Exhibit F

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

| WHOLE WOMAN'S HEALTH, et al., | |
|-------------------------------|------------------|
| Plaintiffs, | |
| v. | Civil Action No. |
| AUSTIN REEVE JACKSON, et al., | |
| Defendants. | |

DECLARATION OF MELANEY A. LINTON IN SUPPORT OF PLAINTIFFS' MOTION FOR SUMMARY JUDGMENT

I, Melaney A. Linton, declare as follows:

- 1. I am over the age of 18. I make this declaration based on personal knowledge of the matters stated herein and on information known or reasonably available to my organization. If called to do so, I am competent to testify as to the matters contained herein.
- 2. I am President and CEO of Planned Parenthood Gulf Coast, Inc. ("PPGC"). PPGC is a Texas not-for-profit corporation headquartered in Houston. We operate six health centers in the Houston Metropolitan area that provide a range of family planning services and other preventative care, including physical exams, contraception and contraceptive counseling, screening for breast cancer, screening and treatment for cervical cancer, screening and treatment for sexually transmitted infections, pregnancy testing and counseling, and certain procedures, including biopsies and colposcopies. In addition to those centers, PPGC has a facilities and services agreement with a separate organization, Planned Parenthood Center for Choice, Inc. ("PPCFC"), which provides abortion services at two health centers, and of which I am also the President and CEO. PPCFC is also a Texas not-for-profit corporation that is headquartered in Houston. It operates a licensed ambulatory surgical center ("ASC") in Houston and a licensed

abortion facility in Stafford. PPCFC and its predecessor organizations have provided abortion in Houston and southeast Texas since 1973.

- 3. I am responsible for the management of these organizations and therefore am familiar with our operations and finances, including the services we provide and the communities we serve.
- 4. I submit this declaration in support of Plaintiffs' Motion for Summary Judgment. I understand that Texas Senate Bill 8 ("S.B. 8" or the "Act") would ban the provision of abortion in Texas after embryonic cardiac activity can be detected, which occurs at approximately 6 weeks of pregnancy, as measured from the first day of a patient's last menstrual period ("LMP"). Without relief from the Court, we will be legally prohibited from providing abortions after approximately 6 weeks of pregnancy at our health centers on September 1, 2021, the Act's effective date.
- 5. The Act will make it virtually impossible to access abortion in Texas by banning abortion at a point in pregnancy before many patients even realize they are pregnant. Patients who can pull together the resources will be forced to travel out of state for medical care, and many others who cannot do so will be forced to carry a pregnancy to term against their will or seek ways to end their pregnancies on their own.

PPCFC and Its Services

6. As noted above, PPCFC provides abortion, as well as miscarriage management and contraception to patients. PPCFC's Houston ASC offers medication abortion through 10 weeks LMP and procedural abortion through 21 weeks 6 days LMP; the Stafford abortion facility offers medication abortion through 10 weeks LMP.

- 7. PPCFC's staff who are involved in the provision of abortions include physicians and physician assistants licensed by the Texas Medical Board, nurses licensed by the Texas Nursing Board, and pharmacists licensed by the Texas Pharmacy Board.
- 8. While most patients obtain an abortion as soon as they are able, most patients are at least 6 weeks LMP into their pregnancy by the time they come in for an abortion. In 2019, approximately 92% of abortions that PPCFC provided were at 6 weeks LMP or later. This means only 8% of 2019 PPCFC patients would have likely qualified for an abortion under the Act, although for some, there may have been embryonic cardiac activity at the time of the abortion.
- 9. The vast majority of patients who do not reach us until after 6 weeks likely do not for a variety of reasons, including that they may not have learned they are pregnant until after 6 weeks. Given that fact, and the travel-related and financial barriers that many of our patients face, we are certain that the vast majority could not obtain abortions before 6 weeks LMP.

Effects of S.B. 8's Abortion Ban

- 10. I understand that S.B. 8 exposes PPCFC and its doctors, nurses, and other staff members to substantial liability for providing or assisting abortion prohibited by the law and requires courts to enjoin violations.
- 11. As a result, S.B. 8 will force us to shut down abortion services after embryonic cardiac activity is detected—at approximately 6 weeks of pregnancy. PPCFC and its physicians and staff simply cannot risk the civil liability, damages, and certain cost of litigation that S.B. 8 will impose.
- 12. We understand that even if we risked liability, a court could order us to stop providing abortions, even while we are defending against these lawsuits.

- 13. Given the strong anti-abortion sentiments held by some Texans and others outside of Texas, I am certain lawsuits under S.B. 8 will be filed against us if we provide abortions in violation of S.B. 8. Indeed, opponents of abortion rights have subjected us to harassment and false complaints even when we have complied fully with our legal obligations. We nearly always have protestors outside our health centers, monitoring who enters and exits the building. They have made complaints to government officials based on completely unfounded allegations. By way of example, a few years ago, a protestor called local law enforcement falsely alleging that we had performed an abortion after the state's legal gestational age limit, which currently is 21 weeks and 6 days LMP (but will be around 6 weeks LMP after S.B. 8 takes effect). Authorities then opened a criminal homicide investigation, which included grand jury proceedings. Although the investigation was ultimately completed with no findings of any wrongdoing (because, of course, we did not do what the protestor alleged we did), we nevertheless had to divert time and resources to comply with the baseless investigation.
- 14. As another example, after a secretly recorded video alleging that we participated in unlawful tissue donation practices appeared online, we were investigated by multiple federal, state, and local government officials. No government entity has found us guilty of any crime and the allegations have been widely discredited; in fact, a Houston grand jury cleared us, and instead, indicted the filmmakers (though those charges were dismissed on procedural grounds). Nevertheless, the resulting investigations were very distressing for staff and costly to the organization. We thus expect complaints and lawsuits filed against us and the staff if we provide abortions, including permitted abortions, after September 1.
- 15. The costs of defending against what could be a flood of lawsuits in every county in Texas would be impossible for us to absorb, even if we were to win each case.

- 16. If we are forced to shut down abortion services, PPCFC and our patients will be seriously harmed. Indeed, even the prospect of S.B. 8 taking effect has already had an effect on staff, who are understandably very concerned about the impact of S.B. 8 on them and their livelihoods. No one should be forced to risk overwhelming costs of litigation and crushing penalties to provide safe and common health care. No one should be subject to state-directed harassment for caring for patients in need.
- 17. Our staff already deal with relentless harassment from abortion opponents, including as they come into work each day. We have had to endure protestors trespassing; conducting drone surveillance; blocking roads, driveways, and entrances; yelling at staff and patients; using illegal sound amplification; video recording staff, staff vehicles, and license plates, as well as surreptitiously recording inside the health center; trying to follow staff home; and more. And after the discredited video about our tissue donation practices was released, multiple staff received death threats. As a result of these threats, and the increasing volume of threats and harassment to abortion providers more broadly—and the increasing severity of threats (including homicide)¹—we have had to expend more resources ensuring our health centers and staff and patients remain safe.
- 18. Despite the harassment, our dedicated staff return to work because they are committed to Planned Parenthood's mission of providing comprehensive reproductive health care services. They have devoted their lives and careers to serving and advocating for their patients.

 S.B. 8 will prevent PPCFC and our staff from fulfilling our mission.

¹ See Nat'l Abortion Fed., 2019 Violence and Disruption Statistics (July 30, 2020), available at https://5aa1b2xfmfh2e2mk03kk8rsx-wpengine.netdna-ssl.com/wp-content/uploads/NAF-2019-Violence-and-Disruption-Stats-Final.pdf; Julie Turkewitz & Jack Healy, 3 Are Dead in Colorado Springs Shootout at Planned Parenthood Center, N.Y. Times (Nov. 27, 2015), https://www.nytimes.com/2015/11/28/us/colorado-planned-parenthood-shooting.html.

- 19. Even staff who have no direct role in abortion services are worried about being named in harassing lawsuits.
- 20. S.B. 8 is already taking a negative toll on our ability to recruit new staff. PPCFC has already had two prospective staff members decline job offers specifically because of fear of S.B. 8.
- 21. In addition to its devastating impact on PPCFC, S.B. 8 will seriously harm our patients. The Act will deprive them of access to safe and legal abortion, forcing those who can to travel hundreds of miles out of state, which will delay their care and increase costs. Many others will be prevented from accessing abortion altogether, because the travel and costs are simply too great.
- 22. These effects will fall most heavily on patients who already face barriers to accessing health care, including our patients with low incomes.
- 23. We know that these patients will face very high barriers to accessing care elsewhere. In fact, after the Texas governor banned abortion by executive order during the early days of the pandemic, we know some of our patients were not able to get an abortion and were forced to carry their pregnancies to term and give birth. Some were able to go out of state to get care, as far away as Colorado and Georgia. Executive Order No. GA-09; *In re Abbott*, 954 F.3d 772 (5th Cir. 2020), *cert. granted, judgment vacated as moot by Planned Parenthood Ctr. for Choice v. Abbott*, 141 S. Ct. 1261 (2021) (mem.).
- 24. Scrambling to get our patients care still haunts me and our staff. We had to cancel and reschedule and cancel appointments again due to the various court orders, and telling patients that they could not obtain an abortion was very difficult for the staff. And while our staff worked tirelessly to try to help patients access care elsewhere, they were crushed when so many of our

patients reported that, even with financial and logistical support, there was simply no way they would be able to travel out of the state. We had several staff who heard from patients that if they could not be seen by us, they would self-induce using pills from flea markets or household chemicals, like bleach. Hearing this was extremely distressing for the staff.

25. I believe S.B. 8 will deprive PPCFC's patients of access to critical health care and will threaten their health, safety, and lives.

The Impact of S.B. 8's Fee-Shifting Provisions

- 26. I understand that S.B. 8 also makes parties and their attorneys liable to pay defendants' costs and attorney's fees in cases challenging Texas laws that restrict or regulate abortion, or that provide public funding to entities that perform abortion or promote abortion access.
- 27. PPCFC is regularly forced to bring court challenges to restrictions on abortion or laws targeting abortion providers in Texas. Litigation is critical to fulfilling our mission to protect and expand access to comprehensive reproductive and sexual health care, including abortion, in Texas.
- 28. S.B. 8's fee-shifting provision will make it extremely difficult for us to continue to protect our patients' constitutional rights because nearly every case carries the significant risk that we and our attorneys could be held liable for attorney's fees and costs, which in turn will make it more difficult for us to retain legal counsel when we need it.
- 29. I am also concerned that S.B. 8 will force us and our attorneys to weigh the possibility of huge legal bills against the claims we might bring. We will be forced to risk those penalties to defend our rights and those of our patients, even though government officials and other

individuals trying to restrict abortion—or ban it outright—would face no similar consequence under S.B. 8.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed on July <u>/2th</u>, 2021, in <u>//ouston</u>, Texas.

Melaney A. Linton