



# Candidate & Legislator Survey

Please email your completed survey to attention: Hannah at [hello@healthrightsMA.org](mailto:hello@healthrightsMA.org)

Name: \_\_\_\_\_

The elected office you hold or are running for (e.g., MA Senate, Dist. 4): \_\_\_\_\_

**1. On a scale from 1-5 (where 1 is lowest and 5 is highest) how important is the issue of health freedom to you?**

1            2            3            4            5

Comment:

**2. Would you support legislation that protects individuals against government-imposed vaccine mandates?**

Yes            No            Not Sure

Comment:

**3. Would you support legislation that protects individuals against vaccine mandates imposed by private entities such as employers, colleges and businesses?**

Yes            No            Not Sure

Comment:

**4. Would you protect parents' rights to choose whether to vaccinate their children?**

Yes            No            Not Sure

Comment:

**5. Under U.S. law, vaccine manufacturers are not liable for injury or death from any of the vaccines currently on the childhood schedule as well as the COVID-19 vaccine. Would you support legislation that would protect the people of Massachusetts from the mandating of any liability-free products as a condition of employment or for a public or private education?**

Yes            No            Not Sure

Comment:

**6. Should the Congress pass legislation that reinstates liability for vaccine manufacturers for harm caused by vaccines in order to protect consumers from potentially devastating financial loss due to vaccine-caused injuries, including death?**

Yes            No            Not Sure

Comment:

Continued on next page.



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**7. Would you support legislation that prohibits vaccine passports and other similar mechanisms for tracking individuals' health status?**

Yes                  No                  Not Sure

Comment:

**8. Should segregation or discrimination based on vaccination status and denial of medical services based on vaccine status be punishable offenses?**

Yes                  No                  Not Sure

Comment:

**9. Would you be willing to schedule a meeting with a small group of voters to discuss this issue?**

Yes                  No                  Not Sure

Comment:

**10. Please provide any other thoughts you might have on the issue of health freedom that you wish to share with voters:**

**THANK YOU FOR COMPLETING OUR SURVEY!**