly competition.

**PP:** They're trying to really build- to strengthen themselves to be a long time player in the community, and I think that's an important collaboration.

**Buyer:** Almost like Kaiser.

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**PP:** Oh yea, for sure.

**Buyer:** If, we can offer to an affiliate that we're going to take care of everything, the consenting, the collection, we don't even need an extra room, we just need three feet of space in the path lab, in the back with a dish so we can do that.

**PP:** Uh huh. Which we already have set up, you just have to-

**Buyer:** Right. Is that- are there affiliates, who would just donate the tissue for free?

**PP:** Probably. I mean really, the guidance is, this is not something you should be making an exorbitant amount of money on.

**Buyer:** Is that the PPFA guidance or?

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**PP:** Yes. Our goal, like I said, is to give patients the option without impacting our bottom line. The messaging is this should not be seen as a new revenue stream, because that's not what it is.

**Buyer:** That seems like it would be, and correct me if I'm wrong. Seems like it would be such an easy thing to not show a profit. No matter how much we compensate, it—

**PP:** Yeah. Well, but at the end of the day, you still need to have the paperwork to back it up because, we are under a microscope.

**Buyer:** But your cost, your loss in some areas must be so much that that can be shown to, I don't know-

**PP:** I understand. If you were to look at it in the big picture, yes. But nobody looks at it in the big picture, they look with the little blinders on.

**Buyer:** Ok. I'm just trying to brainstorm. Because, I think offering some people, not only, just offsetting their cost in other areas, seeing the potential for that, besides the potential, for the patient, I'm still going down that road, even though I know, I understand what you're saying. This cannot be seen as, "We're doing this for profit."

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**PP:** No. Nothing, no affiliate should be doing anything that's not like, reasonable and customary. This is not- nobody should be "selling" tissue. That's just not the goal here.

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**Buyer:** Right. And, I never see that as, I don't look at it that way, we're not selling tissue, we're selling the possibility of what the research can offer.

**PP:** I think we all would agree with you. That's just not the perception, sadly, for everybody.

**Buyer:** I mean, researchers are paying for procurement, they're not paying for-

**PP:** Yea, I know.

**Buyer:** You're not buying a brain, you're buying a procurement service.

**PP:** Exactly. Exactly. And, at the end of the day, it is all just sitting there, it's all just going to be wasted otherwise. That's what it is, it's a waste. It's a complete and total waste. I work at a private clinic where, if the patients want to take the remains with them, they can do that. But at the end of the day, it's just being sent off to Stericycle or some other company, I just don't see-

**Buyer:** It could rot in the ground.

**PP:** And have an impact. But, I mean I understand, there's so many ethical levels involved, and people have very strong feeling, and they're entitled to their opinions. But at the end of the day, I'm just trying to make the most people happy. And to do the most with it.

**Buyer:** Right, and do it in a way that's mindful- often times- Lisa Harris was a very interesting presentation, the NAF meeting, how often times stigma masquerades as ethics or conscience, and so again if people are looking at tissue procurement services and looking at it with blinders on, as opposed to seeing the big picture, why are you looking at it with blinders to begin with? That's a manifestation of your own prejudices and judgment.

**PP:** Yea, Lisa's been doing amazing work, for the last five years so on this. That's another affiliate that goes to 20 weeks.

**Buyer:** She said she's a quite a bit of experience with it, she's provided materials to Michigan researchers in the past. Although, it's sounds like her volume is not very big.

**PP:** Oh I don't know her volume- It can't be that big, because they were sending their students to Los Angeles to train.

**Buyer:** Really? Wow.

**PP:** She didn't come across on my list. Like I said I think we kinda went through the folks- Like I said, I think your best bet at this point would be FPA. They have

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a ridiculous volume, and Rachel Steward is the person to connect with. Whenever she answers me, I'll follow that up, but I think you've got some good leads.

**Buyer:** Yea, and if Dr. Russo as well wanted to have a conversation, I think we would both-

**PP:** I think that she's always willing to talk. It's just- we'll get her on a conversation soon, don't want to be too pushy. And when I'm down in San Diego, I'll just learn a little about what they're doing. I didn't realize that the hostess is in a sling.

**Buyer:** Her wrist.

**PP:** Is that what happened? To get surgery or?

**Buyer:** I asked her and she said it's not very exciting.

**PP:** She's in this lovely dress and a sling. It's hard not to notice.

**Buyer:** So, when you're- when you know, in the back of your mind you've got X, Y, and Z organs that need to be procured and we want them to be reasonably intact, and you convert to breech, are you saying that pretty much, I mean there's no guarantees with any of this, but we can pretty much count on having you know, the major areas, torso, thorax, abdomen intact-

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**PP:** I'll actually collect what you want sometimes, and put it aside.

**Buyer:** Oh, so you actually do the-

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**PP:** If I see it. Why not? I'm right there. Oh, for sure, I mean to me, I don't know, it makes the procedure that much better, like I've done something better. Like I said, I think that forming a relationship with the providers, like you did at NAFF because that was a lot of providers. the providers as much as the patients want to do this. I think they would all love to participate in something like this. It just adds another level of interest to what they're doing. **You know, everyone has a different technique, so that's the thing.** There's definitely local variance, like no two people do a C-section the same way, no two people do a hysterectomy the same way. No two people do a D&E the same way. **With that said, if you maintain enough of a dialogue with the person who's actually doing the procedure, so they understand what the end-game is, there are little things, changes they can make in their technique to increase your success.**

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**Buyer:** Even though they have a set way that they do it, they're open to changing that?

**PP:** Reasonable, if they're reasonable people, sure. I mean there's always going to be that one person who's like: "This is my thing I've been doing it for one-hundred years-

**Buyer:** Warren Hern.

**PP:** Yea. I love Warren Hern, he serves a purpose. I mean, he just lives in an alternate universe. He just lives in Warren's universe. I love him, I use his instruments, I use a lot of his techniques, you know, but he's Warren.

**Buyer:** If we were to look at it from a different perspective, kind looking across the nation at the providers who are best, or most technically skilled maybe-

**PP:** Yes.

**Buyer:** Who we can say, you know, we need two intact brain hemispheres, we need thymus, liver, you know, not shredded liver that's in eight pieces. Does that change the landscape at all? Kind of whoever's better suited to facilitate the process at all.

**PP:** I'll be honest with you, if you have very specific things you're looking for, you're almost more likely to get that, rather than at a clinic, and a private provider who does exactly what they want, the way they want to do it. So for example, when I worked at PPLA, they were seen by a nurse practitioner going over protocol, you have to get at least six laminaria in, if you get more, great, if you can't, no big deal I'll figure something out. When I see my private patients at the other surgical center where I work, I put in the laminaria myself, I know that this isn't enough, so I'm going to do this, that, different things.

020221

**PP:** So, if there are very specific things you are thinking of, sometimes an independent clinic or a private provider, while your volume is going to be lower, your quality is going to be higher. And that's not true for all of them, it's just some of them.

**Buyer:** But it's possible that they may have more freedom-

**PP:** Yes.

**Buyer:** To work the way they want to.

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**PP:** But, on the flip side, for example, so I had 8 cases yesterday. And I knew exactly what we needed, and I kinda looked at the list and said okay, this 17-weeker has 8 lams, and this one—so I knew which were the cases that were probably more likely to yield what we needed, and I made my decisions according to that too, so it's worth having a huddle at the beginning of the day, and that's what I do. I don't think other providers do that, but I actually like being involved in the process, so I say, 'Okay, what are you looking to supply today?' And then I look at the list, and I say well, all these patients, they only have 3 laminaria, I wouldn't hold your breath for that, I think I might be able to get it for this case, I think I might be able to get it for that case, is there, you know, what else can we do? But it's worth having that conversation, that's why I say that the providers are important. Most of the conversation you're going, I want say- at the NAF meeting there's two different crowds. And I feel like the one's who are going to come to your table, are going to be a lot of the independent clinics, owners of independent clinics, and that's who's going to be coming to your table. But there's also the 2nd trimester providers meeting, that's where you heard Lisa Harris talk, that's where- those are the folks who do just those cases that yield the tissue that you want, you know, there should be a way, maybe Matt and figure this out. But, you guys can establish a relationship with just those providers, to just tap into those practices. There's not a lot of us- that's the conversation to have. In most cases it's going to be the clinic owner or the clinic manager saying: "Yes, we're doing this, this is what we're doing." You're not really going to talk to the provider, they change everyday, they do what they do everyday. If you can establish a relationship with the providers, that would be great. When you work with and affiliate- once or twice a year, they have a providers meeting, maybe you say, I don't know if you have meeting with providers, but we'd love to come in and introduce ourselves, talk about what we do, and that's who those people are in the tissue lab, when they're wondering what that person is in the corner. Maybe you forge that relationship to make your quality a little bit better. It can't hurt, it couldn't hurt.

**Buyer:** Right. I didn't realize there wasn't a standard number of laminaria for each patient. But it's highly variable?

**PP:** Every clinic I've been to has an entirely different protocol. Planned Parenthood, New York City, the surgeon that's there that day, takes out the laminaria, does an exam, decides if there's enough for them, if there's not they put more in and come back the next day. PPLA, if they're above 20 weeks, they get at least six in, it's fine. Family Planning Associates in Chicago has what they have. Every- Jerry Edwards has what he has. Warren Hern has what he has.

025813

**PP:** As far as medicine goes, this, for a very long time has been a data-free zone. In the last three to five years, we've seen a lot more, because the Society for Family Planning has been publishing guidelines. So, in ten years from now, I think it'll be much more standard, but we're still a long way away from that.

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**Buyer:** So, that's why it's so important to talk directly with the affiliates because you can't necessarily tell us-

**PP:** I can't tell you how they're doing it. I can tell you what it says in the standards. I can tell you the protocol as, these are all the things you must do, and it allows for **incredible variability**. Like I said, you don't have to use digoxin, you don't have to use misoprostol. Some people use laminaria, some people use Dilapan, so really all over the map.

**Buyer:** Would you- because I heard for example from one of the Planned Parenthood providers, in Northern California, who works with StemExpress. She was saying that she uses misoprostol for all her dilations, and that, she thought made a huge difference, in terms of getting out intact specimens. So can we make a request like that- or maybe more realistically. Digoxin. If we were working with somebody who digs at twenty weeks, and somebody really needs twenty two week thymus, can we hold the dig for two weeks.

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**PP:** So let me tell you an interesting story. So there's not a lot of clear data on digoxin. Providers who use digoxin use it for one of two reasons. There's a group of people who use it so they have no risk of violating the Federal Abortion Ban. Because if you induce a demise before the procedure, nobody's going to say you did a "live"—whatever the federal government calls it. Partial-birth abortion. It's not a medical term, it doesn't exist in reality. So some people use it to avoid providing a "partial-birth abortion." Others use it because they actually think it makes the tissue softer and it makes it safer and easier to do the procedure. Is there data for either of these? No. Because number 1, the Federal Abortion Ban is a law, and laws are up to interpretation. So there are some people who interpret it as intent. So if I say on Day 1 I do not intend to do this, what ultimately happens doesn't matter. Because I didn't intend to do this on Day 1 so I'm complying with the law. There are other people that say well if you induce demise it doesn't matter, you're never gonna do it so you don't have to worry about intent. So that's one side of it. The other side is there are providers who actually feel it makes the procedure easier. I am one of those providers. And so a few years ago, we actually tried to get affiliates to agree together to do a randomized control trial-

**Buyer:** Oh wow.

**PP:** -where patients go digoxin and some didn't, but at the end of the day, the affiliates who liked using digoxin, did not want to give that up. And the affiliates who didn't give digoxin didn't want to do it. We couldn't get anyone to agree to randomize, so the likelihood that you're going to go to an affiliate who uses dig and ask them not to do it, and they say yes? Not

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**going to happen. Not going to happen, people are not going to give up they're dig. And the dig haters are not going to give in.**

**Buyer:** Wow. Wow.

**PP:** Even in the face of research. So they say that they work with UCLA and USC but-

**Buyer:** UCLA is Novogenix, that's where they're based out of.

**PP:** So, I'm thinking they have Novogenix. Which doesn't surprise me because Dr. Steward sometimes fills in at PPLA who probably works with Novogenix. I asked her if she has a procurement company. So the likelihood that you're going to get someone to not use dig, it's low. You're either going to partner with someone who never uses dig, or you're not going to have a choice.

**Buyer:** They're really set in their way basically, it's not a-

**PP:** Until there's more data, I just don't see it changing, like I said, I tried for more than a year to get people to agree, like this is research, this is a randomized control trial, they were willing to randomize everything else. They were not willing to give up digoxin or to give digoxin. Which is- it's amazing how something that has such little data, has such strong feelings.

**Buyer:** So, it sounds like even with data, the emotions are still going to be there.

**PP:** Yea, well, I don't know, I don't think we're ever going to get data-

**Buyer:** Really?

**PP:** -the data, I would love good data. the problem is, the data that we have right now is wishy-washy. The data is, yes providers can tell, if the dig worked or not, they could tell that there was demise, does it translate to anything at the end of the day? I don't know. Do they subjectively see it was easy, yes. Does it make the procedure any easier? Are we ever going to get the volume to show data? Incidence of complication is so low, you would need tens of thousands of cases to show a difference in complications. So, they're probably never going to show a difference in complications. The third difference is, does the patient experience it differently? and there's only one study that really looked at this well. In a small number of patients it showed supposedly, that nausea was higher in the patients that got dig, but they didn't measure the nausea at different parts, so you don't know what the nausea was really from, was it from the laminaria insertion, was it from the dig injection, was it from just being pregnant? So, the people who are anti dig generally say: "It doesn't give you any benefit, it just increases nausea." I don't see nausea as a negative, I think most of these patients are experiencing nausea already, and I have been able to complete procedures already, that I

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know I would not have been able to complete if it wasn't dig. But again, I don't have a randomized control trial to back that up. I don't know, maybe we'll get there. We've been able to slowly get there with randomized control trials around cervical dilation. So, I don't know if you guys have ever spoken to Alyssa Goldberg? Alisa Goldberg is at Planned Parenthood of Massachusetts, she just got a grant for a very large control trial for what dilation is best? What techniques work? Does adding misoprostol make a difference? And things like that. I think it makes a difference. And so maybe after a few more years of success doing these large randomized control trials on dilation, maybe they'll do it on digoxin again. There's just a lot of people that just want to avoid any problem and if there's some fetal demise, you don't have to worry about intent, you don't have to worry about abortion man or anything else. So, like I said, if you want no dig, your options are UCSF and Planned Parenthood New York City, and that's it. And the reason they for Planned Parenthood New York City is because they all trained at UCSF. So, it's like the UCSF school. They're the only ones to my knowledge that don't use dig before 20, 22 weeks. It's going to be hard to get those later cases. Like I said, New York City is worth going for, and I don't know that they're partnered with anybody. I don't know what the feasibility for that is for you but to me that, other than UCSF is the largest site of 20 to 22 week cases that have not gotten feticide, and I know because I'm a provider there too. So, I mean, I've practiced in both places. My subjective experience, it's easier with dig. The other thing that might interesting for you to learn is that there are some affiliates who are interested, there are,

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**PP:** so, genetic abnormalities. Do you guys ever collected tissue in patients with genetic abnormalities?

**Buyer:** Once or twice if there's a specific project going on with that stuff. And even certain genetic mutations are interesting for- not for harmful abnormalities but for HIV, there's a long story we don't have to get involved.

**PP:** **There are affiliates that will do cases higher than they normally would, because they have genetic abnormalities.** But we don't know if you would accept that tissue.

**Buyer:** For fetal indications. More than nine times out of ten, more like ninety five times out of one hundred, stem cell researchers want normal healthy tissue, for therapeutic applications.

**PP:** Well, that's what I figured. You can't develop a cell line if you don't want it to have abnormalities. When I went to medical school I did cell culture for—.

**Buyer:** Oh, yea, yea yea.

**PP:** It was just heart and muscle though. I have a little idea.

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**Buyer:** Oh yea, so you know a little about a certain number of passages, and after a certain number it's no good anymore. You have to source it again.

**PP:** Well yea, people need to develop cell line, and there was this really interesting story in the news. You must have heard- There was a cell line and they traced it back to the patient and the family is suing.

**Buyer:** Yea, Henrietta Lacks. The HeLa cells.

**PP:** Yea, and so I'm reading that and I'm like wow. Take it and do whatever you want with it.

**Buyer:** Ha ha yea, sometimes there is a specific project that, you know, has to do with Down Syndrome or Sickle Cell Anemia or something very specific and the do want something like that, but that's definitely a rarity, especially when it comes to cell based therapies. Really, the fetal cells are getting the most action right now when it comes to translational research, which is actually taking things from the lab into the clinic, finding therapeutic applications that could go to market. There's some really cool stuff going on with neural progenitor cells going on right now. Human clinical trials going on, stage two and three FDA clinical trials right now.

044142

**PP:** So, you know there are providers who go beyond 24 weeks. Are you working with any of them?

**Buyer:** So, you know for example, Susan Robinson-

**PP:** And Shelley Sella.

**Buyer:** Over in Albuquerque, they start doing dig at 18 weeks. I had a great conversations with Susan at NAFF, I recognized her from "After Tiller" which I saw about a year ago. And so we had a great conversation and she was saying she had experience working with Planned Parenthood in Fresno maybe?

**PP:** She works in the Santa Barbara-Ventura, San Luis Obispo clinic and probably Mar Monte and some of those up north.

**Buyer:** She said a couple years ago, she had been working in the Central Valley clinics. They had been working with StemExpress at the time, and she thought it was so fascinating to watch the tech work, and all the parts. She said it's wonderful, we've done it before, would love to do it but, we start doing dig at 18 weeks in New Mexico, and I think they already working with somebody too, maybe with the university there or something. The really extreme or later cases, that's the- there's a standard that researchers are looking at right now, I would

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say is roughly between 16 and 22 weeks. I think that's kind of where everybody is focused on right now, and maybe some of that is artificial because there just aren't that many places to get 24 and later, so that's why nobody is using higher gestational tissue, I don't know, it's just a result of the supply that's there, not of actually-

**PP:** So, she's not working with anybody, she's just working in individual studies right now, whenever it happens. I asked if they were interested.

**Buyer:** And that's?

**PP:** Family Planning Services. So you might have just hit the jackpot.

**Buyer:** Ha, another conversation very soon, about that.

047828

**PP:** **Yea, the reason that I mention that is, there are a few sites that go to 26 or go further and there's a lot of conversation-**

**Buyer:** Those are Planned Parenthood sites?

**PP:** **Not yet- but there's a lot of conversation about who goes to the legal limit in their state, if they don't go to the legal limit in their state why don't they, is there another provider that does? So we're about to start doing some mapping work to say, you know, are there states where nobody's going to the legal limit? And if not, why not, and what can we do about that?** So that's just, I'll keep that in the back of my mind, because that's something worth thinking about. You know, another state you should consider, Utah really has just got their service off the ground, but they're are no other providers in Utah. I'm sure they'd be interested in going further.

**Buyer:** How far are they going now?

**PP:** I just gave them a waiver. They're probably going to 14 or 16, but I just gave them a waiver to go to 20, and I think they're going to start going to 20 on a regular basis. Utah's got a nice airport, Salt Lake City, right there. It's kind western.

**Buyer:** It's not too far away.

**PP:** And uh, they train fellows, but they've got some really motivated providers. I think they would be someone else worth considering. I'll add it to my list.

**Buyer:** Who's the medical director there? His name is David Turok, he's doing a lot of work right now with emergency contraception and IUDs. Pretty incredible guy, pretty forward thinking, always willing to push the envelope a little further

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than anyone else, that's kinda why he popped in to my mind. I feel that there are about a million introductions that I want to make, you know? Not only to people via email, I want you guys to talk to each other.

**Buyer:** I mean certainly, the one's who are closer like Dr. Russo, Dr. Patel? Did you say from Family Planning?

**PP:** No, she's in Chicago. Steward.

**Buyer:** Steward. I have it here, yea.

**PP:** Yea, we'll definitely get you-

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**Buyer:** So, it's easy for us to do the same kind of thing here, and for the ones that are further away, it would be just a little bit more preparation to-

**PP:** Yea, well, the ones that are further away, it probably makes more sense to chat with them in October and then if something comes of it, follow up from there. October actually is not that far away.

**Buyer:** October is not too far away, yea. No pun intended right? For Halloween, October.

**PP:** I'm trying schedule another meeting and looking at the calendar, I'm like we're already in the first two weeks of August, so I'm looking at October for scheduling meetings now. Where has the year gone? It's just wrong, it just gets faster. Can we slow it down a little bit? You know, the work you're doing? Slow down time?

**Buyer:** Yea, I know. I think that's physics, not biology. (inaudible) Well that's the crazy thing. The biggest thing about R&D time lines, some of them are so shackled to the timeline of availability or unavailability of material to work with and so, if you can really open that up, and get the tissues to researchers when they need them, and the stuff that they need that can literally cut in half. The time that their projecting for what they're working on. You know, if you're doing a study that you're foreseeing to have any kind of clinical application whatsoever, the the biggest thing that you're looking at is being able to reproduce or replicate whatever you're showing, so you need more samples, more trails and again, it's just the volume-

**PP:** So, I just had a really weird idea. You know I find it very interesting you know, explaining how tissue procurement will affect the projects, and things like that. Have you ever thought about doing a little talk? On it?

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**Buyer:** Like a little workshop.

**PP:** Yea, like at the NAF meeting, or just a little something for the local providers or something like that?

**Buyer:** If they would let us. Yea

**PP:** You know, where they can hear about and understand where the tissue goes, the impact and things like that?

**Buyer:** That's a word where going through my mind as you were talking. We need to educate.

**PP:** Well, I'm sure people are dying to know. And, they're dying to know, here's the thing, if you can do it for providers. In a way, you have backwards word of mouth. They're going to tell it to the patients too, they are able to share that information and everyone's going to get on board. You do a little thirty minute session before the day starts or at the end of the day, about this is what happens once- once the patients donates tissue, this is what really happens. This is how it affects time lines, this is how critical it is to the people, this is the impact that you can have. That's the best marketing you could ever do. Like I said, I think especially in the scientific community would, they would all find it unbelievably interesting. I certainly do.

**Buyer:** Can we have a wine and cheese evening? We'll get Dr. Steward and Russo and people from Pacific Southwest in a room together.

**PP:** I think we should. Actually, let me reach out to them and say: Hey you know, do you guys ever wonder about these things? We just have to get together one night, and kinda talk about it and what happens.

**Buyer:** Then we could brainstorm about messaging afterwards, and all kind of, you know.

**PP:** Yea.

**Buyer:** We're going to change the world.

**PP:** Look, everyday that's what we try to do. Slow work and sometimes you wish things would slow down so you can have an impact but-

**Buyer:** No, this is the good side of time passing quickly.

**PP:** There you go. I'm going to start changing the way I think about things.

**Buyer:** Good. Reframe it.

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**PP:** I don't consider myself a very political person, but I think it's worth you doing something like that. Let's do kind of a little local thing, and then if it's a hit, you may want to do it for a bigger group.

**Buyer:** So, when you say local, how many people are you talking about, in what area?

**PP:** Here's an idea—the southern California medical directors have an LLC meeting quarterly, and they do it somewhere the San Diego, Orange, Pasadena, LA people, and Santa Barbara people all get together. So maybe we can do it like to coincide wherever they're meeting someday, at the end of that day. I could pull in someone who runs the program at USC, I could pull in the person who is at Family Planning Associates, I could figure out if there is anyone locally-

**Buyer:** What type of venue and how much time?

**PP:** I would just be interested in hearing about what you were just talking about.

**Buyer:** So, like thirty minutes.

**PP:** Yea, so just like a little thirty minutes talk. Just time to chat about it. I think that would be fabulous. You know, you could limit it to medical director people or you could bring in some of the local providers as well. We could pull in the local fellows. You tell me what you think you would want to do. I think that's an amazing idea.

**Buyer:** You said the meet four times?

**PP:** They meet every three months, I know they just had one, we may just want to do something as a one off, or we may want to give you guys some time to plan to do something in October.

**Buyer:** Does that sound like something-

**PP:** I mean we should talk about this. I feel like-

**Buyer:** This is exciting to me.

**PP:** And just, I can't imagine that there's not one of them who wants to understand a little bit better about the other side. We know our side really well, we want to know your side. And it gives you an opportunity to learn our side, and give you ideas as well. But I also think you- you can kinda test it and see what happens, take a shot in the dark, maybe you want to tell them that. You could do a workshop on tissue donation and what it means. We want to do a little reception at the National Medical Conference or Forum or something. I do- I think

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testing it, right here, right now, and seeing what comes of it is probably a good idea.

**Buyer:** Yea.

**PP:** UCLA and USC, they both have a fellowship program, so they have OB/GYNs who are training to be providers. So, maybe. No, I think it's worth a little test. I think the conversation would be unbelievably stimulating for both sides. We'd all get a lot of insight. On both sides of the coin.

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**Buyer:** Yea, speaking of which you don't have, by chance, on you copy of PPFA tissue procurement guidelines or anything like that.

**PP:** There are no guidelines.

**Buyer:** Not written.

**PP:** They're guidelines on research, but there are no guidelines on tissue procurement.

**Buyer:** Okay.

**PP:** And there will never be guidelines.

**Buyer:** Oh. Just to keep it—to keep everything—

**PP:** There's no guidelines, if something qualifies as research, and an affiliate wants to participate in a particular research study, there are guidelines of how that happens. If they're gonna participate in something like this, you know there are mechanisms by which contracts can be reviewed and things like that, but there are no guidelines. This is something that the national office is not involved in. For the first few years that it happened, it was treated as research, and then we realized that this was kind of overkill because we didn't have a particular IRB approved study, it just didn't fit into our framework. So we just kind of backed off of it.

**Buyer:** I guess, even in terms of compensation and stuff like that?

**PP:** Nothing is written. There's nothing in stone.

**Buyer:** As a security measure, as much as anything else.

**PP:** You know, it's- if people want to ask for guidance, there is. But do we have a written policy? No. I can't imagine we're going to have one anytime soon.

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**Buyer:** Yea, I think I would agree, I think these things are kind of best handled- when the atmosphere is the way it is, that kind of thing is best handled at the local level.

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**PP:** Alright, FPA apparently seems to think that it's research and that it's kinda wishy washy-

**Buyer:** Wait. Can you explain to me, what did she say?

**PP:** She said: "Well because we're a for profit-company we can't really get involved in research." I said, well, I'm not sure this is research this is quite different, we actually-

**Buyer:** If they want to talk profit, I'll talk profit.

**PP:** Well, it's funny because at Planned Parenthood, we don't consider that research. The FPA apparently they consider it research. I also think that's another interesting conversation, I think there needs to be a meeting so we understand what it is, and how it fits into all our different agendas, whatever, how the environment influences all of us. I think it's worth doing. For sure. So, I think this is definitely to be continued.

**Buyer:** Definitely. Is there anything you wanted to talk- is there anything else on your agenda?

**PP:** Any more picking you want to do?

**Buyer:** No, I think we've got a good pit.

**PP:** Well, I feel like we've got some good idea's here.

**Buyer:** I'm excited. Thank you for taking the time.

**PP:** Yeah, absolutely. Thank you for being persistent and having me here today, and for a fabulous lunch. I have to tell you, I am excited about the prospect of even hearing a little bit about what happens once you leave one of our sites, with your tissue. What it means to the researcher and the bigger picture. It's almost kind of like image building.

**Buyer:** Yea.

**PP:** And it's a good thing for everyone. Yea, and who knows, maybe in November we'll feel even better. Something else will happen.

**Buyer:** There is hope.

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**PP:** There is always hope, that's why we all do what we do. Yea, so how did you get involved in-

**Buyer:** I was a bio major in school and I've done graduate research with- my main interest is SCID mouse modeling, which is where you have the humanized mouse model, I don't know how familiar you are with it. So, that's why I say liver and thymus and bone marrow so much, because that's kind of the classic humanized mouse model when you have certain strains of mice that are mutated, they lack a murine immune system.

**PP:** So, I used to bike, I went to school at the University of Wisconsin, in Madison and I used to bike right past this facility where all these poor mutant mice come from.

**Buyer:** No, so they're not ugly or-

**PP:** No, no. They're lacking this gene or they're lacking that gene. What ever mutation they have, they're all have the same-

**Buyer:** So, if they're lacking a mouse immune system, then you can graft whatever you want into them and they won't reject it. So you can graft human fetal tissue into them, and if it's fresh and the cells still viable, then the thymus will still grow and produce thymus cells and the liver will do it's thing, still have hematopoiesis going on. You can construct a human immune system inside a mouse, and then test different diseases, drugs-

**PP:** Vaccines.

**Buyer:** All kinds of stuff on a human immune system, except it's a mouse. It's because of that kind of model that we are on the brink of a cure for HIV. I mean it's right- they're are functional cell based cures, based on bone marrow and things like that. That's when I was talking about the CCR delta-32 mutation, I don't know if that means anything you, it's a mutation that affects the way the actually binds to a cell, and so people- individuals who have the CCR delta-32 mutation in their cells, the virus can't enter the cells.

**PP:** I know. I know someone who has that.

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**Buyer:** You know the Berlin patient?

**PP:** I do, I know the patient. It's funny that you mention it, it's very interesting.

**Buyer:** I mean so it figuring out- how can we use viral vectors or genetic therapy to take regular stem cell, alter them and put them back in, and producing an

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immune system that it itself immune to HIV truly. And there's other models, there's other ways to go about it. There's a lot of interesting work being done, where it's not the CCR delta-32 mutation. Where the idea is to genetically modify the cells to express the same factors and chemicals as typical HIV anti-virus cocktails, the medicine that people take. There was one study where they combine the three most potent HIV meds and took whatever combination that was and inserted it into the cells, and inserted that into the stem cells, and the stem cells will produce antiviral retro therapy stem cells.

**PP:** Yeah, we're really excited, we just rolled out PREP through Planned Parenthood-

**Buyer:** Truvada or something else? Truvada.

**PP:** It's actually affordable for some patients. Not all of them, but for some. See, that's the thing, if people to hear more about the bigger picture too, that's what you need to tell them about. Everybody, at the end of the day, they need to understand the big picture, the end game. It's very easy to protest when they have their blinders on at they're twenty feet view. They get a ten thousand feet view, and suddenly it all fits together.

**Buyer:** [inaudible] Where is that person now? Just being sensitive to how much they can hear. How about you? How did you come to do-

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**PP:** Oh god, you know, it's funny, I train a lot of people, I do a lot of mentoring, I'm probably the worst person ever to tell you how to get where you are. I didn't ever really ever have a plan, I knew what I liked, and knew what I didn't like, and luckily for me opportunities presented themselves every so often and so, I made a decision every few years, but I never looked for a job in my life, I never said I need to do this, I need to do that, it just kind of happened. So, to make a long story as short as possible, I was an athlete and I had a whole bunch of injuries and surgeries, and things like that. I became very interested in orthopedic surgery, and then I said ok, I'm going to be an orthopedic surgeon. And then I went to college and I said, I don't want to be an orthopedic surgeon, maybe I'll just do sports medicine. But, you know I'll be a physical therapist, because that's easier than- Orthopedics are like big old burly guys, and I didn't know if I wanted to be with these people, surrounded, that's just not what I look like, I'm not the orthopedic surgeon type. So I'm going to be a physical therapist, and when I was in college physical therapy became a master's degree instead of a bachelor's degree, and I said, if I'm going to graduate school, I might as well become a doctor. So, I decided to go to graduate school, and then I hung out with all the Ortho people, and I said No, this definitely isn't for me. **But I really liked babies, believe it or not.** And I said ok, I'm going to be a pediatrician. I don't know if you know much about pediatrics, it's really treating moms. It's not really treating kids,

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and the kids you do treat, they're sick, and it's very depressing and I said there's no way I can do this. I could maybe do perinatology, where I deal with like just born babies, and neonatology, and then I said ok, I'm going to be an OBGYN, and then I'm going to become a maternal-fetal medicine specialist. And that was kind where I was going, and I will tell you the date, I was on-call, it was my last day, I was on call, when you're a resident in obstetrics and gynecology you spend a dedicated amount of time in obstetrics and a dedicated amount of time in gynecology. In your senior year, it's four months of each. So, February 28th 1998 was my last day of GYN ever as a resident and then I would be done. July I would graduate and then I would be an OB/GYN. And on that day, there was patient that was transferred to me, from an outside clinic, who had had a D&E, dilation and evacuation, late second trimester abortion, she was bleeding. That patient was transferred to me and she got to the hospital and I met her in the emergency room and I saw her and she was as white as this napkin, and I still remember her name, I remember everything about her, and she looked up at me, and she said, "Don't let me die." And she actually bled to death. We did a hysterectomy in about twelve minutes and she died. It was very distressing and very upsetting. I probably had a very different reaction than most people would, which was **well I do D&Es all the time, and I don't ever have complications.** And I think I'm pretty good at them, I need to keep making sure that there are lots of people doing these D&Es safely so there's not another patient like this. That was the day I said I'm not doing perinatology, which is high-risk OB, I'm going to do family planning, and I'm going to train others to do family planning. So I interviewed for a fellowship in family planning, and Dan Michelle was my program director at the time and he interviewed me and he said: "Why do you want to do this?" And I told him the story, and he said: "What do you see yourself doing in five years?" And I told him all the things I wanted to be doing. He said, "Oh, you want to be the medical director of Planned Parenthood." I said, really? I didn't even know what Planned Parenthood was. I think I went to a Planned Parenthood once when I was in college-

**Buyer:** What year?

**PP:** I think it was '90—no, 2001. He said: "You want to be the medical director of a Planned Parenthood." So, I finished my residency in 2002, I did the Fellowship, it was two years, and then about six months after I finished the Fellowship, I was still faculty at USC, I decided to stay, and I was running the family planning program there. Planned Parenthood of Santa Barbara called me and asked if I would interview to be their medical director. I did, the next thing I know, I was there medial director. I did that for three years, but I didn't get the opportunity to do as much research and teaching there, as I did when I was in LA. I left there and became an associate medical director at LA. I ran the research program and I trained all the fellows at USC. I did that for a few years and then I started consulting for PPFPA, and they asked me if I would write protocol for this and that, and I did. And they said our Senior Director of Medical Services job is opening up, would you interview for that? I said no, I'm too young and there's a lot of

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things I still want to do. They said: "We understand but we can't guarantee that after you do those things, the job will still be available, we think you should interview." So, I did and I got the job, and that's where I am. That was five years ago and that's where I am now. So, I mean, every few years, I've made a decision based on what I feel I should do. I've been very fortunate, that's just kind of happened.

**Buyer:** Totally disagree with you about the mentoring thing.

**PP:** I tell people all the time, I'm just very lucky. I've heard you make your luck. I'm like no, I don't think so.

**Buyer:** I totally disagree with you, it's fabulous.

**PP:** Point taken, but yea, how about you?

**Buyer:** Well, I'm older much than probably both of you combined, it would take too long. What time is it? You need to be out by three? Oh my goodness, my story? I have to go to the bathroom.

[bathroom break]

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**Buyer:** I'm a terrible not taker, I have kind of a photographic memory so I just like to sit and listen as opposed to-

**PP:** No, I hear you. I have to write certain things down, just because there are so many, that if I don't have key points then I'll forget it and not do any of it.

**Buyer:** I'm trying to think if we covered everything. Is there anything that you feel- I think we're good. I don't know, maybe you're clear so maybe we don't need to go over this compensation, how that-

**PP:** Yea, I feel like you guys-

**Buyer:** I think I've got- I know that we want to be sensitive when we talk about that obviously, and if it's an issue- it seems like- when we're talking about that- what we're looking at is less a situation of competing with other people or just- it's not so much about competing piles of money. As it is being able to fit the needs of the affiliate, because they're just trying to be a successful non-profit and meet their bottom line. That's ultimately what we're trying to facilitate, does that sound like a good way to summarize it?

**PP:** Yes, like I said, at the end of the day. What you're trying to do is say, if you were to take money out of the equation, which is what most of the affiliates are

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trying to do. How can we do this for you in the most beneficial way? I think you've totally got it.

**Buyer:** Yea, what are the cost gaps that an affiliate is typically looking at?

**PP:** I don't understand what you mean. The way they look at time, is space and staff time. So, you know, it's a matter of- here's how we can help, we're going to take up the least possible space, we're going to do as much as we can, so it's not your staff time, it's our staff time. You know, maybe there is some other, in kind something else that can happen. You know, so that's it's simply not a- they all want to do this. They just don't have to present it to a single patient ever. That would be the ideal situation, obviously that's not going to work. Somebody is going to have to flag somebody or have the conversation and let them know, this is available, and it's probably going to be their staff. The way to do this with leaving the fewest footprints at the health center, it's going to be beneficial for everybody. We can do that.

**Buyer:** No, I think we started thinking very creatively about way to do that. I do think feedback is good too. Sure, anyone can come get the tissue donation and send it off. I think affiliates would like to know, we send specimens to research who are working on this and this. I think that kind of positive feedback in the end it will just be a better relationship, it just kind of adds a whole human touch.

**PP:** Yea, and we're talking about people in the non-profit sector, the motivations are a little bit different. This is all- anything you can do to help explain, who's benefitting, the benevolence of what they're doing. I think that holds as much value as any cash prize. You know, I think the affiliates would be proud of this. They would go back to their donors, they would go back to their boards, and say look, we contributed to this, this, this, with just this one service, working with this one partner. You know, I think that this could help you on the back end too, because if there are board members- maybe there are board members somewhere else, that say alright, who else can partner with this organization. How else can we contribute to this? They're are bound to be people that have personal connections, patients, donors, board members.

**Buyer:** Yea, we have the Berlin patient right over here.

**PP:** It really, really makes a difference. So, I think, perhaps the difference is, affiliates are looking to benefit in very different ways than just dollars and cents. I mean I get, they're not going to do it in a way that costs them money. They want to break even, they want to be compensated reasonably for the time and space, whatever impact it has. But, I think that they are looking for something bigger.

**Buyer:** And \$30 to \$100 is what we're going to be looking at in terms of- that's what they'll reasonably think is going to cover-

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**PP:** I think so. I think, again, you're going to have to do- it's funny we do a lot of training and we've been trying- is there a way to standardize the contract and what the rate looks like, and at the end of the day, the lines be the same, but at the end of the day, it's very different. The staff member that's involved, the amount of time it takes them, the space it's going to be variable. Could we come up with a line item? Sure. This is what we pay for space, this is what I'm going to pay you for your staff time for this- it's almost the way an affiliate comes up with a research budget. Right? I need this level of staff to consent the patient. It's going to take fifteen minutes, this is what they get paid per hour plus twenty percent, that's how much that costs. So, can you come up with a standard way to do it? Probably, but I wouldn't expect it to be the same number.

**Buyer:** Is that a PPFA project? You're trying to figure out a standard-

**PP:** A lot of the training programs are funded by the same donors. So, from there they came back to us and they're like: "How come with this affiliate it cost his much to train a resident, how come this affiliate-" I said well this affiliate has five ultrasound machines in two rooms, and this affiliate does one ultrasound in one room and **so they're losing patient revenue**. So, it all has to fit into the bigger picture. So can we come up with a template and line items, and think about this creatively in a way that these are all the things we should consider? Yes. Is the number going to be the same at the end of the day or everybody? No way.

**Buyer:** Yea.

**PP:** And that's just the way it is.

**Buyer:** It's such a tapestry we're looking at.

**PP:** It's just like when a patient walks into a health center in Nebraska or Los Angeles or Minnesota. It's going to be very different cost, and it's based on the dynamics and the demand and you know, the level of staff that is required by the state medical board and things like that. At the end of the day the number's going to be different. But, all the input should be exactly the same. And yea, hey in the perfect world if you could find a way to help them deal with their biological waste, pathological waste, they would love that.

**Buyer:** Yea, I'll do some research and see what the details are of getting an incinerator.

**PP:** And also, some of the people that you supply everybody-

**Buyer:** Yea because if there's a university that just processes- there's a university hospital they have their own incinerator. There's all kind of networks that this ends up opening up.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**PP:** Yea, I know originally, when we did research on it, we looked at- what are all of these labs that we work with, because these labs, we send in the labs tissue and at the end of the day, they do something with it. Turns out they use Stericycle like everybody else.

**Buyer:** Sounds like Stericycle is able to get the monopoly. They figured out, well everyone has garbage.

**PP:** That's what ended up happening, they bought up everyone's contracts, they bought up all the smaller vendors, and they're this big multi-national. But no, there has to be another option. Messaging, that's a whole 'nother issue. If you guys could come up with a way to message, it makes it easier for everyone at the end of the day. if there's some kind of one pager that says this is what we offer, this is the service, this is the type of research it contributes to, these are the types of achievements we've been able to work in. This is something you might be interested to ask you doctor or your nurse, if this is something that works for you. It will make it easier for whoever actually does the consenting. **It'll drive demand, it's a win-win.**

**Buyer:** When- as far as consenting, at your site is it Planned Parenthood counselors who are doing the consenting or is it Novogenix?

**PP:** It's the same medical assistants who consent for everything else. Once all that's done, they say oh by the way, we also do this.

**Buyer:** So it's a PPLA consent form.

**PP:** It is, it's a PPLA consent form for tissue donation. But the interesting thing, I'll tell you is, some people consent, some people don't. The funny thing is, the second day, when that patients actually comes back for their procedure, when they're waiting, what often happens is, Novogenix will talk to people who haven't consented, and they usually do, once someone has the time and energy to sit and have the conversation with them. So, she ends up picking up several more specimens, just from being there and speaking.

**Buyer:** The seeds have been planted.

**PP:** The seeds have been planted, they thought about it for twenty four hours, now here's somebody else- they're sitting there, waiting, they've got nothing else to do, it's not like one on top of the next, on top of the next. So, I think it's always beneficial, if you have somebody who that's just what they do, they're going to do it much better than incorporating it in, but it can be, it works both ways.

**Buyer:** I was just thinking about if we use our own consent form or would we use the Planned Parenthood form.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**PP:** You could use the consent form you created, but it would still have to be approved.

**Buyer:** At the end of the, it's another thing, depending on the affiliate that's gonna-

**PP:** Yes, one thing I can promise you, it won't have to go through the rigorous role of a research project, because there is precedent for this now, and affiliates know how to deal with it. Like I said before, it was a nightmare, it had to go through an IRB, not just your IRB, it had to be an IRB for the affiliate. It would have to go through the national office, it had to go through contracts and all these other things. We've totally removed ourselves from the equation because, we said look, in reality, is this tissue going to research eventually? Yes. Is this a dedicated product, that adds additional risks, there is no specific protocol, we're not changing the way we care for the patient. It's just a decision between you and the patient, and we're not going to be apart of it.

**Buyer:** So, is it only the affiliates that have a robust research department like Gulf Coast have IRBs or-

**PP:** Yea, and most of them use commercial IRBs-

**Buyer:** I think most people do.

**PP:** Yea, commercial IRBs, they all know which IRBs to use depending on what they are doing, and how they feel about it so, yea. Most people hate Western IRB now.

**Buyer:** There's quite a few options out there, Quorum and other.

**PP:** I get emails from Quorum on a daily basis. But yea, everyone has their own process. With that said, most of the affiliates who go to the higher gestational ages, who also tend to be more developed, there may be a little more process involved. But, I can't speak to everyone's processes. Like I said, I'm going to have a conversation with Rachel, there's misperception on every level. I don't think that misperception exists in Planned Parenthood anymore, because this is a conversation we've been having for years now, where people know it's research and yes, it's an alternative way to help you manage your tissues, but it doesn't account for all tissue, because everybody's not going to be eligible, everybody's not going to consent, you're still going to have someone else manage your tissue, even though it's donated, everything's not donated. At the end of the day, it all goes somewhere.

**Buyer:** And all that's conversations, like we're having. None of that's written down?

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**PP:** No.

**Buyer:** So I mean if we're concerned about messaging, I don't know if- well, you can have messaging be spoken word. You don't have to have things written down.

026776

**PP:** Well you can have messaging, **and what happens is, folks will ask the national office questions. We certainly have answers to the questions, but we don't have a policy per se, and that is by choice.**

**Buyer:** Yea.

**PP:** So for now, that's the way it will be. And when they ask the questions they're going to get the answer. It's just getting people asking the question. But, I think like I said, people have been talking about this for so long now- California's pretty saturated, I think we have an opportunity with FPA. But most of the other locations, I don't think they are so much, and so it's just a matter of what makes the most sense where you can put some resources and how it can work out. So, between PPFA and FPA in California, I think you have pretty broad reach, I don't know of any other volume providers, and the academic sites will be at the Forum. But, they don't have any particular volume.

**Buyer:** Yea. Yea.

**PP:** Cedars is going to have a fellowship program, they're in the process of putting it together. USC has one, UCLA has one. Those are basically the three sites that are training all the providers in the region. So, if everybody who is providing knows you exist, you know, I don't know what your interest is in a small provider, who wants to call you up and offers one case today, do you want to come out and do this? That's kind of a lot of work.

**Buyer:** Yea, that's really not an ideal situation.

**PP:** That's why you want to go with someone like PPFA, who does 40 percent of the cases and has a whole schedule for the day. Again, FPA is a possibility we just have to do some education there. On both sides, now you know they don't dig until 18.6, now I just need to let them know, it's not really research.

**Buyer:** Does FPA do actual research, research where they have IRBs for that or?

**PP:** Nah, they might participate in a one off study but, like she was just saying, they feel uncomfortable doing research because they are a for-profit. I think it actually looks worse for their research partner.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Buyer:** Oh.

**PP:** You know for profit companies doing research.

**Buyer:** I'm sure that the partner can make that determination though- they're talking about people who are partnered with FPA?

**PP:** She's basically partnered with USC and UCLA to help them recruit for studies, but I guess it looks weird when a for profit partner for a project, because they probably have some- they could be accused of having an outcome in mind, if they stand to gain something. As opposed to just general letting patients donate their tissue, it's a service.

031513

**PP:** I see it as a service that is offered to patients, and it just happens to be a service that is offered to researchers on the back side. It's not what's seen on the face of the health centers though. It's if our patients want to do this, we make it available to our patients. And, I think I can have that conversation with Rachel as well. So, it might take a little while, I need to have a few conversation with Rachel before I can make an introduction. We'll see what happens.

**Buyer:** How much time do you think you need to have that conversation.

**PP:** Couple weeks. Yea, just because I'm leaving town on Monday. I won't be able to have a real conversation with her until I get back. I'm leaving town for a week, and then I go to New York for half the week, then I get back, so I'm guessing mid-August. It's not too far way, it's July 25.

**Buyer:** Time goes quickly.

**PP:** And apparently that's a good thing. I need to just change my perspective. Is there anything else we haven't touched on?

**Buyer:** I think we're saturated for now.

**PP:** Haha, like much of southern California.

**Buyer:** The conversation will continue, I'm sure a million things will come up.

**PP:** I'm going to have to write a whole bunch of follow-up emails and I'm really- Like, if we can get you guys to the forum, I think that's going to be pretty beneficial. We'll get some people by your table once I know where it is.

**Buyer:** I'm sure we can commit to that, we've been intending to, I don't know how far Brianna got talking to the organizers but, even- at this point, even if there

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

were some other stem cell stem cell meeting that was of conflict of the same weekend, I think this is easily more important so-

**PP:** It's October 11th or something, it's around October 11th. You know more than I do, I just know I have to go down there on the 9th. Probably then, the 8th.

**Buyer:** Are you presenting there, or speaking, or anything.

**PP:** I run a lot of the meetings, and then there's pre-meetings. It's basically three conferences back to back to back, I have to go, I'm having a pre meeting on the 9th. I have to go the meeting on the 10th and 11th, the 12th and the 13th. Then I have to go on the 14th, then I'm hoping to take a few days off to just breathe after like six days of no sleep. But I just go where I'm told. I think I'm giving two talks at the meeting, and part of the panel.

**Buyer:** So, what can we do? So that you, this part that you're helping us with? In a couple weeks, send a little reminder?

**PP:** Yea, I'll send a follow up email after, to make sure I've got my follow up thing. I mean, like I said, I'm going to have this conversation with Rachel, I'm going reach out to Arizona, - mean I have to figure out what Gulf Coast is doing, what Orange is doing, figure out what San Diego is doing. To reach out to some people on the East Coast, to reach out to Chicago, and also reach out to Utah. Like I said, I'm going to be at a retreat all next week, so this isn't going to happen until the week of the fourth. Or even the week after the 4th. Why don't we check back in like, mid- August, figure out what's going on with you guys, being at the forum, and me getting some contacts to some people then we can figure out where we are.

**Buyer:** So, I'm going to say about August 19th.

**PP:** Wonderful, by then I should have all the emails out. Ok, that's right before I go to the CDC. So, I have a few days to get my act together. Yes, no, and I would like to talk more, just about a little meet and greet. Just even in California to talk about who you're working with, and the work that they're doing, just the whole process. I'm very excited at that. That sounds really good, because everyone talks about tissue donation, but it's kind of a giant brown box. Kinda puts a face on a whole new perspective. Like I said, especially if it's the places where it's our staff that's talking to patients, we know what's going on, they know what's going on. Everyone knows what's going on, it just makes it more genuine. Alright, we will be following up, circling back in a few weeks. This has been pretty beneficial.

**Buyer:** This has been good. Thank you so much for being able to take the time to-

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**PP:** Thank you for being persistent. That's what it takes with me because I am busy and have many things going on at one time. Alright, I am going to say my farewell then, so good to see you, thank you.

**End of Transcript**

Exhibit 19



"\$75 a specimen," Gatter cuts across.

Later in the discussion, she says that she wants a higher price if it turns out Planned Parenthood's California affiliates are getting more. "Let me just figure out what others are getting, and if this is in the ballpark, then it's fine, if it's still low, then we can bump it up. I want a Lamborghini!" Gatter joked.

"What did you just say?" the actor asked.

"I said I want a Lamborghini!" she repeated.

Throughout the video, Gatter constantly clarifies that Planned Parenthood is not in it for the money. "You know the money is not the important thing for me," she says after the Lamborghini crack. "But it has to be big enough that it's worthwhile for me."

The Center for Medical Progress also alleges that the video shows that Planned Parenthood alters its abortion procedures to ensure preserving organs, which is against federal law. In fact, Gatter seems aware that doing so would be unethical, but tells the actors she'll try anyways.

"If our usual technique is suction at 10 to 12 weeks, and we switch to using an IPAS [a brand of manual vacuum aspirator] or something with less suction to increase the odds that it will come out as an intact specimen, then we're kind of violating that protocol that says to the patient, 'We're not doing anything different in our care of you,'" she warns at first. [\(link\)](#)

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 **Mr. Izz says:**  
July 21, 2015 at 3:22 pm

The brazen way in which these individuals talk about this is incredible. To them,

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6	7	8	9	10	11	12
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it's nothing. It's just a money making process, and they are happy to do it. In fact, they want to do it!

Are we to assume from the Lamborghini remark that if a lot of these babies are preserved for their bodies and sell well, that this woman gets rewarded?

★ Liked by 3 people  
[Reply](#)



**MaryfromMarin** says:  
July 21, 2015 at 6:44 pm

Sort of like Mary Kay for baby butchers?

[NB: no putdown of Mary Kay intended whatsoever]

★ Like  
[Reply](#)



**BigMamaTEA** says:  
July 22, 2015 at 12:21 am

Yes, with higher bonuses for more valuable parts.

[http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/FAX\\_20130110\\_1357862283\\_45.pdf](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/FAX_20130110_1357862283_45.pdf)

AND-

StemExpress also gives bonus to technicians in clinic- per organ/skin

<http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PT-Comp-Policy-Effective-20130101.pdf>

This is a Procurement Log of baby parts harvested from Planned Parenthood Mar Monte's flagship abortion clinic in San Jose, CA, (one day/ 9 specimens were harvested from 8 different fetuses by StemExpress. At the time, StemExpress paid Planned Parenthood \$50/specimen, so this one day of procurement at one clinic yielded \$450 for Planned Parenthood Mar Monte. StemExpress also harvests from PPMM clinics in Sacramento, Fresno, and Stockton, and so a similar yield at those clinics just one day per week means at least \$1800/week, \$7200/month, and \$86,400/year for this Planned Parenthood affiliate.

<http://www.centerformedicalprogress.org/human-capital/document-vault/>

★ Like  
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**bodicacia** says:  
July 21, 2015 at 3:25 pm

Of all that is unholy!!

Ian (the surgeon) can use a "less crunchy" technique and that vampire wants a Lamborghini!!

Pure EVIL!

★ Liked by 1 person  
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**letjusticeprevail2014** says:  
July 21, 2015 at 3:30 pm

"I want a Lamborghini!" Gatter joked.

- <http://t.co/5nsTrocMaP>  
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### George Zimmerman Case Research



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I don't think she was joking at all. Seems like she's willing to give her *soul* away to get one.

★ Liked by [4 people](#)

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**Anubis says:**

July 21, 2015 at 4:37 pm

I am glad they are following Breitbart's lead in showing one vid and letting people make statements before the next one comes out. The Lamborghini refutes a lot of what was said.

★ Liked by [5 people](#)

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**chiavarm says:**

July 21, 2015 at 6:50 pm

She already gave her soul away

★ Liked by [1 person](#)

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**Dr. Bogus Pachysandra says:**

July 21, 2015 at 3:30 pm

She looks evil!

★ Liked by [2 people](#)

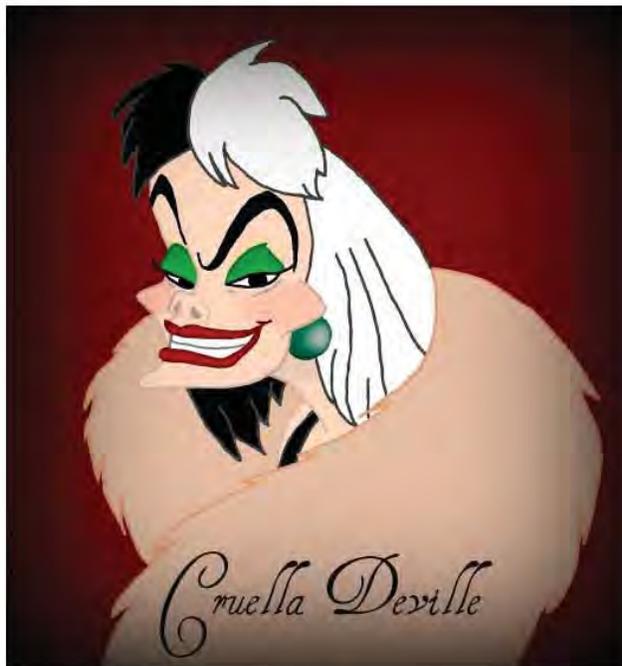
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**letjusticeprevail2014 says:**

July 21, 2015 at 3:57 pm

Yeah.... kinda like a real-life version of *this*



★ Liked by [2 people](#)

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**bodicacia says:**

July 21, 2015 at 3:58 pm



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**letjusticeprevail2014** says:

July 21, 2015 at 4:26 pm

They really have a striking resemblance, don't they?

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**BigMamaTEA** says:

July 21, 2015 at 3:34 pm

This makes me ill.

★ Liked by [2 people](#)

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**sundance** says:

July 21, 2015 at 8:39 pm



★ Liked by [2 people](#)

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**Nick** says:

July 21, 2015 at 3:35 pm

Who gives birth to these demons. Seriously, you can see the wickedness in her eyes. These are not normal people.

★ Liked by [1 person](#)

[Reply](#)



**MaryfromMarin** says:

July 21, 2015 at 6:47 pm

Nick-

The problem is, they ARE normal people. Normal people who have willingly put themselves totally under the influence of evil.

Could happen to any of us. Take that as a warning.

★ Like

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**Nick** says:

July 21, 2015 at 8:09 pm

I understand but what I can't get my head around is the satisfaction factor in this profession (if you can even call it a profession). It's like, at what point in your life do you tell yourself, gee, wouldn't it be a nice job to kill babies and sell their parts for a living, day in and day out. You can't deny these demons get satisfaction from killing life.

★ Like

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**georgiafi** says:

July 21, 2015 at 8:52 pm

The human conscience is able to grow slowly harder and harder, until it is impossible to feel remorse.

One of the Archbishops of Ireland interviewed a huge number of pedophile predator priests and said only one showed any sort of remorse for the damage he had caused to the children he molested....only one. He said all the rest had every excuse, rationalization, denial, sense of entitlement. Their own stone cold consciences/hearts were like millstones around their necks.

Brings to mind what Jesus said about harming a child, "It would be better for them to be thrown into the sea with a millstone tied around their neck than to cause one of these little ones to stumble."

★ Liked by [1 person](#)

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**Spar Harmon** says:

July 22, 2015 at 1:58 am

see Hannah Arendt's THE BANALITY OF EVIL a deep analysis of the rise and existence of the III REICH

★ Like

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**Spar Harmon** says:

July 22, 2015 at 2:03 am

also look up the UTUBE videos of Margaret Sanger, founder of PPH

We don't have to wrap our heads around evil, only be a witness to what is so and to guard ourselves from slipping into evil mindsets— —

★ Like

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**michelle** says:

July 21, 2015 at 11:18 pm

My daughter being a new mother does what many of us mothers have done and reflects on her pregnancy, the love she felt for her unborn son but not really realizing how much she could actually love someone until he was born and how in 6 months she can't now imagine her life without him in it. These videos are really getting to her, she said what I often wonder about, do these women doctors who perform these abortions have children of their own? If so then how could they take these innocent lives and talk about selling their organs like they were talking about selling parts out of a car? She told me she wants to go sit outside abortion clinics and beg them to let her raise their baby and not kill it.

I've always said I could sort of understand a man not really realizing these

little babies are little humans, but I've never understood a woman, especially a woman who is a mother talking about killing a baby as a choice and it's even harder to understand a mother taking the life of a baby. I can't explain how you can let evil take over your life, but there is no other explanation for it, evil runs their life.

★ Like

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**Stormy says:**

July 21, 2015 at 11:37 pm

*They know ...*

★ Like

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**Col. (R) Ken says:**

July 21, 2015 at 3:35 pm

This just sickens me, these people need to be locked up, and the key thrown away. My personal opinion on abortion, that's someone challenged, it's murder. And these people are murders. God will have vengeance upon them.

★ Liked by [1 person](#)

[Reply](#)



**robertnotsowise says:**

July 21, 2015 at 3:38 pm

I mean, really, where is a real life Paul Kersey when you need one....

★ Like

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**TheLastDemocrat says:**

July 21, 2015 at 3:49 pm

The first video had discussion of unifying the buying across Planned Parenthood locations. As could be seen, this has not been adopted by Planned Parenthood, or there would be no doctor to lure at the local level.

The nationwide Planned Parenthood organization may have decided to simply ignore what the locals are doing. This allows Cecile to declare that they, the nationwide PP, does not sell body parts, while sustaining the infrastructure (consent forms, refrigerators, etc.) for this altruistic "tissue donation" effort.

Some liberals will wake up. I jumped off the crazy train before Obama's first run. I figured out this train was headed straight for Greece, with a stop at Bernie Sanders Land along the way.

Yet, for the most part, the virtue-cult members will repeat the spoon-fed replies in order to sustain their membership in the virtue cult: they will parrot the "heavily-edited" talking point and the "tissue donation for science" point in order to be free from facing the sick reality their political world view holds.

I really don't know how to talk to your zombie, body-snatched friends and family – they are trained to react with indignancy or with self-righteous vehemence when you counter their views. This is because their thought architecture cannot handle close examination, since it will fall apart, and so the cult needs automatic protection from logical scrutiny of their positions – so their automatic answers are: you are misled by FauxNews (totally hilarious – my wife and I have limited cable that does not include Faux News, yet one facebook friend throws this out all the time), or you are ignorant/not yet enlightened (total cult move: i.e., we don't yet perceive the necessity of abortion for women to be on equal footing with men in societv. or we do not yet perceive the institutional racism in our nation – the

micro-aggression, marihuana laws, etc.), or you simply get labelled as one of the enemy: a living, breathing, walking, talking conservative Christian white stingey racist misogynist straw man.

If you try to break it down really slow, and into mutually agreeable pieces of the issue, and stay on one topic, they sense danger to their world-view and throw out a red herring – always a hypothetical sob story or a TM/MB story where the actual facts do not fit their narrative.

At times, if you focus on one specific situation in order to prove at least one point, and hope for a chink in their cult-worldview, you will get labelled for being overly obsessed with one topic or issue, such as the issue of when life begins. That labeling is yet another pre-programmed rhetorical trick to avoid the fear of discovering they are in a cult.

This is pretty much all they got.

★ Liked by 1 person  
[Reply](#)



**Les says:**

July 21, 2015 at 6:38 pm

Good post. It's like arguing with a 13-year-old, more mouth than sense.

★ Like  
[Reply](#)



**boutis says:**

July 21, 2015 at 3:51 pm

All of these PP women in their marketing biz look like they crawled out of a crypt. Creepy, ugly, and bizarre.

★ Liked by 1 person  
[Reply](#)



**lilbirdee'12 says:**

July 21, 2015 at 4:17 pm

They truly do, don't they? Since 2008 we know what it looks like to have no soul. We can now spot them a mile away.

★ Liked by 2 people  
[Reply](#)



**Cymrygirl says:**

July 21, 2015 at 6:39 pm

I have seen some people on FB referring to this particular woman as the Crypt Keeper (I suppose it's a reference to the old TV show "Tales From the Crypt.").

★ Like  
[Reply](#)



**BigMamaTEA says:**

July 21, 2015 at 7:06 pm

<http://i2.wp.com/www.thisishorror.co.uk/wp-content/uploads/2012/04/Crypt-Keeper.jpg?resize=259%2C253>

★ Like  
[Reply](#)



**BigMamaTEA says:**

July 21, 2015 at 7:10 pm

again....



★ Like

[Reply](#)



**Totally Domestic** says:

July 21, 2015 at 7:11 pm

That's her right there!!!!

★ Like

[Reply](#)



**Les** says:

July 21, 2015 at 6:40 pm

I have found IRL that conservatives are generally better-looking than liberals. I think because many liberals imbibe too often and try to look as cheap and available as possible.

★ Like

[Reply](#)



**ZurichMike** says:

July 21, 2015 at 3:57 pm

Oh my God, this is so utterly soul-destroying and despicably evil.

Archangel Michael, we pray for your intervention to you who patrol the border between heaven and hell. We are inundated with evil and vicious demonic forces that mock and destroy life and traffic in the body parts of God's most innocent creations. We pray fervently for you to marshal the seraphim, cherubim, thrones, dominions, virtues, powers, principalities, archangels and angels — indeed all the heavenly host — and rally to the aid of these innocent souls ripped untimely from the womb. And we pray mightily to find, capture, and cast the demonic forces prowling the earth back to the eternal filth and hellfires that spawned and await them. In the name Jesus the Lord. Amen.

★ Liked by [5 people](#)

[Reply](#)



**mikayla825** says:

July 21, 2015 at 5:26 pm

Amen.

★ Liked by [3 people](#)

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 5:33 pm

Amen.

★ Liked by [2 people](#)

[Reply](#)



**RonJ says:**

July 21, 2015 at 6:48 pm

Amen

★ Like

[Reply](#)



**Jennifer Joseph says:**

July 23, 2015 at 4:59 pm

Amen!

★ Like

[Reply](#)



**lilbirdee'12 says:**

July 21, 2015 at 4:13 pm

Not sure if I can/will watch the full video here. The one-minute clip on the news was enough since I am still reeling from the Immigration hearing this mornin' and the words of the loved ones of those murdered by illegal aliens.

The evil ones shopping baby parts will surely burn in hell. I ask for no mercy for them.

Here is a list of 25 representatives of our so-called govt. who took PP money. Grrrrrrrr.

<http://dailysignal.com/2015/07/21/planned-parenthood-spent-679596-in-2014-to-help-elect-these-candidates/>

★ Liked by [1 person](#)

[Reply](#)



**Ursula says:**

July 21, 2015 at 4:20 pm

I just pray that those fetuses feel no pain. This sounds like something Nazi Dr. Mengele would do.

★ Like

[Reply](#)



**Justice 099 says:**

July 21, 2015 at 5:31 pm

It certainly is no coincidence that abortion procedures were developed at the height of eugenics, when the socialist party was very strong in America, and Hitler was rising.

Margaret Sanger was an admitted socialist and eugenicist. She shared a lot in common with Hitler's ideals.

★ Liked by [6 people](#)

[Reply](#)



**georgiafl says:**

July 21, 2015 at 7:37 pm

Sanger was also a racist who met with the KKK.

★ Liked by [1 person](#)

[Reply](#)



**michelle says:**

July 21, 2015 at 7:03 pm

These babies do feel pain and these people causing that pain before they murder these babies will someday face the wrath of God.

★ Liked by 1 person  
[Reply](#)



**Jersey Beach says:**

July 21, 2015 at 4:24 pm

The people in those videos are horrendous, even that is putting it mildly. Godforsaken disgusting.

★ Like  
[Reply](#)



**CrankyinAZ says:**

July 21, 2015 at 4:31 pm

I can't even wrap my head around this evil...

★ Like  
[Reply](#)



**Obomination says:**

July 21, 2015 at 4:39 pm

*The founder of StemExpress, the private company that has engaged with Planned Parenthood in the sale of aborted baby body parts, is the younger sister of the health policy director of House Speaker Rep. John Boehner (R-OH)*

<http://www.breitbart.com/big-government/2015/07/17/boehners-health-policy-director-is-sister-of-stemexpress-founder/>

★ Like  
[Reply](#)



**letjusticeprevail2014 says:**

July 21, 2015 at 4:44 pm

Wow.



★ Liked by 1 person  
[Reply](#)



**judyw says:**

July 21, 2015 at 8:06 pm

Thank you for posting this.....I wanted to post it on another thread earlier

but couldn't remember where I read it and no google search turned it up...  
imagine that! 😞

★ Liked by [1 person](#)  
[Reply](#)



**William** says:

July 21, 2015 at 4:42 pm

Money is not important, except when it comes to wanting a Lamborghini. Hah?

★ Liked by [1 person](#)  
[Reply](#)



**aprilyn43** says:

July 21, 2015 at 4:55 pm

Anyone still wondering why this nation is under a curse from the Living God? ...

★ Liked by [2 people](#)  
[Reply](#)



**MaryfromMarin** says:

July 21, 2015 at 6:48 pm

Not wondering in the slightest.

★ Liked by [2 people](#)  
[Reply](#)



**Scott Spencer** says:

July 21, 2015 at 4:58 pm

Instead of a Lamborghini, how about a hangman's **noose**? How would that be?  
Pure unadulterated evil..

★ Like  
[Reply](#)



**conservativehippie** says:

July 21, 2015 at 5:13 pm

i think trump needs to make a statement about this. he absolutely needs to  
mention this. like today.

★ Like  
[Reply](#)



**FTWPHil** says:

July 21, 2015 at 6:31 pm

Strike while the iron is hot!

★ Like  
[Reply](#)



**Justice\_099** says:

July 21, 2015 at 5:33 pm

I just wonder when they are going to lose their minds and come out and say they  
are doing us a favor by aborting minorities and other undesirables and that we  
should be grateful for them keeping the population down.

After all, that's what this was all founded on.

★ Liked by [1 person](#)

[Reply](#)



**TheLastDemocrat** says:

July 21, 2015 at 7:22 pm

if you look at the liberal news sites, and look at the comments, you will eventually see this.

“every child a wanted child.”

what is the corollary to that?

“if you are not wanted, we just might kilt you off.”

★ Like

[Reply](#)



**Concerned** says:

July 21, 2015 at 5:40 pm

She would have made a great Auschwitz guard.

★ Like

[Reply](#)



**Tkim** says:

July 21, 2015 at 5:44 pm

This makes me think of all of the women (for example Rosalyn Carter) who opined that although she herself would never have an abortion, she isn't "comfortable making that decision for other women."

Imagine a well known man saying, "Well I myself would never hit a woman, but I'm not comfortable making that decision for other men."

Abortion advocates would immediately pipe up: well abortion is LEGAL, hitting women is not.

Hitting men isn't legal either. So, in reality, a tiny ninety pound woman could walk up to a burly guy and kick him in the shin and even if it felt like a mosquito bite to him she could be arrested.

That same woman could walk into an abortion facility, hugely pregnant, and announce she was about to have her baby torn limb from limb, and neither she nor the doctor would be breaking the law.

We are supposed to have laws against selling our body parts so the rich can't buy the kidneys or corneas of the poor. But we have people drooling over the possibility buying a sports cars, if only enough babies of many socioeconomic groups can be murdered.

One moment you're safe in Mommy's womb, the next you're being cut to pieces and your tiny body sold (or incinerated or tossed out with garbage).

With the evil we have rampant in our country it is a marvel we don't have a 9.5 earthquake ripping this nation from coast to coast. We deserve nothing less.

★ Liked by [2 people](#)

[Reply](#)



**Elsbeth** says:

July 22, 2015 at 8:18 pm

That argument often comes from horrific situations like rape and incest, where most people feel that the mental health of the sexual assault victim overrides the baby's life. One can understand the impetus behind this even though we disagree . However, if you look at the Guttmacher research,

only 1% of all abortions are for rape and incest. There is also a small percentage of abortions that occur because the mother's life is in mortal danger.

Explaining to people on the fence that at least 95% of all abortions are not rape, incest, or life of the mother can actually make a difference in their thinking.

★ Like

[Reply](#)



**Totally Domestic** says:

July 21, 2015 at 5:47 pm

Best Cars and News:  
Lamborghini Egoista  
Cost can be over \$500,000.00  
That's a whole lot of baby parts Ms.Gatter!

★ Like

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 7:22 pm

I've got it in my files, (I'll post later tonight) some more "price lists" and stuff before they changed their website . If I remember correctly, prices went up to \$24,000.00.

★ Liked by [1 person](#)

[Reply](#)



**MaryfromMarin** says:

July 21, 2015 at 11:53 pm

Glad you have that, BMT. Post it EVERYWHERE.

★ Liked by [1 person](#)

[Reply](#)



**taqiyvologist** says:

July 21, 2015 at 6:17 pm

Anyone seen Twitchy today?

Apparently "Lamborghini" is trending on Twitter:

<http://twitchy.com/2015/07/21/why-is-lamborghini-trending-just-when-you-thought-planned-parenthood-couldnt-get-more-depraved/>

(No idea how to embed a tweet, but...)

Stephen Miller said:

*Lamborghini social media team is like "I don't know what we did but hey check this ou- ... oh...oh.. oh shit"*

Remember, folks, the outrage of the day is not calling a man a woman because "feelings."

Baby parts for Lamborghinis? Not an outrage.

★ Liked by [1 person](#)

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 6:42 pm

 **Stephen Miller**  
@redsteeze [Follow](#)

Lamborghini social media team is like "I don't know what we did but hey check this ou- ... oh...oh... oh shit"

6:51 AM - 21 Jul 2015

  122  112

★ Liked by [1 person](#)  
[Reply](#)

 **BigMamaTEA** says:  
July 21, 2015 at 6:46 pm

 **Stephen Miller**  
@redsteeze [Follow](#)

Lamborghini social media team is like "I don't know what we did but hey check this ou- ... oh...oh... oh shit"

6:51 AM - 21 Jul 2015

  122  112

★ Like  
[Reply](#)

 **taqiyyologist** says:  
July 21, 2015 at 6:18 pm

How many livers and kidneys for, say, a Toyota Prius?

★ Like  
[Reply](#)

 **BigMamaTEA** says:  
July 21, 2015 at 7:01 pm

h/t canadafreepress Captured this before StemExpress changed their website:



★ Like  
[Reply](#)

 **taqiyyologist** says:  
July 21, 2015 at 6:20 pm

Folks, THIS is why they wanted late-late-late term abortions.

Not because banning them was restrictive of a woman's "right to choose", but because the longer you let them grow, the more parts you can harvest and sell.

SJWs always lie.

★ Liked by [5 people](#)  
[Reply](#)

 **FTWPHIL** says:  
July 21, 2015 at 6:33 pm

SJW's?

★ Like  
[Reply](#)

 **BigMamaTEA** says:  
July 21, 2015 at 6:54 pm

social justice warriors. {hate capitalism; but always find a way to hustle a buck!}

★ Liked by 1 person  
[Reply](#)



**conservativehippie** says:  
July 21, 2015 at 6:38 pm

exactly. bet those late term organs are worth more. literally killing a human being to harvest their organs. i feel so sick today. where is trump on this? i will be beyond disappointed if he's silent.

★ Like  
[Reply](#)



**taqiyyologist** says:  
July 21, 2015 at 6:59 pm

Prepare to be beyond disappointed. I am not expecting Trump to bring this up.

★ Like  
[Reply](#)



**BigMamaTEA** says:  
July 22, 2015 at 12:28 am

They are. Somewhere on this thread I just posted links to some internal documents, and also more captured images (that have disappeared now from the StemExpress website. Huh? go figure.....{sarc}

★ Like  
[Reply](#)



**Les** says:  
July 21, 2015 at 6:43 pm

Soylent Green. 1984. Animal Farm. Fahrenheit 451. All non-fiction nowadays.

★ Liked by 2 people  
[Reply](#)



**TheLastDemocrat** says:  
July 21, 2015 at 8:23 pm

"Walden II" = "Nudge."

★ Liked by 1 person  
[Reply](#)



**BigMamaTEA** says:  
July 21, 2015 at 6:47 pm

taqiy's twitter from above {well, if this works, sometimes it doesn't}



**Stephen Miller**  
@redsteeze

[Follow](#)

Lamborghini social media team is like "I don't know what we did but hey check this ou- ... oh...oh.. oh shit"

6:51 AM - 21 Jul 2015

🔄 122 ★ 112

★ Like

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 6:50 pm

not working tonight.

Somebody on taqiy's tweet from @redsteeze thread is starting a new hastag

#silenceofthelambos

★ Liked by [1 person](#)

[Reply](#)



**taqiyvologist** says:

July 21, 2015 at 6:56 pm

Absolute genius.

★ Liked by [1 person](#)

[Reply](#)



**sundance** says:

July 21, 2015 at 8:47 pm



**The People's Cube**

@ThePeoplesCube

[Follow](#)

Hitler takes selfie with #PlannedParenthood hashtag

[j.mp/1lhyfdl](#) #TCOT #PlannedButcherhood #MargaretSanger

5:32 PM - 21 Jul 2015

↩️ ↻️ 51 ★ 28

★ Like

[Reply](#)



**taqiyvologist** says:

July 22, 2015 at 12:16 am

Just a couple of years ago, Hilary won the Margaret Sanger award.

<http://www.lifenews.com/2013/02/08/remember-when-hillary-clinton-got-planned-parenthoods-sanger-award/>

Not going away, Ms. Braun.

★ Liked by [1 person](#)

[Reply](#)



**BigMamaTEA** says:



July 22, 2015 at 12:31 am

ooh! Thanks. I had forgotten about that!

★ Like

[Reply](#)



**Les says:**

July 21, 2015 at 6:58 pm

Do NOT donate to the United Way. It makes me sick they fund Planned Parenthood.

I'm looking for a full list of "charities" that fund PP, but here's a start:

Charities to avoid:

<https://www.facebook.com/notes/the-drew-mariani-show/list-of-charities-and-organizations-that-are-linked-to-planned-parenthood-andor-/223486397683559>

Additional to avoid:

Adobe, AOL, Bank of America, Bayer, Chevron, Darden Restaurants (Olive Garden, Red Lobster, etc.), eBay (PayPal, etc.), Laureate Education, Midas, Nationwide (insurance), Nike, Select Comfort (Sleep Number bed), Southwest Airlines (Jet Blue, etc.), Starwood Hotels (Aloft, Element, Four Points, Le Méridien, Sheraton, St. Regis, W, Westin, etc.), Symantec, Wells Fargo, and Whole Foods.

Comic Relief, Eagles Clubs, Elks Clubs, Elton John AIDS Foundation, and the Red Cross.

Continuing members of the list of nonprofits that associate with Planned Parenthood include: AARP, American Cancer Society, Amnesty International, Audubon Society, Boys & Girls Clubs, Camp Fire, Dr. Phil Foundation, Girl Scouts, Girls Inc., Human Rights Watch, Juvenile Diabetes Foundation, Kiwanis Clubs, Leukemia & Lymphoma Society, Lions Clubs, March of Dimes, Michael J. Fox Foundation, Muscular Dystrophy Association, Paralyzed Veterans of America, Parkinson's Disease Foundation, Ronald McDonald House Charities, Rotary Clubs, Salvation Army, Save the Children, Sierra Club, Susan G. Komen Breast Cancer Foundation, YMCA, and YWCA.

Advance Publications (magazines such as Bon Appetit, Details, Glamour, GQ, Self, Vanity Fair, and Vogue), Ameriprise Financial, Arthur Murray (dance studios), Bikram's Yoga, Bob Evans (restaurants), Danone (Dannon products), Fresh Enterprises (Baja Fresh Mexican Grill, Canyons Burger Co., and La Salsa Fresh Mexican Grill), and NACCO (Hamilton Beach and Proctor Silex products; Kitchen Collection and Le Gourmet Chef stores).

Pernod Ricard (alcoholic products including Absolute, Ballantine's, Beefeater, Chivas Regal, Kahlúa, Malibu, and Royal Salute), TD Bank Group, UBS (financial services), and Wyndham (lodging including Baymont, Days Inn, Dream Hotels, Hawthorne, Howard Johnson, Knights Inn, Microtel, Night, Ramada, Super 8, Travelodge, TRYP Hotels, Wingate, and Wyndham; eatery: Planet Hollywood).

I don't mind cord blood research if the parents have donated it.

Just give to Wounded Warriors or your church. Or better yet, give your money to your family. Start a savings account and make a deposit every time you feel the need to give.

This issue makes me ill and I'm not a regular church-goer. I'm not against birth control, I just don't think abortion is birth control. It's just so gut-wrenchingly wrong.

★ Liked by [1 person](#)

[Reply](#)



**georgiafi says:**

July 21, 2015 at 7:34 pm

Trump resorts are not on the list and there is no Trump business on the list that I can find.

★ Like

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 7:34 pm

Agreed. And then to add this next level of selling, adds a whole new evil for me.

★ Like

[Reply](#)



**georgiafl** says:

July 21, 2015 at 7:42 pm

Bill and Melinda Gates Foundation is a likely sponsor since his father was once President of PP.

★ Like

[Reply](#)



**Les** says:

July 22, 2015 at 8:14 am

They DID give money in the past, but they stipulated it was NOT to be used for abortions.

★ Like

[Reply](#)



**TheLastDemocrat** says:

July 21, 2015 at 8:36 pm

Good call on the United Way campaign. we get encouraged Rah! Rah! But I do not sign up. I am a regular church-goer, and I tithe, plus give in other places, plus usually give at least a little bit for every friend or family doing the for-a-cause fun run. I don't need United Way to feel like I am helping out.

March of Dimes: they claim to be "neutral" on abortion, thus dodging controversy. But they support "secondary prevention," which "aims to reduce the number of children born with birth defects," including by aborting them before they are born. See how that works?

Komen. Each time a friend or family asks me to sponsor them for the three-day walk, or another Komen deal, I give to one of the other breast cancer research and advocacy charities, and let the requestor know.

Be wary of the organizations for overseas charity and development! Most are favorable to boosting abortion capacity! When the Haiti disaster happened, we felt moved to give. I asked a couple charities about explicit avoidance of abortion support of any kind. Samaritan's Purse gave a great answer, so we gave to them. You have to ask very specifically, and learn the euphemisms and tricky language.

★ Liked by [1 person](#)

[Reply](#)



**Jersey Beach** says:

July 21, 2015 at 11:25 pm

Thanks for the listing, I can't believe I gave to Salvation Army for Texas and Oklahoma flooding victims. Wonder if went to them of PP. Bye bye SA, I'm done with you! Marking this site for future reference. Thanks again.

★ Like  
[Reply](#)



**BigMamaTEA** says:  
July 21, 2015 at 7:19 pm



★ Like  
[Reply](#)



**SkidTorque** says:  
July 21, 2015 at 7:47 pm

I had this emailed to me by Live Action News. Thought I would post it if anyone would like to sign it.

<https://petitions.whitehouse.gov/petition/order-attorney-general-investigate-planned-parenthoods-sale-aborted-baby-parts-1>

★ Like  
[Reply](#)



**BigMamaTEA** says:  
July 21, 2015 at 8:29 pm



**Planned Parenthood's founder Margaret Sanger was active in the eugenics movement also was the Nazi Dr. Josef Mengele.**

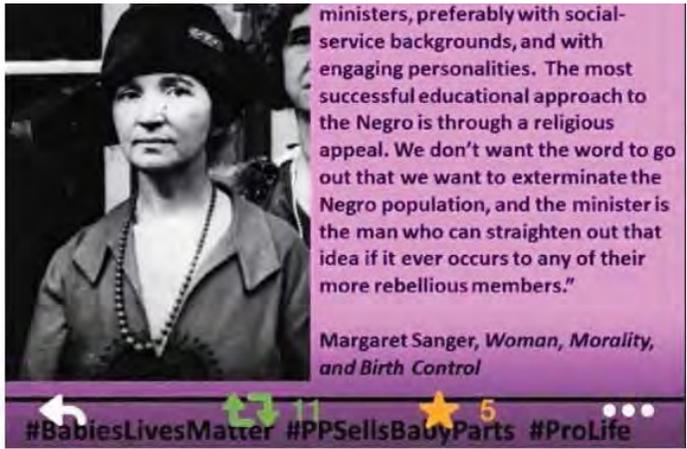
You might be thinking "so what?" but truly they were likeminded people as I will show you in the examples below:



"inferior morons" should be exterminated, added, "We have to make sure that nature's suspended eradication will continue through human arrangements... birth control can be done by sterilizing those with deficient genes."

Josef Mengele, personal diary

"We should hire three or four colored



★ Liked by 1 person  
[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 8:33 pm



★ Like  
[Reply](#)



**taqiyvologist** says:

July 21, 2015 at 8:47 pm

All I know is, I'm never eating the patè at a PP party again.

And yeah I know. The unwanted unviable, yet somehow viable and even profitable, "tissue" is probably in my hand lotions and skin creams and diet Pepsi, but still.

No patè at PP gatherings any more. Swear.

Let me know if I go too far.

I know who has gone too far. It ain't me.

★ Liked by 1 person

LAUNCH BY A PERSON

[Reply](#)



**taqiyyologist says:**

July 21, 2015 at 8:49 pm

This last week, month, and year, the Left just ripped their mask off — proudly.

★ Liked by 1 person

[Reply](#)



**taqiyyologist says:**

July 21, 2015 at 8:57 pm

Don't bring me down! Brrruce!

It just keeps echoing. Bouncing around like a ping-pong ball in my poor skull.

I've heard that E.L.O. was Satanic. Oh, Bruce.

★ Like

[Reply](#)



**BigMamaTEA says:**

July 21, 2015 at 9:00 pm

★ Like

[Reply](#)



**taqiyyologist says:**

July 21, 2015 at 9:42 pm

Damn.

★ Liked by 1 person

[Reply](#)



**BigMamaTEA says:**

July 21, 2015 at 9:01 pm



Become a Customer  
Become a StemExpress customer today to receive 25% off your first order up to \$1,000!



NOTE: We will email you your password!

-  Fetal Liver CD36+ Erythroid Progenitor Cells
-  Fetal Liver CD133+ Stem/Progenitor Cells
-  Fetal Liver Mononuclear Cells – 12 Weeks Gestation & Earlier
-  Fetal Liver Mononuclear Cells – 13 Weeks Gestation & Later
-  Fetal Liver Stromal Cells

★ Like

[Reply](#)



**BigMamaTEA** says:

July 21, 2015 at 9:06 pm

StemExpress flyer

<http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/StemExpress-flyer.pdf>

★ Like

[Reply](#)



**stella** says:

July 21, 2015 at 10:36 pm

Brit Hume's commentary yesterday on Special Report:



★ Like

[Reply](#)



**taqiyyologist** says:

July 22, 2015 at 12:22 am

The headline on the screenshot:

HUME: SCANDAL EXPOSES THE UNPLEASANT (as opposed to all those normally PLEASANT) DETAILS OF ABORTION.

All this unpleasantness about ending human life is NOT OK.

We must make it all continue to be pleasant.

★ Like

[Reply](#)



**taqiyyologist says:**

July 22, 2015 at 12:24 am

Am I, somehow, clear?

Treepers?

★ Liked by [1 person](#)

[Reply](#)



**stella says:**

July 22, 2015 at 6:33 am

So what do you think about the substance of the remarks?

★ Like

[Reply](#)

### Leave a Reply

Exhibit 20

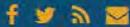
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SEARCH MENU

# Planned Parenthood Doc Deletes Twitter Account After Exposed Selling Aborted Baby Body Parts

NATIONAL STEVEN ERTELT JUL 14, 2015 | 10:57AM WASHINGTON, DC

## BEFORE release of investigative video:



## 1.5 hours AFTER release of investigative video:



After the top doctor at the Planned Parenthood abortion business was exposed describing how the abortion business sells the body parts of aborted babies, she has deleted her twitter account to avoid criticism and investigation.

7.1k

1.9k

12



As LifeNews has reported, new undercover footage shows Planned Parenthood Federation of America's Senior Director of Medical Services, Dr. Deborah Nucatola, describing how Planned Parenthood sells the body parts of aborted unborn children and admitting she uses partial-birth abortions to supply intact body parts.

In the video, Nucatola is at a business lunch with actors posing as buyers from a human biologics company. As head of PPFA's Medical Services department, Nucatola has overseen medical practice at all Planned Parenthood locations since 2009. She also trains new Planned Parenthood abortion doctors and performs abortions herself at Planned Parenthood Los Angeles up to 24 weeks.

**SIGN THE PETITION! Congress Must Investigate Planned Parenthood for Selling Aborted Baby Parts**

Following the LifeNews report, thousands of pro-life people across Twitter have flooded the accounts of Planned Parenthood, its CEO Cecile Richards and Nucatola's accounts with criticism. In a screen shot taken by pro-life activist Jill Stanek, Nucatola has deleted her twitter account less than two hours after the expose' was unveiled and criticism and calls for Congressional investigation began.

## BEFORE release of investigative video:



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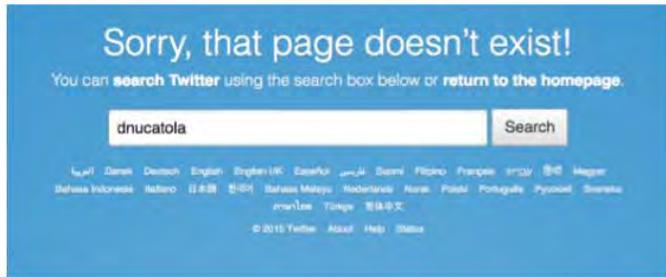


that the pro-life movement can't stop talking about...





**1.5 hours AFTER release of investigative video:**



Nucatola's Facebook page is still active, though she rarely engages in any political or pro-abortion activism there. The last post concerning abortion was from July 2013, where she posts the testimony of a pro-abortion Texas legislator supporting Wendy Davis' filibuster of a bill to ban late-term abortions. The Facebook page doesn't identify Nucaolta as a Planned Parenthood abortion practitioner and medical adviser.



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News

# Dr. Deborah Nucatola: 5 Fast Facts You Need to Know

Published 4:06 pm EDT, July 14, 2015 | Updated 1:57 pm EDT, July 15, 2015 | 25 Comments | By Paul Farrell 20.6k

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FULL FOOTAGE: Planned Parenthood Uses Partial-Birth Abortions to Sell Baby Parts



In an undercover video from the anti-abortion group [Center for Medical Progress](#), a senior Planned Parenthood doctor drinks wine and describes the harvesting of fetus organs and the cost to provide them. The doctor is identified as Dr. Deborah Nucatola, senior director of medical services at Planned Parenthood Federation of America. The video's makers claim it proves Planned Parenthood is illegally selling fetal tissue and performing illegal partial-birth abortions. Planned Parenthood refutes the claims, explaining that the dollar figures discussed refer to costs associated with delivering donated tissue. You can watch the full video above.

Here's what you need to know about the video and Nucatola:

## 1. Nucatola Says 'We've Been Very Good at Getting Heart, Lung, Liver' & the Cost of Providing Specimens Is \$30 to \$100



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(Center for Medical Progress)

According to the [Center for Medical Progress](#), which produced the video, it was recorded secretly during a lunch meeting between Nucatola and actors, who were posing as buyers from a medical company. The clip was made in June 2014. Below is the heavily edited version:



During the meeting, Nucatola discusses the cost to provide specimens — between \$30 and \$100 for body parts such as lungs and kidneys, with liver being the most sought-after organ. [According to the Center for Medical Progress](#), anybody found guilty of the sale of fetal tissue is liable for a \$500,000 fine and/or 10 years in prison. The group claims the video proves Planned Parenthood is illegally selling organs, but [Planned Parenthood](#) says Nucatola is not talking about sale prices but rather the costs associated with delivering donated tissue.

In the video, Nucatola discusses the legal sensitivity surrounding Planned Parenthood's role in providing specimens, saying the organization distances itself from the issue but she knows it's happening at affiliate clinics: "At the national office, we have a Litigation and Law Department, which just really doesn't want us to be the middle people for this issue right now. But I will tell you that behind closed doors these conversations are happening with the affiliates."

Finally, Nucatola talks about abortion doctors' prowess in harvesting organs intact: "We've been very good at getting heart, lung, liver, because we know that, so I'm not gonna crush that part, I'm gonna basically crush below, I'm gonna crush above, and I'm gonna see if I can get it all intact."

Nucatola describes in graphic detail the techniques designed to preserve certain body parts, including what the video's makers claim is a description of so-called partial-birth abortion, which is illegal according to the Supreme Court.

Read a [transcript of the video](#) below:

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**25 July 2014**

**Speakers:**

-Deborah Nucatola, MD, *Senior Director of Medical Services, Planned Parenthood Federation of America ("PP")*

-Two actors posing as Fetal Tissue Procurement Company ("**Buyer**")

*frame counts are approximate*

UUUUU

**Buyer:** So, I have a dilemma to ask the doctor.

**PP:** OK.

**Buyer:** I really, after this week was looking forward to a glass of wine, maybe a bottle, to share of course. I have such a sinus headache though, I have advil sinus, not over the counter though. Can I mix them?

**PP:** Uh-huh. Oh yea.

**Buyer:** Please tell me yes. Ok.

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## 2. Her Boss, Nancy Pelosi's Former Deputy Chief of Staff, Calls Nucatola 'Amazing'



Cecile Richards, the president of Planned Parenthood, calls Nucatola "amazing." (Getty)

Cecile Richards, the president and CEO of Planned Parenthood, appears at the end of the video in a clip recorded separately and commends the work of Nucatola, calling her "great" and "amazing." It's made clear that at the time of her comments, Richards didn't know about the video.

Planned Parenthood has [issued a statement](#) in response to the video:

“

In health care, patients sometimes want to donate tissue to scientific research that can help lead to medical breakthroughs, such as treatments and cures for serious diseases. Women at Planned Parenthood who have abortions are no different. At several of our health centers, we help patients who want to donate tissue for scientific research, and we do this just like every other high-quality health care provider does — with full, appropriate consent from patients and under the highest ethical and legal standards. There is no financial benefit for tissue donation for either the patient or for Planned Parenthood. In some instances, actual costs, such as the cost to transport tissue to leading research centers, are reimbursed, which is standard across the medical field.

A well funded group established for the purpose of damaging Planned Parenthood's mission and services has promoted a heavily edited, secretly recorded videotape that falsely portrays Planned Parenthood's participation in tissue donation programs that support lifesaving scientific research. Similar false accusations have been put forth by opponents of abortion services for decades. These groups have been widely discredited and their claims fall apart on closer examination, just as they do in this case.

and their claims fall apart on closer examination, just as they do in this case.

Richards is the daughter of former Texas Governor Ann Richards and was a former deputy chief of staff to Nancy Pelosi, the Democratic Leader in the House of Representatives.

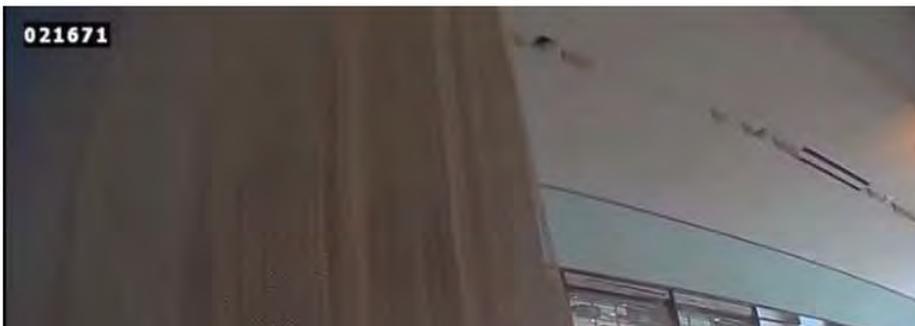
### 3. Nucatola Has Been With Planned Parenthood for 10 Years



Nucatola, pictured on her now-deleted Twitter page.

According to her [LinkedIn page](#), Nucatola has worked for Planned Parenthood since February 2005, ascending to the role of senior director in 2009. She got her BA from the University of Wisconsin-Madison and her medical degree from the State University of New York Downstate Medical Center College of Medicine. The little information that could be gathered from a cached version of her deleted [Twitter page](#) indicates that she's a big football fan.

### 4. Nucatola Says 'No One Ever Plans to Have an Abortion'





In an interview about her day-to-day role as an abortion doctor, Nucatola told Think Catalog in 2014:

“ One thing I’ve learned is that no one ever plans to have an abortion. Or to ever be in a situation where they might want or need to consider having an abortion. I think that’s one reason why we’ve seen so many laws restricting abortion in the last few years: People don’t put themselves in that hypothetical situation and wonder what they would do if they were faced with an unintended pregnancy.

She also answered the question about why she became an abortion doctor, answering:

“ Patients will often ask me why I became an abortion provider, and I explain that I didn’t plan my path in life to become an abortion provider. Rather, I became an obstetrician gynecologist because I wanted to take care of women — through all the phases of their reproductive life, whether or not they ever decided to have children.

Nucatola also dismisses the idea of having any qualms about providing abortions, saying, “I think providing abortion to a woman who requests it is the moral and ethical thing to do.”

## 5. ‘Partial-Birth Abortion’ Is Not a Medically Recognized Term



(Getty)

The phrase [partial-birth abortion](#), or partial-term abortion, though used frequently by pro-life groups, is not a medical term according to the American Medical Association or the American Congress of Obstetricians and Gynecologists. Anybody caught administering partial-birth abortions is subject to two years in prison. The Center for Medical Progress has said this is just the first in a series of investigations into the "illegal trafficking of aborted fetal parts."



**Jajuan Dawson Dead: 5 Fast Facts You Need to Know**

The body of missing NFL player Jajuan Dawson has been found on the Texas lake where he went missing on Sunday July 12.

[Click here to read more](#)



Paul Farrell is Heavy's breaking news editor. He's from Ireland and lives in Brooklyn. Reach him at Paul@heavy.com.

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## 25 COMMENTS

 Anonymous says:

July 14, 2015 at 10:28 pm

Your skewed and sloppy reporting is quite impressive in its laziness. You take this heavily political video at face value, not asking yourself once whether it might have been edited to skew the results – as videos frequently are – or how much credence to give to Live Action, who are an extremist group well-known for using deliberately misleading and selectively edited video. The Center for Medical Progress is not, despite its name, a medical professional group, but another anti-abortion group. Pathetic.

[Reply](#) Anonymous says:

July 15, 2015 at 12:12 pm

If you actually believe pp isn't selling body parts you are blind. I knew your kind of spin would come up fast.

[Reply](#) terrilynnmerritts says:

July 15, 2015 at 8:59 pm

How could Planned Parenthood sell body parts when they ONLY perform FIRST trimester abortions in the first 12 months and the fetus is only less than an inch long with no body parts to sell and considering most of the abortions are pill abortions in the first 9 weeks where a woman gets a prescription for pills, goes home and takes them and her period begins and the 1/2 inch clot of tissues washes out in the commode?

[Reply](#) Anonymous says:

July 16, 2015 at 12:26 am

First of all, the gestation period for a baby is 40 weeks or 10 months not 12 months which would not be a first trimester, also Dr. Nucatola mentions a "17 weeker".that she just aborted, so get your facts straight.

[Reply](#) Robin says:

July 27, 2015 at 5:38 pm

During an early abortion, the fetus is ripped limb from limb—that's how it dies. During a later abortion, a needle is inserted into a woman's abdomen, and the baby is killed by lethal injection. Nothing can change that. You can write and justify yourself for the rest of your life, but it doesn't change the truth. I guess you think the little thing doesn't have any feelings.

[Reply](#) Me says:

July 14, 2015 at 10:54 pm

Why should she give a rip about selling the organs? The fetus is not a person, it's not worthy of dignity or respect. Everything is about women's health. . .or that is what we are supposed to think. The bottom line is that she arranged kick-backs to the clinic in exchange for "donating" collected fetal tissue. I hope retires as the career all-time leader in abortion percentage. Own it Doc, you got caught.

[Reply](#) Shame on you!!!! says:

July 15, 2015 at 12:38 am

This is for ME shame on you for your stupidity ppl like you are the reason our country is the way it is. In my opinion you are not worthy to be spit on let alone be respected. But I can guarantee you this if you and your way of thinking don't change you will suffer for eternity in a roasting pit and I'm sure every stupid heartless thing you have said and done will play back to you over and over again for ever and ever.

[Reply](#) austin says:

July 15, 2015 at 9:43 pm

my god you are a childish person

[Reply](#) Anonymous says:

July 17, 2015 at 6:56 pm

You have deliberately omitted fact that you are a fetus, too. Just a bit overgrown.

[Reply](#) Anonymous says:

July 15, 2015 at 6:43 am

The entire three hour video has been released. No denying it.

[Reply](#) terrilynnmerritts says:

July 15, 2015 at 9:02 pm

There is denying. Planned Parenthood only does first trimester abortions in the first 12 weeks of pregnancy when the fetus is less than an inch long and there are NO parts to sell. Many are in the first 9 weeks when it is a pill abortion, Women get a prescription, go home and take the pills, and their period begins,

flushing out the 1/2 inch clot of tissue that looks like a tiny blood clot. There is nothing to sell.

[Reply](#)

 *Chuck Hurst* says:

July 15, 2015 at 6:59 pm

Worthless fkn jew cunt.

[Reply](#)

 *Anonymous* says:

July 16, 2015 at 9:42 pm

Excuse me?

[Reply](#)

 *Truth* says:

July 17, 2015 at 5:44 pm

Worthless fkn jew cunt.

[Reply](#)

 *M. J. Jobbins* says:

July 21, 2015 at 12:19 am

You heard it.

[Reply](#)

 *terrylynmerritts* says:

July 15, 2015 at 8:55 pm

It is a fake video. Planned Parenthood is a non-profit organization that only does abortions in the first trimester- first 12 weeks- when the fetus is less than an inch long and there are no parts to sell. This has always been what they do. Many are pill abortions in the first 9 weeks when a woman takes pills and her period begins at home and the 1/2 inch clot of tissue comes out in the flow. Again, there are no parts to sell and the woman isn't even at Planned Parenthood when it comes out. You really need to research stories. The group involved are KNOWN for clipping together videos and editing them to appear to be something different.

[Reply](#)

 *Anonymous* says:

July 15, 2015 at 11:38 pm

how do you know what they do or do not, do you have a horse in that race, yourself? awful stuff, stupid ass Doctor she is, she deserves everything she has coming at her for her stupidity alone.

[Reply](#)

 *Anonymous* says:

July 15, 2015 at 11:45 pm

planned parenthood?! Interesting concept, where are the kids to be parented? ooh, wait they are parted out in jars! do they do a sale on black Friday?

[Reply](#)

 *Marylou* says:

July 17, 2015 at 11:23 pm

A 9 week fetus is NOT "a 1/2 inch clot of tissue". I was unfortunate to suffer a miscarriage in the first trimester. The fetus I misaccrries was 7 weeks gestation and there was a head a body and tiny arms and legs. There would be significant more development by 9 weeks.

[Reply](#)

 *Karen* says:

July 16, 2015 at 12:10 am

terrylynmerritts is correct, and shame on you, Heavy, for not fact checking. This 'film' is propoganda, pure and simple. To the creatine attacking Terrylyn about her facts, LOOK IT UP yourself, lean biology! At 12 weeks, there are minute 'parts'. If you want MORE information about aborted fetal tissue, ask Mitt Romney, whose company 'Stericycle' disposes of fetal tissue. If you don't believe in abortion, don't have one, and support sex ed in schools. Support birth control. It's legal, not mandatory.

[Reply](#)

 *Jacobroman* says:

July 16, 2015 at 7:57 am

Choice best way mother-in-law makes \$84 an hour on the internet . She has been out of work for 6 months but last month her paycheck was \$19451 just working on the internet for a few hours.

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 *Céline* says:

July 16, 2015 at 9:40 am

Who's crying

[Reply](#)

 *ds2futuredirtysprite2download* says:

July 17, 2015 at 2:03 am

[reddit.com/2dh0f/](#)

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[Reply](#)

 *Anonymous* says:

July 18, 2015 at 8:20 pm

Ferocious Top Talker Mocks Planned Parenthood by drinking wine and eating cheese on his TV Show. MUST WATCH!!!  
<http://www.examiner.com/article/conservative-talker-compares-ppfa-exec-fetal-body-parts-scandal-to-nazi-doc>

[Reply](#)

 *georgcantor6* says:

July 21, 2015 at 2:43 pm

According to Dr Dutton, a psychopath expert in the UK, psychopaths are found in great numbers in the surgical profession. Obstetrics-gynecology is a branch of surgery. Therefore, it's not surprising that Nucatal might be a psychopath. There's a high probability she is—at the very least she's a subclinical psychopath. Click here for more information on psychopathy-> [https://www.youtube.com/watch?v=stG2gd9\\_JUg](https://www.youtube.com/watch?v=stG2gd9_JUg)

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**Philip Nolan** · School of Hard Knocks

"The phrase partial-birth abortion, or partial-term abortion, though used frequently by pro-life groups, is not a medical term ..." Of course not! The abortion industry and the medical professionals who are part of it give the process clinical and sterile names to mask what they are doing, so they and their supporters don't have to feel bad. What you call it doesn't change the nature of what it is. It is still the terminating the life of an undelivered baby.

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Exhibit 22

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**6 February 2015**

**Speakers:**

-Mary Gatter, MD, *President, Medical Directors' Council, Planned Parenthood Federation of America and Medical Director, Planned Parenthood Pasadena & San Gabriel Valley* ("**Gatter**")

-Laurel Felczer, WHCNP, *Senior Director of Medical Services, Planned Parenthood Pasadena & San Gabriel Valley* ("**Laurel**")

-Two actors posing as Fetal Tissue Procurement Company ("**Buyer**")

*frame counts are approximate*

**Buyer:** Dr. Gatter, good to see you again.

**Gatter:** Yea, nice to meet you. Thank God you introduced yourself, I really didn't-

**Buyer:** We met in October, in Miami.

**Gatter:** Oh yea, that's right.

**Buyer:** I was there with one of our procurement techs. Go ahead, yes. [Name] is in the restroom.

**Gatter:** How are you?

**Buyer:** Pretty good, it's been really since the holidays, I feel like I've been going on stop. It's been kinda tough to find the time but I'm glad we were able to make it work.

**Gatter:** Ok, where are you based?

**Buyer:** We're based in Long Beach. Yea, Norwalk-Long Beach area.

**Gatter:** Long Beach, ok. The music is loud, what do you think about turning it down?

**Buyer:** Fortunately it isn't too crowded here, I was surprised. I thought there would be a lot of people.

**Gatter:** Now, you're in Long Beach, are you associated with an academic institution of any sort or?

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Buyer:** Myself? Not really, no. I have a relationship with some people at Cal State Long Beach, but it's not very official.

**Gatter:** Ok, and you're company is called, what, again?

**Buyer:** [Company Name]. I'm the procurement- Oh, there's my boss.

**Gatter:** Hi. Mary Gatter.

**Buyer:** Mary. Nice to meet you. You know what I was just thinking? Is this meeting now supposed to be happening? Sinus headache. Just totally out of it. But, no. I couldn't postpone again, right? Thank you so much.

**026800**

**Gatter:** Keep your eyes peeled.

**Buyer:** Ok, what does she look like?

**Gatter:** Mid-fifties. Chunky, my height, blondish hair.

**Buyer:** Ok, I've got a clear shot. So, how are you?

**Gatter:** I'm doing well. So, your companion, whose name is?

**Buyer:** [Name].

**Gatter:** Ok. I'm getting older, the names-

**Buyer:** Me too. If we- I have been calling him a different name, and I don't even know, he looked at me, and I was like oh, you'll understand when you get this age. What did I call him. Oh, it was, I said [Name], which is his middle name, but I never call him that. So, I think it's the sinus headache.

**Gatter:** Plus, this music is loud. Maybe because I put in my hearing aid this morning. Anyway, so [Name] was explaining that your company is in Long Beach. How long have you been around?

**Buyer:** Well, I'm a start up. We're coming up on our anniversary very soon. One year. So uh-

**Gatter:** How did you get into this business?

**Buyer:** Oh, that's a long story. I got into it years and years ago, so eighties. What I was doing, was I was working with women, really doing counseling with them.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

The whole stigma, pressure from family, depression. So, that was really where I started. And then, you know, we're about the same age I would guess. How it got babies, very dangerous. So, I was raising my family and that went away. Just still keeping my hands in it. The clinic in this area has closed down since then. Now, I just see such a positive direction I can take.

**Gatter:** How did you connect that with your-

**Buyer:** So, my niece was working in research and she knows [Name], and she came to me and she was telling me about the work that she was doing. And that researchers were not able to-

**Gatter:** Get tissue.

**Buyer:** Yea. So I just sorta put two and two together, and thought- the main thing at the time. The main thing at the time was this could be positive. If I could work with women saying, no, no, this is not all negative. You don't have to-

**Gatter:** Well, it's been my experience that people are eager to find some silver lining in the situation, and they're seventy or eighty percent of the people you thought would say yes.

**Buyer:** Exactly. Really? Is that what you're finding? seventy/eighty-

**033000**

**Gatter:** Years ago, I was involved; I'm stepping back now. For years, I was the medical director of Planned Parenthood Los Angeles. We had fifteen thousand procedures a year. We had a relationship with people out of UCLA, which switched to USC. They would bring their own researcher in- we would get our staff to get informed consent which has to be the federal consent. Then, their staff would get the tissue, what ever tissue they wanted that day. They would come mostly to our main site, where we did procedures to 24 weeks. And they would mostly handle the bigger cases.

**Gatter:** So it was my experience that maybe 60% to 70%, but a large percent of patients we approached would say yes. [inaudible] I don't know how much you know about this. But at Los Angeles we used digoxin- a feticidal agent- once you apply a feticidal agent-

**Buyer:** It nukes the stem cells.

**Gatter:** Anyway, about a year and a half ago I retired from PPLA and I had been at Pasadena since '05, so I continued my work at Pasadena, which is a much smaller affiliate, much more suitable for a semi-retired person. I live in San Moreno, much closer to here. Laura who will be joining us, is the lead clinician there. We do about eight hundred abortions a year, and about sixty of them are

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

between twelve and sixteen weeks. So, I didn't know if that was going to satisfy you, not satisfy you. Or what you were interested in, or what.

**Buyer:** Well, ok. Whether it would satisfy, maybe it's not the volume I was thinking about, but would it fulfill something else? Yes. I think it would. What do you-

**Gatter:** So, where we stopped off was with your organization, so you started a year ago as a start up.

**Buyer:** Yes.

**Gatter:** And you are for profit?

**Buyer:** Yes.

**Gatter:** Your academic connections or researchers are with?

**Buyer:** I was telling her, Briana coming to me and talking about researcher not being able to get tissue and-

**Gatter:** It's a perennial problem, thirty years ago when I was working in New Haven and we had people at Yale who were doing research on Parkinson's and stuff like that. I was involved with tissue donation there as well. Not at Planned Parenthood, it was women's health services. They would come, they were very good and they would take whatever I could give them, because they were just desperate to have tissue.

**Buyer:** So, I might be looking high volume to satisfy needs but, I'm just in a position where I see, this last year, the great strides we made. One problem that I have encountered is saying yes, I can get this for you and then not be able to. So, I don't want to run into that, I don't want to get that reputation. There are some organizations with that reputation.

**Gatter:** Well, it depends, if you have high enough volume you can get pretty much anything.

**Buyer:** Right.

**Gatter:** So, have you thought about FPA or-

**Buyer:** Yea, FPA is- because we're close with Dr. Nucatola- She was kind of our go between FPA this summer. And FPA doesn't feel like they're in a position to partner with something like that, they feel like it's too research based and-

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Gatter:** Now that I think about it, you know Rachel Steward, the medical director? I think, this is before Rachel though, they're attitude was they were for profit and they didn't feel like they could partner with another for profit because they'd be accused of selling tissue or convincing people to have procedures [inaudible] it was a PR issue for them. They do fifty thousand abortions a year, they're a huge [inaudible]

**Buyer:** Yea, I didn't know much about them when we started talking to Deb, and it sounded really good but- apparently she reached out to them, I think she's close to Rachel, they said that's not something they wanted to be involved in. You know, what's kind of the most disappointing thing that summer, was we discovered pretty much every affiliate in California was already partnered.

**Gatter:** Yea.

**Buyer:** StemExpress has the whole North and ABR has San Diego, and there's Novogenix in LA, and I guess there's a private lab in Orange. So, had assumed that California was saturated, so we're starting to cast our gaze further.

**Gatter:** You've got one small pocket of people who are not partnered, that's Pasadena because the volume is not big.

**Buyer:** And so it's literally eight hundred surgical procedures a year. Wow.

**Gatter:** That's surgical. Our medical is up too, medicine abortion came around in two thousand (inaudible) Who would want to do this? (inaudible) come in for a quick little surgical procedure. It turn out a lot of women would rather do that than come in for any kind of surgical procedure. So our- it might be as many as thirty percent of our total AB volume is not medicine abortion. That's not- it isn't helpful to you.

**Buyer:** No. So, you found that- that surprised you when-

**Gatter:** Yea, I was surprised. I've learned from my experience and (inaudible) But I was surprised. Plus there was a lot of fear, back in two thousand that our phone lines would be overwhelmed but you know, if you do proper counseling up front, and what to expect-

**Gatter:** You know, when we first, we got calls from 12-year-old kids who hadn't told their parents they were coming in, who were horrified, they were now bleeding, cramping, some of them went to the emergency rooms, some of the emergency rooms were Catholic hospitals, so you know, all this kind of stuff goes on, but in general, we now have permission to go to 10 weeks as well, the original FDA was approved up to 7 weeks, and then evidence-based protocols started- I wonder if my- let me just walk out there, she's usually pretty reliable.

**Buyer:** So, did you want to wait for Laurel or-

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Gatter:** We can go ahead and start the conversation.

**Buyer:** So, what have you done in the past as far as providing tissue, how has that worked with the logisitics-

**Gatter:** Ok. I was involved in New Haven, I was involved in Boston-

**Buyer:** Dr. Stubblefield?

**Gatter:** So Novogenix was our partner in PPLA and they would send us- you know, big volume. They would send their staff to the site, and our staff, our medical assistants were used to discussing with the patients, do you want to consent? And they would say yes or no, and a lot of them said yes. Maybe it wasn't entirely sixty, and then once the patients have signed the consent form, the patients did not receive digoxin, and Heather would look at the tissue- that's probably Laura- she would take the pieces that she wanted and it worked out well for everyone. She was unobtrusive, she was helpful, she did all that kind of stuff.

**Laurel:** Oh, my apologies. Hi.

**Gatter:** So we just started the conversation.

**Gatter:** They're a start up, they've have been about a year in business. They are for profit company connecting researchers with people willing to donate tissue. We just started talking- they were a little bit concerned about the fact that they're in Long Beach, but they understand that every California affiliate is paired up in a tissue donation program, except for Pasadena. Volume, that you for getting it to me is eight hundred a year. We were just starting to talk about the process worked with Novogenix down in Los Angeles when I was there. To back up a little bit, PPFA, our parent body, is on board with tissue donation, but we have to ask for a waiver to do it, and we have to lay out for them what our program's gonna be like. And it's absolutely a requirement that we use only the official, federal government form for tissue donation, that we don't modify it in any way. Novogenix was working on a concept that California has slightly different requirements, and so it's different, and so they wanted to very reasonably insert the California requirements into the consent form, the federal form, PPFA said no, you have to have two separate forms, so it just added to the burden of consent issues. But I was also explaining to them, back when I was in Los Angeles maybe sixty to seventy percent of people said yes to tissue donation.

So Heather, a Novogenix person would come to the site, and our staff would sign the patients up, and get consent. Heather would look at the tissue and take what she required, so logistically it was very easy for us, we didn't have to do anything. There was compensation for this, and there was discussion if that was legal, they

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have been paying by the case, and there was some discussion about do we, in a different way, or I don't know what you're used to doing, how you're used to doing compensation. Patients don't care what we do, of course, but-

**Buyer:** I want to go back to the percentage of people that do consent, do you find it makes a difference with who is approaching them? How they're approached?

**Gatter:** The person approaching them, medical assistants have to be on board with the program. I didn't find any difference who approached. What I found the difference was, they were not consistently approached because of how busy it was. The busier you are, the less likely the staff is going to take the time to say "by the way, there's two more forms for you to sign." Which is such a waste (inaudible) If we need liver today, and there's a seventeen week patient who would be perfect, but she wasn't approached, then you can't do that.

**Buyer:** Is that- whether you want to use your clinic staff doing consenting, or whether our technician should be don't that, because that's an option as well. It sounds like it has to be a PPFA form?-

**Gatter:** PPFA uses the Federal form. The federal government put out a form, saying here's the form for tissue donation, aside from PP. PPFA, the form that we use, is a federal form. Now, you can use the California form, or your company specific form but you've got to use at least, that one.

**Buyer:** But your experience is always your clinic staff doing all the consenting, not the outside technician.

**Laurel:** I was with the San Diego affiliate, and they were utilizing the same process. It was the staff who was doing the consenting and then there was someone from the company also. You know, it's an education piece, absolutely for the staff. Support staff are well trained and I think it's a small amount of training and it's easy to bring them up to speed. We're participating in a research project, and that's gone well. There was a learning curve, with the education but they took that on and did quite well with it.

**Gatter:** What Novogenix did, they came in for a half hour session for the staff, before we started the program. They had a power point saying here is where the tissue is going, here's the diseases that are being helped (inaudible) So, yea I think the staff that understand the program is more likely to buy in to it and want to do it.

**Buyer:** So, logistically, what would that look like if we were to come in, not come in. We're paying to- I was always envisioning that our tech would do everything, so that's less work for you guys. Obviously they're doing the collecting and

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shipping and they would also do the consenting. They can also be a clinic float that way, depending on your flow or however that works.

**Laurel:** Yea, I mean that's not something to turn down. I think that may well help with flow to decrease the amount of time that they have to take with our staff, and then move them to a different room, then we- I'm trying to strategize about that. We have the three rooms, I don't think, spacewise it would be an issue.

**Buyer:** It wouldn't be a problem.

**Gatter:** We could move people for one building to another.

**Laurel:** Well, I think we could-

**Buyer:** There's multiple buildings?

**Laurel:** We use- we have a second building in front of the parking lot. Actually, we just moved into a trial that we're working on (inaudible) It's a separate waiting area for patients who come in for in-clinic abortion and they're able to wait with their partners and it's out of the family planning setting. They are splitting it sometimes but for the most part, let me take it back. they intake in the main clinic and they move them for pre-op and everything, the rest of the time out there. We could keep it consistent (inaudible)

**Gatter:** Here's a side issue, if we use your staff to do the consenting, obviously this is your employee, not our employee. And so far when's she's dealing with out patients, she took all those courses; how to talk about abortion, how to talk about this, how to talk about that.

**Laurel:** They're probably a couple that it would fall under, that we'd want her to take.

**Gatter:** Her status wouldn't be independent contractor. It would be-

**Laurel:** I don't know what-

**Buyer:** You feel like Planned Parenthood would contract with our tech or?

**Gatter:** We would have a contract with you guys that would specify some of these things. (inaudible) It would specify that you wear a nametag, all those things.

**Buyer:** But on top of that there would be a personal contract with the technician.

**Gatter:** We were just talking about it, probably not.

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**Laurel:** Maybe not, it may fall under- if they're your employee, then probably not. (inaudible)

**Gatter:** Tissue donation on the cusp of research and something else. I know that for years, well PPLA and northern California, we were kind of the vanguard to have PP doing this kind of stuff. I know that PP national had a hard time trying to figure out where to draw the lines and whether to have us sign—in fact, now it's all coming back to me. If you guys were doing a specific, one research project, we would have to sign it up as a research project. But if you're collecting tissue for multiple research projects, not just one, then it falls into the tissue donation area. It's complicated. The paperwork is a nightmare. But, yeah.

**Buyer:** Does that track with what Deb was telling us before?

**Dr. Gatter:** Yeah, they're always changing their mind, they're always doing things different. I'm sorry. The last moment I checked into this, we did not require any research form submission to do tissue donation, providing it wasn't a one-on-one relationship with a researcher who was collecting the tissues in order to use them.

**Buyer:** Does that track- I think so. We'll be exhibiting at the Medical Directors Council meeting in a few weeks. I don't know if you'll be attending.

**002800**

**Gatter:** I am now the president of that organization. Of course I'll be there.

**Buyer:** Excellent. So we'll be there, and I guess- I imagine, I mean I've never been but I imagine there would be more dialogue with the national office or something like that. So that might be a good opportunity to hear what the most up to date protocol is.

**005300**

**Buyer:** What would you expect for intact tissue? What sort of compensation?

**Gatter:** Well why don't you start by telling me what you're used to paying.

**Buyer:** Okay. I don't think so. I'd like to hear, I would like to know, what would make you happy. What would work for you?

**Gatter:** Well, you know in negotiations the person who throws out the figure first is at a loss, right? So [laughs]

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**Buyer:** No, I don't look at it that way. I know, you want to play that game, I get it.

**Gatter:** I don't want to play games, I just don't want to lowball, because I'm used to low things from—

**Buyer:** You know what? If you lowball, I'll act pleasantly surprised and you'll know it's a lowball. What I want to know is, what would work for you. Don't lowball it, tell me what you really—

**Gatter:** Okay. \$75 a specimen.

**Buyer:** Oh. That's way too low.

**Gatter:** Okay.

**Buyer:** And that's, really, that's way too low. I don't, I want to keep you happy.

**Gatter:** I was going to say \$50, because I know places that did \$50, too. But see we don't, we're not in it for the money, and we don't want to be in a position of being accused of selling tissue, and stuff like that. On the other hand, there are costs associated with the use of our space, and that kind of stuff, so what were you thinking about?

**Buyer:** Exactly. Way higher than that.

**Gatter:** Mhm.

**Buyer:** So I'd like to start at around \$100.

**Gatter:** Okay. Now this is for tissue that you actually take, not just tissue that the person volunteers but you can't find anything, right?

**Buyer:** Exactly. What is, what we can use, what is intact. So that's why I'm saying no, don't lowball, I want you to be happy and—

**Gatter:** Well, it's complicated by the fact that our volume is so low too. I mean, are you looking at 8 and 9 week specimens or only 2nd trimester specimens?

**Buyer:** Well, here's kinda the different factors that come in to that. A lot of the research demand, I would say the majority but a plurality would be for second trimester and later trimester. So, there are some good scientific reasons for that, with cell differentiation, how developed it is and all that. But, at the same time it's all somewhat artificial because there's the practical consideration, like what you

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said, of whether the tech can actually find what they're looking for, and it happens to be easier in the second trimester. Whereas if you're trying to do first tri, you're waiting for an intact enough specimen to come out to try and find. Even then, you spend an hour playing find the liver. And uh- it wouldn't be microscope assisted.

**Gatter:** Naked eye? (inaudible)

**Buyer:** Our techs are most used to- they're most used to adipose tissue and stuff like that from cosmetic surgery centers. That might be a logistical thing we have to look at a little more carefully.

**Gatter:** The problem is that we're only doing sixty second tri's a year. If she doesn't say yes, then your staff is tied up the whole day. When we first started the program, we had a situation- a policy that she would call the day before and how many ten weekers do you have, she wouldn't come in unless we had a chance for getting tissue that day.

**Buyer:** So call the day before? So that-

**Gatter:** For the schedule, say how many second tri's are- and you know second tri's could not show up, there's a lot of slip between plans and the actuality. The staff- your staff would call the night before and say "I need a twelve weeker, do you have any?" That kind of thing. Then they could come in or not come in. It would be irregular for you in terms of whether she could do it or not.

**Buyer:** So coordinating what we need with what is available, the night before?

**Laurel:** I mean we- the schedule is full almost a week before, we do-

**Buyer:** How much does it change? Within a weeks time? Just ballpark it.

**Laurel:** Usually the schedule is so full they don't add anymore appointments, so they move to the next weeks schedule. So at least typically the Monday before the Friday, the schedule's set. It's full.

**Buyer:** And you don't see so much-

**Laurel:** No. we can certainly check back, but no.

**Gatter:** For the full schedule on Monday, have them show up on Friday.

**Laurel:** Well that's I mean, they're having an excellent show rate today. Last week they were at twenty three patients. The demand is higher up because of the holidays, which is what we always see. But, on the average week we see about twenty to twenty four patients every Friday, and it's a combination of first

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and second tri's. in those numbers, you know, second tri's are much less than first tri's.

**Buyer:** So, is Friday your only procedure day?

**Laurel:** Mm-h. It is.

**Gatter:** We're thinking of adding more.

**Laurel:** Yes. We're on the cusp- staffing wise and the need to carry out family planning visits, we're watching how far out our scheduling is, we're not ready to add a second day yet. As I was just going to share, once in a while, there is a change in the schedule, so coming up in the end of March we're going to change Friday to a Tuesday, and send it out a good month in advance, so we know that too.

**Buyer:** And would you be adding a second procedure day this fiscal year, or no?

**Laurel:** Not this fiscal year, no. Unless something dramatically changed with the numbers, in the last year, our in-clinic numbers have been very steady if not dropped just a little bit with the switch to medication abortions. But for the most part the numbers have been fairly constant. (inaudible)

**Buyer:** When you add another procedure day, I guess it's not relevant for this year. Does that mean procedure volume is more spread out over the week or does it increase-

**Laurel:** No.

**Gatter:** It actually increases volume. There's no point if you just divide the days up.

**Buyer:** The intact specimens, I wanted to touch on that. What I was trying to say is if the 10 to 12 week specimens, end of the 1st trimester, if those are pretty intact specimens, that's something we can work with.

**Gatter:** So that's an interesting concept. Let me explain to you a little bit of a problem, which may not be a big problem, if our usual technique is suction, at 10 to 12 weeks, and we switch to using an IPAS or something with less suction, and increase the odds that it will come out as an intact specimen, then we're kind of violating the protocol that says to the patient, "We're not doing anything different in our care of you." Now to me, that's kind of a specious little argument and I wouldn't object to asking Ian, who's our surgeon who does the cases, to use an IPAS at that gestational age in order to increase the odds that he's going to get an intact specimen, but I do need to throw it out there as a concern. Because the patient is

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**signing something and we're signing something saying that we're not changing anything with the way we're managing you, just because we agree to give tissue. You've heard that before.**

**Buyer:** Yes. It's touchy. How do you feel about that?

**Gatter:** I think they're both totally appropriate techniques, there's no difference in pain involved, I don't think the patients would care one iota. So yeah, I'm not making a fuss about that.

**Buyer:** Mhm. IPAS is the manual suction, right?

**Gatter:** Yeah, our shorthand for that.

**Buyer:** So, would you, I could see where it might present some sort of problem for you. So, to, if we could compensate more on something like that, or—

**Gatter:** Well, now you're shading into the area of you're paying me to do something that's not right. So [laughs] that's not what I want to talk about!

**Buyer:** No, I don't, I don't see that. What I want to make sure is that you, whatever you have to go through to deliver intact specimen, that that's compensated. Not that I'm paying you to do something shady or—

**Gatter:** Well I will discuss it with Ian, our surgeon. We'll see what he has to say. Do you have feelings about this?

**Laurel:** I'm just trying to think of it from his perspective. You know, I don't know what his opinion would be on that.

**Buyer:** You're not putting the patient at any more risk, right? As you said.

**Gatter:** No. Just slight variation of the technique.

**Buyer:** Okay.

**Laurel:** Which, the consent they're signing is for suction aspiration, it doesn't describe what kind it is.

**Gatter:** Yes, but I have heard people argue that for the tissue donation, it says we're not doing anything different, so.

**Buyer:** That's what I need to understand, because what I'm seeing it as, of course, I'm looking for intact specimens. You know from a medical perspective, the patient is receiving just as good of care. So help me understand the problem.

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**Gatter:** Well, there are people who would argue that by using the IPAS instead of the machine, you're slightly increasing the length of the procedure, you're increasing the pain of the procedure, is it local anesthesia or conscious sedation, so they're technical arguments having to do with one technique versus another.

**Buyer:** So it's technicalities, is what I'm hearing.

**Gatter:** It's something that I need to discuss with Ian, before we agree to do that.

**Buyer:** And when you do second tri's- your gestational limits is sixteen weeks? Are you doing D&E's at all when you go up to sixteen weeks?

**Laurel:** Thirteen to sixteen weeks are D&E's.

**Buyer:** And Ian? He's the one who does the procedures? And that's a hard cut off, at that point he switches over to D&E's?

**Gatter:** It's a cut off. Under twelve weeks, it's a D&C, over twelve weeks it's a D&E, whether you do all with suction or dismemberment. I have written documentation from ACOG describing D&E even though you're doing suction. So, it's totally a billing issue. The technique we use at thirteen weeks is the same suction technique we use at eleven weeks. As it gets a little bigger, because we practice in LA, (inaudible)

**Buyer:** Even at fourteen weeks, he'll do an actual D&E?

**Gatter:** He might do a suction, I don't know, I haven't seen him in a while.

**Buyer:** Ah, yea, then it's kind of a different ball game too, when we're talking about D&E's because then it's all about the cervical dilation-

**Gatter:** We don't use laminaria, we do everything same day.

**Buyer:** Oh, interesting. Is that just a personal preference?

**Gatter:** Yea. What do you guys prefer in terms of collecting?

**Buyer:** Well, the best for us would be, you know, multi-day induction.

**Gatter:** Yea. That's not going to happen.

**Buyer:** Right. I don't know enough about the aspiration procedures, I think that's uncharted territory for- well, maybe not completely uncharted, but it's certainly less common for tissue procurement right now. Most people- what we're most familiar with is D&E's and trying to get as intact a specimen as you can with that. Like I said, if we're looking to increase volume by dialing up specimen quality

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earlier then it's just a different kind of thing. So cervical dilation isn't going to affect the intactness of a specimen in the first trimester? Right? or is there any difference in the cannula width or anything like that?

**Gatter:** No. In the first trimester you train to use a cannula at certain gestation (inaudible) If you over dilate, you can put a bigger cannula in and get a more intact specimen, but again, you promise that you wouldn't change up the procedure (inaudible)

**Buyer:** Are there any other benefits to having a larger cannula?

**Gatter:** No. The smaller you go, the more likely you are to miss tissue.

**Buyer:** Right. That's what I ment- this might be too technical but in your procedure volume figures do you have a breakdown at like the end of the second trimester? Ten, eleven, twelve weeks to know what we're looking at there or?

**Laurel:** Might be-

**Gatter:** It's something that we can pull up. Most patients are coming in earlier and earlier so we have more seven weekers than nine weekers.

**Buyer:** What's your feeling about how your staff would feel about us coming in-

**Gatter:** I think if you present it in a positive light, maybe give a little fifteen minute powerpoint or lecture about who we're doing this for, they would be for it. Especially if you bring in your own staff to consent.

**Laurel:** It's an extra burden on them to explain it.

**Buyer:** Is your staff, are they aware of the research-

**Laurel:** No.

**Buyer:** So, that's something I think would helpful, for people to know the positives.

**Laurel:** Yes.

**Buyer:** Would that be beneficial? For a little educational-

**Laurel:** Yea. Absolutely.

**Buyer:** I mean, when we talked to people before, that seemed like going away from it, there was a change in attitude. Just our presence there, and how people can be used to the flow and what they're used to, and to have people coming in.

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So I have found it, so far, when people don't understand the research that's going on, they don't understand the positives, once they're told, once it's presented- so, you think they would be-

**Buyer:** So, you think they would be open to that?

**Laurel:** yea, we have, just to share with you, each health center has a monthly meeting and we have speakers that come in all the time.

**Buyer:** Ok.

**Laurel:** Whether it's a pharmaceutical company, or we do our own end services and updates on items. They're very interested and appreciative of that kind of thing. I think they would react positively to this because of the understanding.

**Buyer:** Ok, and then, once there's an understanding about why we're looking for what we're looking for, and trying to coordinate patients with providing that- was it Heather? Did you say Heather was looking for something but because of the rush, rush, rush she's not able to-

**Gatter:** Because of the rush, rush, rush, they couldn't consent the patients and she couldn't get what she needed.

**Buyer:** That was why I suggested having our techs doing the consenting, so we don't miss-

**Gatter:** Even if your techs are doing the consenting, our staff has to identify the patients to talk to them. So, I can easily see with the rush, rush, rush, even if you're person is there twiddling their thumbs, patient services is too busy to enter this topic. Not saying it will happen often-

**Buyer:** Mhmm. So, how many days is that rush, rush, rush?

**Laurel:** Ha. One of the ways we would go back to this research we're currently involved with the Ellis study. Is we added a special form to the intake paperwork to remind the staff to ask these specific questions, it's like a script and they don't have to remember this stuff, they could check off on the slip, I would envision probably developing something similar, that would say discuss patient declines, patient agrees, and then the patients who read it would be passed on to your staff member.

**Gatter:** And how long is Ellis going on for?

**Laurel:** It's going through May.

**Gatter:** It would be helpful to finish with that, before starting this.

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**Buyer:** So, you're saying this is something what would need to be in place before we could come in? Is that what I'm hearing?

**Gatter:** No. I was suggesting that if Ellis finished soon, we could transition.

**Buyer:** I was going to suggest some kind of pre-screening process, which is what I think you're referring to.

**Laurel:** Yea exactly. To be more easily be able to identify and have a set script that they can just follow and talk about, it makes it much easier.

**Buyer:** Is that a reason that you would prefer to have your staff doing that part?

**Gatter:** We have to have our staff do the initial triage, and then your staff could do the consenting.

**Buyer:** So, your staff has to be the initial contact?

**Gatter:** Yea. because otherwise it's ridiculous , if you talk to everybody, then the patients who do want to do it-

**Buyer:** Mhmm.

**Gatter:** We would have to have a contact in place before we could even start.

**Buyer:** Because I was even imagining- I've heard of people who have the tech as a floater, in the front. They can kind of pre-screen, they have a little clipboard. "Hi my name is Heather, my name is Briana, I'm from Novogenix, there's an opportunity at this clinic to donate you're- I just think back to the eighties, you know, when you and I are talking about that. Had this been around, I don't think I would have been doing as much work in those days with women who were suffering and-

**Gatter:** That might be overstating the case, we were talking about people wanting to see something good come out of their thing, they want to see a silver lining but I'm not sure that would change all that much.

**Buyer:** I'm more hopeful. I think that's just from working with the people. You've got a different perspective but that's what I would be my hope. If people could, if the staff could just be educated to see it, to know about it. What do you think Laurel?

**Laurel:** No, I think if you look at our staff, the age range, they're young twenty plus years. We now have a process of MA training, and most of them are. Previously we were training our own staff so I don't think with official MA trained

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staff they would get that exposure at all. I'm sure they've heard of it, but I think it definitely brings up their level of interest when they understand something and the reasons behind wanting to do it.

**Buyer:** Do you happen to remember, off the top of your head, maybe use last week or this week as an example, I guess today is a procedure day, it's Friday. Do you know what the breakdown is for gestational ages today?

**Gatter:** You keep asking the question, we keep telling you we don't know. Stop asking that question.

**Laurel:** If we look at the schedule itself, it's not broken down by first or second. I know there were some scheduled, a few weeks ago, I think there were two. It also takes looking at documentation on the individual ultrasound, again-

**Gatter:** Its also on the EPN. It's on the EPN. (inaudible)

**Laurel:** It's for first and second tri.

**Gatter:** Yea, (inaudible) can have the gestational age pulled directly from the ultrasound.

**Laurel:** Yea, the billing may help.

**Gatter:** Then you just run the EPN report and it was say that we had seven hundred-eighty nine procedures and how many were second trimesters. When I was at LA, I used to be able to do it myself, it's just not as easy now.

**Buyer:** So, you think there was at least one second tri today?

**Laurel:** I didn't look at the schedule, so no.

**Gatter:** The law of averages is one or two every week.

**Buyer:** So Mary, did I hear you say that you are semi-retired?

**Gatter:** Yupp. I filled my schedule, I'm busier than I was when I was working in LA. This was a sixty hour a week job, you know. Now, it's like one day a week, but I joined a barbershop chorus on Wednesdays, these women are serious singers, I mean serious singers. We go to retreats and we sing for twelve hours a day and we stretch and there's a contest coming up, and we wear these costumes they would be embarrassed about in Las Vegas, and I belong to a local amatur theater group and I'm on the membership committee and were discussing what it means to be a member and dues and that conversation, I'm just busy. Then I got a call yesterday from PP national, they want to put together a cadre of medical directors to do international reviews, I also do reviews all

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around the country, part of the accreditation process. The answer to your question is I am busy. What were you thinking of? Oh, my daughters wedding, that's coming up, mother of the bride dress, ugh. I'd be having that ruben if I didn't have to fit into the dress. So yea, how about yourself, what do you do?

**Buyer:** Nothing for fun. Nope. Nothing for fun. But it doesn't sound like, well I don't know, you sound busier now.

**Gatter:** They're activities but yea. I do research, I had a research paper published last week. There was a research paper inspired by Danco. A lot of red states are trying to limit abortion access by passing ridiculous legislation, and one of them is you have to use the FDA regimen for medication abortion, it's from two thousand, it's outdated and we have evidence alternatives now. But the red state legislation says no, no you have to have seventeen million visitors, you have to do this, you have to do that, and you can't to telemedicine either, which is great. So, Danco- people rarely go back to the FDA to change the label, because it's expensive and there's no point to it and doctors are used to using evidence based alternatives that don't have to have a label. But, if the politicians are saying you have to use a label, we go back to the FDA and say we want to change the label. Danco says you need a big volume of patients to say it's safe and effective, because LA had all those cases. Deb and I put together a paper based on fifteen thousand cases with LAMS and alternative methods saying guess what? Its safer, easier, more effective than the regimen that those stupid idiots want us to use. Im interested in political research so.

**Buyer:** Mhm. Where do you see that going? You're working with Deborah, you said?

**Gatter:** We just published, it will be out shortly. And I had worked with some researchers out of UCSF, Tracy's (inaudible) who moved to Omaha to be part of the Buffett foundation. So, the doctors and I looked at if it made a difference in abortion if you were forced to have an ultra sound or not. As it happens we have them in our system but when you record that patients decision, do you want to see it or not, because it California it's optional. So, now they give a court ordered decision to see it, and we have a separate thing asking how sure are you about your decision. Very sure, not sure, you know, So we looked at thirty thousand patients to see if looking at the ultrasound made a difference. Guess what? For most patients, it does not. Sixty percent of patients did not want to look at it, forty percent did. They both proceeded to have the abortion the exact same way, with the exception of women who were unsure about their decision. If you were uncertain and you saw the ultrasound, you are one or two percentage points less likely to have the procedure. So, it's kind of a nuance, and our enemies don't do nuance as you know, so we published that last year. What do you do for fun?

**Buyer:** I think I enjoy blowing off steam the same way anybody else does. There's lots of funs stuff to do in south LA and Orange county area.

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**Gatter:** Mmm. I can tell you're a clubbing person.

**Buyer:** Yea, that's a polite way of putting it.

**Gatter:** You're a young man.

**Buyer:** I'm sure that Dr. Van Handel of Novogenix would say the same thing.

**Gatter:** Who else is with Novogenix? It's an Asian guy, I'm so bad at names now. I'm sure he would be horrified.

**Buyer:** So, they've been exclusively contracted with PPLA for quite some time? Interesting, and that's the thing, once someone is in, there isn't much room to share.

**Gatter:** They've got to do something really bad to get kicked out. Part of the self sustaining, you know.

**Gatter:** (Inaudible) Heather, when she came in, was pleasant, unintrusive, she didn't get into anything, she didn't get in the way. She was efficient, wrapped up her specimens, sent them out- shipped them out.

**Buyer:** I'm thinking about the 2nd tris, if we knew were going to be able to get a liver-thymus, even if it's just one, consistently, per week I think that would be a good start. Obviously, that limits how many researchers are being served at once, but at the same time, it gets you started-

**Gatter:** It's a promise we can keep.

**Buyer:** It's a promise you can keep, exactly.

**Gatter:** So, what gestational age are we talking about, liver and thymus?

**Buyer:** Well, if it's a liver and thymus pair, that's used in the humanized mouse models, I don't know if you're familiar, the way they have immunodeficient rodent and you can engraft human blood products in order to reconstitute a human immune system. That's used for all kinds of applications, and highly dependant on having a liver- thymus set from a fetal cadaver. So, that's always in demand, people always want that, I was just at two or three-

**Gatter:** How big is the thymus in case I'm looking for something?

**Buyer:** The thymus is pretty tiny, and liver is similar in coloration and consistency as the vaginal lining so, that can be difficult, that's one of the reasons for second tri, they're just easier to identify I think but in terms of differentiation of the

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

progenitor cells in those tissues, there is some some kind of a sweet spot, say fourteen and up. Fourteen to twenty-two weeks, most of the protocols call for eighteen to twenty-two weeks, well, no I think that's an older protocol, sixteen to twenty-two weeks. SCID mice have definitely been engrafted with fourteen week liver and thymus tissue. It's just a matter of knowing that if our tech goes there, you know, that Friday, there is going to be one case there that's got that for certain, we can get it and send it off.

**Gatter:** So, suppose you call in Monday, and there's two 14 weekers, coming in on Friday, we don't know if they're coming in until Friday. So, you could call again in the morning, be asking again if you should come in. We don't really have the volume you need. That's a problem, when developing a relationship. (Inaudible)

**Buyer:** Yea, if it's a matter of finding out and committing the day before, it's a two hour round trip, or whatever for someone to drive out there, that could be worth it, that could be really worth it. So, it would be good to- the name of your physician again? Dr.-

**Gatter:** Ian Tilley.

**Buyer:** Ian Tilley, it would be good to touch base with him-

**Gatter:** Actually, I'm having lunch with him in two weeks so, I could chat with him then.

**Buyer:** Oh, excellent.

**Gatter:** You know, PPFA takes a enormous amount time to get back in terms of contractual issues and stuff.

**Buyer:** Oh, so you would have to apply for the waiver that you spoke of.

**Gatter:** Which, I'm willing- it's not that big a deal.

**Buyer:** Does that go to Deborah? Is she the one that signs off?

**Gatter:** She's one of the people it goes to, but they change who it goes to so, she's involved in the process.

**Buyer:** So, that's why I don't want to lowball. Because, I hear this is what you're going to have to go through, frustration, time just paper work.

**Gatter:** Oh, we will. Where's your company located?

**Buyer:** Long Beach.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Gatter:** When I was at PFFA, they used to have surgical site in Long Beach. (Inaudible) They stopped that Long Beach site too. I don't think I ever went to Long Beach, now that I think about it.

**Buyer:** Do you know well, the Orange/San Bernardino affiliate?

**Gatter:** Jennefer Russo.

**Buyer:** Because we're told they're very high volume, and they're right there, next door to us. The last that I heard was they were working with a private laboratory in Orange, but I guess that would be a research study, a bone-fide research study because they're going right to the researchers who are using it there. But, I don't know, I don't have any more information on what they were after, and what was being done. It sounded to me like it was just one laboratory. There's probably availability-

**Gatter:** Room for expansion.

**Buyer:** Room for expansion. Or maybe room for someone else to come in. I don't know, maybe if Dr. Russo will be in Orlando-

**Gatter:** She will. Absolutely.

**Buyer:** Maybe we can have that conversation.

**Gatter:** Come up to me in Orlando and remind me to introduce you.

**Buyer:** Definitely, yea that would be helpful. So even though you don't have high volume, I see that their are other niches you could fill for us. Don't you think so?

**Gatter:** Here is my suggestion. Write me a three of four paragraph proposal, which I will then take to Laurel and the organization to see if we want to proceed with this. And then, if we want to pursue this, mutually, I talk to Ian and see how he feels about using a "less crunchy" technique to get more whole specimens. Then, if we agree to move forward, the steps, I would need to apply for a waiver at PFFA, in order to do this, we need to have a contract, do you have a contract?

**Buyer:** What we've used in the past is a materials transfer agreement. And obviously, that's open to discussion.

**Gatter:** It needs to say exactly what your staff is going to do. It needs to say exactly what your expectations are. Exactly what the compensations is. That you're agreeing that your person will only use specified the Federal government tissue donation form, you can add extra forms if you want. California-

**Buyer:** Do you have a copy of your form that you could send us and-

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Gatter:** Our form?

**Buyer:** Your form for tissue donation. The standard one.

**Gatter:** Outline this in the email you send, because I will forget as soon as I walk out.

**Buyer:** And are we agreed that \$100 would keep you happy.

**Laurel:** I think so—

**Dr. Gatter:** Well let me agree to find out what other affiliates in California are getting, and if they're getting substantially more, then we can discuss it then.

**Buyer:** Yes.

**Dr. Gatter:** I mean, the money is not the important thing, but it has to be big enough that it is worthwhile.

**Buyer:** No, no, but it is something to talk about. I mean, it was one of the first things you brought up, right? So.

**Dr. Gatter:** Mhm.

**Buyer:** Now here's another thought, is we could talk about specimen, per specimen per case, or per procured tissue sample.

**Dr. Gatter:** Mhm.

**Buyer:** So if we're able to get a liver/thymus pair, maybe that is \$75 per specimen, so that's a liver/thymus pair and that's \$150.

**Dr. Gatter:** Mhm.

**Buyer:** Versus if we can get liver, thymus, and a brain hemisphere, and all that, then that's—

**Dr. Gatter:** Okay.

**Buyer:** So that protects us so that we're not paying for stuff we can't use. And I think it also maybe illustrates things—

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Dr. Gatter:** It's been years since I talked about compensation, so let me just figure out what others are getting, if this is in the ballpark, it's fine, if it's still low then we can bump it up. I want a Lamborghini. [laughs]

**Buyer:** [Laughs] What did you say?

**Dr. Gatter:** I said I want a Lamborghini! [laughs]

**Buyer:** Don't we all, right?

**Dr. Gatter:** [laughs] Exactly! I wouldn't know how to drive a Lamborghini. Oh god I was hysterical, three months ago, driving on the wrong side of the road. Thinking oh my god, I'm too close to that side.

**Laurel:** I couldn't even sit in the front seat in Australia. It was (inaudible) I'll sit in the back.

**Gatter:** I sat in the front and my sister was driving, and every time she'd stop or get too close, I'd go eek, eek. And finally, my other sister was sitting in the back goes "Stop. Get out of that seat."

**Buyer:** Do you have family there?

**Gatter:** My sister did our genealogy and have Irish and half Scott. For the Scotts part we went to Ireland where my great-great grandfather emigrated, he was a sea captain actually. He wrote some very interesting letters about being caught in the south seas, 1870 or so.

**Buyer:** That was your first time there?

**Gatter:** Yes. Yes. Actually, it was my second time because I was in Edinburgh when I was a medical student. We did pre med in OB, that was interesting because the midwives in the deliveries at the time weren't allowed (inaudible) any time there was a delivery, eight am the next morning, the medical student would go out and do (inaudible) it was ridiculous. So, that was my second time.

**Buyer:** And no you have a wedding coming up?

**Gatter:** My daughter is getting married in New Jersey, Atlantic City. Yes, she's getting married, she's going to law school, so she's moving forward with her life.

**Buyer:** And how about you Laurel? Do you have children?

**Laurel:** Two married children. And one- my daughter is pregnant again. Five months.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Gatter:** Oh no! That was quick!

**Laurel:** She wanted to have them thirteen months apart, guess what? She had them thirteen months apart. I said Good for you. She said:

“Are you ready to retire yet?”

I said: “Can you afford for me to retire yet?” So, very good, five month old granddaughter and then older grandchildren, step grandchildren from twenty six to sixteen.

**Buyer:** My goodness. What made her reasoning for thirteen months apart?

**Laurel:** She just wanted to have them close together, it looks like it’s going to be thirteen months.

**Gatter:** Yea, my sister and I are thirteen months apart.

**Laurel:** Yea, my brother and I are too. Very fortunately, she is a stay at home mom, she doesn’t need to work.

**Gatter:** Hey. alright. How about you? You’ve got the energy. How are your children doing?

**Buyer:** They’re both in college.

**Gatter:** Where do they go?

**Buyer:** They go to Cal Poly.

**Gatter:** Oh. Two of them go to Cal Poly.

**Laurel:** Very good.

**Gatter:** We should be moving on here, we’re going to stick you with the check.

**Buyer:** Yes. Yes. Thank you for taking the time, thank you for being flexible.

**Laurel:** I really apologize for being late.

**Buyer:** No need.

**Laurel:** It’s been one of those days.

**Buyer:** I’ll draft a four paragraph proposal, I’ll send over one of our draft contracts as an example. Excellent. I will see you in Orlando. Thank you so much.

**TRANSCRIPT BY THE CENTER FOR MEDICAL PROGRESS**

**Laurel:** I'm not going to shake your hand because of my cold. Nice meeting you.

**Buyer:** Nice meeting you.

**Gatter:** Nice meeting you.

Exhibit 23

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**FILED**  
Superior Court of California  
County of Los Angeles

**JUL 28 2015**

Sherri R. Carter, Executive Officer/Clerk  
By Arnette Fajardo, Deputy  
Arnette Fajardo

7 Attorneys for Plaintiffs

8 SUPERIOR COURT OF THE STATE OF CALIFORNIA  
9 COUNTY OF LOS ANGELES – CENTRAL DISTRICT

11 STEMEXPRESS, LLC, and  
12 CATHERINE DYER,

13 Plaintiffs,

14 v.

15 THE CENTER FOR MEDICAL  
16 PROGRESS, BIOMAX  
17 PROCUREMENT SERVICES, LLC,  
18 DAVID DALEIDEN (aka "ROBERT  
19 SARKIS"), DOE 1 (aka "SUSAN  
20 TENNENBAUM"), and DOES 2 through  
100, inclusive,

21 Defendants.

CASE NO. BC589145

**[PROPOSED] TEMPORARY RESTRAINING  
ORDER, ORDER TO SHOW CAUSE RE:  
PRELIMINARY INJUNCTION, AND  
EXPEDITED DISCOVERY ORDER**

Hearing

Date: July 28, 2015  
Time: 8:30 a.m.  
Dept: 86  
Judge: Hon. Joanne O'Donnell

McDERMOTT WILL & EMERY LLP  
ATTORNEYS AT LAW  
LOS ANGELES

**ORDER TO SHOW CAUSE RE: PRELIMINARY INJUNCTION**

Based upon the complaint filed in this action on July 27, 2015, the *Ex Parte* Application for a Temporary Restraining Order, Order to Show Cause re: Preliminary Injunction, and Expedited Discovery Order filed by plaintiffs StemExpress, LLC and Catherine Dyer, the declarations of Catherine Dyer, Kevin Cooksy, Megan Barr, and Gregory Jones, and the exhibits attached thereto, and having heard argument of counsel at the hearing on July 28, 2015:

IT IS HEREBY ORDERED that defendants The Center for Medical Progress, BioMax Procurement Services, LLC, David Daleiden, and Doe One (aka "Susan Tennenbaum") ("Defendants") appear on Aug 19, 2015 at 9:30 a.m. in Department 86 of this Court, located at 111 North Hill Street, Los Angeles, California 90012, TO SHOW CAUSE, if any, why a preliminary injunction should not be issued pending trial in this action:

1. enjoining Defendants, and all officers, directors, shareholders, members, employees, agents, and all persons acting with The Center for Medical Progress or BioMax Procurement Services, LLC or on their behalf, (i) from any manner of releasing, publishing, disclosing, posting, sharing, uploading, downloading, transferring, or any other means of disseminating, including on the website of The Center Medical Progress, located at <http://www.centerformedicalprogress.org>, (ii) any file, media, device, or document be it electronic, digital, analog, or physical in nature (iii) that contains or represents a recording of any portion (in whole or part) of (iv) any communication (verbal and non-verbal) (v) made by Catherine Dyer, Kevin Cooksy, or Megan Barr (vi) on the evening of May 22, 2015 at approximately between 4:30 p.m. PST and 6:45 p.m. PST (vii) that occurred at, near, or in the restaurant known as Bistro 33, located at 4364 Town Center Boulevard, El Dorado Hills, California 95762; and

2. ~~enjoining Defendants, and all officers, directors, shareholders, members, employees, agents, and all persons acting with The Center for Medical Progress or BioMax Procurement Services, LLC or on their behalf, (i) from any manner of releasing, publishing, disclosing, posting, sharing, uploading, downloading, transferring, or any other means of disseminating, including on the website of The Center Medical Progress, located at~~

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1 ~~http://www.centerformedicalprogress.org~~, (ii) any file or physical document (iii) on which  
2 StemExpress, LLC is identified, including the three “documents” presently posted on the  
3 “Document Vault” website of The Center Medical Progress, located at  
4 ~~http://www.centerformedicalprogress.org/human-capital/document-vault/~~, bearing the dates  
5 January 10, 2013, March 20, 2013, and January 1, 2013.

6 **TEMPORARY RESTRAINING ORDER**

7 Based upon the complaint filed in this action on July 27, 2015, the *Ex Parte* Application  
8 for a Temporary Restraining Order, Order to Show Cause re: Preliminary Injunction, and  
9 Expedited Discovery Order filed by plaintiffs StemExpress, LLC and Catherine Dyer, the  
10 declarations of Catherine Dyer, Kevin Cooksy, Megan Barr, and Gregory Jones, and the exhibits  
11 attached thereto, and having heard argument of counsel at the hearing on July 28, 2015:

12 IT IS HEREBY ORDERED that pending and until the date of the above-described hearing  
13 on the Order to Show re: Preliminary Injunction or, if such hearing should be continued for any  
14 reason, until the date on which the hearing is actually held or this Temporary Restraining Order is  
15 dissolved, defendants The Center for Medical Progress, BioMax Procurement Services, LLC,  
16 David Daleiden, and Doe One (aka “Susan Tennenbaum”), and all officers, directors,  
17 shareholders, members, employees, agents, and all persons acting with The Center for Medical  
18 Progress or BioMax Procurement Services, LLC or on their behalf, shall:

19 1. refrain from (i) any manner of releasing, publishing, disclosing, posting, sharing,  
20 uploading, downloading, transferring, or any other means of disseminating, including on the  
21 website of The Center Medical Progress, located at <http://www.centerformedicalprogress.org>, (ii)  
22 any file, media, device, or document be it electronic, digital, analog, or physical in nature (iii) that  
23 contains or represents a recording of any portion (in whole or part) of (iv) any communication  
24 (verbal and non-verbal) (v) made by Catherine Dyer, Kevin Cooksy, or Megan Barr (vi) on the  
25 evening of May 22, 2015 at approximately between 4:30 p.m. PST and 6:45 p.m. PST (vii) that  
26 occurred at, near, or in the restaurant known as Bistro 33, located at 4364 Town Center  
27 Boulevard, El Dorado Hills, California 95762; and

2. refrain from (i) any manner of releasing, publishing, disclosing, posting, sharing, uploading, downloading, transferring, or any other means of disseminating, including on the website of The Center Medical Progress, located at <http://www.centerformedicalprogress.org>, (ii) any file or physical document (iii) on which StemExpress, LLC is identified; and

3. by no later than July \_\_, 2015 at \_\_\_\_\_.m., or within \_\_\_\_ hours of service of this Order, whichever occurs first, remove, take down, or otherwise make inaccessible to the public the three "documents" presently posted on the "Document Vault" website of The Center Medical Progress, located at <http://www.centerformedicalprogress.org/human-capital/document-vault/>, bearing the dates January 10, 2013, March 20, 2013, and January 1, 2013.

**BRIEFING SCHEDULE**

IT IS FURTHER ORDERED that:

1. Plaintiffs are to ~~take all reasonable steps to~~ personally serve the following documents on Defendants by the close of business on July 28, 2015: the Summons and Complaint; *by personal service or FAX* <sup>9</sup> ~~Ex Parte~~ Application for a Temporary Restraining Order, Order to Show Cause re: Preliminary Injunction, and Expedited Discovery Order; the Compendium of Evidence; and this Order. Proof of such service shall be filed in Department 86 of this Court on the next court day following such service.

2. Any opposition papers to the Order to Show Cause shall be filed and served on Plaintiffs by ~~electronic mail~~ <sup>personal service or FAX</sup> no later than by 3 p.m. on Aug. 12, 2015. Any reply papers, including any additional or supplemental declarations in reply to evidence submitted in the opposition papers, shall be filed and served on Defendants by electronic mail no later than by 3 p.m. on Aug 14, 2015.

**ORDER AUTHORIZING EXPEDITED DISCOVERY**

IT IS FURTHER ORDERED that pursuant to Code of Civil Procedure §§ 2025.201(b), 2025.201(b), 2031.020(d), 2031.030(b)(2), for good cause shown, Plaintiffs are hereby authorized to conduct the following discovery as of the date of this Order: (a) no more than 3 depositions to be noticed on 3 days and completed no later than 5 court days before any hearing on the Order to Show Cause re: Preliminary Injunction; and (b) no more than 10 document requests to which

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1 written responses and responsive documents are due within 7 calendar days from the date on  
2 which they are served. *The discovery is to address my <sup>any</sup> recordings*  
3 *of the May 22, 2015 meeting and the extent to which*  
4 *these documents have been disseminated, if at all.*

4 Dated: JUL 28 2015

*J. O'Donnell*  
\_\_\_\_\_  
JUDGE OF THE SUPERIOR COURT  
**JOANNE B. O'DONNELL**

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Exhibit 24

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## A Dozen Very “Shocking” Videos of Planned Parenthood Selling Aborted Babies Still to Come

NATIONAL STEVEN ERTELT JUL 24, 2015 | 5:24PM WASHINGTON, DC



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The Planned Parenthood abortion business may think the worst is over when it comes to the extensive national expose of its practice of selling the body parts of aborted babies. However, the pro-life muckraker behind the undercover investigations says about a dozen of the most shocking videos are still to come.

As LifeNews reported, new undercover footage shows Planned Parenthood Federation of America's Senior Director of Medical Services, Dr. Deborah Nucatola, describing how Planned Parenthood sells the body parts of aborted unborn children and admitting she uses partial-birth abortions to supply intact body parts.

A second shocking video has been released showing another top Planned Parenthood official discussing and arranging the sale of body parts of aborted babies.

**SIGN THE PETITION! Congress Must De-Fund Planned Parenthood Immediately**

In the wake of the two shocking videos showing top Planned Parenthood doctors arranging the sale of body parts from aborted babies, the Senate will vote soon on legislation that would de-fund the Planned Parenthood abortion business. A total of 9 states have already launched an investigation including Massachusetts, Kansas, Missouri, Arizona, Indiana, Ohio, Georgia, Texas and Louisiana and members of Congress have launched an investigation as well.

Yet, for the Planned Parenthood abortion business, the worst is yet to come. [Here are some comments from David Daleiden](#) of the Center for Medical Progress — who appeared at a function with state legislators yesterday, as reported in The Guardian:

“For the first time, all of the American public, and the whole world, is getting to see the truth about Planned Parenthood’s abortion services,” he said on Thursday. “There is a lot more to come.”

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There were lots more videos and between 100 to 200 pages of documents from Planned Parenthood and its “proxies” which his group, the Center for Medical Progress, would soon release, he said.

How many more videos? someone asked.

“About a dozen.”

Some of the “most shocking” revelations implicating Planned Parenthood leaders were still to come, said Daleiden. All the videos will be released by late September, he said.

Asked if the videos proved profit-making, he nodded. “Oh yeah, it’s pure profit.” A “high volume” abortion clinic can “easily make” \$120,000 a year, he said. “They’ll never admit it’s for profit but if you look at how the business is sustained it’s clear.”

Daleiden gave graphic details of late-term abortions, dismemberment and fetal tissue, including kidneys and brains, being implanted into laboratory rats. “A lot of frankly Frankenstein stuff.” His audience recoiled, then requested more detail.

In the second video, Planned Parenthood doctor Gatter discusses the pricing of aborted baby body parts — telling the biotech company officials that the prices for such things as a baby’s liver, head or heart are negotiable. She also tells the officials that she could talk with the Planned Parenthood abortion practitioners to potentially alter the abortion procedure to kill the baby in a way that would best preserve those body parts after the unborn child is killed in the abortion.

The Obama administration is connected to at least one of the Planned Parenthood doctors in the video. Nucatola is an Obama administration adviser and she also serves on the board of a pro-abortion sex ed group founded by a former Obama administration official and whose board includes current Obama administration staff.

Reacting to the video, President Barack Obama’s top spokesman Josh Earnest indicated Obama will definitely not agree with pro-life Republicans in Congress to revoke funding for the Planned Parenthood abortion business.

In the first video, planned Parenthood doctor Deborah Nucatola is at a business lunch with actors posing as buyers from a human biologics company. As head of PPF’s Medical Services department, Nucatola has overseen medical practice at all Planned Parenthood locations since 2009. She also trains new Planned Parenthood abortion doctors and performs abortions herself at Planned Parenthood Los Angeles up to 24 weeks.

Nucatola admits that Planned Parenthood charges per-specimen for baby body parts, uses pseudo-partial-birth abortion procedures in order to get salable parts, and is aware of their own liability for doing so and takes steps to cover it up.



Nucatola also admits that Planned Parenthood charges per-specimen for baby body parts, uses illegal partial-birth abortion procedures in order to get salable parts, and is aware of their own liability for doing so and takes steps to cover it up.

The footage shockingly depicts the top medical official at the Planned Parenthood corporation munching on her salad while she discusses the sale of body parts of unborn children victimized by abortions. She brazenly describes how the heads of unborn babies killed in abortions command top dollar.

The buyers ask Nucatola, “How much of a difference can that actually make, if you know kind of what’s expected, or what we need?”

***SIGN THE PETITION! Congress Must Investigate Planned Parenthood for Selling Aborted Baby Parts***



“It makes a huge difference,” Nucatola replies. “I’d say a lot of people want liver. And for that reason, most providers will do this case under ultrasound guidance, so they’ll know where they’re putting their forceps. The kind of rate-limiting step of the procedure is calvarium. Calvarium—the head—is basically the biggest part.”

Nucatola explains, “We’ve been very good at getting heart, lung, liver, because we know that, so I’m not gonna crush that part, I’m gonna basically crush below, I’m gonna crush above, and I’m gonna see if I can get it all intact.”

“And with the calvarium, in general, some people will actually try to change the presentation so that it’s not vertex,” she continues. “So if you do it starting from the breech presentation, there’s dilation that happens as the case goes on, and often, the last step, you can evacuate an intact calvarium at the end.”

In a video response to the heavy criticism, [Planned Parenthood CEO Cecile Richards apologizes for the tone](#) the Nucatola took but not for selling the body parts of aborted babies.

Dr. Nucatola said, “You’re just kind of cognizant of where you put your graspers, you try to intentionally go above and below the thorax, so that, you know, we’ve been very good at getting heart, lung, liver, because we know that, so I’m not gonna crush that part, I’m going to basically crush below, I’m gonna crush above, and I’m gonna see if I can get it all intact.”

The abortionist also explains that Planned Parenthood charges per-specimen for baby body parts and is aware of their own liability for doing so. When asked about a price, she said, “I would say it’s probably anywhere from \$30 to \$100, depending on the facility and what’s involved.” Unbelievably, she admits that some body parts, such as livers and heads, are much more popular and go for a higher price than other specimen.



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Exhibit 25



1 of 1 DOCUMENT

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**SHOW:** FOX HANNITY 10:00 PM EST

July 22, 2015 Wednesday

**TRANSCRIPT:** 072201cb.253

**SECTION:** NEWS; Domestic

**LENGTH:** 6974 words

**HEADLINE:** Interview With Senator Ted Cruz; Planned Parenthood Exposed

**BYLINE:** Sean Hannity, Tamara Holder

**GUESTS:** Sen. Ted Cruz, David Daleiden, Abby Johnson, Lila Rose, Tamara Holder, Geraldo Rivera, Rand Paul

**BODY:**

(BEGIN VIDEOTAPE)

SEAN HANNITY, HOST (voice-over): Tonight...

UNIDENTIFIED FEMALE: What would make you happy? What would work for you?

HANNITY: A shocking new video allegedly shows another Planned Parenthood executive casually talking about selling parts of aborted fetuses.

UNIDENTIFIED FEMALE: (INAUDIBLE)

HANNITY: 2016 Republican presidential candidates Senators Ted Cruz and Rand Paul are here to react to this disturbing tape.

UNIDENTIFIED MALE: (INAUDIBLE) down here! We're getting creamed! (INAUDIBLE)

HANNITY: Newly released police audio from the Baltimore riots back in April shows officers came under attack after being ordered to stand down.

Interview With Senator Ted Cruz; Planned Parenthood Exposed Fox News Network July 22, 2015 Wednesday

UNIDENTIFIED MALE: I got glass in my eye (INAUDIBLE)

HANNITY: Geraldo Rivera will weigh in.

"Hannity" starts right here, right now.

(END VIDEOTAPE)

HANNITY: And welcome to "Hannity." Planned Parenthood is in deep, deep trouble tonight. For the second time now in two weeks, a damning undercover video has been released, this time a high-ranking doctor within the organization caught on tape allegedly negotiating the sale of aborted fetuses, a potential felony offense under federal law.

We must warn you the video is extremely graphic. It is not suitable for children. But watch this.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: What would you expect for intact tissue? What sort of compensation? What sort of...

UNIDENTIFIED FEMALE: Well, why don't you start by telling me what you're used to paying.

UNIDENTIFIED FEMALE: What I want to know is, what would work for you? Don't lowball it.

UNIDENTIFIED FEMALE: OK.

UNIDENTIFIED FEMALE: Tell me what you...

UNIDENTIFIED FEMALE: (INAUDIBLE) It's been years since I've talked about compensation, so just let me figure out (INAUDIBLE) and that's fine. If it's still low (INAUDIBLE)

UNIDENTIFIED MALE: (INAUDIBLE)

UNIDENTIFIED FEMALE: (INAUDIBLE) Lamborghini!

(LAUGHTER)

UNIDENTIFIED FEMALE: (INAUDIBLE) Lamborghini!

(END VIDEO CLIP)

HANNITY: Grotesque, gruesome, unbelievable! Now, while that high-ranking Planned Parenthood doctor, quote, dreams" of turning aborted fetuses and profits into a new Lamborghini -- well, officials from both sides of the aisle in states all across the country are now opening up investigations into the nation's leading provider of abortions. So given these new incriminating developments, should Planned Parenthood lose its federal funding, some half a billion dollars a year?

Joining us now to react, author of "A Time for Truth" -- he's a 2016 GOP candidate -- Texas senator Ted Cruz. Senator, it is against the law. There are three separate laws that I see that are in question here. You're a former attorney general. Your thoughts.

SEN. TED CRUZ (R-TX), PRESIDENTIAL CANDIDATE: Sean, you're exactly right. This video and the one from last week are both gruesome. They show senior officials at Planned Parenthood callously, heartlessly bargaining and bartering to sell the body parts of unborn children.

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They're sipping wine. They're laughing about it. This one official you just showed said she wants to sell so many body parts of unborn children, she buy her own Lamborghini!

Now, I think every American should watch these videos and just ask the question, Are these my values? Now, what should we be doing? Number one, in the course of these videos, it appears both of these officials are admitting to multiple felonies, both federal felonies and state and local felonies. If the Department of Justice wasn't a partisan arm of the DNC, it should open an investigation, prosecute these individuals and Planned Parenthood as an entity.

Thankfully, there are state and local attorneys general and DAs that are opening investigations. We need to prosecute Planned Parenthood, and also we need to cut off every penny of taxpayer funding. I'm leading the fight in the Senate to do exactly that and insure that we are not funding people who are buying and selling body parts of unborn children in violation of federal criminal law!

HANNITY: Couldn't say it any better, Senator. I agree wholeheartedly. The president now is going to -- plans to release thousands of violent felons on an unsuspecting public. Now, there was testimony yesterday about these sanctuary cities. The Steinle case was only the tip of the iceberg, family members talking about how their loved ones, one after the other, killed by illegal immigrants.

You took on the director of ICE about the number of illegal immigrants released without charges. I want to roll that tape.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: You asked me, I thought, about 2014. That is 30,558. And the good news is at least that went down from 2013, when it was 36,700.

CRUZ: But you're omitting the 68,000 criminal illegal aliens that ICE did not begin deportation proceedings against at all. And you got to add both of those together. It's over 100,000.

UNIDENTIFIED FEMALE: And yes, sir, that's absolutely right, all done pursuant to this statute that the Congress has outlined.

(END VIDEO CLIP)

HANNITY: Senator, murders are being committed! These are known criminals! Felonies! And if they do leave, they can cross right over the border as in the case of Steinle, Kate Steinle. What can be done, and how quickly could it be done?

CRUZ: You are absolutely right. The hearing we had yesterday in the Senate Judiciary Committee, we heard from the families, from mothers and fathers and brothers and wives of those murdered by criminal illegal aliens that the Obama administration has released into the public.

As that exchange just showed, in 2013 alone, the Obama administration released 104,000 criminal illegal alien! That included 193 murderers, illegal aliens with homicide convictions. It included over 400 illegal aliens with sexual assault convictions. It included over 16,000 with drunk driving convictions.

The Obama administration is refusing to enforce the law! And it is unjustifiable. And as I said at that hearing, if President Obama had the courage of his convictions, he would have come to that hearing, he would have looked in the eyes of Kate Steinle's mother and father and he would have apologized for refusing to enforce the law and releasing murderers who kill their children!

Now, asked what can we do. Number one, I have joined with other senators in introducing legislation to strip all federal funds from any sanctuary city. San Francisco's a sanctuary city. It invites illegal aliens, including criminal illegal

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aliens, to come to San Francisco. We need leadership in Congress to stop that.

Secondly, I've introduced Kate's Law, which would put in place a mandatory five-year minimum for anyone convicted of illegal reentry.

You know, Sean, it's interesting. This week, the Senate is taking up the highway bill. And in the highway bill, you are seeing Republican leadership that's pressing to reauthorize the Export Import Bank, which is just corporate welfare and cronyism.

How about instead of listening to the big business and the corporate giveaways in Washington, we take up this week stopping sanctuary cities, passing Kate's Law, defunding Planned Parenthood? How about if we pass my legislation to end the congressional exemption from "Obama care"? We ought to be leading on issues that matter to the American people...

HANNITY: You know...

CRUZ: ... not giving in to the Washington cartel!

HANNITY: I love that term, "Washington cartel." You know, senator, I think I speak for a lot of conservatives in that we are frustrated. You look at the rise of Donald Trump. I would attribute a good part of it to the fact that he's straight-talking. He's iconoclastic. He's bringing in energy to the campaign, no holds barred.

You -- of all the Republicans that promised to repeal and replace "Obama care," you were the only one that stood up, and you were excoriated by the Republican Party! The same thing with executive amnesty. Every Republican said, Oh, no, elect us. Don't worry about it. We're going to -- we'll pass the cromnibus, but we're going to defund the Department of Homeland Security. The funded executive amnesty!

My question to you is, what has happened to this party? Why are they timid and weak and afraid? And why go after you when you're doing the very thing that they also promised to do?

CRUZ: Well, Sean, the fundamental problem is far too many of them are listening to the lobbyists and special interests in Washington. As you mentioned, I have a new book, "A Time for Truth," that has become a New York Times best-seller. And it talks about...

HANNITY: By the way, that was nice for them to finally acknowledge it.

(LAUGHTER)

CRUZ: Well, they tried to keep it off the list the first week. It was the third best-selling book in America. It outsold 18 of the 20 books on the list, and yet The New York Times, for pretty obvious partisan reasons, didn't want it there. There was such a hue and outcry that they were forced to list it the next week.

HANNITY: Yes. What...

CRUZ: But the book, "A Time for Truth," it reveals the corruption in Washington behind closed doors, where you've got career politicians in both parties, Republicans and Democrats, that get in bed with lobbyists.

You know, what so many Americans are frustrated with is we have campaign conservatives, people who talk good on the campaign trail, but they don't follow through on what they're doing.

And I think in the 2016 Republican primary, it's all going to come down to one issue, trust. Who has been a consistent conservative, walking the walk and over and over again standing and fighting against "Obama care," against executive amnesty, against lawlessness, against the debt, defending religious liberty, defending the Constitution?

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Who is leading the fight against this catastrophic Iran nuclear deal? I think that's what people are looking for is someone who will tell them the truth and do what he said he would do.

HANNITY: I want to ask you what you -- what do you make of the phenomenon or the rise of Trump in the polls? I know you recently met with him. I actually thought it was one of the funniest things I've ever saw in a presidential campaign when he did this to Lindsey Graham, who called him a jackass and started a fight, when he did this yesterday.

(BEGIN VIDEO CLIP)

DONALD TRUMP (R-NY), PRESIDENTIAL CANDIDATE: Didn't this guy call me, like, four years ago? Yes. He called me four years ago, three, four years ago, Lindsey Graham. I didn't even know who he was. He's, like, begging me to help him with "FOX and Friends." So I say, OK, and I'll mention your name. He said, Could you mention my name? I said, Yes, I'll -- and he gave me his number.

And I found the card! I wrote the number down. I don't know if it's the right number. Let's try it -- 202...

(END VIDEO CLIP)

HANNITY: Tell us about the meeting. Your thoughts on his rise in the polls, as now being number one in many polls now across the country. And I'll be honest, I look at Lindsey Graham as part of the problem. He's one of the guys that won't stand up on immigration. He's one of the guys that I would say is a RINO Republican!

CRUZ: Well, look, I like Donald Trump. He's a friend of mine. He and I have sat down and visited many, many times. I think the reason why he's getting the attention he is and the support he is, is that he's bold and brash and he's willing to speak the truth. And he's taking on the Washington cartel.

And in particular, he's focusing on illegal immigration and sanctuary cities. And a great many of the candidates in 2016 for the Republican nomination have been vocal, aggressive advocates of amnesty. When we come to the first debate in a couple of weeks, I'm going to be one of the very few major candidates on that stage who has never embraced amnesty.

And I appreciate Donald's focusing on illegal immigration. It's an issue I've been fighting a long time. When Chuck Schumer had the Democrats' "gang of eight" bill, I helped lead the fight, along with Jeff Sessions, to stop amnesty.

And you know, I think it was really sad to see so many Republican 2016 candidates taking out sticks and trying to smack Donald Trump because they don't want him talking about illegal immigration and sanctuary cities.

I've refused to do so. I've been proud to defend him for focusing on illegal immigration. And I intend to follow Ronald Reagan's 11th commandment. Thou shalt not speak ill of another Republican. Don't engage in character attacks. But keep the focus on policy and substance and the issues that matter to the American people.

HANNITY: I think that's a good strategy (INAUDIBLE) Oh, what do you think about what So-and-So said? I said, Go ask them. I saw your answer. I thought that was a good answer.

Senator, good to see you. We'll see you on the campaign. Looking forward to that debate. Appreciate you being with us.

CRUZ: Thank you, Sean. God bless you.

HANNITY: All right, God bless.

And coming up, we'll have more on Planned Parenthood and that controversy and more tape. Also, an exclusive interview, the person that went undercover for that video coming up next.

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And then later, newly released audio of Baltimore police scanners proves, in fact, that the officers were told to stand down as we reported back in April while the -- while literally being attacked by rioters. We'll check in with Geraldo Rivera, also Senator Rand Paul straight ahead.

(NEWSBREAK)

HANNITY: Welcome back to "Hannity." So the sale of aborted fetuses by Planned Parenthood may not only be the only (sic) wrongdoing uncovered by the Center for Medical Progress. In fact, a high-ranking Planned Parenthood doctor was also caught on tape discussing her potential compliance with some pretty unethical practices involving patients receiving abortions.

Now, please be advised that the video we're showing is extremely graphic. It's disturbing. You don't want your children watching. Ready? Watch this.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: (INAUDIBLE) our usual technique is suction at 10, 12 weeks and we switch to using (INAUDIBLE) something (INAUDIBLE) increase the odds that we'll come out with an intact specimen, then we'll (INAUDIBLE) weighing the protocol that says to the patient, We're not doing anything different in our care.

To me, that's a kind of (INAUDIBLE) I wouldn't object to asking (INAUDIBLE) to use an ipas (ph) (INAUDIBLE) increase the odds that he was going to get an intact specimen. But I do need to throw it out there and the concern because the patient is signing something, and we're singing something saying we're not changing anything in the way we're managing you just because you agree to give tissue.

(END VIDEO CLIP)

HANNITY: Pretty grotesque.

Joining me now, the man behind the new campaign that's exposing Planned Parenthood's unethical behavior. From the Center for Medical Progress, David Daleiden is with us. How are you, sir?

DAVID DALEIDEN, CENTER FOR MEDICAL PROGRESS: I'm doing pretty good, Sean. How are you?

HANNITY: All right, I mean, I watch this -- not only in both tapes are they basically saying, Well, the law is up to interpretation, and they pretty much are acknowledging that they know it's against the law. Then they're quibbling over prices. Then they're talking about wanting to buy Lamborghinis. Then they're talking about how they do it so that they don't ruin the specimens and crushing this part of the baby and not that part of the baby.

Walk us through the history of how you got into this and what your take is.

DALEIDEN: Sure. So for the past two-and-a-half years, the Center for Medical Progress conducted a long-term in-depth comprehensive investigative journalism study of how exactly Planned Parenthood harvests and sells the body parts from the babies that they abort. And this is something that Planned Parenthood has been doing for decades at this point.

It's something that by their own admission in their press statements for the past week that their top-level leadership supports and knows is going on. They've admitted that they harvest the specimens. And they've admitted that they receive payment for it in exchange for those specimens.

Really, the only bone of contention that's left is whether or not they receive a financial benefit from those payments and exactly how much the profit is. But as you can start to see in the video that we released yesterday, Dr. Gatter, the president of Planned Parenthood's medical directors counsel, admits that they really don't have any costs and don't have

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to do anything when they harvest the specimens. So the money that they're getting is straight-up profit to their bottom line.

HANNITY: All right, now, their claim at Planned Parenthood is that, Oh, this is all heavily edited. Explain the context of each tape that you released and how long you had taped them. And are there more tapes coming out?

DALEIDEN: Sure. So for the two summary videos that we've released so far, the full, unedited footage of those conversations has been available on our YouTube channel from the very beginning. So the public can judge for themselves the accuracy of the -- of the summaries that we put up of just the highlights.

Ultimately, these are, you know, one to three-and-a-half-hour-long conversations. So again, you know, it's all very interesting. And frankly, there's information in there that we have to leave out for time reasons that I think just continues to confirm our case.

So the full conversations are up there, and everybody can look at those and get more information.

HANNITY: Well, I didn't see anything from what I've read and what I saw that it was taken out of context. This was in the proper context that you released it. It wasn't -- you know, if you're releasing the full tape, as you said, everyone can watch it if they want to spend the time. How many hours total did you tape?

DALEIDEN: We probably have -- we probably have hundreds to even thousands of hours total of videotape over the past two-and-a-half years. Of the really, really shocking, compelling stuff, we've probably got dozens upon dozens of hours. And that will continue to be released in the days and months to come.

HANNITY: Now, so we're going to see tape after tape after tape as bad as the two that we've already seen or worse?

DALEIDEN: Exactly. Even worse.

HANNITY: All right, so let's talk about the funding. You know, half a billion dollars a year, taxpayer dollars, it's now -- we've got what, three separate investigations, seven separate states looking into Planned Parenthood. Ultimately, what would you like to have happen?

DALEIDEN: You know, ultimately, I think that the public is seeing this information and the public is pretty outraged. There's already over 2.5 million YouTube views on the first video that we posted last week, and the second one is starting to climb up there.

People are responding with a lot of shock and a lot of disgust at the fact that Planned Parenthood is harvesting and selling the body parts from aborted babies and doing so all the way with half a billion taxpayer dollars every single year.

So there needs to be an immediate moratorium on all of Planned Parenthood's public funding. And then there needs -- and that needs to be pending the results of the three congressional investigations and the multiple -- I think there might be eight now state investigations that are going on.

HANNITY: It's against the law to harvest organs this way. It's against the law to perform abortion specifically designed to protect the lungs, the heart or the liver. Do you expect by the time all is said and done that there's going to be indictments of some of these people?

DALEIDEN: I certainly hope that Planned Parenthood is held accountable to every single law that they're breaking in the course of this kind of -- this kind of activity, these real atrocities against humanity of selling the body parts and using partial-birth abortions to do so.

And I think that their top-level people, their medical directors, their executives both at the national level and all

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across the country are going to have a lot of explaining to do once everything is said and done.

HANNITY: Explain your motivation. Why did you decide to undertake this investigative report on Planned Parenthood?

DALEIDEN: You know, we did this because Planned Parenthood has been harvesting and selling the body parts from the abortions that they commit for decades now, and no one has held them accountable. They've held themselves above the law. And this is something that is offensive to the American public. It's offensive to us as human beings. It violates human dignity and it needs to stop.

HANNITY: All right. It's grotesque. It's gruesome. And I'm glad that you were able to expose this. We'll be waiting for the next tapes to be revealed. Thank you, sir, for being with us.

DALEIDEN: Thank you, Sean.

HANNITY: And coming up, you'll hear from a former Planned Parenthood clinic director who actually carried out the organization's controversial fetal tissue practices. She's now helping others leave that industry.

And later tonight...

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: I need a medic! (INAUDIBLE) officer down! Need a medic!

UNIDENTIFIED MALE: I need the air. Liberty Heights, hold the line. Do not go forward and do not chase them!

(END VIDEO CLIP)

HANNITY: Newly released audio of Baltimore police scanners now prove the officers were, in fact, told to stand down back in April while being attacked by rioters. Geraldo Rivera was on the ground during the riots. He is with us later tonight, and much more.

HANNITY: Welcome back to "Hannity." Now, while the undercover Planned Parenthood videos allegedly showing officials trying to sell the parts of aborted fetuses are causing shock and outrage, well, they don't come as a surprise to a former Planned Parenthood clinic director whose duties included sorting and then shipping out fetal tissue and organs.

Joining me now, Abby Johnson. She worked at a Planned Parenthood clinic for eight years, but she quit after seeing an ultrasound-guided abortion. She now runs an organization that helps abortion clinic employees leave that industry.

Abby, thank you for being with us.

ABBY JOHNSON, FMR. PLANNED PARENTHOOD DIRECTOR: Thank you, Sean.

HANNITY: So these videos are 100 percent accurate. They -- Planned Parenthood has been purposefully using ultrasound, et cetera, to preserve livers, hearts, lungs so that they can sell them, correct? You saw this?

JOHNSON: Absolutely.

HANNITY: Tell us what you saw.

JOHNSON: Absolutely and it's a big business. Planned Parenthood is harvesting these organs, this tissue, as early as seven and eight weeks gestation at a lot of their abortion facilities across the country. They are packaging them. They are shipping them off to sometimes companies that act as middlemen, sometimes directly to the research labs. And

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they're getting paid a pretty good price for each specimen that they send out.

HANNITY: Do they tell the women who are having these abortions what they're doing with this material?

JOHNSON: You know, they do, by and large. And I can only speak at my affiliate and what I experienced. But we did consent our patients.

But the interesting thing is that I think it almost soothed the conscience of the woman. So you know, we would talk to them and say, You know, this is an opportunity for you to give back by donating the fetal tissue to research. It could potentially save the lives of other people. And so...

HANNITY: So in other words...

JOHNSON: ... this was an opportunity for them to say, Oh, well, this is sort of a false sense of altruism. They're giving back through their abortions.

HANNITY: Would you say -- and I don't want to put words in your mouth. Are they manipulating these women? In other words, are they couching it in such a way that it's very different from the reality of what's happening?

JOHNSON: Well, they're certainly not telling women that, you know, we're going to pick through the body parts that are removed from your uterus and we're going to pick out the best organs, the ones that we can get the most money for, and ship them off.

They are, you know, talking to these women about the life-saving efforts that these research studies could have, when that may not be true at all.

HANNITY: All right, can -- it's so grotesque and so unbelievable to me. What are they doing with them? Where are they shipping them to? And how late in a woman's pregnancy -- these are second-term abortions, as well? In other words, are they being used for transplant in some cases?

JOHNSON: You know, we don't ever know what they're being used for, as the abortion provider. We are just told that the tissue is being used for different research studies. Sometimes we ship them to a middleman. Sometimes we ship them directly...

HANNITY: Wow.

JOHNSON: ... to the research department.

HANNITY: All right, Abby. Thank you for telling us the truth in your story. It's going to be very interesting to watch what happens.

Here with reaction, the president of Live Action, Lila Rose, and FOX News contributor Tamara Holder.

This isn't an abortion debate that I want to get into with you. There is a legal side of this. Harvesting organs, fetal tissue like this, is illegal! So there's laws that have been broken. They're caught on tape breaking the laws and admitting they're breaking...

TAMARA HOLDER, FOX CONTRIBUTOR: No. Sean...

HANNITY: Here's my question.

HOLDER: That's not true.

HANNITY: Do you not -- do you not find what they're saying on those tapes as they eat their salad and drink their

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wine -- do you not find that grotesque and gruesome?

HOLDER: I think that the conversation is definitely gross, especially over a meal. But this isn't about good and bad conversation. This is about the law. And as far as I can tell, the law is not being broken.

And sure, there should be a criminal investigation if there's any sign that Planned Parenthood is violating the law. But the law specifically says that they can donate fetal matter...

HANNITY: They're selling it for Lamborghinis!

HOLDER: No, no. They...

HANNITY: No, no, no! The girl on the tape said she wants to buy a Lamborghini!

HOLDER: And she apologized for that. And again...

HANNITY: Apologize?

HOLDER: ... I am not defending...

HANNITY: I apologize for selling cocaine or heroin. It's not going to work! It's a law that's broken! Lila?

LILA ROSE, PRESIDENT OF LIVE ACTION: There are three federal statutes that are being broken here, three. First of all, selling the body parts of babies and getting profit for them. Even Stem Express, the company that's selling in California, advertises to Planned Parenthood and is marked off by Planned Parenthood (INAUDIBLE) saying that this is financially profitable for your clinics.

Number two, they're using partial-birth abortions to do this. Dr. Deborah Nucatola, their senior medical director, says this herself! She admits it herself! The late-term...

(CROSSTALK)

HANNITY: Let her finish!

ROSE: Number three, Tamara, as a lawyer, this is something you need to study because...

HOLDER: Right. Right.

(CROSSTALK)

ROSE: She's manipulating the abortion procedure. They're manipulating they abortion procedure without the woman's consent or knowledge in order to better harvest the organs of the baby that they're going to be...

HANNITY: When they crush this part but not that part.

HOLDER: Sean, your words "crushing" --

HANNITY: That was on the tape.

HOLDER: We can get --

ROSE: Those are the words of the abortionist.

HOLDER: OK, we can get everybody worked up about the tape. The law is, because you are not a lawyer,

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unfortunately, the law --

ROSE: Have you read the federal statute, the three federal statutes that these videos prove that Planned Parenthood is violating?

HOLDER: The partial video, the bits and pieces of the video, or the entire video.

HANNITY: The entire video. They are admitting on tape the law is up for interpretation. They're admitting it.

HOLDER: Sean, it is not illegal to donate body parts.

HANNITY: It's illegal what they are doing.

(CROSSTALK)

HOLDER: That is her -- she's not a prosecutor.

HANNITY: She's explaining it accurately.

HOLDER: She's a pro-lifer who believes abortion is illegal, period.

(CROSSTALK)

ROSE: Have you read the federal statutes that prohibits abortionists from manipulating the abortion procedure as both of the videos have two different abortionists admitting to doing this, manipulating the abortion procedure to deliver a, quote-unquote, "intact specimen" in the words of the abortionist Dr. Mary Gatter in the last video, in order to better harvest those part. In the video you have Dr. Deborah Nucatola admitting to practicing partial birth abortions, which are illegal at a federal level. This is even beyond the selling and the buying of body parts. This is abuse upon abuse.

HANNITY: Here's my question to you. You admit it's grotesque. You admit it's disgusting. Now my question to you is why should we give them a half a billion dollars of taxpayer money every year? Why? Why should we give them a cent when they are clearly talking about crushing this part of the body, not crushing that part of the body, preserving it, selling it so you can buy Lamborghinis.

HOLDER: Why should you take away their money, Sean? Because --

HANNITY: Because we're broke as a country --

HOLDER: Because you have an opinion that they are committing a crime, which there is no proof whatsoever.

ROSE: Give the money to someone better. Give them to --

HANNITY: I have an idea.

ROSE: Give them to people who actually care.

HANNITY: You and your liberal friends --

HOLDER: You care because you believe that abortion is illegal. I am a lawyer who believes that the law of the land

--

HANNITY: I got to break. But here's my last point to you. You and your liberal friends, you guys --

HOLDER: It's not about being liberal.

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HANNITY: You can raise all the money you want, and stop taking it from hard working Americans who find the crushing of body parts --

(CROSSTALK)

ROSE: Even Democrats are speaking out. Bernie Sanders is calling this extremely wrong.

(CROSSTALK)

HANNITY: I pay more than my fair share, Tamara. Every single solitary cent I owe.

HOLDER: There are laws that allow you to use them for tax exempt organizations.

HANNITY: I don't use them. I don't use them. But we got to leave. Thank you both.

Coming up next, tonight, here on HANNITY.

(BEGIN VIDEO CLIP)

UNIDENTIFIED FEMALE: I need a medic at Liberty High School now. Officer down. I need a medic.

UNIDENTIFIED MALE: I need the air. Liberty Heights. Hold the line. Do not go forward and do not chase them.

(END VIDEO CLIP)

HANNITY: Newly released police audio during the Baltimore riots back in April proves that cops were told to stand down and not confront the rioters. Coming up next, Geraldo Rivera will weigh in.

And then later, 2016 Republican presidential candidate Rand Paul is here. He wants to know whether you want to burn the tax code or put it in a wood chipper. You get to vote, straight ahead.

HANNITY: Welcome back to HANNITY. On April the 27th the city of Baltimore erupted into violent protests over the death of Freddie Gray. And despite the best efforts of local police to bring order, many of the officers suggested that their hands were tied because they were told not to engage with the rioters, in other words, to stand down. Yesterday audio was released of police radio transmissions from that day that seems to corroborate all of this.

(BEGIN VIDEO CLIP)

UNIDENTIFIED MALE: Listen, helmets on now.

UNIDENTIFIED MALE: They're in that alley to the south of the unit. They're busting up cinder blocks over there.

UNIDENTIFIED MALE: We got no shields.

UNIDENTIFIED MALE: Objects are being thrown at the barricade. They are starting to deteriorate the glass.

UNIDENTIFIED MALE: We need shields down here. We're getting creamed. We need help down here. We're getting destroyed with these rocks and stuff.

UNIDENTIFIED MALE: That was a brick. I got glass in my eye.

UNIDENTIFIED MALE: Officers are down. Can we have the -- mace?

UNIDENTIFIED MALE: We have one female officer injured. She's sustained a head injury, and is in and out of

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consciousness.

(END VIDEO CLIP)

HANNITY: Joining us now FOX News senior correspondent Geraldo Rivera. Everything we were told and reported corroborated by that tape. They let those guys hang out to dry.

GERALDO RIVERA, FOX NEWS SENIOR CORRESPONDENT: It was amateur hour to begin with. You had an incompetent mayor. And the police chief didn't know which way to go. He was torn between his officers, his loyalty to the rank and file, and the orders he was getting from city hall.

Then you had a power structure that was being politically correct. They sided, it seemed to me, with those who were protesting and rioting and destroying rather than the shopkeepers, rather than the people whose lives, whose very lives were being burned up right in front of them. Now the tapes corroborate all of FOX News' reporting. Now the people, the citizen of the Westside of Baltimore and in the state of Maryland can see how utterly they were let down by their public officials.

HANNITY: It's pretty unbelievable. And you were dead on. Your reporting was accurate. These cops were left to hang out to dry. People's businesses were ruined. They're never going to get their money back. It's unbelievable.

I want to go to your friend, Donald Trump. I think what he did with Lindsey Graham was brilliant. Let me show you what -- he gave out Lindsey Graham's cell phone number. This is great. Watch this.

(BEGIN VIDEO CLIP)

DONALD TRUMP, (R) PRESIDENTIAL CANDIDATE: Didn't this guy call me like four years ago? Yes. He called me four years ago, three, four years ago. Lindsey Graham, I didn't know who he was. He's begging me to help him with "FOX and Friends." So I say, OK, and I'll mention your name. He said could you mention my name. And he gave me his number. And I found the card. I wrote the number down. I don't know if it's the right number. Let's try it -- 202.

(END VIDEO CLIP)

HANNITY: I think that is the funniest thing I've ever seen in a presidential campaign.

RIVERA: I totally relate to Donald Trump in the sense that both of us are like junkyard dogs. You can kick us, but you push you're going to get pushed back. And people understand that. And I think it has in a sense muted some of the criticism against Trump, until there becomes critical mass.

In the scandal about the POW's, there was critical mass. In other words, one guy can't take on the big bully, but if everybody feels the same, everybody comes together and they come on our pack, we can snarl at this guy.

HANNITY: Here's the reality, he withstood all of that. And here's the bottom line -- he's right on immigration. Our borders are not secure and people are dying. Look at all the families that testified this week about sanctuary cities and their loved ones killed by illegal immigrants. Secondly --

RIVERA: Let me -- I'm going agree. Before I get to vets let me deal with the border. I think you're absolutely right. It's the potency of the immigration issue that ultimately saved Donald Trump from the POW controversy. That on an ordinary mortal would have finished their political ascendancy. I think that you would agree with that. It was such a huge error in judgment. But the --

HANNITY: But the Lindsey Graham thing was funny.

Interview With Senator Ted Cruz; Planned Parenthood Exposed Fox News Network July 22, 2015 Wednesday

RIVERA: Rather than responding to the POW's, what Donald Trump did, and it's brilliant -- immigration, immigration, immigration, so the people who for whom that is the prime issue then start saying, well, the POW's he'll explain that eventually. He's our guy on this issue, on the immigration issue. Therefore we will cut him some slack. What I don't know, Sean, and nor does anyone, is how in the big picture, how much of his generalized or potential support was eroded by the POW flack as opposed to the 25 percent of the GOP electorate for whom immigration is the --

HANNITY: How many unforced errors -- in other words, I just think what he did with Graham was funny. It was clever. It made me laugh.

RIVERA: As long as you laugh, as long as he's not too snarly.

HANNITY: Before we leave, I want to show everybody your glasses. Put your glasses on.

(LAUGHTER)

HANNITY: We have the over here.

RIVERA: I forgot my glasses over here. I asked if I could wear these.

HANNITY: You're Geraldo. You can do whatever you want.

RIVERA: Thank you.

HANNITY: And coming up next right here tonight on HANNITY.

(BEGIN VIDEO CLIP)

(MUSIC)

(END VIDEO CLIP)

HANNITY: Chainsaw, wood chipper, burn it, I think I'm leaning wood chipper. Anyway, that was 2016 Republican presidential candidate Kentucky Senator Rand Paul. He's taking on the tax code. He'll explain next.

HANNITY: Welcome back to HANNITY. In the wake of the incredibly disturbing videos allegedly exposing Planned Parenthood for selling parts of aborted fetuses, earlier today my next guest introduced an amendment to end taxpayer funding of this organization.

Joining us now, author of "Taking a Stand, Moving Beyond Partisan Politics to Unite America," 2016 Republican presidential candidate, Kentucky Senator Rand Paul. Senator, we have given them over half a billion dollars a year for the last four years. One has to wonder, with all the debt we have can we not better spend our money?

RAND PAUL, (R) PRESIDENTIAL CANDIDATE: Well, above and beyond the gruesomeness of selling body parts, there's another reason to oppose giving money to Planned Parenthood. Everything they do is done by community health centers. We've given billions and billions of dollars to community health centers which do everything that Planned Parenthood does, except they don't do abortions. So really the taxpayer money is for abortions. There's absolutely no reason to give money to Planned Parenthood unless you want taxpayer funding of abortions.

And now apparently they're also involved in the sale of body parts. And so this is gruesome, and I hope will wake up a lot of people, because I know people who say, oh, I'm kind of pro-choice, but they're not for selling body parts. They're not for trying to extract a fetus in a way that we can keep part of the baby and not crush part of the organs. So this is very upsetting to a lot of people, and I think even a lot of pro-choice people are going to wonder, really, why are

Interview With Senator Ted Cruz; Planned Parenthood Exposed Fox News Network July 22, 2015 Wednesday

we giving money to Planned Parenthood?

HANNITY: Let me talk about the state of the 2015 GOP race. Obviously the surge of Donald Trump, his messages is resonating on immigration, the treatment of veterans. What do you make of his rise? What do you make of him in the Republican Party, in the debates, et cetera? Some people are very critical of him like Governor Rick Perry. What are your thoughts?

PAUL: I think what you're going to find with so many candidates that little bitty tweaks up and down seem to be bigger than they actually are. And I think you'll find that as the other candidates, myself included, get our message out there, that there is going to be a lot of shifting of the vote.

One of the things that we're excited about is when you poll my candidacy against Hillary Clinton, we actually lead Hillary Clinton in five states won by President Obama. So there is some good news to spread around if you know where to look for it.

HANNITY: You put out an ad that actually cracked me up, you using a shredder. "I'm Rand Paul. I'm trying to kill the tax code, all 70,000 pages of it." Let's show the tape.

(BEGIN VIDEO CLIP)

PAUL: Hey, I'm Rand Paul, and I'm trying to kill the tax code, all 70,000 pages of it.

(MUSIC)

(END VIDEO CLIP)

HANNITY: I think I choose all three. Great way to get the message out. I'd love to see the tax code changed. What would you like to do with it?

PAUL: You know, we looked at the code, and it's so complicated. It's 70,000 pages, and really we think the tax code is chasing American jobs overseas, chasing American companies overseas. Just last year Burger King reincorporated in Canada. Several dozen companies have reincorporated in Europe.

Wouldn't it be great if we had a low flat rate, 14.5 percent, fill out your tax return on one page, maybe we would see the opposite. Maybe companies would want to come to America and people would want to relocate and bring their money here because America would be the best place to do business. And right now, it's not because we've been chasing people away. We say eliminate the whole tax code. I like the chain saw best myself. But eliminate the whole tax code and replace it with a one page tax return, 14.5 percent for individuals and 14.5 percent for businesses.

HANNITY: I'm pretty sure that Obama is going to get this horrible Iranian nuclear deal. Where do you think it stands now?

PAUL: I voted for sanctions because I wanted to drive them to the table. I've always wanted negotiations as being preferable to war. But I've always wanted a good deal. And I think given Iran's duplicity and their lack of trustworthiness with regard international agreements, I think we need proof of compliance, proof of consistent compliance, before we would release the sanctions.

So had I been in charge I would have negotiated I think from a position of strength and I would have said, look, we'll negotiate, but the only way we'll take off sanctions is very gradually over a several year period as we see proof of compliance. And I think taking them off simultaneous at the beginning is a mistake.

HANNITY: All right, Senator, thank you for being with us, appreciate your help.

Interview With Senator Ted Cruz; Planned Parenthood Exposed Fox News Network July 22, 2015 Wednesday

And coming up, we need your help, very important "Question of the Day" is next, straight ahead.

HANNITY: Welcome back to HANNITY. Time for tonight "Question of the Day." According to federal law, it is illegal to buy and sell fetal tissue in the United States. That leads us to tonight's question -- should Planned Parenthood or those that work for Planned Parenthood face charges for allegedly selling the body parts of aborted fetuses as you saw in these videotapes? Go to Facebook.com/SeanHannity, @SeanHannity on Twitter and let us know what you think.

That's all the time we have let this evening. We hope you'll set your DVR so you never miss an episode because we miss you if you're not here. Thanks for being with us. We'll see you back here tomorrow night.

**LOAD-DATE:** July 23, 2015

Exhibit 26



July 28, 2015

# Human Capital – Episode 1: Planned Parenthood’s Black Market in Baby Parts

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FOR IMMEDIATE RELEASE

### #PPSellsBabyParts EX-CLINIC WORKER REVEALS PROFIT MOTIVE IN PLANNED PARENTHOOD BABY PARTS SALES, VP MEDICAL DIRECTOR PRICES BODY PARTS “PER ITEM”

*“We Can See How Much We Can Get Out of It,” says Planned Parenthood Affiliate VP; Whistleblower Who Harvested Aborted Baby Parts Details Traumatic Job in Planned Parenthood Clinics in New Documentary Web Series*

Contact: David Daleiden, [media@centerformedicalprogress.org](mailto:media@centerformedicalprogress.org), 949.734.0859

LOS ANGELES, July 28—The first episode in a new documentary web series features a woman who once worked in Planned Parenthood clinics describing the profit motive involved in Planned Parenthood’s sale of aborted fetal body parts, and includes new admissions from top-level Planned Parenthood leadership about the illicit pricing structure.

The “Human Capital” documentary web series is produced by The Center for Medical Progress and integrates expert interviews, eyewitness accounts, and real-life undercover interactions to tell the story of Planned Parenthood’s commercial exploitation of aborted fetal tissue. Episode 1, “Planned Parenthood’s Black Market in Baby Parts,” launches today at: <https://www.youtube.com/watch?v=Xw2xi9mhmuo>

Episode 1 introduces Holly O’Donnell, a licensed phlebotomist who unsuspectingly took a job as a “procurement technician” at the fetal tissue company and biotech start-up StemExpress in late 2012. **“I thought I was going to be just drawing blood, not procuring tissue from aborted fetuses,”** says O’Donnell, who fainted in shock on her first day of work in a Planned Parenthood clinic when suddenly asked to dissect a freshly-aborted fetus during her on-the-job training.

For 6 months, O’Donnell’s job was to identify pregnant women at Planned Parenthood who met criteria for fetal tissue orders and to harvest the fetal body parts after their abortions. O’Donnell describes the financial benefit Planned Parenthood received from StemExpress: **“For whatever we could procure, they would get a certain percentage. The main nurse was always trying to make sure we got our specimens. No one else really cared, but the main nurse did because she knew that Planned Parenthood was getting compensated.”**

Episode 1 also shows undercover video featuring the Vice President and Medical Director of Planned Parenthood of the Rocky Mountains (PPRM) in Denver, CO, Dr. Savita Ginde. PPRM is one of the largest and wealthiest Planned Parenthood affiliates and operates clinics in Colorado, New Mexico, Wyoming, and Nevada. Standing in the Planned Parenthood abortion clinic pathology laboratory, where fetuses are brought after abortions, Ginde concludes that payment per organ removed from a fetus will be the most beneficial to Planned Parenthood: **“I think a per-item thing works a little better, just because we can see how much we can get out of it.”**

The sale or purchase of human fetal tissue is a federal felony punishable by up to 10 years in prison or a fine of up to \$500,000 (42 U.S.C. 289g-2).

Dr. Katherine Sheehan, Medical Director *emerita* of Planned Parenthood of the Pacific Southwest in San Diego, describes her affiliate's long-time relationship with Advanced Bioscience Resources, a middleman company that has been providing aborted fetal organs since 1989: **"We've been using them for over 10 years, really a long time, you know, just kind of renegotiated the contract. They're doing the big government-level collections and things like that."**

"Planned Parenthood's sale of aborted baby parts is an offensive and horrifying reality that is widespread enough for many people to be available to give first-person testimony about it," notes David Daleiden, Project Lead for The Center for Medical Progress. "CMP's investigative journalism work will continue to surface more compelling eyewitness accounts and primary source evidence of Planned Parenthood's trafficking and selling baby parts for profit. There should be an immediate moratorium on Planned Parenthood's taxpayer funding while Congress and the states determine the full extent of the organization's lawbreaking."

###

See the video at: <https://www.youtube.com/watch?v=Xw2xi9mhmuo>

Tweet: [#PPSellsBabyParts](#)

For more information on the Human Capital project, visit [centerformedicalprogress.org](http://centerformedicalprogress.org).

The Center for Medical Progress is a 501(c)3 non-profit dedicated to monitoring and reporting on medical ethics and advances.

David Daleiden

PREVIOUS

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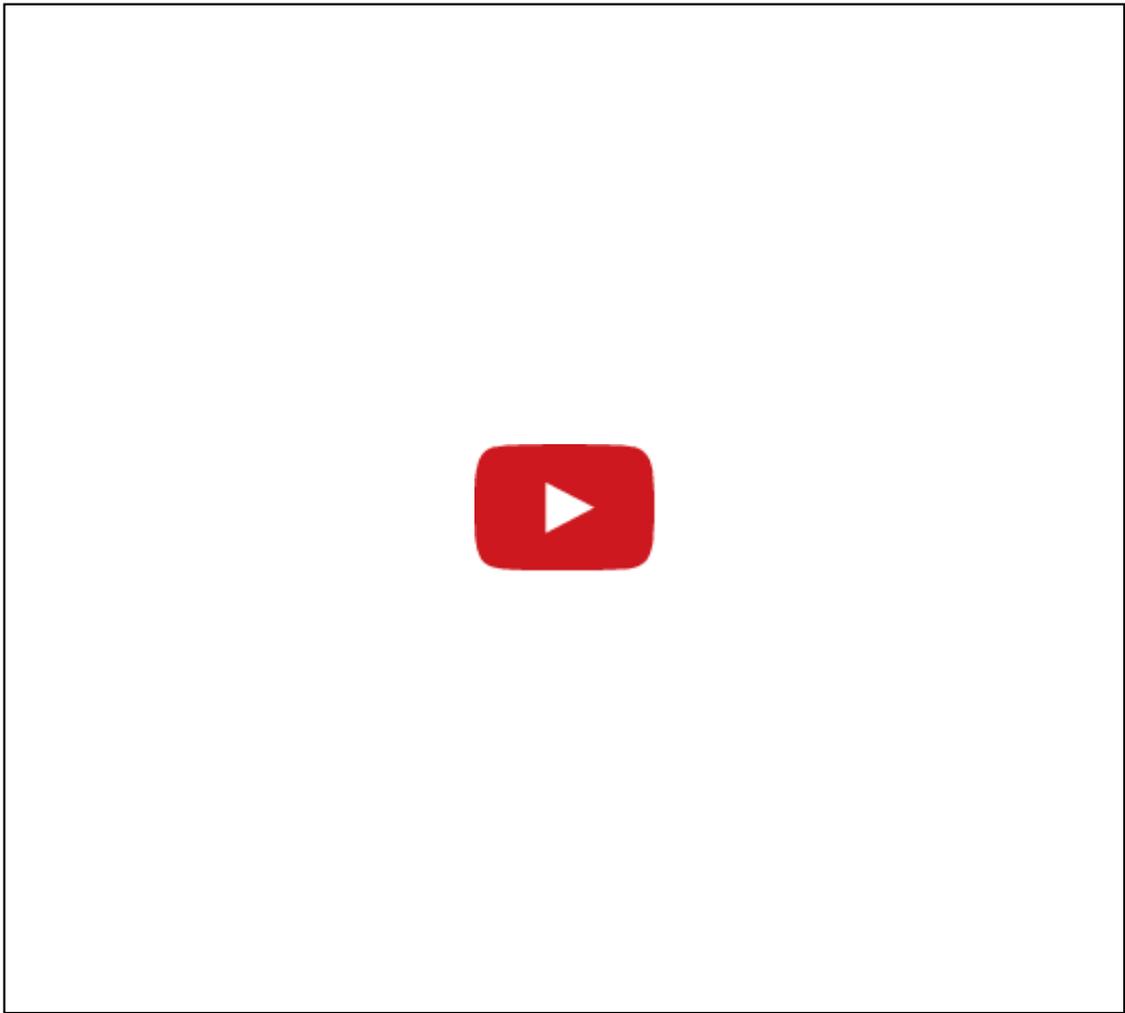
**CMP Statement on Meritless Lawsuit from Planned Parenthood Baby Parts Buyer**

Exhibit 27



July 30, 2015

## **Planned Parenthood VP Says Fetuses May Come Out Intact, Agrees Payments Specific to the Specimen**



FOR IMMEDIATE RELEASE

## **#PPSellsBabyParts PLANNED PARENTHOOD VP SAYS FETUSES MAY COME OUT INTACT, AGREES PAYMENTS SPECIFIC TO THE SPECIMEN**

*Planned Parenthood Rocky Mountains VP & Medical Director Savita Ginde Discusses Contract Details, Aborted Body Parts Pricing, and How to Not “Get Caught”*

**Contact:** David Daleiden, [media@centerformedicalprogress.org](mailto:media@centerformedicalprogress.org),  
949.734.0859

DENVER, July 30—New undercover footage shows Planned Parenthood of the Rocky Mountains’ Vice President and Medical Director, Dr. Savita Ginde, negotiating a fetal body parts deal, agreeing multiple times to illicit pricing per body part harvested, and suggesting ways to avoid legal consequences.

Planned Parenthood of the Rocky Mountains (PPRM) is a wealthy, multi-state Planned Parenthood affiliate that does over 10,000 abortions per year. PPRM has a contract to supply aborted fetal tissue to Colorado State University in Fort Collins.

In the video, actors posing as representatives from a human biologics company meet with Ginde at the abortion-clinic headquarters of PPRM in Denver to discuss a potential partnership to harvest fetal organs. When the actors request intact fetal specimens, Ginde reveals that in PPRM’s abortion practice, **“Sometimes, if we get, if someone delivers before we get to see them for a procedure, then we are intact.”**

Since PPRM does not use digoxin or other feticide in its 2nd trimester procedures, any intact deliveries before an abortion are potentially born-alive infants under federal law (1 USC 8).

**“We’d have to do a little bit of training with the providers or something to make sure that they don’t crush”** fetal organs during 2nd trimester abortions, says Ginde, brainstorming ways to ensure the abortion doctors at PPRM provide usable fetal organs.

When the buyers ask Ginde if “compensation could be specific to the specimen?” Ginde agrees, **“Okay.”** Later on in the abortion clinic’s

pathological laboratory, standing over an aborted fetus, Ginde responds to the buyer's suggestion of paying per body part harvested, rather than a standard flat fee for the entire case: **"I think a per-item thing works a little better, just because we can see how much we can get out of it."**

The sale or purchase of human fetal tissue is a federal felony punishable by up to 10 years in prison or a fine of up to \$500,000 (42 U.S.C. 289g-2). Federal law also requires that no alteration in the timing or method of abortion be done for the purposes of fetal tissue collection (42 U.S.C. 289g-1).

Ginde also suggests ways for Planned Parenthood to cover-up its criminal and public relations liability for the sale of aborted body parts. **"Putting it under 'research' gives us a little bit of an overhang over the whole thing,"** Ginde remarks. **"If you have someone in a really anti state who's going to be doing this for you, they're probably going to get caught."**

Ginde implies that PPRM's lawyer, Kevin Paul, is helping the affiliate skirt under the fetal tissue law: **"He's got it figured out that he knows that even if, because we talked to him in the beginning, you know, we were like, 'We don't want to get called on,' you know, 'selling fetal parts across states.'" The buyers ask, "And you feel confident that they're building those layers?" to which Ginde replies, "I'm confident that our Legal will make sure we're not put in that situation."**

As the buyers and Planned Parenthood workers identify body parts from last fetus in the path lab, a Planned Parenthood medical assistant announces: **"Another boy!"**

The video is the latest by The Center for Medical Progress documenting Planned Parenthood's sale of aborted fetal parts. Project Lead David Daleiden notes: "Elected officials need to listen to the public outcry for an immediate moratorium on Planned Parenthood's taxpayer funding while the 10 state investigations and 3 Congressional committees determine the full extent of Planned Parenthood's sale of baby parts." Daleiden continues, "Planned Parenthood's recent call for the NIH to convene an expert panel to 'study' fetal experimentation is absurd after suggestions from Planned Parenthood's Dr. Ginde that 'research' can be used as a catch-all to cover-

up baby parts sales. The biggest problem is bad actors like Planned Parenthood who hold themselves above the law in order to harvest and make money off of aborted fetal brains, hearts, and livers.”

###

See the video at: <https://www.youtube.com/watch?v=GWQuZMvcFA8>

*Tweet: #PPSellsBabyParts*

*For more information on the Human Capital project, visit [centerformedicalprogress.org](http://centerformedicalprogress.org).*

*The Center for Medical Progress is a 501(c)3 non-profit dedicated to monitoring and reporting on medical ethics and advances.*

 David Daleiden

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Exhibit 28



July 20, 2015

## CMP Statement on Planned Parenthood's Refusal to Produce Senior Director of Medical Services for House Committee

In the reply of their top attorney to the House Energy and Commerce Committee, refusing to provide Senior Director of Medical Services Dr. Deborah Nucatola to brief the committee on fetal body parts harvesting, Planned Parenthood displays the same contempt for the law against selling baby parts that they did during our nearly 3-year-long investigative journalism study.

Roger Evans, the author of the letter, is the head of the same Litigation and Law Department that Dr. Nucatola says "really doesn't want us to be the middle people for this issue, right now" of harvesting fetal organs. Roger Evans gave a presentation to Planned Parenthood affiliates at their March 2015 National Meeting encouraging them to supply fetal tissue in exchange for remuneration. He has been helping Planned Parenthood evade the law on fetal tissue trafficking for over 15 years, and if Planned Parenthood is so confident they follow the law on baby parts sales, they should willingly provide the conference recording of his presentation to the three Congressional committees now investigating.

The Center for Medical Progress follows all applicable laws in the course of our investigative journalism work, and we look forward to showing the public more clear evidence that Planned Parenthood routinely profits from the sale of baby parts and changes the abortion procedures it uses on pregnant women in order to do so. Congress and state authorities are right to continue to hold Planned Parenthood accountable for these atrocities against humanity.

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7 Attorneys for Plaintiff  
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9 UNITED STATES DISTRICT COURT  
 10 NORTHERN DISTRICT OF CALIFORNIA

12 NATIONAL ABORTION FEDERATION (NAF),

13 Plaintiff,

14 v.

15 BIOMAX PROCUREMENT SERVICES LLC,  
 THE CENTER FOR MEDICAL PROGRESS,  
 16 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 and TROY NEWMAN,

17 Defendants.  
 18

Case No. 3:15-cv-3522

Judge:

**DECLARATION OF PROFESSOR  
 JENNIFER T. DUNN IN  
 SUPPORT OF NATIONAL  
 ABORTION FEDERATION  
 (NAF)'S MOTION FOR A  
 TEMPORARY RESTRAINING  
 ORDER AND PRELIMINARY  
 INJUNCTION**

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1 I, JENNIFER TEMPLETON DUNN, J.D., declare as follows:

2 1. My name is Jennifer T. Dunn, J.D. I make this Declaration in Support of National  
3 Abortion Federation's (NAF's) Motion for a Temporary Restraining Order and Preliminary  
4 Injunction. I have personal knowledge of the facts set forth in this declaration, unless otherwise  
5 indicated, and if called to testify, I could testify competently thereto.

6 2. I am a currently a Lecturer in Law at the University of California Hastings College  
7 of the Law ("UC Hastings"), a position that I have held full time since 2013. I teach Women's  
8 Health and the Law, Professional Responsibility, and Global Health Law and Policy. I have been  
9 teaching law classes since 2009, first at the University of California Berkeley and then later at UC  
10 Hastings. I also served as the Acting Assistant Dean of the Graduate Division at UC Hastings  
11 from 2012 to 2013, and as the Executive Director of the UCSF/UC Hastings Consortium on Law,  
12 Science & Health Policy from 2009 to 2012. I earned a J.D. from UC Hastings in 1998, and a  
13 Bachelor of Arts from the University of California, Berkeley in 1991.

14 3. My primary area of expertise focuses on women's health and reproductive justice,  
15 and the intersection of the practice of health sciences and the law. I have written numerous  
16 professional publications in my field of research. For example, I published a law review article in  
17 the UCLA Law Review Discourse entitled *After the Choice: Challenging California's Physician-*  
18 *Only Abortion Restriction Under the State Constitution*, 61 UCLA L. Rev. Disc. 22 (2013), which  
19 analyzed the constitutionality of California's physician-only abortion restriction under the state  
20 constitution. I also co-authored a book entitled *Abortion in California: A Medical-Legal*  
21 *Handbook* (CreateSpace Independent Publishing Platform 2012), which provides an overview of  
22 California law and how it relates to clinical healthcare practices. I also frequently speak at  
23 medical and health sciences conferences on topics relating to pregnancy, maternal health,  
24 contraception, and abortion. I also provide *pro bono* expert consultation to hospitals relating to  
25 policies governing premature neonates, fetal death (miscarriage and IUFD), and abortion.

26 4. I started attending National Abortion Federation (NAF) Annual Meetings in 2006,  
27 and I have been a NAF member since 2010 or 2011. I attended the 2006, 2007, 2008, 2010,  
28 2011, 2012, 2013, 2014, and 2015 Annual Meetings. Attending the NAF Annual Meeting helps

1 keep me informed about the cutting edge medical research and emerging legal and policy issues  
2 relating to abortion care, and also helps me recognize important areas of future legal research.

3 5. One of the reasons I believe that providers and researchers attend the NAF Annual  
4 Meetings is that it is a place where they can come together, discuss the latest medical research  
5 and best practices, and feel safe. The threat of violence against abortion care providers is very  
6 real. In 1994, an anti-abortion activist shot and killed two receptionists at a Planned Parenthood  
7 clinic in Boston. At the time, I was a young recent college graduate working in a Planned  
8 Parenthood clinic in San Jose, California. I was at the NAF meeting the year before Dr. George  
9 Tiller was shot in 2009 – and the year after. I have received professional training and guidance  
10 from NAF security personnel about security and privacy issues, and have arranged NAF sessions  
11 for California abortion providers to help them improve security at their facilities.

12 6. I have a high expectation of security and privacy at NAF Annual Meetings. I had  
13 to provide two references from NAF members in order to join NAF. Attendees cannot bring their  
14 suitcases to conference sessions because of security issues. Only exhibitors at meetings are  
15 allowed to bring in boxes or other items. I have attended NAF meetings for almost 10 years, and  
16 at each meeting I have been required to sign a confidentiality agreement and present valid photo  
17 identification to obtain a conference badge and be admitted into the facility.

18 7. I was stunned to learn that an anti-abortion organization had falsified their  
19 credentials and identifications in order to become an exhibitor at the NAF Annual Meetings in  
20 2014 and 2015.

21 8. In 2014, I presented at NAF's Annual Meeting in San Francisco, California. I  
22 participated in a panel discussion titled "Fetal Disposal Choices and Restrictions" along with  
23 three other panel members. The panel discussed issues that may arise in the disposition of fetal  
24 remains after abortion and miscarriage, as well as the legal limits placed on a woman's choice in  
25 disposition of fetal remains. In addition, the panel discussed options available to donate fetal  
26 remains for research. I discussed and compared six state laws on fetal tissue and model guidance  
27 from the Center for Disease Control (CDC) to illustrate different ways that states regulate or  
28 restrict the disposition of fetal remains. My remarks and presentation focused on how these

1 restrictions on the disposition of fetal remains can interfere with a woman's desired method of  
2 coping after pregnancy loss (miscarriage) and abortion.

3 9. On July 14 and 21, 2015, anti-abortion activists, calling themselves the Center for  
4 Medical Progress ("CMP"), released highly edited videos in a coordinated attack on Planned  
5 Parenthood and a woman's right to choose. The highly edited videos sought to mislead viewers to  
6 make it seem that Dr. Deborah Nucatola, Dr. Mary Gatter, and Planned Parenthood have been  
7 violating federal law by profiting from fetal tissue donated for medical research. In the longer  
8 version of the video posted on the CMP website, an anti-abortion activist, pretending to be an  
9 employee of a company that arranges for the donation of fetal tissue, stated that they attended the  
10 2014 panel discussion regarding the disposition of fetal remains that I participated in.

11 10. One of the first actions I took after I realized that anti-abortion activists from CMP  
12 attended and may have secretly videotaped my presentation at the NAF 2014 Annual Meeting  
13 was to contact family members and ask them to check the privacy settings on social media that  
14 could potentially identify the location of my children and other family members. I am very  
15 concerned that this panel, including my presentation, may have been filmed. CMP's heavily  
16 edited videos show they are capable of twisting words to make it seem that the abortion provider  
17 community is not complying with the law. I fear that the release of a misleading and highly  
18 edited video of my presentation at the NAF 2014 Annual Meeting would open me up to the very  
19 public disparagement and intimidation that I saw directed towards Dr. Deborah Nucatola and Dr.  
20 Mary Gatter after misleading videos of them were released.

21  
22 I declare under penalty of perjury that the foregoing is true and correct. Executed this  
23 29th day of July, 2015 at San Francisco, California.

24  
25   
26 JENNIFER T. DUNN, J.D.

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UNITED STATES DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA

NATIONAL ABORTION FEDERATION (NAF),

Plaintiff,

v.

BIOMAX PROCUREMENT SERVICES LLC,  
 THE CENTER FOR MEDICAL PROGRESS,  
 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 and TROY NEWMAN.

Defendants.

Case No. 3:15-cv-3522

Judge:

**DECLARATION OF DR.  
 MATTHEW REEVES IN  
 SUPPORT OF NATIONAL  
 ABORTION FEDERATION  
 (NAF)'S MOTION FOR A  
 TEMPORARY RESTRAINING  
 ORDER AND PRELIMINARY  
 INJUNCTION**

1 I, DR. MATTHEW REEVES, declare as follows:

2 1. My name is Dr. Matthew Reeves, M.D., M.P.H. I make this Declaration in  
3 Support of National Abortion Federation's (NAF's) Motion for a Temporary Restraining Order  
4 and Preliminary Injunction. I have personal knowledge of the facts set forth in this declaration,  
5 unless otherwise indicated, and if called to testify, I could testify competently thereto.

6 2. Since April 2013, I have served as the Medical Director of the National Abortion  
7 Federation in Washington, DC. Previously, I worked as a Medical Officer at CONRAD; Chief  
8 Medical Officer at WomanCare Global; and as Director of Family Planning Research at the  
9 University of Pittsburgh. In addition to my role at the National Abortion Federation, I also serve  
10 as the Associate Director for Research at the Fellowship in Family Planning at Washington  
11 Hospital Center; Adjunct Associate Professor of Population, Family, and Reproductive Health at the  
12 Johns Hopkins Bloomberg School of Public Health; and I see patients at Planned Parenthood of  
13 Metropolitan Washington, DC.

14 3. I decided to pursue a career in medicine after studying at the University of Ibadan  
15 in Nigeria, as part of earning a BA in anthropology from the University of Pennsylvania. During  
16 my studies at Harvard Medical School, I spent 2 months in rural Malawi. The harm to women  
17 from illegal abortion and unintended pregnancy was so striking and obvious that I decided to  
18 pursue a career in obstetrics and gynecology. After graduating from Harvard Medical School, I  
19 completed a residency in obstetrics & gynecology at the University of California at San Francisco  
20 (UCSF). I then joined the UCSF Department of Radiology for a fellowship in clinical ultrasound  
21 at which time I also completed the UCSF Advanced Training in Clinical Research program. I  
22 then completed the Fellowship in Family Planning & Contraceptive Research and the MPH  
23 program at the University of Pittsburgh, and joined the School of Medicine faculty afterwards.

24 4. My career has spanned research, teaching, and providing care to women. I have  
25 taught graduate students and trainees at the Johns Hopkins Bloomberg School of Public Health,  
26 and University of Pittsburgh School of Medicine. I have provided abortion care for 14 years and  
27 have worked at four Planned Parenthood Federation of America (PPFA) affiliate clinics, one  
28 independent clinic, and two hospital-based practices. I have conducted research on post-

1 pregnancy IUD insertion, contraceptive cost-effectiveness, early phase clinical trials of  
2 contraceptive and HIV-prevention products, applications of ultrasound in family planning, and  
3 provision of family planning services in the developing world. I have published more than 30  
4 research articles in journals such as *Obstetrics and Gynecology*, *Contraception*, *New England*  
5 *Journal of Medicine*, *Fertility & Sterility*, and *Ultrasound in Obstetrics and Gynecology*. I am  
6 proud of my research, which has helped improve the quality and safety of abortion care and  
7 improve access to contraception after abortion. I am a diplomate of the American Board of  
8 Obstetrics & Gynecology and a fellow of both the American College of Obstetricians and  
9 Gynecologists and of the Society of Family Planning.

10 5. Prior to taking on the role of Medical Director at the National Abortion Federation,  
11 I was a member of the National Abortion Federation for 8 years.

12 6. I attended my second NAF Annual Meeting as Medical Director in April 2014 in  
13 San Francisco. There, I was chair of a full-day post-graduate seminar on pre-procedural abortion  
14 evaluation, led discussions of placenta accreta and the use of antibiotics in abortion care,  
15 presented the newly revised *Clinical Policy Guidelines*, and was chair of the Scientific Papers and  
16 Posters Selection Committee.

17 7. I had a reasonable expectation of privacy and confidentiality at the NAF meeting  
18 because my experience with NAF meetings as an attendee had always been very positive. The  
19 idea that I might be video recorded at the NAF meeting never entered my mind at any of the  
20 many meetings I attended. NAF strives to create a safe space for providers of abortion care at the  
21 annual meetings, including intense security measures and signed confidentiality agreements.

22 8. “Robert Sarkis” approached me at the 2014 NAF Annual Meeting in San  
23 Francisco several times. The time I remember most clearly was near the Biomax booth, probably  
24 on Monday, the first full day of the conference. “Robert” really wanted to introduce himself and  
25 to talk. We talked for several minutes. At the time, I thought he was just being pushy due his  
26 desire to get the company going and to make money. I assumed that his unusual stiff posture and  
27 lack of movement were just a personality quirk, but I now realize that he was most likely filming  
28 me.

1           9.       He explained Biomax’s business and how he wanted to meet clinicians interested  
2 in donating fetal tissue. I said something to the effect that there were likely to be many clinics  
3 that would be interested because: (1) disposing of tissue is complicated in all medical contexts  
4 (regardless of how it is used); and (2) many patients like to donate fetal tissue for research. I  
5 think I mentioned that I was involved in fetal tissue donation at the Magee-Womens  
6 Hospital/University of Pittsburgh, and that many patients participated. This conversation might  
7 have lasted 5 minutes, and almost certainly less than 10 minutes. As a general rule, I try to meet  
8 people where they are coming from in my conversations, and then reframe the conversation in  
9 terms of compassionate care for women. It is easy for me to imagine that my conversation with  
10 him could be edited to my detriment, just as was done for Drs. Nucatola and Gatter.

11           10.       Though “Robert” approached me several times throughout the conference, I do not  
12 recall any other substantial conversations. I remember one moment where he chased me down  
13 the hallway in front of the registration desk and scientific posters. He seemed very pushy.

14           11.       I am convinced that my fellow providers in the NAF community provide the  
15 highest quality of care to their patients, and that offering patients the option to donate fetal tissue  
16 is a key part of this mission. In my experience and opinion as a medical expert, fetal tissue  
17 research is vital to medical advancements. This research provides key knowledge of human  
18 development that has led to life-saving advances. Continuing this research is important to  
19 allowing further advances in life-saving medical care.

20           12.       I have seen the videotapes released by the fraudulent members of the “Biomax”  
21 and “CMP” groups including footage of Doctors Nucatola and Gatter. Drs. Nucatola and Gatter  
22 are highly respected members of the medical community. They are considered experts in their  
23 field and their work has moved the work of reproductive health forward for women and families.  
24 Despite their stellar reputations and accomplishments, they’ve been falsely accused by extremists  
25 and unnecessarily shamed in the media.

26           13.       In the longer transcript of the conversation with Dr. Nucatola released shortly after  
27 the video on July 14, 2015, the “Biomax” imposters specifically reference my name six times.  
28

1 Given that this was filmed in July 2014, I have reason to believe that this is referencing my  
2 conversations with “Robert Sarkis” at the April 2014 NAF Annual Meeting.

3 14. For example, the person who represented himself as “Robert Sarkis” at the NAF  
4 meeting—but whom I now believe is David Daleiden based on Daleiden’s public statements  
5 about the videos—states the following in the transcript: “I met the guy who is also the medical  
6 director for NAF. Matt Reeves . . . He and I spoke about second trimester and he indicated he  
7 had good volume. It was an interesting conversation because he’s friends with someone, I think in  
8 Pennsylvania, who was actually a researcher . . .” (Transcript at 17 (*available at*  
9 [https://cbsla.files.wordpress.com/2015/07/ppfatranscript072514\\_final.pdf](https://cbsla.files.wordpress.com/2015/07/ppfatranscript072514_final.pdf).)

10 15. In addition, later in the video, the same man says “Matt Reeves had actually  
11 suggested that to us,” (*Id.* at 22), apparently referencing a panel discussion on fetal disposition at  
12 the NAF 2014 Annual Meeting.

13 16. I have reason to believe that I was filmed, not only because of “Robert’s” leading  
14 questions, but also because of his strange face-forward stiffness when speaking with me, both of  
15 which now make sense in the context of the other smear videos. I have reason to believe that my  
16 words could be edited into a smear campaign video similar to the videos involving Drs. Nucatola  
17 and Gatter. The fact that “Robert” mentioned my work in “Pennsylvania” to Dr. Nucatola in  
18 roughly July 2014 makes me think that he was filming me in April 2014.

19 17. I am fearful of this. I have witnessed the terrible reaction towards the prior doctors  
20 in the wake of their smear videos. I expect that I will suffer similar levels of reputational harm  
21 should a heavily edited and misleading video of me be released.

22 18. As a doctor who provides abortion care, I have long been all too aware of the  
23 constant threat of violence, intimidation, and other extreme tactics that anti-abortion extremists  
24 perpetrate towards abortion providers. The most grievous example of this was the murder of Dr.  
25 George Tiller. I came to know Dr. Tiller as a smart, dedicated, and compassionate doctor through  
26 meeting him at NAF Annual Meetings for over three years.

27 19. I am also fearful of my safety and the safety of my family. On Friday, July 24,  
28 2015, NAF’s Security Associate Michelle Davidson performed a security assessment of my

1 home. Shortly thereafter, I had a security company come to my house to assess my and my  
2 family's safety. As a result, we are getting an alarm system installed. I hope that this is sufficient  
3 to deter the violent extremists that radicals like David Daleiden/"Robert Sarkis" hope to incite to  
4 violence. But I know that normal security systems are not enough to stop extremists whose sole  
5 goal is to murder doctors. Although the radical anti-abortion movement pretends to distance  
6 themselves from the violent extremists, their work serves to incite their violence.

7 20. In the case of Daleiden, one of his colleagues helped provide information to the  
8 killer of Dr. Tiller. I am fearful that Daleiden might do the same for someone who wanted to find  
9 me. Given his ability to conduct a fraud like "Biomax", I have no doubt that he could find my  
10 home and direct anti-abortion extremists to it.

11 21. The video and coordinated response of anti-abortion extremists make it clear that  
12 Daleiden and other Defendants named in this action hope to return the United States to the days  
13 when contraception was illegal, abortion was illegal, and women died on hotel room floors. Given  
14 that a primary goal of my research has been to promote women's reproductive choice and ensure  
15 safe and effective family-planning, and because I was almost certainly recorded by David  
16 Daleiden/"Robert Sarkis", I have every reason to believe that he and his radical colleagues will  
17 target me.

18 22. With the release of the prior videos, David Daleiden/"Robert Sarkis" and his  
19 colleagues have already accomplished one of their major goals: to sow fear and terrorize those  
20 who support full and equal human rights for women.

21 I declare under penalty of perjury that the foregoing is true and correct.

22 Executed this 30 day of July 2015 at Washington, D.C.

23  
24 

25 \_\_\_\_\_  
26 DR. MATTHEW REEVES  
27  
28

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UNITED STATES DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA

NATIONAL ABORTION FEDERATION,

Plaintiff,

v.

BIOMAX PROCUREMENT SERVICES LLC,  
 THE CENTER FOR MEDICAL PROGRESS,  
 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 and TROY NEWMAN,

Defendants.

Case No. 3:15-cv-3522

Judge:

**DECLARATION OF MARK  
 MELLOR IN SUPPORT OF  
 NATIONAL ABORTION  
 FEDERATION (NAF)'S MOTION  
 FOR A TEMPORARY  
 RESTRAINING ORDER AND  
 PRELIMINARY INJUNCTION**

1 I, MARK MELLOR, declare as follows:

2 1. My name is Mark Mellor. I make this Declaration in Support of National Abortion  
3 Federation's (NAF's) Motion for a Temporary Restraining Order and Preliminary Injunction. I  
4 have personal knowledge of the facts set forth in this declaration, unless otherwise indicated, and  
5 if called to testify, I could testify competently thereto.

6 2. I am a Security Consultant who directs the Security Program at the National  
7 Abortion Federation (NAF). Prior to joining NAF in September of 2013, I worked for a national  
8 security provider, specializing in high risk security events and close protection duties for nine  
9 years. In this role I was responsible for security and protective intelligence for the host  
10 broadcasting network for the 2010 Winter Olympics. From 2007-2013, I provided private  
11 security for Vancouver physician Gary Romalis, an abortion provider who survived two attempts  
12 on his life by anti-abortion extremists. In 1994, Dr. Romalis suffered a severe gunshot wound to  
13 his left thigh, and six years later in 2000, he was stabbed. Both injuries could have been fatal.

14 3. Throughout my career, my experience has been concentrated in providing  
15 specialized security services, including threat risk assessments and physical security of buildings,  
16 and providing advice on security solutions. I was introduced to NAF meetings through my  
17 position with Dr. Romalis and began working with the onsite conference security team in 2007.

18 4. I led the Security detail team for NAF's 2012 Annual Meeting in Vancouver  
19 before directing the NAF Security Department in 2013. I was personally responsible for  
20 overseeing security at our 2014 Annual Meeting in San Francisco, and 2015 Annual Meeting in  
21 Baltimore.

22 5. NAF implements a multi-faceted program to help ensure the security of our  
23 members and safe access to reproductive health care clinics. As part of the NAF Security team, I  
24 provide 24/7 emergency assistance to NAF members, conduct trainings and security assessments  
25 of facilities and homes, support our members during large-scale protests occurring throughout the  
26 U.S. and Canada, respond to individual security incidents at member facilities, convene  
27 community law enforcement briefings, monitor anti-abortion activities, and protect attendees at  
28 NAF meetings.

1           6.       The safety and security of NAF meeting attendees is of the utmost importance to  
2 NAF. We go to great lengths to ensure a safe, secure, and intimidation-free environment for  
3 Annual Meeting attendees each year, and have security measures in place that are not common at  
4 other conferences. These security precautions start long before the actual conference begins.  
5 NAF's Security Department is involved in the selection process for conference hotels in order to  
6 ensure that sites meet our strict security guidelines. When screening sites, we prioritize the  
7 location and floor of meeting space, and the ability to secure NAF meeting rooms and restrict  
8 access from others in the hotel. We often reject hotel sites for security reasons. Once a site is  
9 selected, my department implements a comprehensive security plan for each conference.

10           7.       NAF goes to great lengths to make sure that the dates and locations of our  
11 meetings do not fall into the wrong hands. Unlike most other organizations, we do not post  
12 information about our meeting dates and locations on our public website, and only give this  
13 information out to members and trusted others. All emails about the conference remind recipients  
14 to: "Please be mindful of security concerns and do not forward this email or share information  
15 about NAF meetings." We email a security reminder to all registered attendees the week before  
16 the meeting, reminding them not to post their travel plans or information about the meeting on  
17 social media. Attendees are prohibited from posting information related to content and/or the  
18 location of NAF's Annual Meeting on social media of any kind. This is communicated to  
19 attendees in the security reminder email, in the conference Final Program, and through signs  
20 posted at the registration booth and throughout the meeting space. Media representatives are  
21 regularly not allowed at NAF meetings, and media personnel are not informed about the meeting.

22           8.       In advance of our meetings, NAF security staff travel to the meeting site at least  
23 once in order to assess the security risks and needs at the hotel and the surrounding area. I visited  
24 the Westin St. Francis in San Francisco on September 18, 2013 and the Hyatt Regency Baltimore  
25 two times: December 10, 2014 and January 30, 2015. During these advance meetings I met with  
26 hotel management and hotel security to discuss security issues and explain the overall plan we  
27 would implement and how hotel security would be integrated into that plan. I also coordinated  
28 with local police officials, FBI, and fire and rescue personnel to review security issues, potential

1 threats, and the security needs of NAF members. NAF employed security officers for the onsite  
2 conference security team, including hotel security, security staff from partner organizations, and  
3 off-duty local law enforcement officers.

4 9. NAF security staff typically arrive prior to the beginning of each conference to set  
5 up the security team and their assignments; orient security staff about procedures and protocols;  
6 arrange for the safe receipt of mail and packages at the hotel; and finalize the involvement of K-9  
7 teams. For the 2014 and 2015 Annual Meetings, I arrived in San Francisco on Thursday,  
8 April 3, 2014 and Baltimore on Thursday, April 16, 2015.

9 10. During the conferences, I supervised the onsite security team and was available on  
10 a 24/7 basis in case any issues occurred. My team and I worked with K-9 security personnel to  
11 patrol NAF meeting space and the Exhibit Hall with explosive detector dogs.

12 11. Upon arrival, each attendee must show photo ID and sign a confidentiality  
13 agreement before obtaining their meeting materials and gaining access to meeting areas.  
14 Attendees are given a name badge, which they must wear in order to enter any NAF meeting  
15 rooms. Throughout the entire conference, we have security officers posted at strategic locations  
16 throughout the meeting areas and outside entrances to meeting rooms. One of their primary  
17 responsibilities is checking to ensure that everyone entering a meeting room is wearing a NAF  
18 badge. Security staff will restrict access to meeting areas for anyone without a visible NAF badge.

19 12. During the conference, all signage uses a version of the NAF logo, which omits  
20 the words "National Abortion Federation" so that non-meeting attendees in the hotel are not  
21 alerted to NAF's presence. We also work with the hotel to make sure that our full name is not  
22 listed in any public hotel schedules or bulletins. Attendees and staff are advised to remove their  
23 conference badges when they leave the meeting areas, including in elevators, in order to decrease  
24 the chances of non-meeting attendees learning about the meeting.

25 13. For security reasons, NAF does not allow luggage or large bags to be brought into  
26 meeting or event rooms. Meeting attendees must make arrangements to store luggage in their  
27 hotel room or with the hotel concierge who is alerted to the need for extra baggage handling  
28 personnel on the last day of NAF's meeting.



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9 UNITED STATES DISTRICT COURT  
 10 NORTHERN DISTRICT OF CALIFORNIA

12 NATIONAL ABORTION FEDERATION (NAF),

13 Plaintiff,

14 v.

15 BIOMAX PROCUREMENT SERVICES LLC,  
 THE CENTER FOR MEDICAL PROGRESS,  
 16 DAVID DALEIDEN (aka "ROBERT SARKIS"),  
 and TROY NEWMAN,

17 Defendants.  
 18

Case No. 3:15-cv-3522

Judge:

**DECLARATION OF VICKI  
 SAPORTA IN SUPPORT OF  
 NATIONAL ABORTION  
 FEDERATION (NAF)'S MOTION  
 FOR A TEMPORARY  
 RESTRAINING ORDER AND  
 PRELIMINARY INJUNCTION**

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1 I, VICKI SAPORTA, declare as follows:

2 1. My name is Vicki Saporta. I make this Declaration in Support of National  
3 Abortion Federation's (NAF's) Motion for a Temporary Restraining Order and Preliminary  
4 Injunction. I have personal knowledge of the facts set forth in this declaration, unless otherwise  
5 indicated, and if called to testify, I could testify competently thereto.

6 2. I am a graduate of Cornell University. Since 1995, I have served as the President  
7 and CEO of the National Abortion Federation (NAF). NAF is the professional association of  
8 abortion providers. Our members include private and non-profit clinics, Planned Parenthood  
9 affiliates, women's health centers, physicians' offices, and hospitals who together care for half  
10 the women who choose abortion in the U.S. and Canada each year. Our members also include  
11 public hospitals and both public and private clinics in Mexico City and private clinics in  
12 Colombia. NAF is a 501(c)(3) nonprofit organization, and we do not receive any federal funding.  
13 NAF does not operate any facilities that directly provide abortion care.

14 3. Our mission is to ensure safe, legal, and accessible abortion care, which promotes  
15 health and justice for women. In furtherance of this mission, NAF sets the standards for quality  
16 abortion care with our evidence-based Clinical Policy Guidelines (CPGs). We also develop  
17 innovative, accredited, continuing medical education and training programs and educational  
18 resources for abortion providers and other health care professionals. Our comprehensive quality  
19 assessment and continuing medical education and training programs help ensure high-quality  
20 abortion care and provide support for health care professionals who add abortion care to their  
21 practices. We have also developed Ethical Principles for Abortion Care. These ethical principles  
22 provide a common ethical framework for abortion providers, and are intended to guide decision  
23 making in the challenging situations abortion providers face when providing health care or  
24 interacting with the broader medical or non-medical community.

25 4. One of my most important roles in leading NAF is to help ensure the safety and  
26 security of our members. Since the 1973 *Roe v. Wade* Supreme Court decision legalized  
27 abortion, there has been an organized campaign by anti-abortion extremists, which has resulted in  
28 escalating levels of threats and violence against abortion providers.

1           5.       In an attempt to stop abortion, anti-abortion extremists have chosen to take the law  
2 into their own hands. What began as peaceful protests with picketing moved to harassing clinic  
3 staff and patients as they entered clinics and eventually escalated to blockading clinic entrances.  
4 This foundation of disruption led to violence with the first reported clinic arson in 1976 and a  
5 series of bombings in 1978. Arsons and bombings have continued until this day. Anti-abortion  
6 extremists have also used chemicals to block women's access to abortion care, employing butyric  
7 acid to vandalize clinics and sending anthrax threat letters to frighten clinic staff and disrupt  
8 services. The NAF office in Washington, DC was bombed along with several clinics in 1984.  
9 Members of the anti-abortion extremist group the Army of God were responsible for the  
10 bombings and spent time in prison.

11           6.       In the early 1990s, anti-abortion extremists concluded that murdering providers  
12 was the only way to stop abortion. The first provider was murdered in 1993. Since then, there  
13 have been seven subsequent murders and 17 attempted murders of clinic staff and physicians,  
14 several of which occurred in their own homes. In 2009, NAF member Dr. George Tiller was shot  
15 and killed in his church in Wichita, Kansas.

16           7.       Although we haven't had another murder since 2009, in some ways we have just  
17 been lucky and have apprehended individuals before they could commit acts of violence. In May  
18 2011, Ralph Lang was arrested in his hotel room in Wisconsin after he accidentally fired his gun  
19 while cleaning it. When questioned by police, he revealed that he was planning to go to two  
20 Planned Parenthood clinics and shoot the doctors. He also said he wished he could line up the  
21 rest of the clinic staff and "mow them down" with a machine gun. He was later found guilty of  
22 attempted first-degree intentional homicide and sentenced to 10 years in prison.

23           8.       In recent years, there have been a number of arsons and significant vandalism. In  
24 some parts of the country threats, intimidation, and harassment remain a daily part of life for  
25 abortion providers. In March 2014, our member Susan Cahill in Montana was forced to close her  
26 clinic after it was destroyed by someone opposed to abortion. The perpetrator was recently  
27 sentenced to 20 years, with 15 years of that suspended, and was ordered to pay restitution. We  
28 have also seen a trend toward increasing internet harassment.

1           9.       Even today, there remains a part of the extreme anti-abortion movement who  
2 believe that it is justifiable to use deadly force to stop abortion. The man convicted of murdering  
3 Dr. Tiller tried to use a so-called “necessity defense” as justification for the crime. And Troy  
4 Newman—a Defendant in this action and the head of Operation Rescue and a Center for Medical  
5 Progress (CMP) Board Member—has called the murder of an abortion provider a “justifiable  
6 defensive action.”

7           10.       The safety and security of our members is of the utmost importance to us. In my  
8 20 years at NAF, I have twice gotten a call that one of our members had been murdered. I don’t  
9 ever want to get a call like that again. We remain vigilant about the safety of our members, and  
10 implement a multi-faceted security program to help ensure the safety of abortion providers.  
11 Because of anti-abortion violence, applicants for NAF membership must submit references from  
12 current NAF members or from other people or institutions known to NAF. Our security staff also  
13 provides technical assistance, on-site security training and assessments at facilities and homes of  
14 clinic staff, and 24/7 support to our members when they are facing an emergency or are targeted  
15 by extremists. We work with federal, state, and local law enforcement officials and advocate for  
16 increased protection for abortion providers, as well as investigation and prosecution of anti-  
17 abortion criminal activities.

18           11.       One of the most critical roles of our security department is to protect attendees at  
19 our Annual Meetings where we provide essential accredited continuing medical education and  
20 training. Our meetings bring together approximately 700-850 abortion providers, researchers,  
21 and advocates, including individuals who are high-profile targets of anti-abortion extremists. Our  
22 members need to feel and be safe at our meetings and protected from those who wish to do them  
23 harm.

24           12.       In order to provide a safe place for our members, we have had to increase the  
25 security precautions and measures for our Annual Meetings over the years. NAF held our first  
26 Annual Meeting in 1977. In the early years, before the violence against providers had escalated,  
27 we had no security to speak of at our meetings, and in fact, we allowed known anti-abortion  
28 extremist Joe Scheidler, author of “99 Ways of Closing an Abortion Clinic,” to attend our

1 meetings. However, by the early 1990s, we were forced to hire security professionals as well as  
2 off-duty police officers to secure our Annual Meetings from Scheidler and other anti-abortion  
3 extremists who publicized our meeting location and used it as an opportunity to harass and  
4 intimidate our members.

5 13. We have had to continually increase our meeting security to ensure a safe, secure,  
6 and intimidation-free environment for Annual Meeting attendees. Since the late 1990s, anti-  
7 abortion extremists have attempted to infiltrate our meetings and identify providers. Anti-  
8 abortion extremist Mark Crutcher and his group Life Dynamics worked to develop a network of  
9 “spies for life” to infiltrate abortion clinics. Crutcher has also offered substantial monetary  
10 rewards for materials from NAF meetings, including audio recordings of our Annual Meeting  
11 sessions, which we made for educational purposes. As a result of this targeted campaign to  
12 intimidate providers, we stopped taping our meeting sessions, started labeling all Annual Meeting  
13 packets and materials as confidential, and started requiring all meeting attendees to sign  
14 confidentiality agreements in 2000. These practices and agreements are vitally important to our  
15 ability to protect the privacy, identity, and security of our members.

16 14. We have security measures in place that are not common at other conferences.  
17 One prominent author who presented at a NAF meeting told attendees that she had attended  
18 meetings all over the world and had never encountered the level of security that is present at a  
19 NAF meeting. She said it made her better understand the threats that abortion providers have to  
20 face every day.

21 15. Many of the physicians and clinic staff at our meetings have been targeted by anti-  
22 abortion extremists. They have been stalked, threatened, and intimidated, including being  
23 picketed at their homes, churches, and their children’s schools. Some attendees have had death  
24 threats made against them, and bomb threats made against their clinics. NAF members who  
25 attend our meetings have had their names put on threatening “wanted” posters and websites  
26 featuring their photos and personal information that are intended to incite violence against them.  
27 Given the hostile climate and the history of violence, some of our members go to great lengths to  
28 preserve their privacy and identity. Many of our members have security protocols in place to try

1 and protect the identity of their physicians. This may entail not having the doctors enter the  
2 building wearing scrubs, driving a different way to the clinic each day, and for some wearing  
3 disguises when entering and exiting facilities. Some wear bulletproof vests to work every day. A  
4 number of our members try to remain under the radar in their communities, and may not speak  
5 publicly about their work out of fear for their personal safety or the safety of their families.

6 16. NAF's Annual Meetings are one of the only places where abortion providers can  
7 come together to learn about the latest research in our field and network without fear of  
8 harassment or intimidation. As one recent meeting attendee said, "It is great to be in a place  
9 where I can say 'abortion' out loud and be supported."

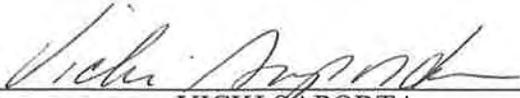
10 17. The recent security breaches at our 2014 and 2015 Annual Meetings have  
11 negatively impacted our organization and our membership. In order to address these breaches  
12 and the recently released videos, we have been forced to divert key staff and resources from work  
13 that is central to our mission. We have incurred expenses for staff time, meals, and transportation  
14 during weekends and late nights working; cell phone and data usage for a member of our senior  
15 staff who was out of the country and contacted by members when the first video was released; IT  
16 security consultants to assess the security of our network against further breaches or hacks; and  
17 we expect to incur additional travel costs to support our members and address this matter.

18 18. Our conference Final Program contained save-the-date information for our  
19 upcoming meetings, so we know that David Daleiden and other CMP agents know the location  
20 and dates of our next two U.S. meetings. Our security staff have been in contact with the hotel  
21 management and hotel security staff for these meeting sites to let them know that information  
22 about our dates and locations has been compromised, and that we may need to take additional  
23 security precautions for those meetings. This could include additional site visits in advance of  
24 these meetings, more time and resources running background checks and vetting potential  
25 exhibitors and meeting attendees, and hiring an increased number of onsite security personnel.  
26 We may also see a decrease in attendees at our next meetings as a result of this breach, and we are  
27 concerned that those who do attend will not feel safe and secure.  
28

1 We may also see a decrease in attendees at our next meetings as a result of this breach, and we are  
2 concerned that those who do attend will not feel safe and secure.

3 19. However, the most chilling aspect of this latest attack has been the direct threats to  
4 our community as a result of the videos. Shortly after the first video of Dr. Deb Nucatola was  
5 released, an individual posted online that they would offer a reward for her murder. Using the  
6 handle "Joseywhales," this individual posted on Fox Nation: "I'll pay ten large to whomever kills  
7 Dr. Deborah Nucatola. Anyone. Go for it." They also threatened to personally murder the CEO  
8 of StemExpress, a legitimate biomedicine procurement company who has exhibited at NAF  
9 meetings, and was named in the CMP videos: "The CEO of StemExpress is a death-profiteer.  
10 The CEO of StemExpress should be hung by the neck using piano wire and propped up on the  
11 lawn in front of the building with a note attached...." The person posting went on to identify  
12 where the CEO lives and stated: "I'm going there... I'll pay ten grand to whomever beats me to  
13 [CEO]... [CEO] must die to save the innocents." We can expect similar threats against providers  
14 whose names and identities are revealed in future videos and releases from CMP. This type of  
15 intimidation is real, and exactly the type of attack our meeting security and confidentiality  
16 agreements are in place to mitigate.

17  
18 I declare under penalty of perjury that the foregoing is true and correct. Executed this 30  
19 day of July, 2015 at Washington, D.C.

20  
21   
22 VICKI SAPORTA