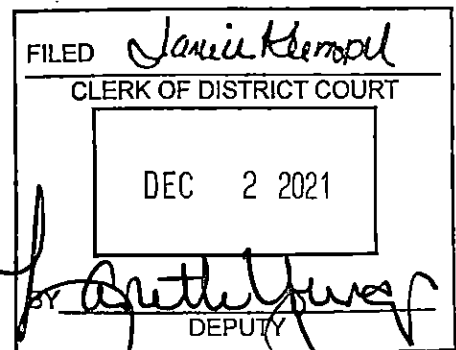


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MONTANA SEVENTH JUDICIAL DISTRICT COURT, RICHLAND COUNTY

<p>NETZER LAW OFFICE, P.C. and DONALD L. NETZER,</p> <p>Plaintiffs,</p> <p>vs.</p> <p>STATE OF MONTANA, by and through AUSTIN KNUDSEN, in his official capacity as Attorney General and LAURIE ESAU, Montana Commissioner of Labor and Industry,</p> <p>Defendants.</p>	<p>Cause No. DV-21-89</p> <p>SUPPLEMENTAL AFFIDAVIT OF DONALD L. NETZER</p> <p>Hon. Olivia Rieger</p>
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I, DONALD L. NETZER, declare under penalty of perjury the following is true and correct:

- As the majority shareholder and owner of Netzer Law Office, P.C. I have had to take time away from the practice of law to review best practices for mitigating risk from COVID-19 to myself, fellow employees, owners, clients, and potential clients who enter our offices.

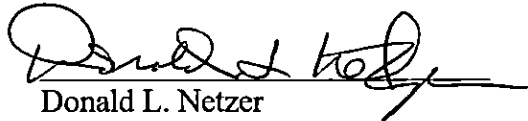
30

2. Due to HB 702's restrictions, I have had to spend additional time consulting with other employees and owners of Netzer Law Office, P.C. about remaining lawful ways to protect the health and safety of our workplace, which depending on the severity of conditions in Montana, may require us to close our offices to the public again. These internal consultations have taken away from time that I and other employees and owners could have been practicing law and billing time to clients.
3. Lost productivity by myself and other owners and employees from time spent addressing COVID-19 and mitigation measures has had a negative economic impact on both myself and on Netzer Law Office, P.C. as a business.
4. Netzer Law Office, P.C. has purchased masks for use by employees, owners, clients and potential clients who enter our law offices, to mitigate against the spread of COVID-19.
5. Due to HB 702's prohibitions on treating individuals different based upon their vaccination or immunity status, we have had to use more masks than if we only required their use for unvaccinated individuals or individuals who did not have immunity from prior infection, at greater cost to Netzer Law Office, P.C.
6. Due to HB 702's prohibitions, I have been concerned about potential legal liability myself and Netzer Law Office, P.C. could face if an employee or office visitor contracted COVID-19 in our office space.
7. To the extent that it was unclear in my original affidavit, Netzer Law Office, P.C. would treat persons with proof active vaccination or immunity the same for purposes of adopting health and safety measures. In other words, Netzer Law Office, P.C. would require either proof of vaccination or immunity protection for all employees and potential employees. For Netzer Law Office, P.C.'s other desired measures, it would treat persons

lacking proof of vaccination or immunity the same (e.g., remote work requirements for employees who lack proof of either active vaccination or immunity protection).

8. Attached as Exhibit 23 is a true and correct copy of Centers for Disease Control and Prevention, *CDC Statement on B.1.1.529 (Omicron variant)*, <https://www.cdc.gov/media/releases/2021/s1126-B11-529-omicron.html> (Nov. 26, 2021).
9. Attached as Exhibit 24 is a true and correct copy of World Health Organization, *Update on Omicron*, <https://www.who.int/news/item/28-11-2021-update-on-omicron> (Nov. 28, 2021).
10. Attached as Exhibit 25 is a true and correct copy of Centers for Disease Control and Prevention, *Post-Covid Conditions*, <https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects/> (Sept. 16, 2021).

Dated this 2 day of December, 2021.


Donald L. Netzer

STATE OF MONTANA)
 ss:
COUNTY OF RICHLAND)

Signed and sworn to (or affirmed) before me on this 2 day of December, 2021, by Donald L. Netzer.

Notary:

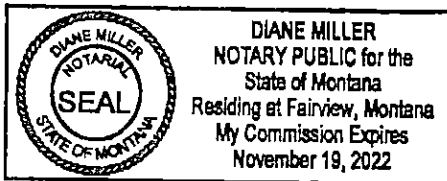




EXHIBIT 23

CDC Statement on B.1.1.529 (Omicron variant)

Media Statement

For Immediate Release: Friday, November 26, 2021

Contact: Media Relations

(404) 639-3286

On November 26, 2021, the World Health Organization (WHO) classified a new variant, B.1.1.529, as a Variant of Concern and has named it Omicron. No cases of this variant have been identified in the U.S. to date. CDC is following the details of this new variant, first reported to the WHO by South Africa. We are grateful to the South African government and its scientists who have openly communicated with the global scientific community and continue to share information about this variant with the U.S. Department of Health and Human Services and CDC. We are working with other U.S. and global public health and industry partners to learn more about this variant, as we continue to monitor its path.

CDC is continuously monitoring variants and the U.S. variant surveillance system has reliably detected new variants in this country. We expect Omicron to be identified quickly, if it emerges in the U.S.

We know what it takes to prevent the spread of COVID-19. CDC recommends people follow prevention strategies such as wearing a mask in public indoor settings in areas of substantial or high community transmission, washing your hands frequently, and physically distancing from others. CDC also recommends that everyone 5 years and older protect themselves from COVID-19 by getting fully vaccinated. CDC encourages a COVID-19 vaccine booster dose for those who are eligible.

Travelers to the U.S. should continue to follow CDC recommendations for traveling.

CDC will provide updates as more information becomes available.

###

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 

CDC works 24/7 protecting America's health, safety and security. Whether disease start at home or abroad, are curable or preventable, chronic or acute, or from human activity or deliberate attack, CDC responds to America's most pressing health threats. CDC is headquartered in Atlanta and has experts located throughout the United States and the world.

EXHIBIT 24

Update on Omicron

28 November 2021 | Statement | Reading time: 3 min (899 words)

中文

Русский

Español

On 26 November 2021, WHO designated the variant B.1.1.529 a variant of concern, named Omicron, on the advice of WHO's [Technical Advisory Group on Virus Evolution](#) (TAG-VE). This decision was based on the evidence presented to the TAG-VE that Omicron has several mutations that may have an impact on how it behaves, for example, on how easily it spreads or the severity of illness it causes. Here is a summary of what is currently known.

Current knowledge about Omicron

Researchers in South Africa and around the world are conducting studies to better understand many aspects of Omicron and will continue to share the findings of these studies as they become available.

Transmissibility: It is not yet clear whether Omicron is more transmissible (e.g., more easily spread from person to person) compared to other variants, including Delta. The number of people testing positive has risen in areas of South Africa affected by this variant, but epidemiologic studies are underway to understand if it is because of Omicron or other factors.

Severity of disease: It is not yet clear whether infection with Omicron causes more severe disease compared to infections with other variants, including Delta. Preliminary data suggests that there are increasing rates of hospitalization in South Africa, but this may be due to increasing overall numbers of people becoming infected, rather than a result of specific infection with Omicron. There is currently no information to suggest that symptoms associated with Omicron are different from those from other variants. Initial reported infections were among university students—younger individuals who tend to have more mild disease—but understanding the level of severity of the Omicron variant will take days to several weeks. All variants of COVID-19, including the Delta variant that is dominant worldwide, can cause severe disease or death, in particular for the most vulnerable people, and thus prevention is always key.

Effectiveness of prior SARS-CoV-2 infection

Preliminary evidence suggests there may be an increased risk of reinfection with Omicron (ie, people who have previously had COVID-19 could become reinfected more easily with Omicron), as compared to other variants of concern, but information is limited. More information on this will become available in the coming days and weeks.

Effectiveness of vaccines: WHO is working with technical partners to understand the potential impact of this variant on our existing countermeasures, including vaccines. Vaccines remain critical to reducing severe disease and death, including against the dominant circulating variant, Delta. Current vaccines remain effective against severe disease and death.

Effectiveness of current tests: The widely used PCR tests continue to detect infection, including infection with Omicron, as we have seen with other variants as well. Studies are ongoing to determine whether there is any impact on other types of tests, including rapid antigen detection tests.

Effectiveness of current treatments: Corticosteroids and IL6 Receptor Blockers will still be effective for managing patients with severe COVID-19. Other treatments will be assessed to see if they are still as effective given the changes to parts of the virus in the Omicron variant.

Studies underway

At the present time, WHO is coordinating with a large number of researchers around the world to better understand Omicron. Studies currently underway or underway shortly include assessments of transmissibility, severity of infection (including symptoms), performance of vaccines and diagnostic tests, and effectiveness of treatments.

WHO encourages countries to contribute the collection and sharing of hospitalized patient data through the [WHO COVID-19 Clinical Data Platform](#) to rapidly describe clinical characteristics and patient outcomes.

More information will emerge in the coming days and weeks. WHO's TAG-VE will continue to monitor and evaluate the data as it becomes available and assess how mutations in Omicron alter the behaviour of the virus.

Recommended actions for countries

As Omicron has been designated a Variant of Concern, there are several actions WHO recommends countries to undertake, including enhancing surveillance and sequencing of cases; sharing genome sequences on publicly available databases, such as GISAID; reporting initial cases or clusters to WHO;

performing field investigations and laboratory assessments to better understand if Omicron has different transmission or disease characteristics, or impacts effectiveness of vaccines, therapeutics, diagnostics or public health and social measures. More detail in the [announcement](#) from 26 November.

Countries should continue to implement the effective public health measures to reduce COVID-19 circulation overall, using a risk analysis and science-based approach. They should increase some public health and medical capacities to manage an increase in cases. WHO is providing countries with support and guidance for both readiness and response.

In addition, it is vitally important that inequities in access to COVID-19 vaccines are urgently addressed to ensure that vulnerable groups everywhere, including health workers and older persons, receive their first and second doses, alongside equitable access to treatment and diagnostics.

Recommended actions for people

The most effective steps individuals can take to reduce the spread of the COVID-19 virus is to keep a physical distance of at least 1 metre from others; wear a well-fitting mask; open windows to improve ventilation; avoid poorly ventilated or crowded spaces; keep hands clean; cough or sneeze into a bent elbow or tissue; and get vaccinated when it's their turn.

WHO will continue to provide updates as more information becomes available, including following meetings of the TAG-VE. In addition, information will be available on WHO's digital and social media platforms.

Reference material:

- [Classification of Omicron \(B.1.1.529\): SARS-CoV-2 Variant of Concern](#)
- [Further information on TAG-VE](#)

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EXHIBIT 25



Post-COVID Conditions


Updated Sept. 16, 2021

This information is intended for a general audience. Healthcare providers should see the [Post-COVID Conditions: Information for Healthcare Providers](#) webpage and the interim guidance on evaluating and caring for patients with post-COVID conditions for more detailed information.

Overview

Although most people with COVID-19 get better within weeks of illness, some people experience post-COVID conditions. Post-COVID conditions are a wide range of new, returning, or ongoing health problems people can experience four or more weeks after first being infected with the virus that causes COVID-19. Even people who did not have COVID-19 symptoms in the days or weeks after they were infected can have post-COVID conditions. These conditions can present as different types and combinations of health problems for different lengths of time.

These post-COVID conditions may also be known as long COVID, long-haul COVID, post-acute COVID-19, long-term effects of COVID, or chronic COVID. CDC and experts around the world are working to learn more about short- and long-term health effects associated with COVID-19, who gets them, and why.

As of July 2021, “long COVID,” also known as post-COVID conditions, can be considered a disability under the Americans with Disabilities Act (ADA). Learn more: [Guidance on “Long COVID” as a Disability Under the ADA, Section | HHS.gov](#) 

Types of Post-COVID Conditions

New or Ongoing Symptoms

Some people experience a range of new or ongoing symptoms that can last weeks or months after first being infected with the virus that causes COVID-19. Unlike some of the other types of post-COVID conditions that tend only to occur in people who have had severe illness, these symptoms can happen to anyone who has had COVID-19, even if the illness was mild, or if they had no initial symptoms. People commonly report experiencing different combinations of the following symptoms:

- Difficulty breathing or shortness of breath
- Tiredness or fatigue

- Symptoms that get worse after physical or mental activities (also known as post-exertional malaise)
- Difficulty thinking or concentrating (sometimes referred to as “brain fog”)
- Cough
- Chest or stomach pain
- Headache
- Fast-beating or pounding heart (also known as heart palpitations)
- Joint or muscle pain
- Pins-and-needles feeling
- Diarrhea
- Sleep problems
- Fever
- Dizziness on standing (lightheadedness)
- Rash
- Mood changes
- Change in smell or taste
- Changes in menstrual period cycles

Multiorgan Effects of COVID-19

Some people who had severe illness with COVID-19 experience multiorgan effects or autoimmune conditions over a longer time with symptoms lasting weeks or months after COVID-19 illness. Multiorgan effects can affect many, if not all, body systems, including heart, lung, kidney, skin, and brain functions. Autoimmune conditions happen when your immune system attacks healthy cells in your body by mistake, causing inflammation (swelling) or tissue damage in the affected parts of the body.

While it is very rare, some people, mostly children, experience multisystem inflammatory syndrome (MIS) during or

COVID-19

Effects of COVID-19 Illness or Hospitalization

Hospitalizations and severe illnesses for lung-related diseases, including COVID-19, can cause health effects like severe weakness and exhaustion during the recovery period.


Effects of hospitalization can also include post-intensive care syndrome (PICS), which refers to health effects that begin when a person is in an intensive care unit (ICU) and can remain after a person returns home. These effects can include severe weakness, problems with thinking and judgment, and post-traumatic stress disorder (PTSD). PTSD involves long-term reactions to a very stressful event.

Some symptoms that can occur after hospitalization are similar to some of the symptoms that people with initially mild or no symptoms may experience many weeks after COVID-19. It can be difficult to know whether they are caused by the effects of hospitalization, the long-term effects of the virus, or a combination of both. These conditions might also be complicated by other effects related to the COVID-19 pandemic, including mental health effects from isolation, negative economic situations, and lack of access to healthcare for managing underlying conditions. These factors have affected both people who have experienced COVID-19 and those who have not.

Children and Adolescents

A person of any age who has had COVID-19 can later develop a post-COVID condition. Although post-COVID conditions appear to be less common in children and adolescents than in adults, long-term effects after COVID-19 do occur in children and adolescents. Studies have reported long-term symptoms in children with both mild and severe COVID-19, including children who previously had multisystem inflammatory syndrome in children. Similar to the symptoms seen in adults, the most common symptoms reported have been tiredness or fatigue, headache, trouble sleeping (insomnia), trouble concentrating, muscle and joint pain, and cough. Young children may have trouble describing the problems they are experiencing; information on post-COVID conditions in children and adolescents is limited. It is possible that other symptoms may be likely in younger age groups.

If your child has a post-COVID condition that impacts their ability to attend school, complete schoolwork, or perform their usual activities, it may be helpful to discuss with your child's school possible accommodations such as extra time on tests, scheduled rest periods throughout the day, a modified class schedule, etc. School administrators, school counselors, and school nurses can work with families and healthcare professionals to provide learning accommodations for children with post-COVID conditions, particularly those experiencing thinking, concentrating, or physical difficulties. You may also request similar accommodations for activities outside of school, such as day care, tutoring, sports, scouting, etc.

For more information, visit the U.S. Department of Education's Office for Civil Rights (OCR) and the Office of Special Education and Rehabilitative Services (OSERS)'s Resource to Support Children, Students, Educators, Schools, Service Providers, and Families. 

Prevention

The best way to prevent post-COVID conditions is to prevent COVID-19 illness. For people who are eligible, getting vaccinated against COVID-19 as soon as you can is the best way to prevent getting COVID-19 and can also help protect those around you.

Stopping a pandemic takes all the tools in our toolbox:

Important Ways to Slow the Spread of COVID-19

- Get a COVID-19 vaccine as soon as you can. Find a vaccine.
- Wear a mask that covers your nose and mouth to help protect yourself and others.
- Stay 6 feet apart from others who don't live with you.
- Avoid crowds and poorly ventilated indoor spaces.
- Wash your hands often with soap and water. Use hand sanitizer if soap and water aren't available.

If you are NOT yet fully vaccinated, prevent long-term complications by protecting yourself and others from COVID-19.

Although media articles have reported that some people with post-COVID conditions say their symptoms improved after being vaccinated, studies are needed to determine the effects of vaccination on post-COVID conditions.

What CDC is Doing

CDC continues to work to identify how common post-COVID conditions are, who is most likely to get them, and why some symptoms eventually improve for some people and may last longer for other people. Rapid and multi-year studies are underway to further investigate post-COVID conditions in more detail. These studies will help us better understand post-COVID conditions and how to treat patients with these longer-term effects.

Supporting People with Post-COVID Conditions

For information on supporting people with a post-COVID condition, see the [Caring for People with Post-COVID Conditions](#) webpage.

Last Updated Sept. 16, 2021