PROGRAM PRESS STATEMENT - QAIAX CT

OFFICE OF PROGRAM ADMINISTRATOR

August 10, 2026

OFFICE SYMBOL: OSPA/OTA-RDTE

MEMORANDUM FOR RECORD

SUBJECT: Program Update and Opportunities Brief for the QAIAx Clinical Trial (NIH PSR ID: NCT07661823)

1. **References.**

   a. 10 U.S.C. § 4001, Research and Development Projects (Other Transaction Authority).

   b. First Step Act (18 U.S.C. § 3624(g) - Evidence-Based Recidivism Reduction Alignment).

   c. 28 U.S.C. § 1498, Patent Claims and Sovereign Patent Immunity.

   d. 42 CFR Part 2 & 45 CFR § 164.500, Behavioral Health Record Tokenization Isolation.

   e. Cooperative Research and Development Agreement (CRADA) with U.S. Special Operations Command and VA Health Systems.

2. **Program Overview and Mission Authority.**

   a. *Statutory Authority:* Conducted under 10 U.S.C. § 4001, utilizing Other Transaction Authority (OTA). This framework establishes specialized Research, Development, Test, and Evaluation (RDT&E) enclaves designated as "Microcities" on closed U.S. military installations, tribal lands, and global special economic zones.

   b. *Program Mission:* Evaluates whether a quantum artificial intelligence public health agency can deliver free or low-cost behavioral and mental health services within self-contained, dome-enclosed communities. This "AI City Hall Project" utilizes AI-managed public administration, AI humanoid robots, and holoportation remote command to serve individuals on fixed incomes or public assistance.

   c. *Trial Scale:* The multi-year study targets a total enrollment of 1,000,000 participants across a global network of 300 Microcities. Each facility will house between 1,500 and 15,000 occupants. The initial live-in phase requires 50,000 patients and 5,000 trainees. Operations are scheduled to run from early 2027 through the end of 2028.

d. *Pre-Launch Status:* The project remains in a pre-launch phase until 1 July 2027. A pre-launch coordination sync will occur via Zoom on 8 September 2026 to announce initial enclave sponsors, microcity locations, and enrollment execution data.

e. *Official Information Channels:*

(1) Clinical Trial Registry: ClinicalTrials.gov (NCT07661823).

(2) Key Sponsor: Veterans Recovery Network.

(3) Principal Program Site: QAIAx Official Portal.

(4) Digital Labor Branch: Q-Men Workforce Project.

3. **Sponsorship Tiers and Paid Volunteer/Resident Personnel Opportunities.**

a. *Sponsorship Structure:* Corporate, government, philanthropic, or crowdfunded entities can establish a customized Microcity (1,000 to 3,000 occupants) via a site sponsor investment of $2,000,000 to $10,000,000. Contributions are structured as tax-deductible Donor-Advised Fund (DAF) donations or small business leasing frameworks. Sponsors retain naming rights and can designate a specialized theme (e.g., *Sober City AI, Smart Health City AI*).

b. *Intervention and Individual Subsidies:* Entities may sponsor whole Intervention Groups (up to 90,000 members) to cover operational overhead. Individuals may guarantee a singular participant's subscription fee for the trial duration.

c. *Resident Patient Member (RPM) Benefit Matrices:* Approved RPMs receive all-inclusive housing, meals, and essential needs covered by site sponsors. Transitional dorm housing starts at $100 per month and includes a mobile/tablet device with free Wi-Fi and voice services.

d. *Stipend and Compensation Schedules:*

(1) Daily Technology/Educational Stipend: $20 to $100 per day in "AI Credits".

(2) Monthly Base Stipend Packages: $1,000 to $3,000 per month.

(3) Part-Time Functional Roles: $4,000 per month (subject to applicable taxes).

(4) Council Leaders/Dignitaries: $5,000 to $7,000 per month (25–35 hour work week).

(5) Executive Leadership (Mayor, Zone Secretaries): $100,000 to $150,000 base salary annually, plus premium mission vehicles and expanded housing quarters.

(6) Technical Hardware Allocations: Full-time access to a personalized omni-AI humanoid companion (QAIA Mini-Me), holographic suites (Vulcan Beam Bot), and an AGI virtual reality PC (QAIA AI-Me).

e. *Enrollment and Eligibility Criteria:* Enrollment and waiting list entry carry zero cost. Fees are waived or scaled for low-income, veteran, government, domestic survivor, refugee, and student applicants. Open to adults aged 17 to 99 presenting with autism spectrum disorders, substance use disorders, psychiatric conditions, behavioral addictions, severe trauma, or treatment-resistant depression.

f. *Referral and Priority Pipelines:* Formal clinical diagnosis is bypassed if an applicant holds a referral letter from an approved professional (MD, NP, RN, PhD), non-profit organization, or public safety/judicial official. Priority processing is granted to military veterans, individuals experiencing homelessness, and recipients of public assistance (VA Disability, SSDI/SSI, Medicaid/Medicare).

g. *Point of Contact:* Digital intake is processed through Veterans Recovery Network Enrollment or via email at rdte@vetsrecovery.org. Telephonic lines are open at (888) 307-8380 (US/Canada) and +1 804-390-5037 (International).

4. **Domestic and Foreign Internship Operations.**

a. *Scope:* Open to licensed professionals and postgraduate/doctoral students (PhD, MD, LLM, MBA) from all member states of the United Nations System, African Union, European Commission, NATO, G7, Status of Forces Agreement (SOFA), WHO, and ILO.

b. *Work-Study Protocols:* Resident patients may participate in operational labor if authorized by the FDA/DoD clinical trial protocol. Work-study actions utilize a minimized hour schedule compensated via biometric "AI Credit" loops to protect the integrity of the clinical trial bubble.

c. *Visa Verification:* Formal documentation regarding work and education program visa eligibility can be reviewed at Google Share AI-Mode Link. Application packets must be sent directly to internship@qaiax.org.

5. **Early Enrollment Frameworks (Veteran Organizations and Affiliated NGOs).**

a. *Waiting List Windows:* Key Sponsor Veterans Recovery Network (VRN) maintains an early-access waiting list serving over 450,000 members and VSO chapters globally. Enrollment actions open mid-August 2026. Spouses and affiliates within veteran households qualify for no-cost mental health, legal, educational, and employment assistance.

b. *NGO Autonomous Entry:* Non-Governmental Organizations registered with UN System bodies (CSO Net, UNDESA, UNESCO, ECOSOC), WHO, ILO, NATO, or the EU Commission do not require site sponsorship to operate as verified trial service or vending providers. Priority enrollment is granted to entities supporting ADA and Veteran Rights advocacy.

6. **Sponsorship and Enclave Vendor Integration.**

a. *Enclave Vending Program Authority:* Operates under 10 U.S.C. § 4001 OTA parameters. Local and international commercial entities are accepted across primary categories: grooming services, food/beverage dining, personal body care, licensed medical care, specialized pharmacies, and general merchandise.

b. *Corporate Brand Integration:* National corporate entities operate under a "Smart Concessionaire" model managed by the military exchange or an authorized OTA partner. All inventory is digitized; checkouts double as data-telemetry hubs tracking participant consumption via biometric tokens.

c. *Commercial Scaling Matrix:*

Enclave Occupancy	24/7 Convenient Store Locations	Discount Outlets (e.g., Dollar Store)	Coffee/Donut Kiosks	Farmers Market/Swap Meet Mall	Health & Personal Hygiene Counters	Dine-in Restaurant or Food Court	Supermarket Facilities
1,650 *(Full Scale)*	1 (Express Kiosk)	0	1 (Consolidated)	0	0	1 (Express)	1 (General Store)
3,300	1 (Full + Fuel)	1 (Small Format)	1 (Standard)	0	1 (Counter)	1 (Standard)	1 (Expanded)
5,500 *(Mid-Scale)*	2 (1 Fuel, 1 Express)	1 (Full)	2 (1 Cafe, 1 Drive)	1 (Small)	1 (Standalone)	1 (Full)	1 (Medium Mall)
11,000	3 (Distributed)	2	3 (Distributed)	1 (Full)	2	2	1 (Large Exchange)
16,500 *(MDB Scale)*	4	3 (2 Std, 1 Bulk)	4	2	3	3	1 (Mega Mall)

d. *Clinical and Wellness Vendor Scaling Matrix:*

Enclave Occupancy	General Goods & Pharmacy Locations	Alternative Pharmacy & Grocery Locations	Independent Medical Professionals
1,650	0 (Telehealth Kiosk)	0 (Telehealth Kiosk)	1–2 (Rotational / On-Call)

3,300	1 (Small Retail Clinic)	1 (Small Retail Clinic)	3–5 (Dedicated Full-Time Staff)
5,500	1	1	8–12 (Specialized Clinicians)
11,000	2 (1 Main, 1 Kiosk)	2 (1 Main, 1 Kiosk)	20–30
16,500	3	3	40–50+

e. *Lease Framework and Rental Policy:* Vendors execute Non-Appropriated Fund (NAF) Concessionaire Agreements or specialized OTA Sub-Leases under a 5-year fixed timeline with two 5-year options (5+5+5 structure). Financial terms follow a Percentage of Gross Sales (Concession Fee) model requiring 8% to 15% of monthly revenue paid to the enclave operating fund.

f. *Upfront Integration Capital:*

(1) Digital Infrastructure Buy-In: $25,000 to $75,000 flat, non-refundable (funds POS conversion to enclave quantum AI cloud-robotics layer).

(2) Operational Escrow: 3 months of minimum guaranteed concession fees.

(3) Clearance Account: $10,000 initialization fee covering Tier 1/HSPD-12 federal background investigations and Common Access Card (CAC) generation.

g. *Liability and Clearances:* Vendors must maintain $2,000,000 to $5,000,000 in Commercial General Liability per occurrence, naming the Federal Government and Enclave Authority as additional insureds. International enclaves require mandatory Defense Base Act (DBA) Insurance. Corporations must possess an active CAGE Code and active registration in SAM.gov, and pass automated Vetting and Facility Clearance (FCL) checks for Foreign Ownership, Control, or Influence (FOCI) compliance.

h. *Staffing Mandates:* All vendor personnel must pass a Tier 1 Federal Investigation (Public Trust or HSPD-12 credentialing) for CAC or localized Enclave Smart-Access Badge issuance.

i. *Financial Projections (Multi-Enclave Network):* Based on a 3,500 mean occupancy, $650 mean monthly per capita spend, and 10% concession fee split:

(1) 1 Enclave: $227,500 Monthly Admin Fee / $2.73 Million Annual Admin Fee.

(2) 3 Enclaves: $682,500 Monthly Admin Fee / $8.19 Million Annual Admin Fee.

(3) 10 Enclaves: $2.27 Million Monthly Admin Fee / $27.30 Million Annual Admin Fee.

(4) 30 Enclaves: $6.82 Million Monthly Admin Fee / $81.90 Million Annual Admin Fee.

(5) 100 Enclaves: $22.75 Million Monthly Admin Fee / $273.00 Million Annual Admin Fee.

(6) 300 Enclaves: $68.25 Million Monthly Admin Fee / $819.00 Million Annual

Admin Fee.

j. *Tax and Fee Accounting:* Fees route directly to the QAIAx Clinical Trial Program Treasury, legally owned by the 501(c)(3) Veterans Recovery Network Inc.. Funds recycle into the mission to subsidize housing and waive platform subscriptions. Concession fees are classified as Exempt Function Income under IRS Section 501(c)(3) (IRC § 513(a)) due to their operational role as data-telemetry environments. Pro License fees are legally isolated from retail concession fees under IRC § 512(b)(2) (Passive Royalty Exclusion) and filed on Form 990. Vending point of contact is managed at admin@qaiax.org.

7. **QAIAx Alternative Sentencing and Re-Entry Program.**

   a. *Statutory Framework:* Operates via the First Step Act (18 U.S.C. § 3624(g) - EBRR Alignment), 10 U.S.C. § 4001 (Unorganized Military Enclave Encampment Framework), and behavioral health records tokenization isolation mandates (42 CFR Part 2 & 45 CFR § 164.500).

   b. *Program Execution:* First-time and non-violent offenders may execute a binding legal waiver to opt out of traditional custodial confinement, enrolling directly into the active interventional health research trial.

   c. *Therapeutic Methodology:* Uses the "AI-YO" narrative simulation suite to run customized cognitive behavioral therapy scenarios, reducing administrative overhead while executing evidence-based recidivism reduction (EBRR) criteria.

   d. *Pilot Project Footprint:* Deploys a scalable pilot across 100 selected penal facilities utilizing a central, air-gapped QAIAx Microcity Enclave for the 200-to-5,000-hour "AI Elm Street" and "Village of the Crazies" (VOC) educational courses. Each facility filters 100 low-risk offenders, generating a 2,000-person cohort. Infrastructure consists of containerized Liri Modular Tent shelters (2,826 m² internal floorspace, Beaufort Scale Grade 10–12 wind resistance) utilizing an offline, air-gapped LoRaWAN LPI protocol.

   e. *Testing Environments:* Primary testing partners include private correctional providers (CoreCivic, The GEO Group) and large regional detention hubs (such as Alameda County Sheriff's Department's Santa Rita Jail) linked to USMS data networks.

   f. *Standardized Corrective Pipeline:*

   [Judicial Branch Order] ⟶ Voluntary Enrollment Waiver (First Step Act) ⟶ [QAIAx Sovereign Enclave Node]

   ├⟶ [Haptic / Narrative Tracks] (100 to 5,000 Hour Targets; Multi-Sensory "Cool Notes")

├──> [Humanoid Security Layers] (Contraband Interception; Automated Perimeter Scans)

└──> [Biometric Verification & Certified Community Re-entry].

g. *Correctional Fiscal Benefits:* Custodial administrative overhead drops from $800,000 annually per 1,000 residents down to $40,000, creating a net annual savings of $760,000 per 1,000 managed offenders. Per a 5,000 re-entry population, human administration ($4.00M) versus the AI City Hall framework ($200,000) yields a net annual savings of $3.80M. Initial infrastructure CapEx is recovered in under 21 days via Token Velocity Reinvestment loops routing credit transfers through internal commissary, housing, and restitution accounts.

h. *Staff Augmentation:* Implements a 90/10 Hybrid Workforce Model where human corrections staff retain 10% executive command via cryptographic MFA co-signatures, while 90% of routine perimeter and containment operations are handled by Omni-AI Humanoid fleets (QAIA Pro E1 and Mini-Me variants).

i. *Contraband Prevention:* Legal, medical, and family visitation occurs exclusively via Beam Bot holographic instances or remote Holo-Suites, removing physical introduction vectors. Automated defense arrays feature Raven Acoustic Sensors (ML signature matching <50ms) and Flock Condor PTZ Cameras (4K AI tracking up to 140m range) linked to QAIA Pro E1 humanoid dispatch units.

j. *Vocational Training:* Enrolled inmates complete the 220 clock-hour EEC TDC Certification Course covering federal enclave law, zero-trust security, and algorithmic liability. Passing the examination grants a verified QAIA Pro Technical License for direct hire inside the enclave grid. Operational data is outlined in the QAIAx Alternative Sentencing Program Proposal Statement.

8. **Q-Men Workforce Project.**

a. *Scope:* Focuses on digital labor programming executed by QAIAx experts holding professional licensure and general AI robotics operator certifications under the TDC Model Code.

b. *Methodology:* Licensed human professional workers train a professional omni-AI agent and humanoid to clone their exact technical skills, professional expertise, and distinct behavioral traits.

c. *Income Generation System:* Humans license their "Q-Men clone" to execute and deploy multiple simultaneous service orders across separate clients (e.g., an IT engineer scaling to 100 clients simultaneously). The human operator receives full compensation for all executed orders while spending under 2 hours daily reviewing a

procurement dashboard. This model is designed to multiply normal human output income by 2 to 20 times while minimizing the work week.

9. **Program Directory and Administration.**

a. *Key Sponsor:* Veterans Recovery Network Inc. (501(c)(3)).

b. *Collaborating Agencies:* AI-119 Vulcan Project Research & Educational Technology Co. (PRETCO); AI Legal Mate.

c. *Functional Contacts:*

(1) Public Affairs / General Inquiries: puaf@vetsrecovery.org (POC: Chan, Michelle).

(2) RDTE Administrator: rdte@vetsrecovery.org (POC: Peterson, Cary).

(3) Internship Program: internship@qaiax.org.

(4) Vending and Concessions: admin@qaiax.org.

(5) Compliance and Fraud Reporting: compliance@qaiax.org .

(6) Telephonic Routing: (888) 307-8380 (US/Canada); +1 804-390-5037 (Intl); Fax: +1 804-390-5356.

(7) Non-US WhatsApp Live Support: www.snphealth.org.

d. *Reference Documentation:* The foundational QAIAx Clinical Trial Press Release (26 June 2026) contains early baseline metrics.

e. *Fraudulent Content Protocol:* Any unauthorized web distribution of QAIAx data, clinical trial parameters, or registered marks (e.g., *Beam Bot, AVK Suit, QAIAx Cool Word, AI-119 Vulcan, AI-Wat, QAIA Pro, QAIA AI-Me, Q-Men, 4E Model Series, QM-Ware (Quasi-mind ware), AI City Hall Project*) must be flagged immediately to compliance@qaiax.org or routed to the FBI Internet Crime Complaint Center (IC3) at ic3.gov.

10. **Disclaimer.** This document serves informational coordination purposes only and does not constitute a formal binding offer of enrollment, employment, or corporate site sponsorship. All trial access remains contingent upon program administration verification and federal regulatory compliance.

FOR THE PROGRAM ADMINISTRATOR:

//ORIGINAL SIGNED//
s/ MICHELLE CHAN
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