

PUC

AUGUST 14, 2017

CERTIFIED MAIL # 70171450 000222515655

PENNSYLVANIA OFFICE OF CONSUMER ADVOCATE
555 WALNUT ST
5TH FLOOR FORUM PLACE
HARRISBURG PA 17101-1923

We are writing to ask your help regarding the smart meter roll-out that is coming to our community very shortly. Smart meters have been found to emit high gigahertz of EMF and radio frequencies, so much so that they are detrimental to one's health. Gerard is very ill and we have informed the PUC and Duquesne Light Company that installing a smart meter will worsen his already bad health and likely kill him.

WE HAVE FILED A FORMAL COMPLAINT WITH THE PA PUBLIC UTILITY COMMISSION AND OUR ELECTRIC COMPANY, DUQUESNE LIGHT COMPANY IN PITTSBURGH PA, REGARDING FUTURE INSTALLATION OF THE SMART METER AT OUR PREMISES.

As you may be aware, the PUC has claimed there was no opt-out provision in Act 129....which was written, voted upon, and signed into law. No opt-out was needed..it was an OPT-IN bill that the PA PUC REWROTE during their regulations and implementation writing exercises.. (HB2200/#2807(f)7(2)(i)(ii)(iii). THEREFORE, THE OPT-IN LEGISLATION STANDS FIRM AND LEGAL BY ITSELF....and we also stand firm in our CHOICE of not wanting a smart meter..."UPON REQUEST FROM A CUSTOMER THAT AGREES TO PAY THE COST OF THE SMART METER AT THE TIME OF THE REQUEST". We made NO request for a smart meter. We have NOT opted in.

One must opt-in first, in order to opt-out, are we not correct?

In addition, we find it strange that Consumer Affairs Committee Chairman Godshall has been deliberately and actively preventing smart meter legislation and Opt-out, Opt-in bills, from being called to the floor for SIX CONSECUTIVE YEARS. WHY IS THAT? He is the very person responsible for taking away CHOICE from Pennsylvanians.

Shouldn't the PA Governor, Attorney General, Consumer Advocate Office and the PA PUC all be proactively taking a stand For The People against Godshall and demanding the right of CHOICE for Pennsylvanians, which has been dogmatically usurped and deprived? Were you not elected by those who are being usurped and deprived? ACTION is needed, and it is needed now.

Smart Meters are known to emit non-thermal radiation EMF/RF waves, and have been documented scientifically to damage human health in various and sundry ways. There have been numerous studies showing the hazards of smart meters (see attached declaration of Dr. David O. Carpenter, MD.)

We had requested the PA PUC and DLC to submit, under penalty of perjury, a SIGNED declaration stating smart meters are safe, as DLC sent us questionnaire and absent information regarding smart meter safety when we requested it. Well...NEITHER agency addressed our request. It was IGNORED.

That tells us that neither agency wants to be held accountable for making and signing a false statement, only further confirming to us, the hazards of smart meters! We must ask if you would feel comfortable putting a smart meter right outside your bedroom wall to received 30 billion gigahertz of pulsing radiation shot at your head every 15 seconds? People are getting brain tumors from smart meters. Is there no concern for our children and

their present and future health we wonder?

Gerard does not need one more additional thing to harm his already failing health.

Gerard Kurzawski, who is 81 years old, became handicapped in 1978, and is covered and protected by the laws of the ADA, Americans with Disabilities Act.....and Duquesne Light Company and the PUC MUST accommodate our request to back off of this push to install a smart meter. I have contacted Duquesne Light but our request has fallen on deaf ears. Duquesne Light has received federal or state or both, grant monies, to implement its smart meter roll-out program, and the LAW states that any business that accepts grant money is mandated to abide by the ADA, including state regulatory agencies like the PA PUC. WE ARE PROTECTED BY THE ADA and ASKING BOTH DLC AND THE PUC TO BE ACCOMMODATED ACCORDING TO THE LAW. (Act 129, HB2200).

Our CHOICE.....to NOT receive a Smart Meter. We are NOT Opting into the program.

Gerard has numerous medical issues which compromise his health which his doctors can attest to, such as:

1. Kidney Failure/Disease, currently on Dialysis at Fresenius 3 times a week;
 2. Liver Disease (Hepatitis C)
 3. Diabetes
 4. Hypothyroidism
 5. Gallbladder and Toenail Removal
 6. Rheumtoid Arthritis
 7. 4 incidents of TIA's (transient ischemic attacks) Mini Strokes
8. Two Hip Replacements (Gerard fell twice on Aug 1st, 2017, two weeks ago, and fractured his pelvis and bones around the right hip socket and is currently in a nursing home for rehabilitation.
9. FUSED right knee due to streptococcal infection settling in his knee joint and body rejecting a steel rod which had to be removed, back in 1978.
10. DEPRESSION.

Gerard lost 50 pounds in the last 6 months and now weighs 135 pounds. He is 6'1" tall. He is 81 years old and a mere shadow of his old self.

Gerard does not need any further issues caused by Smart Meters compromising his life. We have a human and innate right to protect our health, body, and property.....it is also our Constitutional Right. No one has the right to force something upon us that has been proven harmful, unsafe, and life threatening to our health and well being.

We sincerely request that the Office of Consumer Advocate, the Governor of Pennsylvania, and the Attorney General, proactively make an effort to do more for their constituents and all of the people of Pennsylvania by acting to get House Bill No.1564 adopted and made into law...especially for people like Gerard.

Sincerely,

Gerard Kurzawski
Gerard and Joyce Kurzawski
500 Sunnyland Avenue
Pittsburgh PA 15227

Attachment: Declaration of Dr. David O. Carpenter, MD

7 CERT. # 70171450000222515648
cc: J Shapiro, Office of Atty General
Tom Wolfe, PA Governor
CERT. # 70171450000222515631

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Portland Division

Alexandra Helene Morrison, by and through
her Guardian *ad litem* and father,
David Mark Morrison, and
David Mark Morrison, individually,

v.

Portland Public Schools,
Defendant.

Civil Action No.

Declaration of
Dr. David O. Carpenter, M.D.

I, Dr. David O. Carpenter, M.D., under penalty of perjury pursuant to 28 U.S.C. § 1746, hereby make the following declaration in support of a preliminary and permanent injunction enjoining Portland Public Schools' use of WI-FI:

1. I am a public health physician, educated at Harvard Medical School. My current title is Director of the Institute for Health and the Environment at the University at Albany and Professor of Environmental Health Sciences within the School of Public Health. Formerly, I was the Dean of the School of Public Health at the University of Albany and the Director of the Wadsworth Center for Laboratories and Research of the New York State Department of Health.

2. I served as the Executive Secretary to the New York State Powerlines Project in the 1980s, a program of research that showed children living in homes with elevated magnetic fields coming from powerlines suffered from an elevated risk of developing leukemia. After this I became the spokesperson on electromagnetic field (EMF) issues for the state during the time of my employment in the Department of Health. I have published several reviews on the subject and have edited two books.

3. I am a Co-Editor and a Contributing Author of the *BioInitiative: A Rationale for a Biologically-based Public Exposure Standard for Electromagnetic Fields (ELF and RF)*, www.bioinitiative.org. It documents bioeffects, adverse health effects and public health conclusions about impacts of non-ionizing radiation (electromagnetic fields including extremely-low frequency ELF-EMF and radiofrequency (RF) /microwave or RF-EMF fields). The public health chapter from this report was subsequently published in a peer reviewed journal.

4. Additionally, I am a Co-Author of *Setting Prudent Public Health Policy for Electromagnetic Field Exposures*, *Reviews on Environmental Health*, Volume 23, No. 2, 2008, attached as Addendum A-2.

5. In addition, in 2009, I was invited to present to the President's Cancer Panel on the subject of powerline and radiofrequency fields and cancer, and have testified on this issue before the United States House of Representatives.

6. I am a public health physician who has been involved in issues related to EMF for a number of years.

7. It is generally accepted within the relevant scientific community and has been established beyond any reasonable doubt that many bioeffects and adverse health effects occur at far lower levels of RF exposure than those that cause measurable heating; some effects are shown to occur at several hundred thousand times below the existing public safety limits, which are set based on the fallacious assumption that there are no adverse health effects at exposures that do not cause easily measureable heating.

8. Exposure to EMF has been linked to a variety of adverse health outcomes. The health endpoints that have been reported to be associated with ELF and/or RF include childhood leukemia, adult brain tumors, childhood brain tumors, genotoxic effects (DNA damage and micronucleation), neurological effects and neurodegenerative disease (like ALS and Alzheimer's), immune system dysregulation, allergic and inflammatory responses, breast cancer in men and women, miscarriage and some cardiovascular effects. The strongest evidence for adverse health effects of EMFs comes from associations observed in human populations with two forms of cancer: childhood leukemia and chronic lymphocytic leukemia in occupationally exposed adults.

9. There is also strong evidence for elevated risk of brain cancer following long use of cell phones, but only on the side of the head where the cell phone is used regularly.

10. There is suggestive to strongly suggestive evidence that RF exposures may cause changes in cell membrane function, cell communication, metabolism, activation of proto-oncogenes, and can trigger the production of stress proteins at exposure levels below current regulatory limits. Resulting effects can include DNA breaks and chromosome aberrations, cell death including death of brain neurons, increased free radical production, activation of the endogenous opioid system, cell stress and premature aging, changes in brain function including memory loss, retarded learning, performance impairment in children, headaches and fatigue, sleep disorders, neurodegenerative conditions, changes in immune function (allergic and inflammatory responses), reduction in melatonin secretion and cancers.

11. There is also strong and consistent evidence for increased risk of leukemia in individuals who live near to high power AM radio transmission towers. This is particularly relevant because like WI-FI, radio transmission towers give continuous whole body radiation, not just to the head. In addition WI-FI transmitters are indoors, where children may be very close to them.

12. Like second-hand smoke, EMF is a complex mixture, where different frequencies, intensities, durations of exposure(s), modulation, waveform and other factors are known to produce variable effects. *Many years of scientific study has produced substantial evidence that EMF may be considered both carcinogenic and neurotoxic.*

13. Sources of concern include, but are not limited to, power lines, cell and cordless phones, cell towers, Portland Public Schools' WI-FI, WiMax and wireless internet.

14. Based on existing science, many public health experts believe, myself included, that it is possible we will face an epidemic of cancers in the future resulting from uncontrolled use of cell phones and increased population exposure to WI-FI and other wireless devices. Thus it is important that all of us, and especially children, restrict our use of cell phones, and limit exposure to background levels of WI-FI.

15. Children are more vulnerable to RF fields because of the susceptibility of their developing nervous systems. RF penetration is greater relative to head size in children, and they have a greater absorption of RF energy in the tissues of the head at WI-FI frequencies because their skulls area thinner, their brains are smaller, and their brain tissue is more conductive than that of adults since it has a higher water content and ion concentrations. The Presidential Cancer Panel found that children 'are at special risk due to their smaller body mass and rapid physical development, both of which magnify their vulnerability to known carcinogens, including radiation.'

16. The exposure of children to RF has not been studied extensively, although one study from Sweden reports that regular use of a cell phone by children increases risk of development of brain cancer by a factor five times greater than that observed in adults. However, the FCC standards for exposure to radiofrequency radiation are based on the height, weight and stature of a 6-foot tall man, not scaled to children or adults of smaller stature. They do not take into account the unique susceptibility of growing children to exposures. Moreover, there is clear and strong evidence that intensive use of cell phones increases the risk of brain cancer, tumors of the auditory nerve, and cancer of the parotid gland, the salivary gland in the cheek by the ear. WIFI uses similar radiofrequency radiation (1.8-2.5 to 5.0 GHz), although the intensity of exposure in the immediate environment is much lower than what one gets from holding a cell phone close to their head. The difference between a cell phone and a WI-FI environment, however, is that while the cell phone is used only intermittently a WI-FI environment is continuous. In addition WI-FI transmitters are indoors, where children may be very close to them. Because radiation is the same as those for cell phones, there is every reason to assume that the health effects would be the same, varying only in relation to the total dose of radiation. There is evidence from Scandinavian studies of cell phone usage that children who use cell phones are about five times more likely to develop brain cancer than if use starts as an adult. Thus, it is especially important to protect children.

17. There is reason to believe that children are susceptible to the effects of EMF exposure since they are growing, their rate of cellular activity and division is more rapid, and are at more risk for DNA damage and subsequent cancers. Growth and development of the central nervous system is still occurring well into the teenage years so that neurological changes may be of great importance to normal development, cognition, learning, and behavior. Prenatal exposure to EMF has been identified as a risk factor for childhood leukemia. Children are largely unable to remove themselves from exposures to harmful substances in their environments. Their

exposure is involuntary.

18. When WI-FI is installed in a school, children and their parents have no choice but to allow the school to expose themselves/their children. In fact, the children will be exposed to as much as 30-40 hours per week of constant digitally encoded WI-FI signals from each wireless device in the child's vicinity. Based upon a review of the Mount Tabor WI-FI Floor Plan, a given child is subject to direct signals from multiple WI-FI transmitters and rooms full of students transmitting numerous laptop or other wireless signals. There is a major difference between an exposure that an individual chooses to accept and one that is forced on an individual who can do nothing about it, especially a child.

19. In biology and medicine there is nothing that is 100 percent proven. We rely on statistical significance and weight of evidence when drawing conclusions about health effects. When one uses these definitions there is strong scientific evidence for adverse health effects of WI-FI in humans.

20. The evidence for adverse effects of radiofrequency radiation is currently strong (beyond just a known controversy) and grows stronger with each new study. Educating by way of the internet via cabled systems does not increase exposure.

21. Based on a high degree of medical certainty, Portland Public Schools' use of WI-FI is causing and will continue to cause Alexandra Morrison, other students, and school staff and faculty adverse health effects and should be discontinued immediately.

Dated this 1st day of June, 2011.

/s/ David O. Carpenter, M.D.

DR. DAVID O. CARPENTER, M.D.
Director, Institute for Health and the Environment
University at Albany