

Evaluation Form from  Health Freedom Party.org Date _____

Representative _____ Location _____

What are your legislative actions and commitment.....

1. To eliminate pharmaceutical advertising in the mass media?

2. To protect and promote medical freedom, medical choice, and medical privacy of the Individual?

3. To remove corporate money from political elections and fund elections through governmental funding?

4. To eliminate corporate control of agriculture and protect organic farming from chemical and genetically modified crops?

5. To reduce electromagnetic radiation in the environment, and enact the Precautionary Principle to protect health, biological exposure, and environment?

6. To fund the reactivation of the Office of Technology Assessment?

7. With detailed plans to create a Department of Health Alternatives and Nutrition?

8. To eliminate and disarm biological weapons, chemical weapons, radiation weapons, and nuclear weapons here and abroad?

9. To protect and promote informed consent?

This information is shared with our membership to ensure support for your candidacy and re-election. Thank you for your participation. Please sign and add pages as necessary.

Signed _____ Date _____