

to Kristine Shaw Esq

Informations - 2019-11-26

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DATE 12/28/12 **RECEIPT** **641598**

RECEIVED FROM Bonzeanne Blayk

ADDRESS 1668 Trumansburg Rd., Ithaca 14850

Four Hundred DOLLARS \$ 400.00

FOR Account of Bad Trip Records - A

Division of Databeast, Inc.

Luke Z. Fenchel, Esq.

ACCOUNT		HOW PAID	
BEGINNING BALANCE		CASH	
AMOUNT PAID		<u>CHECK</u>	<u>400.00</u>
BALANCE DUE		MONEY ORDER	

BY Dani S. Haring

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Substantiation of my claim in submitting Informations to the Court and prosecution ca. 7/12/19 that Judge Miller's signature on a check from me for \$400 as President of BAD TRIP RECORDS did not constitute evidence of a prior relationship which might be held to imply a Conflict of Interest on his part.

- Bonze Blayk - 11/26/19



"IQ tested to 160" — Tara Belsare MD — 5/10/2002
 "Brother, you asked for it!" — Signed, Francisco d'Anconia"
 — ATLAS SHRUGGED
 ... see page 3 of 8
 — Bronze Blayk — 11/26/19
 Network Systems Programmer/Analyst
 — Cornell University — DATA BEAST INC.

Offered by my mother → Jim exposed to: Baker 2/25
→ Ezra Sherman 2/25
→ my brother Mide 3/7

bonze blayk's Nervous System

bonze's Neurological Problems

CIDP (Chronic Immune Demyelinating Polyneuropathy): The immune system is primed by a virus whose structure resembles myelin to attack the myelin sheath which provides an electrical insulator for the nerves. My symptoms include worsening of motor control, symmetric creeping paresthesia, and weakness in the limbs proceeding from the extremities. I believe that I fall in the minority whose symptoms includes inflammation of the nerves; note my experience with having no bad ankle sprains for 20 years while using *cannabis*, and then experiencing a terrible inflammation with a minor twist of my ankle after several months not smoking (7/94), which almost immobilized me and did not return to normal for a year or so. The inflammation explains why my behavior is so dramatically affected when I suffer a CIDP outbreak.

Those with a high-set immune system will be particularly troubled by this disorder. Until extended treatment undertaken at the age of 15, I was plagued by allergies, particularly to dust, to the extent that I had a chronically drippy nose. I breathed through my mouth through almost all of these years.

My father died of a stroke caused by this disorder at the age of 60. The progress of the disease was clearly evident in his variable temper, which was increasingly unstable in his last years, the decline of his motor control, and lapses into unresponsive states of illness (and yes, his incredibly sensitive ankles). I believe that everyone in my family has it to some degree; my mother is now suffering from a problem for which Predisone was prescribed (she can't deal with the side effects and discontinued use after one week).

Progressive Supranuclear Palsy: A striking symptom of PSP is the inability to direct the eyes downward, which I experienced with great irritation in dream states for a period when I was young (9?). Other symptoms related to emotional volatility, eye movement disorders, and gait disorder, also seem to apply here. Intriguingly, this disease is treated with Prozac: possibly this is related to "Hysteroid Dysphoria."

Naturally, confirmation of these self-diagnoses will require further investigation by a qualified neurologist.

bonze's Psychological Problems

Generalized Anxiety Disorder. Chewed all nails and hair chronically from age 9 to age 34.

Hysteroid Dysphoria. Acute sensitivity to rejection which can result in prompt and devastating dysphoric crashes, which also seem to trigger rage symptoms. Treated with Prozac. Cf. *Listening to Prozac* by Peter D. Kramer, M.D. Although not in the DSM it should probably be included.

Obsessive-Compulsive Disorder. The clearest demonstration of my obsessive-compulsive behavior is my programming work, on which I've tended to focus obsessional care for over 10 years. dataComet is an excellent example, because I've repeatedly avoided other work in order to focus on the one major product I've developed, even when it has impeded my career as a programmer—programmers are rewarded for conceptual design and initial implementation, not maintenance or bug-fixes, even though "God is in the details" (Mies van der Rohe). Cf. Release Notes available from <<http://www.databeast.com/>>. This document is another fine example of OCD.

Written under the influence of mCPP, as a byproduct of
Trazadone, and Prozac — mCPP is ~~an~~ anxiogenic hallucinogen

—RAQ-BARB-11/26/19

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Gender Identity Disorder. Onset age 10, Non-Transexual, Lesbian orientation: I've called myself a Lesbian since the age of 23 to the downright astonishment of most people. I recall wondering at the age of 12: What are people going to think when my breasts start growing? Are they going to find me *really* weird? My gender orientation has drawn comment and a fair amount of hostility since the age of 9.

Trichotillomania. Removal of *all* hair below the hairline, preferably by pulling. Related to GID. The reduction of pain by CIDP makes this fairly negligible in terms of pain.

bonze's Characterological Problems

Christianity. I was raised as a Disciple of Christ and was found to be qualified as a Protestant Christian to marry within the Catholic Church in 1986, although I did not convert and was not allowed to receive communion within the Catholic Church. The abstraction induced by my Guillain-Barre syndrome leads me to believe that an afterlife is a very real possibility; I believe in the existence of the soul, and because I dread God's judgment, I believe that I must try to act always in accordance with a Higher Law, even if this brings me to harm. The difference between myself and K. in *The Trial* is that I acknowledge my guilt, and know that I can only be redeemed by the mercy of God.

bonze's Treatment Program

GID: Change society so I can be accepted for who I am?

Tranquilizers: For GAD.

Stress Reduction: I need a lot less stress in my life. Stress boosts immune system functioning and produces the unpleasant symptoms of the disease. I associate a number of occasions of my untoward behavior with times of high stress when I was not smoking *cannabis sativa*; *cannabis* use has been inadequate to control the CIDP during periods of extremely high stress.

Prednisone: Lowers the functioning of the immune system, allowing me to give up the use of marijuana. My chronic use of *cannabis sativa* has NOT been drug *abuse*, since it has been practiced only because it serves as a means of treating the unpleasant antisocial symptoms of CIDP (primarily poor self-control and mercurial temper). I prefer to be prosocial, thank you!

Anti-Psychotics: May be required on occasion if Guillain-Barre flares up. Evidently Prednisone also may induce psychosis.

Prozac: Long-term Prozac for PSP/Hysteroid Dysphoria. This improves mood in general and helps prevent attacks of Hysteroid Dysphoria. It dramatically reduces the obsessive components of my thinking, which is bad for my work as a programmer, but is good *for me*.

Nicotine patches: Besides the powerfully addictive properties of nicotine, my tobacco use has been prompted in large part by two factors, both of which can be satisfied with nicotine polacrilex chewing gum, use of which should be tapered off:

- 1) Nicotine is a fairly powerful vasoconstrictor (accounting for its negative impact on the health of the heart). This reduces the effects of inflammation in the brain, reducing "pressure".

2) As a central nervous system stimulant to counter the attenuation of signals caused by CIDP.

Alcohol: I'm perfectly willing to limit myself to the British Government's recommendation of 1 drink per day (though I'm not drinking at all now). This is more on average than I drink in a week; I'm not alcoholic and am not dependent on alcohol either physically or psychologically.

Detox Stress Camp: Thanks, but No Thanks: Out of the question. You've obviously never seen me interact in social groups, where I function as a kind of deranged chaotic-good intellectual *provocateur-deconstructeur*, and priming me for Guillain-Barre rage attacks is not a particularly good idea unless you're prepared to pump me full of Thorazine. I played guitar with the Angry Samoans twice at Camarillo State Hospital, and was not impressed with the PCP smoking I witnessed there the time we played Ward 9 (a ward for acute psychotics); my thought was "*These bars could not hold me in this place!*"

I was clearly suffering from a paranoid delusional state caused by one of the Guillain-Barre Syndromes a couple of weeks ago, but am feeling much better now and am reasonably rational at the moment.

Sincerely,

Kevin Eric Saunders a/k/a bonze blayk
1/30/97

— NGRI Arson offense — 2/6/97 — MCPP!
"Hallucinogen Intoxication"
→ MK-ULTRA

Venuses Penuses: Sexology Sexosophy and Exigency Theory

John Money

Prometheus Books buffalo, NY 1986

p. 394: Effeminate homosexuality, masculine or "butch" lesbianism, and episodic transvestism are conditions which should be considered in the differential diagnosis of transexualism. These variable manifestations of gender identity transposition may be regarded as constituting either a statistical typology, or as marking idealized points on a continuous distribution. One of the problems of differential diagnosis is that some diagnosticians postulate a typology, whereas the clinical phenomena are not polymodal, but statistically continuous in distribution. Confusion on this issue leads to unnecessary argument and dissent with regard to differential diagnosis.

Sex offenders: An Analysis of Types

Paul H. Gebhard

John H. Gagnon

Wardell B. Pomeroy

Comelia V. Christenson

Harper & Row, Publishers and Paul B. Hoeber, Inc., medical Books

New York 1965

p 347: Of the groups involved in this comparison of individuals with extensive homosexual experience, the homosexual offenders vs. adults had the largest number (60 per cent) of persons who betrayed their homosexuality through behavior or dress. Half of those persons who reported or revealed homosexual mannerisms of any sort had mannerisms that were quite obvious. A detailed study of mannerisms has no place in this volume, but a brief discussion is worth including. At one end of the range are the blatant mannerisms that for the most part are imitations of what our society regards as female behavior and dress. Because of historical factors and a primitive basic concept that all sociosexual activity must have one partner in a "masculine" and the other in a "feminine" role, a substantial number of males who are predominantly homosexual feel impelled to adopt what they consider female characteristics—for example, a high voice, fluttering hand gestures, long hair, plucked eyebrows, a hip-rolling walk, etc.

The result in many cases is closer to caricature than imitation. It is ironic that in a sexual situation from which females are excluded (and even involving males who may be completely devoid of heterosexual interest) these allegedly feminine traits are employed despite their being logically incongruous. In some cases wherein a male construes his homosexual interest as evidence of a feminine component within himself, these obvious mannerisms express his feeling that he is acting according to his "true nature." In other cases the behavior seems purely a matter of conforming to a stereotype, and the individual assumes or drops the mannerisms to suit the immediate situation. The efficacy of obvious mannerisms in obtaining sexual partners is dubious: many males, including predominantly homosexual males, are repelled rather than attracted. One of the

illogicalities of homosexual life is that many of these men would like sexual relations with what they call "normal" or "straight" (i.e., heterosexual) partners. A homosexual male with this desire will express revulsion, in derogatory terms, at the idea of sexual contact with a known homosexual. On the other hand, obviousness has certain advantages: It clearly identifies the person as receptive to homosexual advances, and it does attract certain predominantly heterosexual males who regard him as being partly female. Indeed, some predominantly heterosexual males do not consider such a sexual liaison really homosexual.

At the other end of the range are subtle mannerisms that can be detected only by those who know a great deal about homosexuality. These mannerisms are for the most part slight exaggerations of, or departures from, socially acceptable behavior or dress. Any single item has little significance, but if a number exist, they form a symptom-syndrome that is quite diagnostic. Such subtle items are frequently associated with upper socioeconomic level tastes and behavior: over-meticulous dress, too well-groomed fingernails, a gentle modulated voice, an interest in aesthetics, etc. Such things have, in our culture, a vague feminine significance: women pay attention to their clothes, men are less concerned; women tend their nails, men are careless about them; women are supposed to have quiet modulated voices, men are loud and assertive. In brief, we have the old stereotype of males being rough and coarse while women are gentle and dainty. Some less obvious mannerisms, however, have no social class association—for example, the glance that is maintained a fraction of a second too long, or the absence of the appraising look that predominantly heterosexual males automatically bestow on passing or nearby females.

p 410: 4 classes of "masqueraders": "drag", impersonators, transvestites, transsexuals.

p. 413: The great majority of transvestites and transsexualists do not come into conflict with society, although there may be occasional distressing incidents resulting from the fact that society makes no provision for persons with these desires.

Sex Crimes in History: Evolving concepts of sadism, lust-murder, and necrophilia—from ancient to modern times

R. E. L. Masters Eduard Lea

*Is there really such a phenomenon as the "killer transvestite" commonly depicted in the media (e.g., *Dressed to Kill*, *Rocky Horror*, *The Crying Game*, etc. ad nauseam)? Evidently not, usually transsexuals are the victims of murder...*

p. 46: Heliogabalus: Of later emperors, two in particular deserve mention. One of these was Heliogabalus (or Elagabalus), a depraved tyrant in the tradition of Caligula and Nero.

...
Heliogabalus was uncommonly beautiful, some historians say, and when he appeared with long, lustrous hair, attired in rich, seductive feminine dress, even men not usually

attracted to such pleasures were likely to look upon him with desire.

...

Fascinated by the notion of castrating himself, or of having the operation performed, Heliogabalus offered an immense reward to any physician whose skill was sufficient to transform him into a woman. Unable to find a surgeon who would attempt the project, he was forced to settle for circumcision, which was far from being an adequate substitute for surgical feminization.

Like other Roman emperors before him, he roamed the streets of the city by night, disguised as a girl, offering his body to strangers for fellatio and anal intercourse. Sometimes he would visit brothels, reveal his identity, evict the prostitutes, and himself fulfill the requirements of the arriving customers as best he was able.

... At last he fell in love with a powerful slave of enormous stature named Hieracles... To this ardent giant, Heliogabalus became increasingly attached, even remaining faithful, after his fashion, and performing the traditional domestic as well as erotic duties of a good housewife. But it was his grotesque passion for Hieracles that sealed Heliogabalus' doom. He conceived the fantastic idea of abdicating in favor of the slave...

This plan, it is said, was the proverbial straw that broke the camel's back. Emperor Heliogabalus was unceremoniously murdered and his body tossed into the river.

Fantastic Women: Sex, Gender and Transvestism

Annie Woodhouse

Rutgers University Press New Brunswick, New Jersey 1986

xv: But there are serious contradictions here for feminism. It is simply not enough to state that we must tolerate transvestites, all the while thinking, 'but I wouldn't want to live with one.' The fact of the matter is that a lot of women, feminists and non-feminists alike, want their man to *be* a man, and that most definitely does not include wearing dresses, high heels and make-up. Do we deny the validity of these feelings? It is concluded that the contradiction is more apparent than real. The claim for tolerance based on the assertion that transvestism blurs the edges of the gender divide is a false one. Transvestism is a form of fractured behaviour which compartmentalises masculinity and femininity; thus the possession of two wardrobes does not make for a more complete self, any more than it makes for greater sexual equality.

13-14 Feinbloom suggests that the reason that women are allowed to half dress (i.e. wear some items of male clothing), and men are forbidden to, lies in the gender specificity of status, that 'aspiration to female status is perceived as a "step down"' (p. 251). ... This preservation of superior status through the outwardly visible mechanism of clothing has also been recognised by Newton (1972) in her study of femlae impersonators in the United States: "Even one feminine item ruins the integrity of the masculine system: the male loses his caste honour. The superordinate role in a hierarchy is more fragile than the subordinate. Manhood must be achieved and, once achieved, guarded and protected. (p. 101n).

p. 18: However there is no evidence, then or now, of fetishistic cross-dressing by women, the derivatiuon of sexual pleasure from wearing certain garments or fabrics. Male dress was adopted for practical reasons. [!!!]

p. 19 Overall, drag, burlesque and partial cross-dressing intended as a political statement can all be grouped under the heading of performance, a long way from the private obsession of the transvestite. The illusion and fantasy of the 'gender fuck' protagonists of the 1970s – David Bowie, Alice Cooper and the New York Dolls – gave way to the poseurs and the gender-benders of the 1980s and the increasingly common use of make-up by musicians; but this, of course, does nothing for the transvestite who has nod desire to emulate the image of men in make-up; the transvestite wants to pass, from time to time, as a woman.

p. 21: The clearest conclusion we can derive from this discussion is that the hard-and-fast concepts of masculine/feminie, straight/gay tend to fly out of the window in the conbtext of cross-dressing and sexual orientation.

...
Certainly transvestism goes beyond fetishism and incorporates gender and sexual needs. Langevin (1985) points out that cross-dressing is a label incorporating many meanings: it can be socially acceptable entertainment, it can be psychotic, violent, narcissistic, sado-masochistic, or none of these. Thus cross-dressing and transvestism are not one and the same thing – transvestism is one form of cross-dressing.

Transvestism tends to be very much a private activity, occurring behind closed doors, often a closely guarded secret admitted to very few others or no one at all. Consequently its incidence remains unknown, with medical practitioners and law enforcement agencies regarding it as a rare phenomenon.

p. 23: But why should a man wish to appear as a member of ther other, subordinate sex? And why should he derive pleasure, sexual or otherwise from this dissemblance? ... What we do know is that transvestism shocks a lot of people. The idea of a man dressing up as a woman for his own pleasure and not for entertainment evokes a range of reactions, none of them neutral. In western society our idea of sex and gender are fixed; we hang on to them like an anchor in a rapidly changing and othen confusing world. When a man enjoys dressing up in slinky underwear, high heels, make-up and a wig he is generally seen as 'weird' or 'perverted'. There is something wrong with him; he is deviant.

p. 29: after my first visit I began to think about the way I saw cross-dressed men. did I treat them as men, or as women, or as men-appearing-as-women? This was highlighted by an incident which occurred during my third visit to TV/TS. While chatting with a transvestite I had met previously, I noticed someone standing at the counter. She looked different from the others present, dressed in a quiet manner with light make-up and glasses. her own hair was done in an ordinary, unelaborate style. Unremarkable in appearance, she could have been a secretary or receptionist. Not having met her before, I wanted to introduce myself and, hopefully, find out more about her. but I found myself unable to approach her until I knew 'what' she was. In other words, I realised that my social manner towards her would be determined by my knowledge of her sexual status.

p. 72: Immediately we have to ask why deviation from masculine appearance is met with much greater disapprobation than deviation from the feminine. In some respects typical social responses tend to reaffirm Marchuse's (1965) claim that hedonistic sexual pleasure, as opposed to utilitarian function, is anathema to the social order. The representation of deviant behaviour, especially sexual deviance, as sick and thereby symptomatic of inadequacy has provided a convenient mechanism for rationalising the necessity and desirability of treatment. But simply to reverse this process and label society as 'sick' would seem only to replace one form of myopia with another. The insight of Marchuse's analysis has been distorted in precisely this way by West (1974). His pleas for tolerance and reform of 'sex laws' typify would-be-liberal, woolly-minded thinking. In calling for the removal of legal restraint on activities (such as transvestism) which are not proven harmful to others, it seems that West imagine that legislative changes will suddenly 'make it alright,' whereas in fact we come no closer to an understanding of the phenomenon in hand and the problems which it may, or may not, entail for those concerned.

SHEMALES

p. 75 Given the secondary location of femininity, it is not surprising that men who embrace it are labelled pathological.

p. 89: In an American study, Deborah Feinbloom (1976) devotes some space to a consideration of transvestite's wives. Nevertheless, her subjects criticised her for paying insufficient attention to this largely unknown and important area. Posing the question 'Why do women stay married to transvestite?', she suggests three possibilities. First that the woman suffers from low self-esteem. Thus she feels unable to find another man. She also feels that she may be the cause of his transvestism, possibly because she insufficiently feminine herself. Second, she may really want a girlfriend in her husband. His transvestism, therefore, assuages the guilt surrounding her latent lesbian fantasies. Third her life may be so dull and boring that her husband's behaviour may provide excitement and diversion from a humdrum existence.

Feinbloom suggests that a woman who stays married to a transvestite does so precisely because she herself suffers from some inadequacy or problem which she is unable to tackle directly or come to terms with.

p. 124: "Unlike Prince, Sinclair retains a realistic grasp of the situation and refuses to side completely with the transvestite, even going so far as to instruct him not to abuse his wife's acceptance: "Putting on a frock is not being a woman. Most of the time, for the average woman, the routine is pretty boring, and housework is a drudge. It might be fun for you to tie a scarf around your wig and then start dusting the shelves and mop the floor; she will have to follow you around afterwards and do it properly." (p. 35)