



Proof COVID is less dangerous than the Flu

ScientificResearchNotBullshit

This page provides links to a variety of sources of reliable, verifiable information on the coronavirus (aka COVID-19) which the major media have largely ignored. Our most basic material is listed first, followed by other resources which delve deeper for those interested in more.

Coronavirus Information Summaries

Two incisive summaries offer a deeper perspective to the coronavirus than what is being presented to the public. The first explores the recent history of epidemics (including COVID-19) and how they've been used by the powerful elite to pad their pockets and gain ever more control over the public. The second explores profound questions about the damage caused both by the coronavirus and by policies imposed as a result of the virus. Is damage from the policies worse than the damage from the virus itself? The third link raises many important questions about COVID-19 vaccines.

www.WantToKnow.info/h/coronavirus-what-if - What If?

www.WantToKnow.info/h/coronavirus-questions-statistics -

Profound Questions

www.WantToKnow.info/h/covid-19-vaccines-warning - COVID-19 Vaccine Warnings

<https://www.globenewswire.com/.../Studies-Show-that...> **Studies Show that Vaccinated Individuals Spread Disease**

List of people affected and deaths from vaccine: <https://drive.google.com/.../1uS4krGJX.../view>

Unvaccinated Women Report Miscarriages After Interactions with Vaccinated People

By
REAGAN HALL

-

APRIL 16, 2021

<https://montanadailygazette.com/.../unvaccinated-women.../>

Best Videos on the Coronavirus

In this time when much important, reliable information regarding the coronavirus is being censored, the several videos presented at the link below stand out for presenting verifiable information which will educate you to a deeper agenda that the major media have largely failed to cover.

www.WantToKnow.info/h/coronavirus-best-videos - **Best Coronavirus Videos**

Top News Articles Revealing Coronavirus Manipulation

We have collected hundreds of news articles from respected media sources that contain eye-opening information exposing

various aspects of the coronavirus. Links are always provided to the original sources for verification. Though the media largely avoids publishing articles that question the official story, there are many important exceptions which you will find summarized here. The first link provides summaries of incredibly revealing news articles with the most important articles listed first. The second link provides the same article excerpts with the most recently published articles listed first. The final link gives article excerpts about problems with the coronavirus vaccines.

www.WantToKnow.info/coronavirusnewsarticles - **Best**

Coronavirus News

www.WantToKnow.info/coronavirusmediaarticles - **Most Recent**

Coronavirus News

www.WantToKnow.info/coronavirus-vaccine-problems... -

Coronavirus Vaccines

Recommended Coronavirus Resources

Two resources are particularly outstanding for their balanced and carefully researched information on the coronavirus which often questions the official story. Robert F. Kennedy, Jr. has a large organization with thousands of dedicated volunteers who are doing a tremendous job to keep those interested informed on the deeper story. His Children's Health Defense website has long been one of the best for following the money and the reliable science which often contradicts what is being publicly presented. Their email list is most excellent.

<https://childrenshealthdefense.org> - **Children's Health**

Defense

Jeremy Hammond is an excellent independent researcher who works closely with RJK, Jr. and others to find and share the best, most solid information on the coronavirus, vaccines, the coronavirus tests, and much more. His email list may be the best resource out there for educating yourself to all that is going on.

www.jeremyrhammond.com - **Jeremy Hammond**

WantToKnow.info founder Fred Burks has compiled an abundance of intriguing raw data on the coronavirus. The link below takes you to a collection of a large number of media articles and government statistics, and much more. The information is divided into a number of categories. This collection is not designed for public consumption, but it is a great resource for researchers.

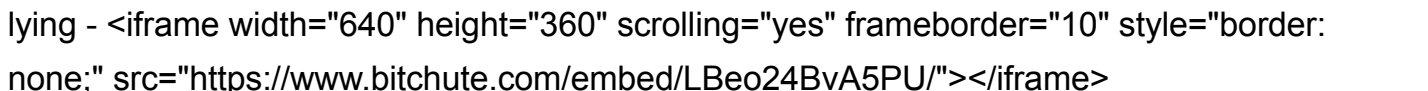
www.notion.so/Coronavirus-ec12eaae9f1c4285b9856024f7f0a137 - **Data collection**

We encourage you to be skeptical in exploring this information. Some of what you read may at first seem quite unbelievable. Yet we also encourage you to keep an [open mind](#) and do research using the links to the reliable sources provided to determine for yourself whether there is truth to the information provided.

The powerful information presented here is a wake-up call. It is a call to move beyond complacency and apathy to focus on our [deeper purpose](#) in life and on creating the world we want to live in. It is a call for each of us to focus on moving from fear to love. If we want to make this world a better place, understanding what's happening behind the scenes is vitally important. By

exploring the reliable, verifiable information provided here and spreading it far and wide, each one of us can make a difference.

Three facts No 10's experts got wrong: DR MIKE YEADON says claims that the majority of the population is susceptible to Covid, that only 7% are infected so far and virus death rate is 1% are all false - 10/30/20, UK's Daily Mail

Dr. Mike Yeadon - Former Chief Scientific Advisor with Pfizer - serious deception and "outright" lying -  <https://www.bitchute.com/video/LBeo24BvA5PU/>

Deaths from all causes compared to coronavirus - <https://www.cdc.gov/nchs/nvss/vsrr/covid19/index.htm>

One asymptomatic Covid patient contacts 455, none infected - <https://pubmed.ncbi.nlm.nih.gov/32513410/>

Why does this David Price, MD, who has risked his life to work with hundreds of Covid patients in NYC, say “you actually have to have very long, sustained contact with someone” to get the virus. He says it takes “15 to 30 minutes in an unprotected environment.”

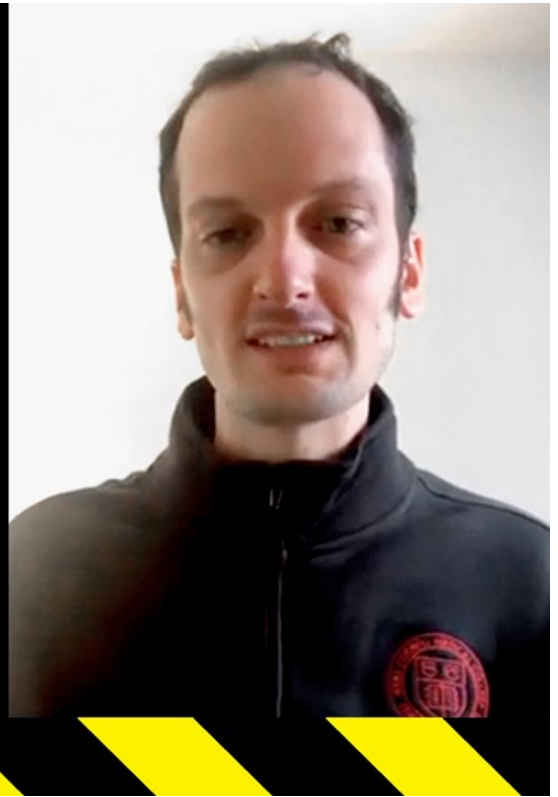
Empowering and Protecting Your Family During the COVID-19 Pandemic

Original Source Video (57min):

[VIMEO.COM/399733860/](https://vimeo.com/399733860)

clickable link in video description

(ABBREVIATED VIDEO)



- 10min

Deaths and Mortality

Data are for the U.S.

- Number of deaths: 2,854,838
- Death rate: 869.7 deaths per 100,000 population

Source: [National Vital Statistics System – Mortality Data \(2019\) via CDC WONDER](#)

- Life expectancy: 78.8 years
- Infant Mortality rate: 5.58 deaths per 1,000 live births

Source: [Mortality in the United States, 2019, data tables for figures 1, 5](#)

Number of deaths for leading causes of death:

- Heart disease: 659,041
- Cancer: 599,601
- Accidents (unintentional injuries): 173,040
- Chronic lower respiratory diseases: 156,979
- Stroke (cerebrovascular diseases): 150,005
- Alzheimer's disease: 121,499

- Diabetes: 87,647
- Nephritis, nephrotic syndrome, and nephrosis: 51,565
- Influenza and Pneumonia: 49,783
- Intentional self-harm (suicide): 47,511

Source: [Mortality in the United States, 2019, data table for figure 2](#)

<https://www.notion.so/Data-5e090f7de0da4b43941a7a7683d2b56e>

Morbidity and mortality from COVID-19 in selected cities, United States

City	County	State	Cases/1,000	Deaths/100,000	Death per case (%)	Tests/1,000
San Francisco	San Francisco	CA	11.2	9.7	0.87	4.22
Los Angeles	Los Angeles	CA	23.6	57.1	2.42	3.02
Seattle	King	WA	8.8	32.5	3.68	1.70
Denver	Denver	CO	18.4	69.5	3.77	2.60
Atlanta	Fulton	GA	23.8	49.9	2.09	NA
Miami	Miami-Dade	FL	58.9	95.7	1.63	NA
Boston	Suffolk	MA	28.5	137.6	4.83	NA
Washington	DC	DC	20.1	86.7	4.31	NA
Baltimore	Baltimore	MD	17.7	56.0	3.17	3.84
Philadelphia	Philadelphia		21.7	111.0	5.12	1.65
New York City	Boroughs	NY	27.4	281.3	10.26	1.12

Courtesy of Dr. Jim Marks, ZSFGH

As of September 4, 2020

<https://www.cdc.gov/nchs/fastats/deaths.htm>

The New York Problem

Undercover Whistle Blower exposes all

<https://www.notion.so/Disinformation-a1b8aa9a65ba49ab99f7fec5f92b10f2>

**The NYC Metro area
makes up 4.5% of the
US population but had
30% of US CoVid deaths**



Ventiladores vs. pulse oximeters



Many don't want to know about the dark side of our world. Feeling secure and content in their personal lives, they choose to avoid matters which might disturb them. Yet **as long as we choose complacency over awareness, these major cover-ups will continue.** In fact, they will likely fester and grow in magnitude until

people are finally forced to open their eyes and deal with the consequences. The sooner each of us decides that we do want to know, and that we are willing to invite others to open their eyes, the more easily we will be able to build a world that supports us.

"Our fear of our own shadows is what gives the shadow forces of our world their power. By facing our fears, both [individual](#) and [collective](#), we can transform our lives and world for the better."

As some of the material here can be difficult to digest, we invite you to explore this website at a pace that is appropriate for you. If you find yourself feeling [upset or overwhelmed](#), consider taking a break and enjoying some of the great [inspirational articles](#) and [resources](#) provided to keep things in perspective. And don't miss our inspiring essay giving [10 great reasons for hope and optimism](#). We also encourage you to open to inner or higher guidance as you explore this material.

And if you find yourself slipping into fear or anger with this material, remember that **we now have an opportunity to [do something](#) about it**. The Internet and email are remarkable tools for transformation. The fact you are reading this now is an excellent example of that.

Simply by sending this information to your friends and colleagues, you can make a difference. Using [this webpage](#), you can also easily contact your political and media representatives. By emailing this vital information and posting it widely on the Internet,

we can quickly and easily [spread this important news](#) around the globe. This website has received over 22 million visits since it was [first established](#) in 2003, yet we need your help to reach many millions more.

We are convinced that once a critical mass of people are aware of this powerful information, the media will be forced to report these major cover-ups in news headlines where they belong. Once these verifiable facts reach the headlines, concerned citizens around the world will stand up and demand that we all work together to find a better way. **If each of us makes a commitment to spread this information and to present it as a powerful opportunity to strengthen democracy, we can and will [build a brighter future](#) for all of us.**

The Real DATABASE

<https://www.notion.so/Coronavirus-ec12eaae9f1c4285b9856024f7f0a137>

Council for National Policy Panel: Dr. Simone Gold |
11/12/2020



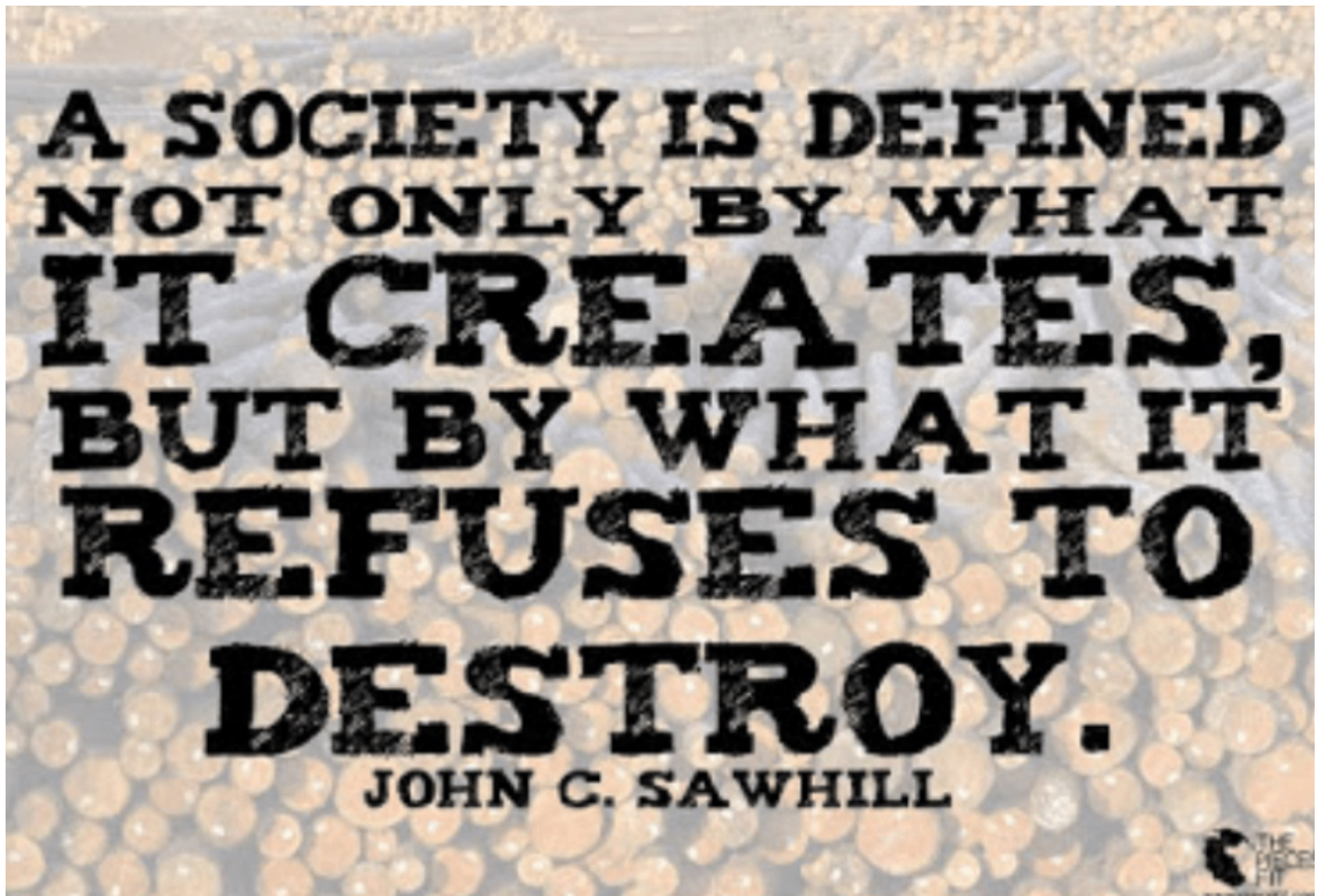
Simone Gold, M.D.

Founder

America's Frontline Doctors



[The World Freedom Alliance 2020 – Documentary](#)



This Feature-Length documentary surrounds the establishment of the World Freedom Alliance (WFA) in Stockholm, Sweden, in November 2020.

The World Freedom Alliance will provide a worldwide platform linking with various associations and organizations offering access to justice, true dialogue for health science and politics while holding worldwide officials to account under the law...

<iframe id="lbry-iframe" width="560" height="315" src="https://odysee.com/\$/embed/World-Freedom-Alliance-2020---Full-Length-

Documentary/231b696c88440f725be3515fc351db4e6ef3eb2a?

r=CTXJwgN1Qs7d3KuWq2xsSMELJnyXxJMt" allowfullscreen></iframe>

<https://odysee.com/@TruthVault:0/World-Freedom-Alliance-2020---Full-Length-Documentary:2>

<https://www.oraclefilms.com/>

<iframe src="https://brandnewtube.com/embed/7tNEBnZogbdlEXu" frameborder="0" width="700" height="400" allowfullscreen></iframe>

<https://brandnewtube.com/v/fRdX4T>

America, Can We Talk? “Biden’s Track & Trace”

November 12, 2020



https://www.americasfrontlinedoctors.com/custom_videos/rally-in-washington-dc/

https://www.instagram.com/tv/CFVGV0bDfJF/?utm_source=ig_embed&utm_campaign=loading

Council for National Policy Panel: Dr. Simone Gold



Simone Gold, M.D.

Founder

America's Frontline Doctors





KUSI News: Dr. Simone Gold discusses benefits of Hydroxychloroquine





VITAMIN D FOR COVID-19

49 STUDIES BY **402** SCIENTISTS

33 SUFFICIENCY STUDIES WITH **5,331** PATIENTS

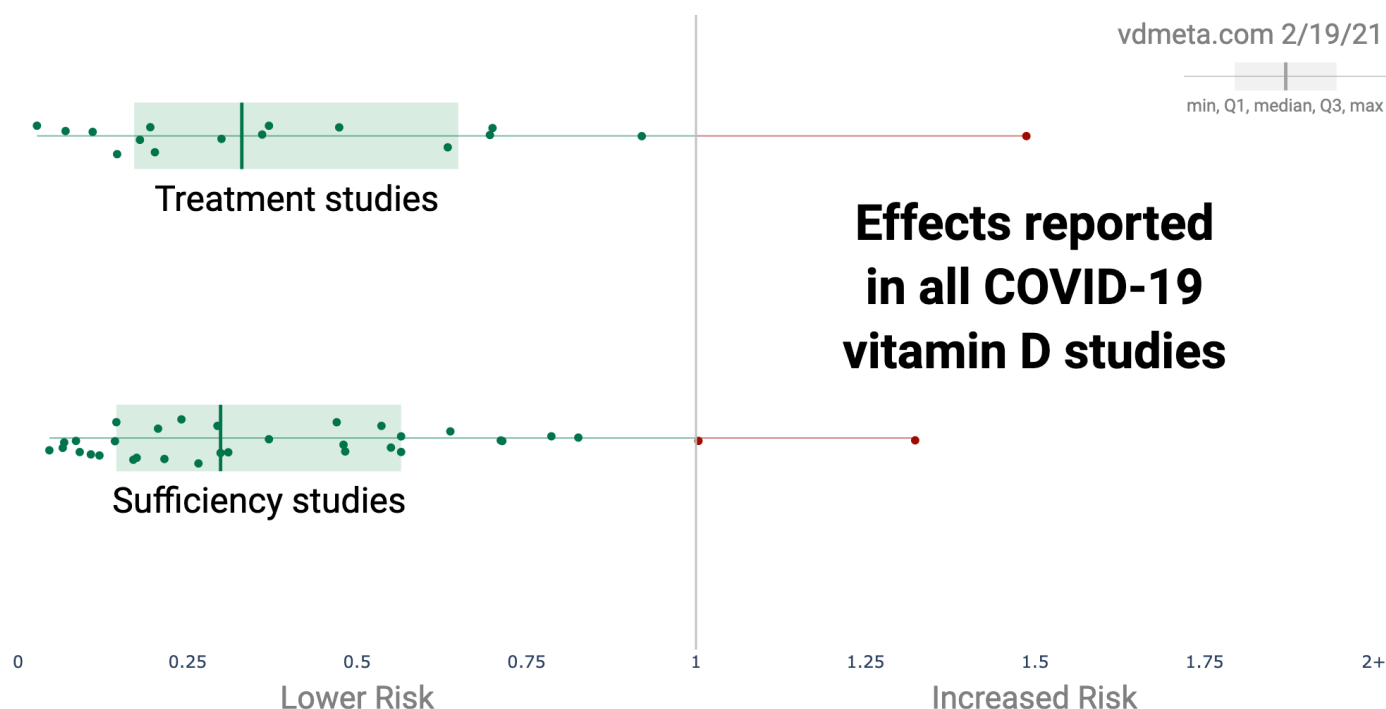
16 TREATMENT TRIALS WITH **11,066** PATIENTS

64% IMPROVEMENT IN **16 TREATMENT** TRIALS RR 0.36 [0.24-0.52]

62% IMPROVEMENT IN **33 SUFFICIENCY** STUDIES RR 0.38 [0.30-0.48]

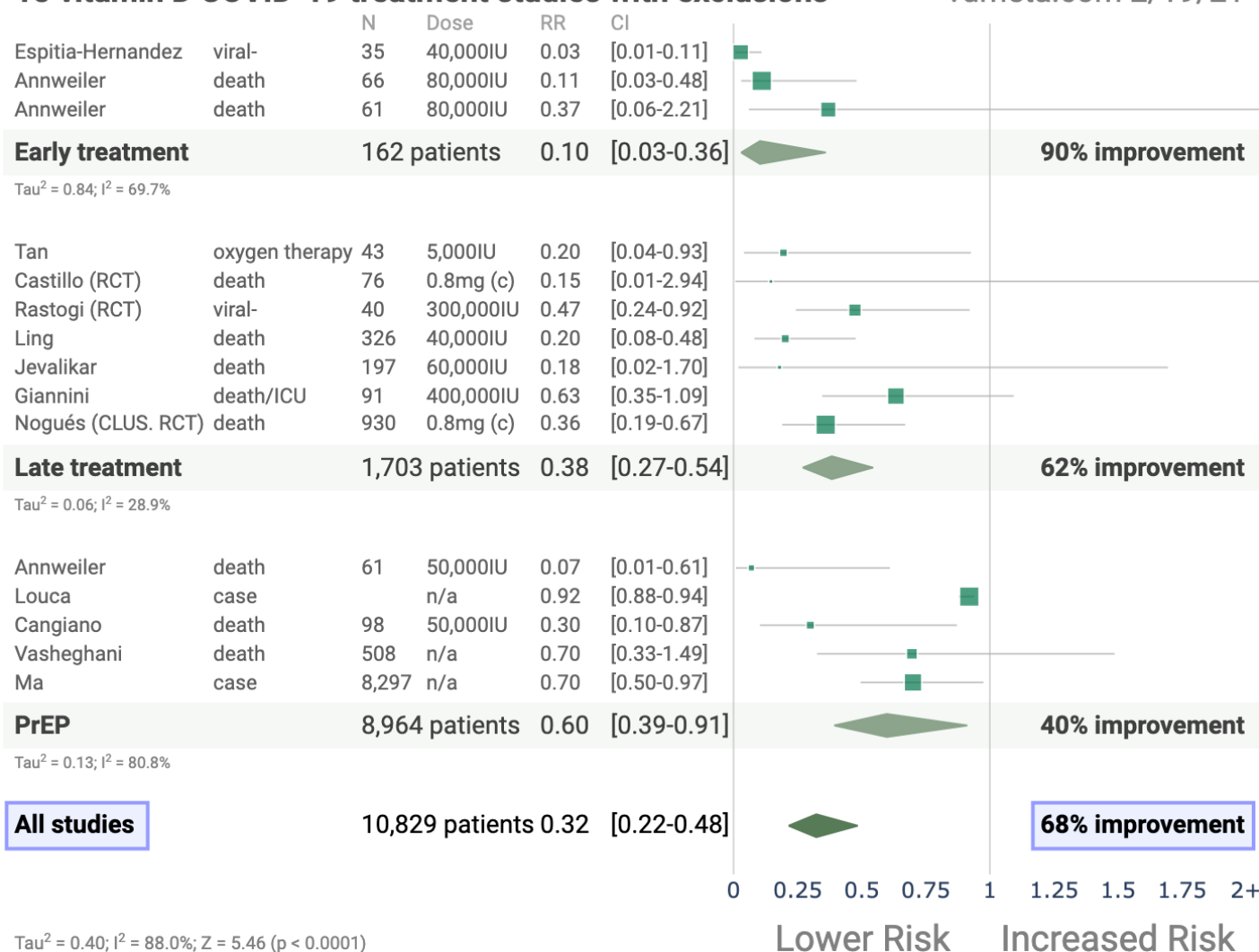
70% IMPROVEMENT IN **10 TREATMENT MORTALITY** RESULTS RR 0.30 [0.17-0.52]

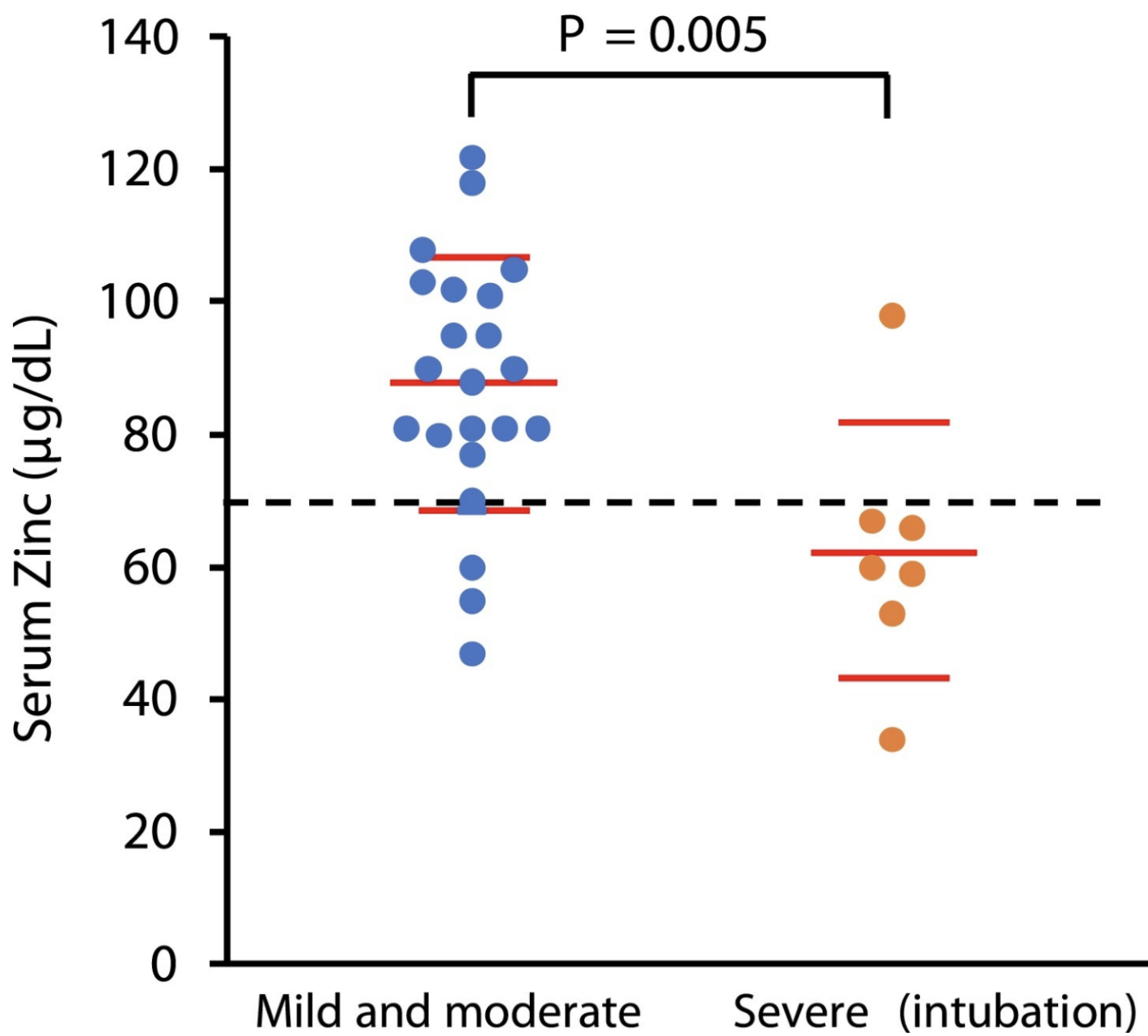
SUFFICIENCY STUDIES ANALYZE OUTCOMES BASED ON SERUM LEVELS. 02/20/21. VDMETA.COM

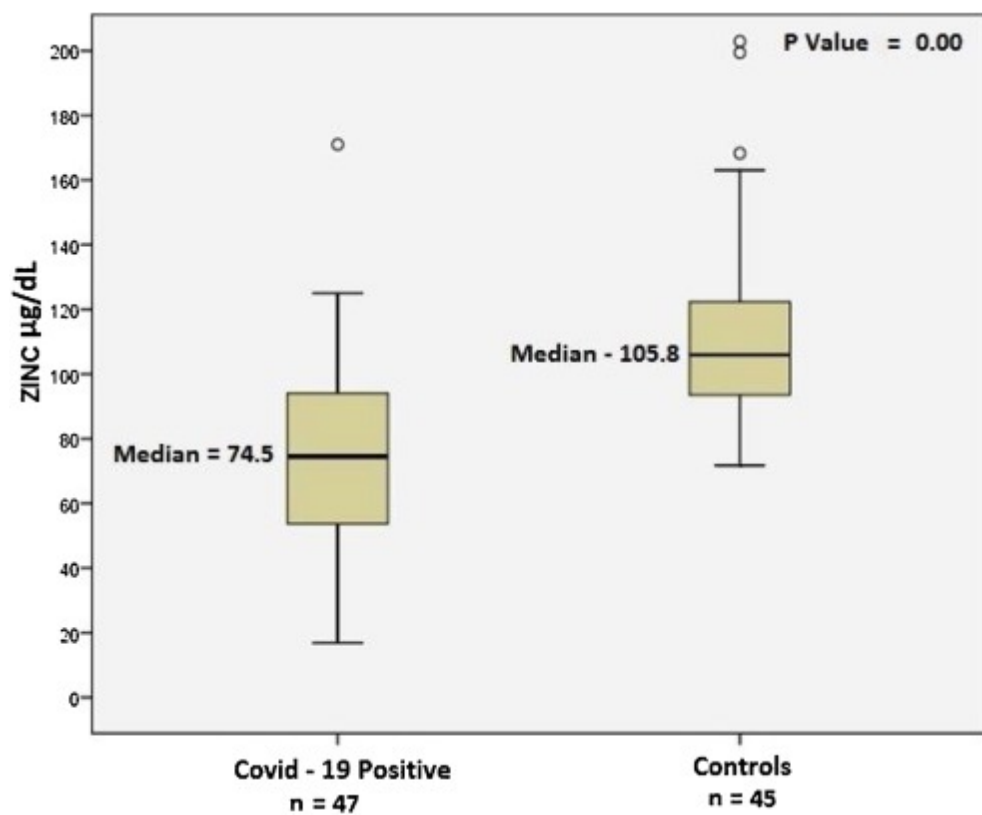
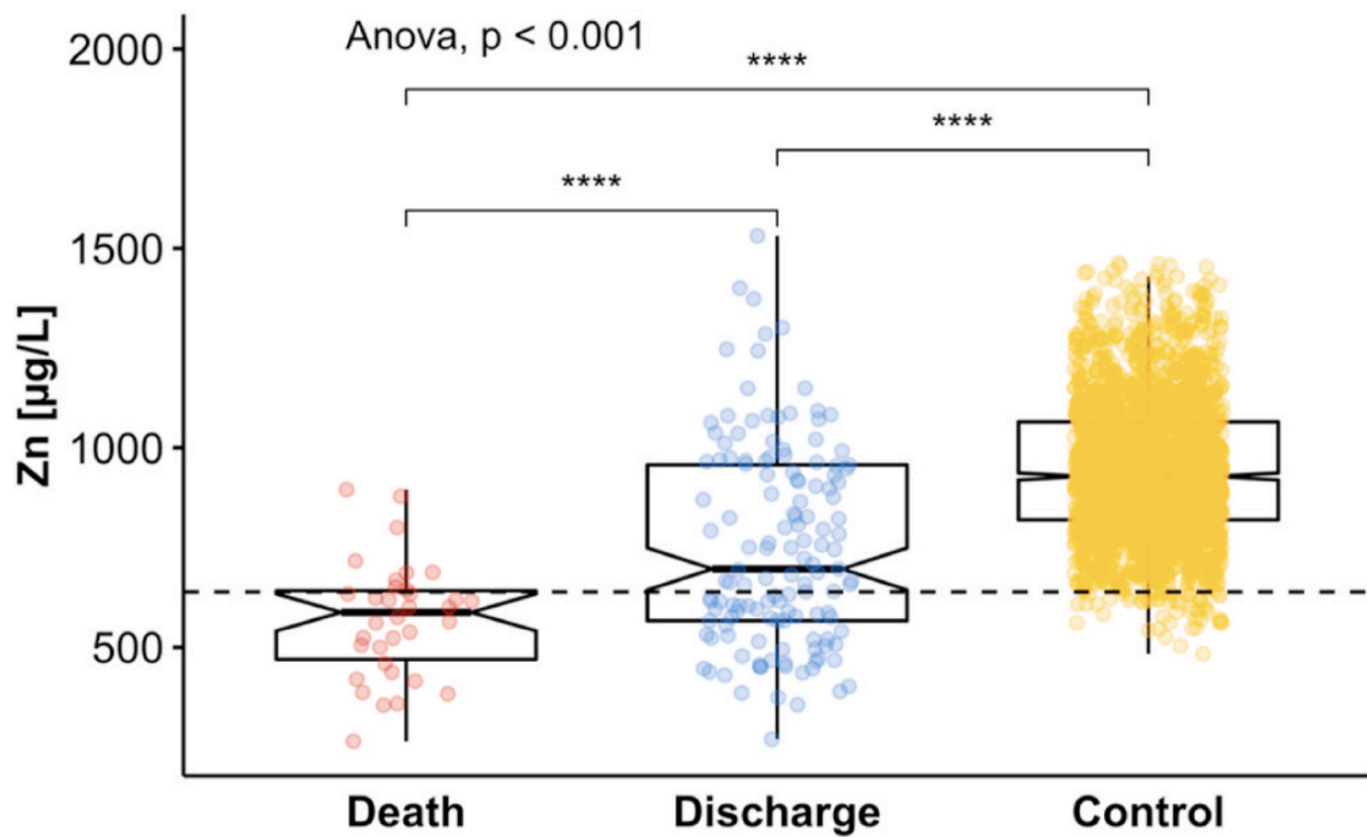


15 vitamin D COVID-19 treatment studies with exclusions

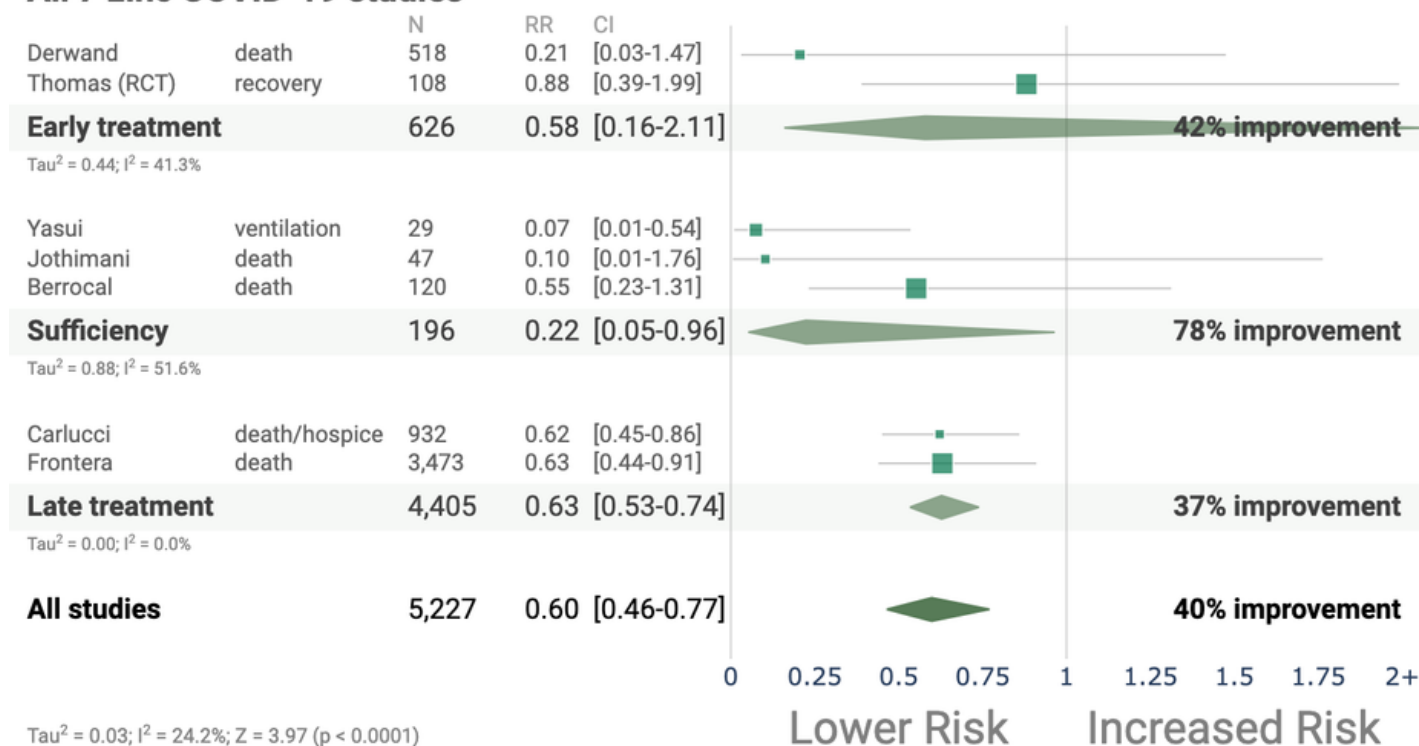
vdm-meta.com 2/19/21







All 7 zinc COVID-19 studies



IVERMECTIN FOR COVID-19

41 TRIALS, 304 SCIENTISTS, 14,833 PATIENTS

20 RANDOMIZED CONTROLLED TRIALS

89% IMPROVEMENT IN 11 PROPHYLAXIS TRIALS RR 0.11 [0.05-0.23]

83% IMPROVEMENT IN 13 EARLY TREATMENT TRIALS RR 0.17 [0.11-0.28]

72% IMPROVEMENT IN 20 RANDOMIZED CONTROLLED TRIALS RR 0.28 [0.17-0.47]

78% IMPROVEMENT IN 15 MORTALITY RESULTS RR 0.22 [0.12-0.41]

POTENTIAL WEEKLY LIVES SAVED*: 52,852

* BASED ON WEEKLY DEATHS AND EFFECTIVENESS OF EARLY TREATMENT WHERE NOT USED. 02/20/21. IVMMETA.COM

HCQ FOR COVID-19

207 TRIALS, 3,239 SCIENTISTS, 183,144 PATIENTS

66% IMPROVEMENT IN 26 EARLY TREATMENT TRIALS RR 0.34 [0.27-0.44]

73% IMPROVEMENT IN 12 EARLY TREATMENT MORTALITY RESULTS RR 0.27 [0.16-0.46]

49% IMPROVEMENT IN 5 EARLY TREATMENT RCT RESULTS RR 0.51 [0.30-0.88]

34% IMPROVEMENT IN 35 PRE-EXPOSURE PROPHYLAXIS TRIALS RR 0.66 [0.51-0.85]

36% IMPROVEMENT IN 6 POST-EXPOSURE PROPHYLAXIS TRIALS RR 0.64 [0.47-0.88]

25% IMPROVEMENT IN 141 LATE TREATMENT TRIALS RR 0.75 [0.69-0.81]

TRIALS COMPARING HCQ WITH A CONTROL GROUP. 02/20/21. HCQMETA.COM

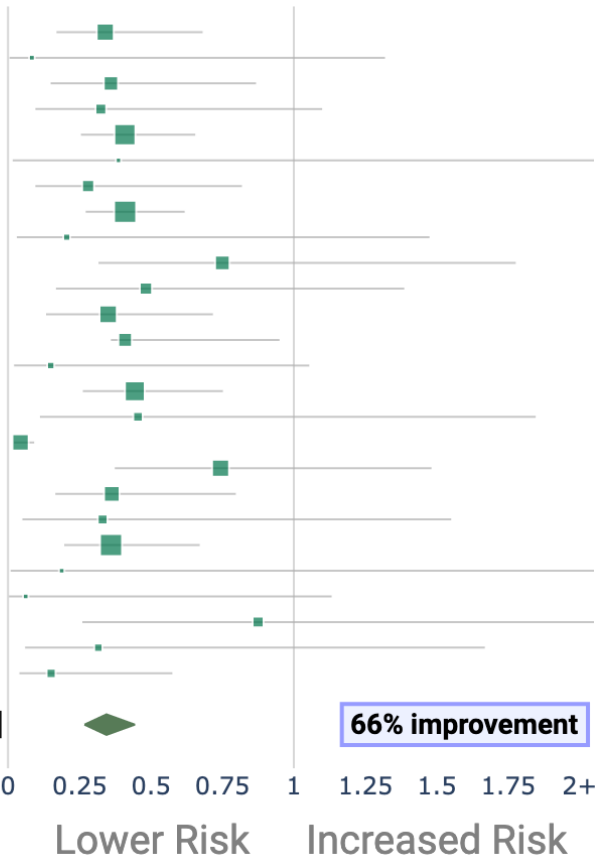
Consider Hydroxychlorquine as OTC Option

<script type="text/javascript" src="https://video.foxnews.com/v/embed.js?id=6170866892001&w=466&h=263"></script><noscript>Watch the latest video at foxnews.com</noscript>
<https://video.foxnews.com/v/6170866892001>

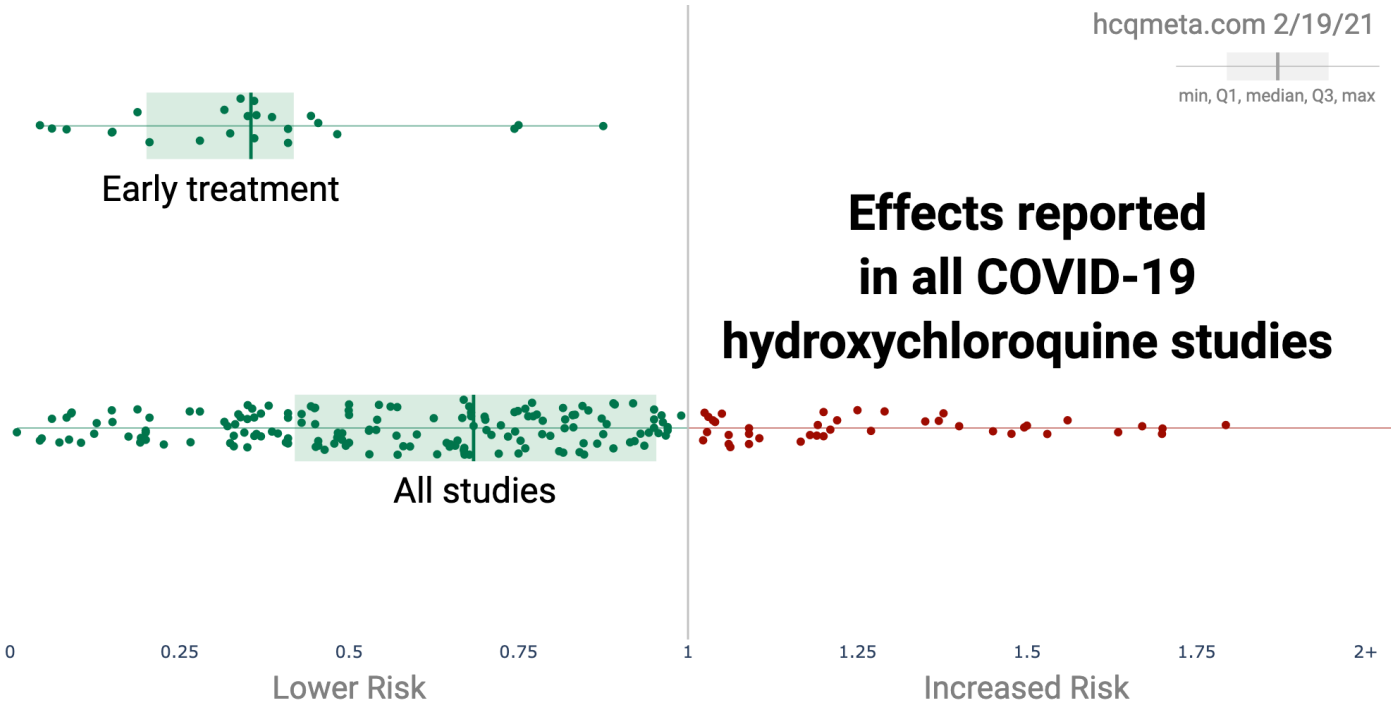
All 26 hydroxychloroquine COVID-19 early treatment studies

hcqmeta.com 2/19/21

		N	Dose	RR	CI
Gautret	viral-	36	2.4g	0.34	[0.17-0.68]
Huang (RCT)	recovery	22	4.0g (c)	0.08	[0.01-1.32]
Esper	hospitalization	636	2.0g	0.36	[0.15-0.87]
Ashraf	death	82	1.6g	0.32	[0.10-1.10]
Huang (ES)	viral-	69	2.0g (c)	0.41	[0.26-0.66]
Guérin	death	54	2.4g	0.39	[0.02-9.06]
Chen (RCT)	viral-	30	1.6g	0.28	[0.10-0.82]
Lagier	death	3,737	2.4g	0.41	[0.27-0.62]
Derwand	death	518	1.6g	0.21	[0.03-1.47]
Mitjà (RCT)	hospitalization	271	2.0g	0.75	[0.32-1.78]
Skipper (RCT)	hospitalization	395	3.2g	0.48	[0.17-1.39]
Hong	viral-	90	n/a	0.35	[0.13-0.72]
Bernabeu-Wittel	death	272	2.0g	0.41	[0.36-0.95]
Yu (ES)	death	2,677	1.6g	0.15	[0.02-1.05]
Ly	death	226	2.4g	0.44	[0.26-0.75]
Ip	death	1,067	n/a	0.45	[0.11-1.85]
Heras	death	100	n/a	0.04	[0.02-0.09]
Kirenga	recovery	56	n/a	0.74	[0.37-1.48]
Sulaiman	death	5,541	2.0g	0.36	[0.17-0.80]
Guisado-Vasco (ES)	death	607	n/a	0.33	[0.05-1.55]
Fonseca	hospitalization	717	2.0g	0.36	[0.20-0.67]
Cadegiani	death	296	1.6g	0.19	[0.01-3.88]
Simova	hospitalization	38	2.4g	0.06	[0.00-1.13]
Omrani (RCT)	hospitalization	456	2.4g	0.88	[0.26-2.94]
Agusti	progression	142	2.0g	0.32	[0.06-1.67]
Su	progression	616	1.6g	0.15	[0.04-0.57]



Tau² = 0.16; I² = 47.7%; Z = 8.27 (p < 0.0001)



Americas Frontline Doctor's

WHO WE ARE

Honest Healthcare Solutions — From the Ground Up

The doctor-patient relationship is being threatened. That means quality patient care is under fire like never before. Powerful interests are undermining the effective practice of medicine with politicized science and biased information. Now more than ever, patients need access to independent, evidence-based information to make the best decisions for their healthcare. Doctors must have the independence to care for their patients without interference from government, media and the medical establishment.

America's Frontline Doctors (AFLDS) stands up for every American looking for the best quality healthcare by empowering doctors working on the front lines of our nation's most pressing healthcare challenges. We help to amplify the voices of concerned physicians and patients nationwide to combat those who push political and economic agendas at the expense of science and quality healthcare solutions.

AFLDS is a non-partisan, not-for-profit organization.

Our growing community of member physicians come from across the country representing a range of medical disciplines and practical experience on the front lines of medicine. Our programs focus on a number of critical issues including:

- Providing Americans with science-based facts about COVID-19
- Protecting physician independence from government overreach
- Combating the pandemic using evidence-based approaches without compromising Constitutional freedoms
- Fighting medical cancel culture and media censorship
- Advancing healthcare policies that protect the physician-patient relationship
- Expanding COVID-19 treatment options for all Americans who need them
- Strengthening the voices of front-line doctors in the national healthcare conversation

WHAT WE BELIEVE

- AFLDS believes that the American people have the right to accurate information using trusted data derived from decades of practical experience, not politicized science and Big Tech-filtered public health information.
- We support devolving critical public health decision-making away from Washington and closer to local communities and the physicians that serve them. We are steadfastly committed to protecting the physician-patient relationship.
- We support incorporating front-line and actively practicing physicians into the nation's healthcare policy conversation.

- We believe that organizations like the AMA and other sources of medical information have lost their independence and should be treated with greater skepticism.
- We believe that safe and effective, over-the-counter COVID preventative and early treatment options should be made available to all Americans who need them. We reject mandatory government lockdowns and restrictions not supported by scientific evidence. We support focused care for the nation's at-risk population, including seniors and the immune-compromised.

Most of all, America's Frontline Doctors is committed to maintaining the physician-patient relationship in the face of government encroachment. We are not the media – please share what you learn here.

ABOUT THE FOUNDER

AFLDS founder Simone Gold, MD, JD, FABEM, “the doctor who went viral,” is a board-certified emergency physician and author of the best-selling book “I Do Not Consent: My Fight Against Medical Cancel Culture.” She graduated from Chicago Medical School before attending Stanford University Law School to earn her Juris Doctorate degree. Dr. Gold worked in Washington, D.C. for the Surgeon General, as well as for the Chairman of the U.S. Senate Labor and Human Resources Committee.

Dr. Gold is a frequent guest on media outlets across the country. She has appeared in USA Today, the Associated Press, the Guardian (UK), New York Times, and many other publications. She

has been featured on such nationally syndicated programs as The Tucker Carlson Show, The Ingraham Angle, The Glenn Beck Show, The Charlie Kirk Show, The Dennis Prager Show, Day Star Television, and others. In July 2020, she organized the first-ever America's Frontline Doctors White Coat Summit in Washington, D.C., which drew 20 million views online. Dr. Gold is America's leading voice of common sense and scientific clarity in the fight against COVID-19.

[HEALING OUR SMALL BUSINESSES: IT IS SAFE TO RESUME INDOOR DINING AND HOSPITALITY NATIONWIDE](#)

By [Hannah Kerns](#) | February 16, 2021 | Comments Off on
HEALING OUR SMALL BUSINESSES: IT IS SAFE TO RESUME
INDOOR DINING AND HOSPITALITY NATIONWIDE

An AFLDS Issue Brief for Citizens, Policymakers and Physicians
STATEMENT OF POSITION The US labor market is showing early signs that it is on the mend. Ending needless lockdowns must be a priority to improve the economy and move the nation past the pandemic. Yet state and local governments continue to punish the dining and...

[EXPANDING USE OF IVERMECTIN AS EARLY TREATMENT FOR COVID](#)

By [Dain Pascocello](#) | February 10, 2021 | Comments Off on
EXPANDING USE OF IVERMECTIN AS EARLY TREATMENT
FOR COVID

An AFLDS Issue Brief for Patients, Policymakers and Physicians
STATEMENT OF POSITION One of the greatest tragedies as well

as most significant errors made by the government in the response to the COVID-19 pandemic has been the repeated and intentional effort to limit the use of preventative and prophylactic medications to help reduce the...

[OPEN OUR SCHOOLS NOW](#)

By [Dain Pascocello](#) | February 4, 2021 | Comments Off on OPEN OUR SCHOOLS NOW

An AFLDS Issue Brief for Parents, Policymaker and Physicians
STATEMENT OF POSITION America's Frontline Doctors (AFLDS) agrees with assessments offered by the Centers for Disease Control and Prevention, the American Academy of Pediatrics (AAP), and both the Trump and Biden administrations that K-12 schools should resume in-person instruction. The medical evidence is clear: Less...

AFLDS – Promotional Video

February 11, 2021

https://www.americafrontlinedoctors.com/custom_videos/video-teaser-2/

Dr. Klinghart's excellent general video -



1:16

Klinghart's bio: <https://www.emedeevents.com/speaker-profile/dietrich-klinghardt> - Profile

Coronavirus Information Center

<https://www.wanttoknow.info/h/coronavirus-information>

This page provides links to a variety of sources of reliable, verifiable information on the coronavirus (aka COVID-19) which the major media have largely ignored. Our most basic material is listed first, followed by other resources which delve deeper for those interested in more.

[WantToKnow.info](https://www.wanttoknow.info) presents this information as an opportunity for you to educate yourself and others, and to inspire us to work

together to strengthen democracy and build a brighter future for us all.

Masks

[Science](#) | [References](#) | [Civil Liberties](#) | [Danish Study](#)

https://www.minds.com/newsfeed/1209324205757710336?referrer=shane_st_pierre

Masks - Dr. Simone Gold

October 26th, 2020

<https://odysee.com/@Marine1063:0/-Masks---Dr-Simone-Gold:d>

lbry://@Marine1063#0/-Masks---Dr-Simone-Gold#d

Download: [https://odysee.com/\\$/download/-Masks---Dr-Simone-Gold/db3b0c0e4cf823a8846d1a2be3a8ac06019e4a21](https://odysee.com/$/download/-Masks---Dr-Simone-Gold/db3b0c0e4cf823a8846d1a2be3a8ac06019e4a21)

CDCThere is no scientific evidence for healthy people wearing masks<https://www.youtube.com/watch?v=OUUOq1ksiQQ&feature=youtu.be> (Video: 16:32) Neurosurgeon Dr. Russell Blaylock "There is no scientific evidence that masks are effective. If you are not sick, you should not wear a face mask."

<https://www.technocracy.news/blaylock-face-masks-pose-serious-risks-to-the-healthy/>

Blaylock: Face Masks Pose Serious Risks To The Healthy Technocracy News and Trends

<https://www.kansascity.com/opinion/editorials/article244839757.html> - Kansas tested whether mask mandates decrease COVID-19 cases. The results were clear - 8/10/20 - "Those with mask orders have seen cases decline from about 26 to 16 per 100,000 population. Cases in counties with no mask mandate have stayed relatively flat."

CDC's definition of close contact: "Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period* starting from 2 days before

illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated."

<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>

The general view among infectious disease experts, including those from the World Health Organization (WHO), is that this strongly indicates that SARS-CoV-2 is not highly airborne transmissible, except possibly under certain circumstances.

If masks work, why did a woman wearing a mask with windows down get it from someone else?

<https://www.sfgate.com/news/article/A-nurse-and-her-entire-family-contracted-covid-19-15775645.php>

Jeremy Hammond exposes fraudulent study on masks in PNAS -

<https://www.jeremyrhammond.com/2020/07/10/study-fraudulently-claims-sars-cov-2-is-mainly-airborne/>

A 4,800 person randomized trial (<https://www.medpagetoday.com/blogs/vinay-prasad/89778>) in Denmark showed that mask have limited value in protecting against COVID.

<https://www.greenmedinfo.com/blog/why-won-t-anyone-publish-danish-mask-study> - Why Won't Anyone Publish the Danish Mask Study? 11/16/20

RFK, Jr. and Jeremy Hammond video on masks -

<https://www.jeremyrhammond.com/2020/10/28/my-chat-with-rfk-jr-on-sars-cov-2-lockdowns-and-masks/>

<https://www.msn.com/en-us/news/world/dutch-govt-will-not-advise-use-of-masks/ar-BB17l46l> - Dutch government will not advise public to wear masks - minister - 7/29/20

"The Dutch government says it will not advise the public to wear masks to slow the spread of coronavirus, asserting that their effectiveness has not been proven."

<https://www.thetimes.co.uk/article/facemask-evidence-is-astonishingly-weak-says-architect-of-swedish-strategy-bm0w335zr>

-Dangerous' to think masks will stop virus - 8/10/20

<https://www.bloomberg.com/news/articles/2020-07-28/sweden-unveils-promising-covid-19-data-as-new-cases-plunge> -

Sweden Unveils 'Promising' Covid-19 Data as New Cases Plunge - 7/28/20

"Tegnell also broached the subject of face masks. "With numbers diminishing very quickly in Sweden, we see no point in wearing a face mask in Sweden, not even on public transport," he said. "

CDC study states "Although mechanistic studies support the potential effect of hand hygiene or face masks, evidence from 14 randomized controlled trials of these measures did not support a substantial effect on transmission of laboratory-confirmed influenza. We similarly found limited evidence on the effectiveness of improved hygiene and environmental cleaning."

https://wwwnc.cdc.gov/eid/article/26/5/19-0994_article

Mercola and friends on masks -

<https://articles.mercola.com/sites/articles/archive/2020/07/19/are-face-masks-effective.aspx>

CAL-OSHA Regulations: "Cloth face coverings do not protect against COVID

-19" <https://dir.ca.gov/dosh/coronavirus/COVID-19-Infection-Prevention-in-Logistics.pdf>

SAFETY AND HEALTH GUIDANCE COVID-19 Infection Prevention for Logistics Employers and Employees. California Department of Industrial Relations Division of Occupational Safety & Health Publications Unit

California Department of Health: "Face coverings may increase risk if users reduce their use of strong defenses."

"There is limited evidence to suggest that use of cloth face coverings by the public during a pandemic could help reduce disease transmission."

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Face-Coverings-Guidance.aspx>

SUBJECT: Face Coverings Guidance State of California—Health and Human Services Agency
California Department of Public Health

FDA "Even a properly fitted N95 mask does not prevent illness or death"

<https://web.archive.org/web/20200516235249/https://www.fda.gov/medical-devices/personal-protective-equipment-infection-control/n95-respirators-and-surgical-masks-face-masks>

Food and Drug Administration N95 Respirators and Surgical Masks (Face Masks)

<https://odysee.com/@thecrowhouse:2/The-COVID-Vaccine---Ask-The-Experts...:f>

<iframe id="lbry-iframe" width="560" height="315" src="https://odysee.com/\$/embed/The-COVID-Vaccine---Ask-The-Experts.../f6ddee2868cfc278e7cf4b97770a52c29a617ea7?r=CTXJwgN1Qs7d3KuWq2xsSMELJnyXxJMt" allowfullscreen></iframe>

Coronavirus Information Summaries

Two incisive summaries offer a deeper perspective to the coronavirus than what is being presented to the public. The first explores the recent history of epidemics (including COVID-19) and how they've been used by the powerful elite to pad their pockets and gain ever more control over the public. The second explores profound questions about the damage caused both by the coronavirus and by policies imposed as a result of the virus. Is damage from the policies worse than the damage from the virus itself? The third link raises many important questions about COVID-19 vaccines.

www.WantToKnow.info/h/coronavirus-what-if - What If?

www.WantToKnow.info/h/coronavirus-questions-statistics -
Profound Questions

www.WantToKnow.info/h/covid-19-vaccines-warning - COVID-
19 Vaccine Warnings

Best Videos on the Coronavirus

In this time when much important, reliable information regarding the coronavirus is being censored, the several videos presented at the link below stand out for presenting verifiable information which will educate you to a deeper agenda that the major media have largely failed to cover.

www.WantToKnow.info/h/coronavirus-best-videos - **Best
Coronavirus Videos**

Top News Articles Revealing Coronavirus Manipulation

We have collected hundreds of news articles from respected media sources that contain eye-opening information exposing

various aspects of the coronavirus. Links are always provided to the original sources for verification. Though the media largely avoids publishing articles that question the official story, there are many important exceptions which you will find summarized here. The first link provides summaries of incredibly revealing news articles with the most important articles listed first. The second link provides the same article excerpts with the most recently published articles listed first. The final link gives article excerpts about problems with the coronavirus vaccines.

www.WantToKnow.info/coronavirusnewsarticles - **Best**

Coronavirus News

www.WantToKnow.info/coronavirusmediaarticles - **Most Recent**

Coronavirus News

www.WantToKnow.info/coronavirus-vaccine-problems... -

Coronavirus Vaccines

Recommended Coronavirus Resources

Two resources are particularly outstanding for their balanced and carefully researched information on the coronavirus which often questions the official story. Robert F. Kennedy, Jr. has a large organization with thousands of dedicated volunteers who are doing a tremendous job to keep those interested informed on the deeper story. His Children's Health Defense website has long been one of the best for following the money and the reliable science which often contradicts what is being publicly presented. Their email list is most excellent.

<https://childrenshealthdefense.org> - **Children's Health**

Defense

Jeremy Hammond is an excellent independent researcher who works closely with RJK, Jr. and others to find and share the best, most solid information on the coronavirus, vaccines, the coronavirus tests, and much more. His email list may be the best resource out there for educating yourself to all that is going on.

www.jeremyrhammond.com - **Jeremy Hammond**

WantToKnow.info founder Fred Burks has compiled an abundance of intriguing raw data on the coronavirus. The link below takes you to a collection of a large number of media articles and government statistics, and much more. The information is divided into a number of categories. This collection is not designed for public consumption, but it is a great resource for researchers.

www.notion.so/Coronavirus-ec12eaae9f1c4285b9856024f7f0a137 - **Data collection**

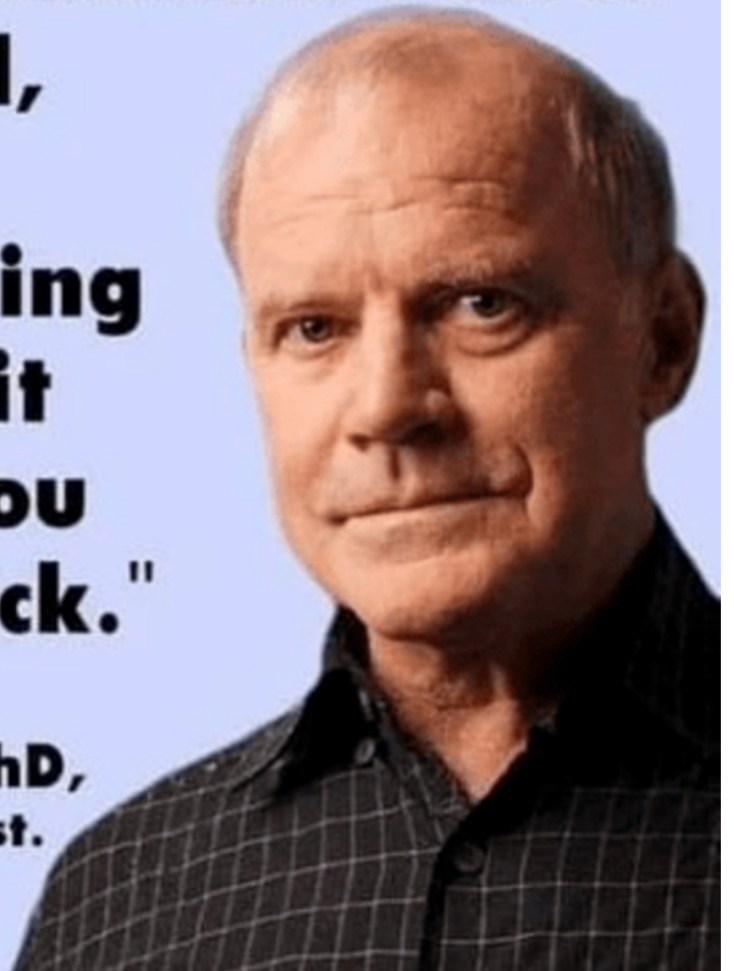
The RT-PCR Test: My Souce:

The Man who invented it, Kary Mullis PhD.

https://www.minds.com/newsfeed/1209324205757710336?referrer=shane_st_pierre

Anyone can test positive for practically anything with a PCR test, if you run it long enough...with PCR if you do it well, you can find almost anything in anybody...it doesn't tell you that you're sick."

**—Dr. Kary Mullis, PhD,
creator of the PCR test.**



Assertion: Positive RT-PCR test means being sick with COVID. This assumption is misleading and incorrect. Very few people, including doctors, understand how a PCR test works

"With PCR, if you do well, you can find almost everything in everybody" Kary Mullis Covid PCR test inventor - "not meant to be used for infectious diseases" Kary Mullis "Kary Mullis who was

awarded a Nobel Chemistry Prize - has always stated that the RT/PCR test being used worldwide by the WHO and government health agencies to test for COVID 19 was never to be used for infectious diseases.

In this short video he explains why and says that - using certain protocols or "tweaking" the RNA sequences - they can come up with any result they want. The World Health Organization and governments worldwide (funded by Bill Gates et al) are engaged in a massive global deception against all peoples, to destroy the global economies and impose a tyrannical planetary regime and full spectrum dominance through surveillance systems designed to control our every move. Lockdowns, facemasks, social distancing and mandatory RNA vaccines with digital tattoos. All based on a hoax test and skewed statistics."

It is time for everyone to come out of this negative trance, this collective hysteria, because famine, poverty, massive unemployment will kill, mow down many more people than SARS-CoV-2! All current propaganda on the COVID-19 pandemic is based on an assumption that is considered obvious, true and no longer questioned: Positive RT-PCR test means being sick with COVID. This assumption is misleading. Very few people, including doctors, understand how a PCR test works. RT-PCR means Real Time-Polymerase

Chain Reaction. In French, it means: Réaction de Polymérisation en Chaîne en Temps Réel. In medicine, we use this tool mainly to diagnose a viral infection. Starting from a clinical situation with the presence or absence of particular symptoms in a patient, we consider different diagnoses based on tests. In the case of certain infections, particularly viral infections, we use the RT-PCR technique to confirm a diagnostic hypothesis suggested by a clinical picture. We do not routinely perform RT-PCR on any patient who is overheated, coughing or has an inflammatory syndrome!

<https://open.libry.com/@Dryburgh:7/kary-mullis-pcr-anthony-fauci:b>

It is a laboratory, molecular biology technique of gene amplification because it looks for gene traces (DNA or RNA) by amplifying them. In addition to medicine, other fields of application are genetics, research, industry and forensics. The technique is carried out in a specialized laboratory, it cannot be done in any laboratory, even a hospital. This entails a certain cost, and a delay sometimes of several days between the sample and the result. Today, since the emergence of the new disease called COVID-19 (COrona Vlrus Disease-2019), the RT-PCR diagnostic technique is used to define

positive cases, confirmed as SARS-CoV-2 (coronavirus responsible for the new acute respiratory distress syndrome called COVID-19).

These positive cases are assimilated to COVID-19 cases, some of whom are hospitalized or even admitted to intensive care units.

Official postulate of our managers: positive RT-PCR cases = COVID-19 patients. [1] This is the starting postulate, the premise of all official propaganda, which justifies all restrictive government measures: isolation, confinement, quarantine, mandatory masks, color codes by country and travel bans, tracking, social distances in companies, stores and even, even more importantly, in schools [2]. This misuse of RT-PCR technique is used as a relentless and intentional strategy by some governments, supported by scientific safety councils and by the dominant media, to justify excessive measures such as the violation of a large number of constitutional rights, the destruction of the economy with the bankruptcy of entire active sectors of society, the degradation of living conditions for a large number of ordinary citizens, under the pretext of a pandemic based on a number of positive RT-PCR tests, and not on a real number of patients. Technical aspects: to better understand and not be manipulated The PCR technique was developed by chemist Kary B. Mullis in 1986. Kary Mullis was awarded the Nobel Prize in Chemistry in 1993.

2 min video - https://www.youtube.com/watch?v=cTWN_PJ8t2o

Although this is disputed [3], Kary Mullis himself is said to have criticized the interest of PCR as a diagnostic tool for an infection, especially a viral one. He stated that if PCR was a good tool for

research, it was a very bad tool in medicine, in the clinic [4]. Mullis was referring to the AIDS virus (HIV retrovirus or HIV) [5], before the COVID-19 pandemic, but this opinion on the limitation of the technique in viral infections [6], by its creator, cannot be dismissed out of hand; it must be taken into account! PCR was perfected in 1992. As the analysis can be performed in real time, continuously, it becomes RT (Real-Time) – PCR, even more efficient. It can be done from any molecule, including those of the living, the nucleic acids that make up the genes: DNA (deoxyribonucleic acid) RNA (Ribonucleic Acid) Viruses are not considered as “living” beings, they are packets of information (DNA or RNA) forming a genome. It is by an amplification technique (multiplication) that the molecule sought is highlighted and this point is very important. RT-PCR is an amplification technique [7]. If there is DNA or RNA of the desired element in a sample, it is not identifiable as such. This DNA or RNA must be amplified (multiplied) a certain number of times, sometimes a very large number of times, before it can be detected. From a minute trace, up to billions of copies of a specific sample can be obtained, but this does not mean that there is all that amount in the organism being tested. In the case of COVID-19, the element sought by RT-PCR is SARS-CoV-2, an RNA virus [8]. There are DNA viruses such as Herpes and Varicella viruses. The most well known RNA viruses, in addition to coronaviruses, are Influenza, Measles, EBOLA, ZIKA viruses. In the case of SARS-CoV-2, RNA virus, an additional specific step is required, a transcription of RNA into DNA by means of an enzyme, Reverse Transcriptase. This step precedes the amplification phase. It is not

the whole virus that is identified, but sequences of its viral genome. This does not mean that this gene sequence, a fragment of the virus, is not specific to the virus being sought, but it is an important nuance nonetheless: RT-PCR does not reveal any virus, but only parts, specific gene sequences of the virus. At the beginning of the year, the SARS-CoV-2 genome was sequenced. It consists of about 30,000 base pairs. The nucleic acid (DNA-RNA), the component of the genes, is a sequence of bases. In comparison, the human genome has more than 3 billion base pairs. Teams are continuously monitoring the evolution of the SARS-CoV-2 viral genome as it evolves [9-10-11], through the mutations it undergoes. Today, there are many variants [12]. By taking a few specific genes from the SARS-CoV-2 genome, it is possible to initiate RT-PCR on a sample from the respiratory tract. For COVID-19 disease, which has a nasopharyngeal (nose) and oropharyngeal (mouth) entry point, the sample should be taken from the upper respiratory tract as deeply as possible in order to avoid contamination by saliva in particular. All the people tested said that it is very painful [13]. The Gold Standard (preferred site for sampling) is the nasopharyngeal (nasal) approach, the most painful route.

If there is a contraindication to the nasal approach, or preferably to the individual being tested, depending on the official organs, the oropharyngeal approach (through the mouth) is also acceptable. The test may trigger a nausea/vomiting reflex in the individual being tested. Normally, for the result of an RT-PCR test to be considered reliable, amplification from 3 different genes (primers)

of the virus under investigation is required. “The primers are single-stranded DNA sequences specific to the virus. They guarantee the specificity of the amplification reaction. » [14] “The first test developed at La Charité in Berlin by Dr. Victor Corman and his associates in January 2020 allows to highlight the RNA sequences present in 3 genes of the virus called E, RdRp and N. To know if the sequences of these genes are present in the RNA samples collected, it is necessary to amplify the sequences of these 3 genes in order to obtain a signal sufficient for their detection and quantification. »[15]. The essential notion of Cycle Time or Cycle Threshold or Ct positivity threshold [16]. An RT-PCR test is negative (no traces of the desired element) or positive (presence of traces of the desired element). However, even if the desired element is present in a minute, negligible quantity, the principle of RT-PCR is to be able to finally highlight it by continuing the amplification cycles as much as necessary.

RT-PCR can push up to 60 amplification cycles, or even more! Here is how it works: Cycle 1: target x 2 (2 copies) Cycle 2: target x 4 (4 copies) Cycle 3: target x 8 (8 copies) Cycle 4: target x 16 (16 copies) Cycle 5; target x 32 (32 copies) Etc exponentially up to 40 to 60 cycles! When we say that the Ct (Cycle Time or Cycle Threshold or RT-PCR positivity threshold) is equal to 40, it means that the laboratory has used 40 amplification cycles, i.e. obtained 240 copies. This is what underlies the sensitivity of the RT-PCR assay. While it is true that in medicine we like to have high specificity and sensitivity of the tests to avoid false positives and false negatives, in the case of COVID-19 disease, this

hypersensitivity of the RT-PCR test caused by the number of amplification cycles used has backfired. This over-sensitivity of the RT-PCR test is deleterious and misleading! It detaches us from the medical reality which must remain based on the real clinical state of the person: is the person ill, does he or she have symptoms? That is the most important thing! As I said at the beginning of the article, in medicine we always start from the person: we examine him/her, we collect his/her symptoms (complaints-anamnesis) and objective clinical signs (examination) and on the basis of a clinical reflection in which scientific knowledge and experience intervene, we make diagnostic hypotheses. Only then do we prescribe the most appropriate tests, based on this clinical reflection.

We constantly compare the test results with the patient's clinical condition (symptoms and signs), which takes precedence over everything else when it comes to our decisions and treatments. Today, our governments, supported by their scientific safety advice, are making us do the opposite and put the test first, followed by a clinical reflection necessarily influenced by this prior test, whose weaknesses we have just seen, particularly its hypersensitivity. None of my clinical colleagues can contradict me. Apart from very special cases such as genetic screening for certain categories of populations (age groups, sex) and certain cancers or family genetic diseases, we always work in this direction: from the person (symptoms, signs) to the appropriate tests, never the other way around. This is the conclusion of an article in the Swiss Medical Journal (RMS) published in 2007, written by doctors Katia Jaton and Gilbert Greub microbiologists

from the University of Lausanne : PCR in microbiology: from DNA amplification to result interpretation: “To interpret the result of a PCR, it is essential that clinicians and microbiologists share their experiences, so that the analytical and clinical levels of interpretation can be combined.” It would be indefensible to give everyone an electrocardiogram to screen everyone who might have a heart attack one day.

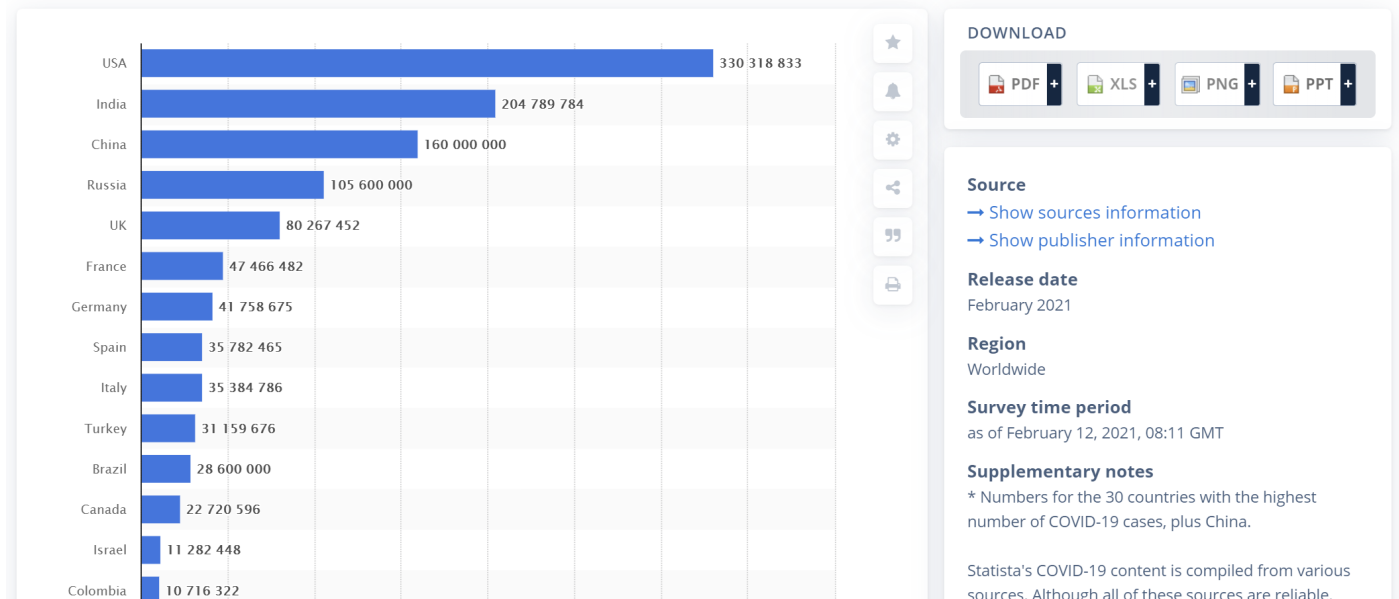
Awfully suspicious that biochemist Kary Mullis who invented the PCR test died on August 7, 2019.

<http://stateofthenation.co/?p=30925>

Knowing this about the PCR test, how relevant is it to USA?

VERY We have an absurd amount of fake testing to drive fear and "cases"

Number of coronavirus (COVID-19) tests performed in the most impacted countries worldwide as of February 12, 2021*



Dr Simone Gold Talk

January 27th, 2021

<https://odysee.com/@FreeYourMindAz:d/Dr-Simone-Gold-Talk:0>

Download: [https://odysee.com/\\$/download/Dr-Simone-Gold-Talk/0bc11aa8af582b1a9095c115baa39afbd2c56205](https://odysee.com/$/download/Dr-Simone-Gold-Talk/0bc11aa8af582b1a9095c115baa39afbd2c56205)

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<iframe id="lbry-iframe" width="560" height="315"
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</iframe>
```

Lockdowns

- **Harmful Health Effects:** Lockdowns are not feasible for seasonal viruses like influenza or Covid-19. In an urban, complex, modern world, shutting down the economy and human life for 1/3 of every year causes exponentially greater downstream harm in poverty, social isolation, depression, alcoholism, delayed and limited access to healthcare resulting in death. In addition drier, uncirculated air of indoor environments encourages viral transmission.

See: [Harmful](#) | [Don't Follow Europe](#) | [Mass Casualty Incident](#)

- **Don't Work:** The most obvious proof that lockdowns don't work is Sweden (not locked down) whose numbers were better than her European neighbors which did lock down.

Furthermore, during the second wave, Sweden's numbers are much better than its neighbors, implying lockdowns are simply irrelevant, as the virus must just get through the community, and once it does, numbers are low. Even under conditions of extreme (voluntary) lockdown the virus gets through.

See: [Sweden](#) | [Marines](#) | [Stanford Study](#)

- **Illegal:** There is no legal precedent or legal authority for the United States government to "lockdown" its citizens. The United States Supreme Court has ruled in *Shelton v. Tucker* 364 U.S. 479 (1960) that the government cannot broadly curtail personal liberty. And there is no legal precedent or authority for locking down healthy citizens. The police power of quarantine only is possible against ill persons. *Jew Ho v. Williamson* 103 F. 10 (1900) and *Wong Wai v. Williamson* 103 F. 384 (1900).

<http://blog.de-program.org/how-a-false-hydroxychloroquine-narrative-was-created-dangerous-when-used-for-covid-19/>

<https://odysee.com/@thecrowhouse:2/The-COVID-Vaccine---Ask-The-Experts...:f>

Hydroxychloroquine

[White Paper PDF](#) | [White Paper References PDF](#) | [Compendium](#) | [Real-Time HCQ Studies](#)

This is the culmination of months-long research from all sources. It explains how Americans have come to be in the grip of fear. All the myths and all the misconceptions about a safe, generic drug that has been FDA approved for 65 years, given to pregnant women, breastfeeding women, children, the elderly and the immune-compromised for years and decades without complication, are finally put in the trash heap where they belong. You will have the indisputable proof that you have been massively lied to, often very intentionally.

Early Treatment

[Early Treatment Protocols](#) | [Real-Time HCQ Studies](#) | [Home Treatment Kits Worldwide](#)

October 9, 2020: In a shameful move, the NIH declared NO treatment of SARS-CoV-2 patients unless the patient is hospitalized and requires oxygen. This is contrary to all the evidence and contrary to all of the history of the practice of medicine and all the evidence to date regarding managing this virus. Attached is the disgraceful NIH statement but also the early treatment protocol published in the American Journal of Medicine.

There are currently over 100 studies showing HCQ is effective in early treatment.

Medicine Uncensored

[Visit Website](#)

Medicine Uncensored is a U.S. based news site covering breaking COVID-19 research without the censorship

OmniJournal

[Visit Website](#)

OmniJournal is an open collaboration focused on the review of scientific publications and discoveries in real-time. Content is continually created and edited by anyone with the shared goal of expediently validating or rejecting medical and scientific discoveries.

[The Hippocratic Oath & COVID-19: Dr Klaus Schustereder's Perspective](#)

Posted on [February 6, 2021](#) by [covexit](#)

<https://www.wanttoknow.info/coronavirusnewsarticles>

Dr. Pierre Kory testifies at a Senate Homeland Security and Governmental Affairs Committee hearing on Capitol Hill, Dec. 8, 2020.

<https://www.dailyechoed.com/opinion-youtube-cancels-the-u-s-senate/?noamp=available>

YouTube Cancels the U.S. Senate
2021-02-02, *Wall Street Journal*



Google's YouTube has ratcheted up censorship to a new level by removing two videos from a U.S. Senate committee. They were from a Dec. 8 Committee on Homeland Security and Governmental Affairs hearing on early treatment of Covid-19. One was a 30-minute summary; the other was the opening statement of critical-care specialist Pierre Kory. Dr. Kory is part of a world-renowned group of physicians who developed a groundbreaking use of corticosteroids to treat hospitalized Covid patients. His testimony at a May Senate hearing helped doctors rethink treatment protocols and saved lives. At the December hearing, he presented evidence regarding the use of ivermectin, a cheap and widely available drug that treats tropical diseases caused by parasites, for prevention and early treatment of Covid-19. He described a just-published study from Argentina in which about 800 health-care workers received ivermectin and 400 didn't. **Not one of the 800 contracted Covid-19; 58% of the 400 did.** Before being removed from YouTube and other websites, Dr. Kory's opening statement had been viewed by more than eight million people. Unfortunately, government health agencies don't share that interest in early treatment. A year into the pandemic, NIH treatment guidelines for Covid patients are to go home, isolate yourself and do nothing other than monitor your illness. The censors at YouTube have decided for all of us that the American public shouldn't be able to hear what senators heard.

Note: You can access the entire article free of charge on [this webpage](#). **Can it be any more blatant that facebook is in cahoots with big Pharma in not wanting cheap, effective treatments for COVID-19?** Watch an excellent, eye-opening [14-minute interview](#) with a facebook insider revealing how censorship works. Read about how Silicon Valley is [shutting](#)

[down even live streams](#) by legitimate journalists. For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) and [media manipulation](#) from reliable major media sources.

Video showing Denmark's successful major protest against epidemic law not reported:



Hydroxychloroquine - study in Michigan showed 50% cured -



- The BIG Hydroxychloroquine Lie

<https://www.newsweek.com/key-defeating-covid-19-already-exists-we-need-start-using-it-opinion-1519535> -

<https://www.independent.co.uk/news/world/americas/donald-rumsfeld-makes-5m-killing-on-bird-flu-drug-6106843.html>



COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective

Henry Ealy , y, Michael McEvoy zx, Daniel Chong , John Nowicki , Monica Sava {, Sandeep Gupta k, David White , James Jordan , Daniel Simon

https://www.dropbox.com/s/efiohurvamvfnvd/COVID-19%20Data%20Collection%2C%20Comorbidity%20%26%20Federal%20Law_%20A%20Historical%20Retrospective.pdf?dl=0

Sci, Pub Health Pol, & Law COVID19 Comorbidity & Federal Law - October 12, 2020

Figure 3. Recovery Rates By Age Compared To Preceding Weeks. Recovery rates and fatality rates are reciprocal ways of looking at the data available. If a fatality rate is 0.018%, as is the case for the age 0 to 19 demographic on Aug 23, then the reciprocal recovery rate is 99.982%. Based upon this information, Americans in the age 0 to 19, 20 to 49, and 50 to 69 demographics are at extremely low risk of fatality due to COVID-19 . Recovery rates rise even higher if the methods for recording cause of death reporting based upon the March 24, 2020 COVID-19 Alert No. 2 guidelines are proven to have violated the PRA & IQA.[33][34][State & Territory Health

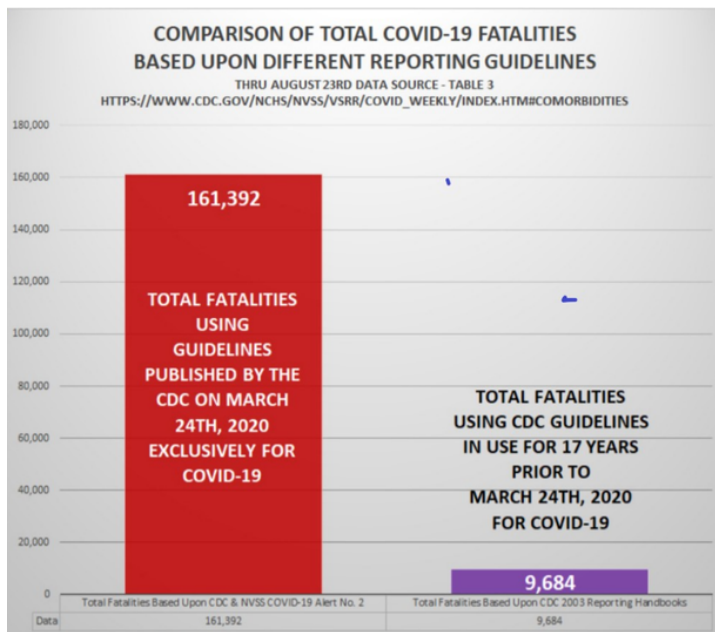


Figure 9. COVID-19 Using the March 24 Exclusive Guidelines vs Using the 2003 Guidelines. Had the CDC used the 2003 guidelines, the total COVID-19 be approximately 16.7 times lower than is currently being reported. [1][30][State & Territory Health Departments]

Deadliness of COVID-19 vs. the seasonal flu

Chart compares COVID-19 mortality rate from China with seasonal flu mortality in the United States by age group.

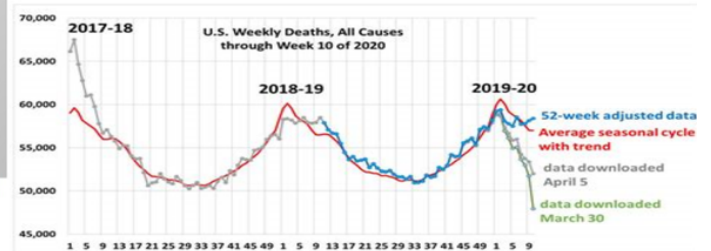
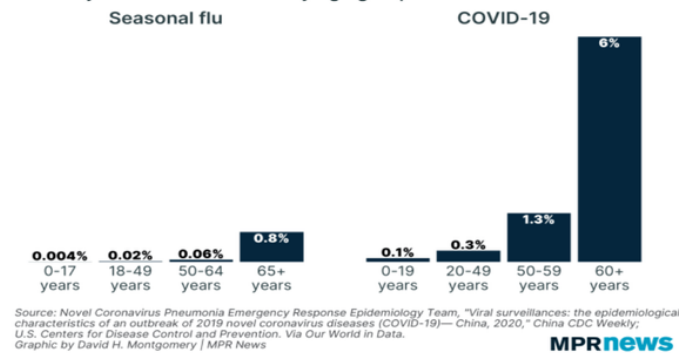


Figure 4. US Cases By Age Note: Although the age 70+ demographic makes up a small percentage of cases (12.7%), the age 70+ demographic makes up a disproportionate percentage of hospitalizations and fatalities. Additionally, roughly 92.5% of the more than 74 million Americans tested have tested negative for the SARS-COV-2 virus, and at least 89,009 reported cases are unconfirmed because of inaccuracies of contact tracing.[30][State & Territory Health Departments]

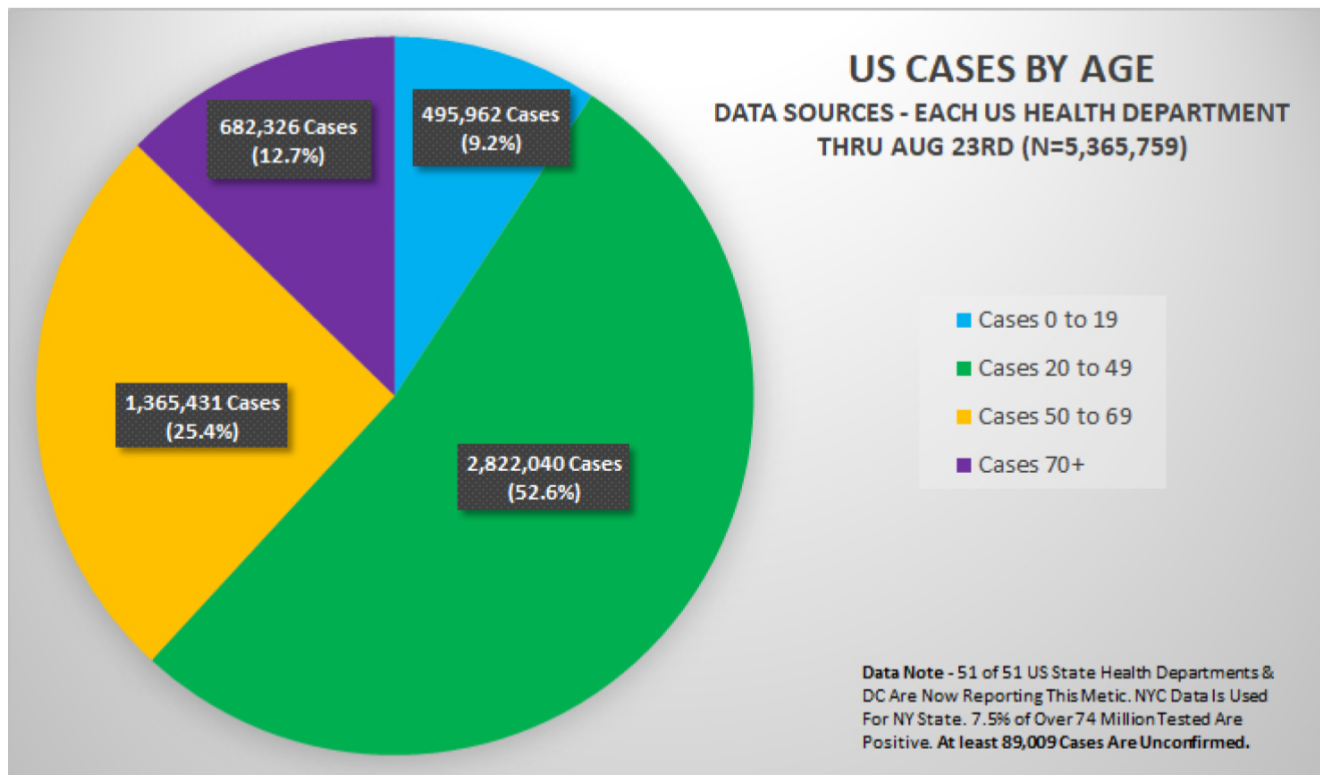


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For example:

The CSTE position paper in Section VII established rules for COVID-19 data classification and collection that allowed for probable diagnoses unconfirmed by lab testing, a test-based strategy for lab testing, and set the stage for people with no medical licensure to contact trace and illegally diagnose American citizens they have never seen. The latter is a clear violation of nationally recognized state laws prohibiting the practice of medicine without a license. In Section VII.B, the CSTE position paper specifically declined to define a method for ensuring that rules for data collection prevented the

same person from being counted multiple times as new COVID-19 cases.

As a result, people hospitalized with a positive PCR test could be tested every 24 hours and each time counted as new COVID-19 to the complete absence of basic rules to ensure that this could not happen.

Upon Investigation: The CDC did not submit a proposal to the

Federal Register for public consideration and comment regarding their desire to adopt these unnecessary changes. The CDC did not submit a proposal to the Federal Register for public consideration and

comment regarding their desire to forgo existing rules for infectious disease data collection that has been in use, without incident, for at least 17 years.

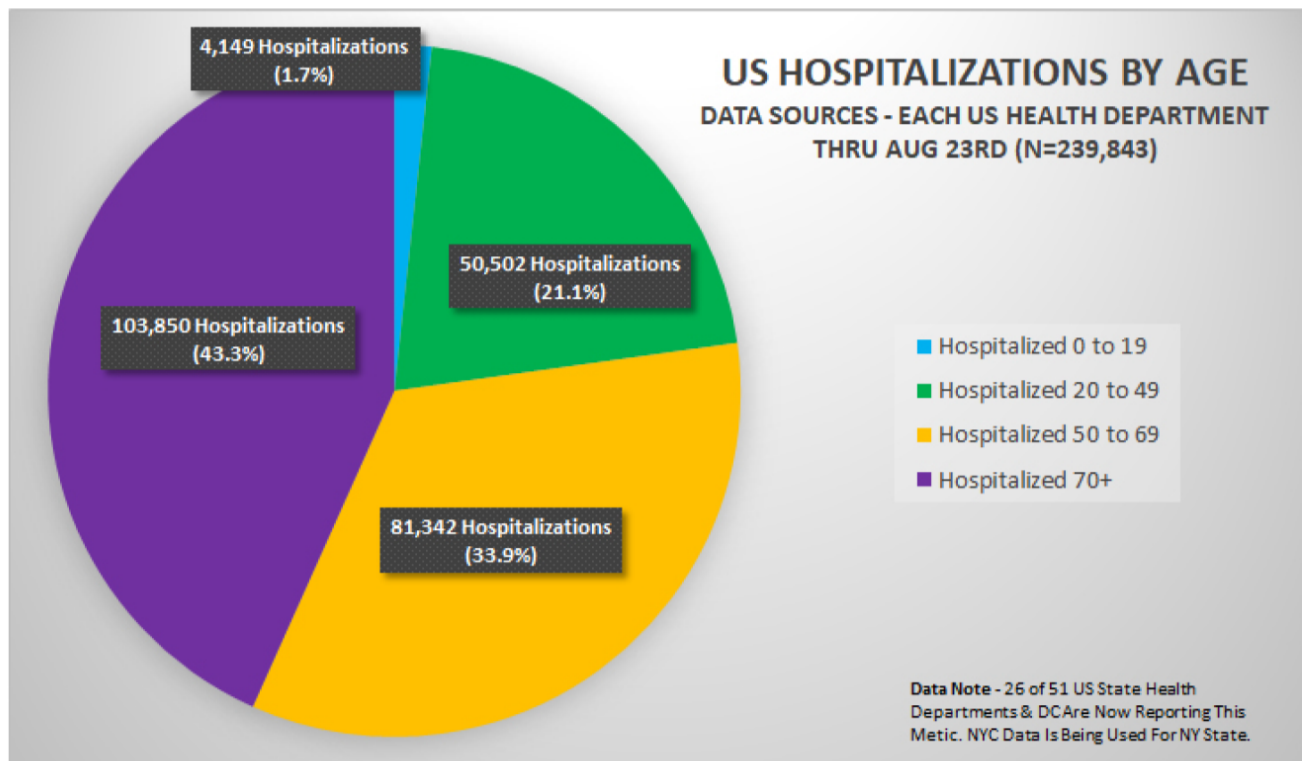


Figure 5. US Hospitalizations By Age. Note: The age 70+ demographic makes up the largest percentage of hospitalizations (43.3%) yet makes up a small percentage of cases (12.7%).[30][State & Territory Health Departments]

A. Objectivity and Quality of Information

1. As defined in Section IV, below, “objectivity” is a measure of whether disseminated information is accurate, reliable, and unbiased and whether that information is presented in an accurate, clear, complete, and unbiased manner.

“Utility” refers to the usefulness

of the information for the intended audience's anticipated purposes.

OMB is committed to disseminating reliable and useful information.

Before disseminating information, OMB staff and officials should subject such draft information to an extensive review process including open public comment. It is the primary responsibility of the Division or Office (hereafter collectively referred to as "Division") drafting information intended for dissemination to pursue the most knowledgeable and reliable sources reasonably available to confirm the objectivity and utility such information.

Based upon our investigation of Federal Register Records for 2020, there was no formal, transparent, public review process initiated by the NVSS or CDC prior to or following the issuance of the March 24th NVSS COVID-19 Alert No. 2 that dramatically altered cause of death reporting

exclusively

for COVID-19. In this regard, we allege that the CDC and NVSS's alterations to cause of death reporting guidelines exclusively for COVID-19, violated the IQA & PRA by compromising data quality, objectivity, and utility. Additionally, our investigation into Federal Register Records for 2020 revealed that there was no formal, transparent, public review process initiated by the CDC prior to or following the adoption of the April 14th CSTE position paper that dramatically altered what defines a new case exclusively for COVID-19. In this regard, we allege that the CDC changes to cause of death reporting exclusively for COVID-19 violated the IQA & PRA by compromising data quality, objectivity, and utility

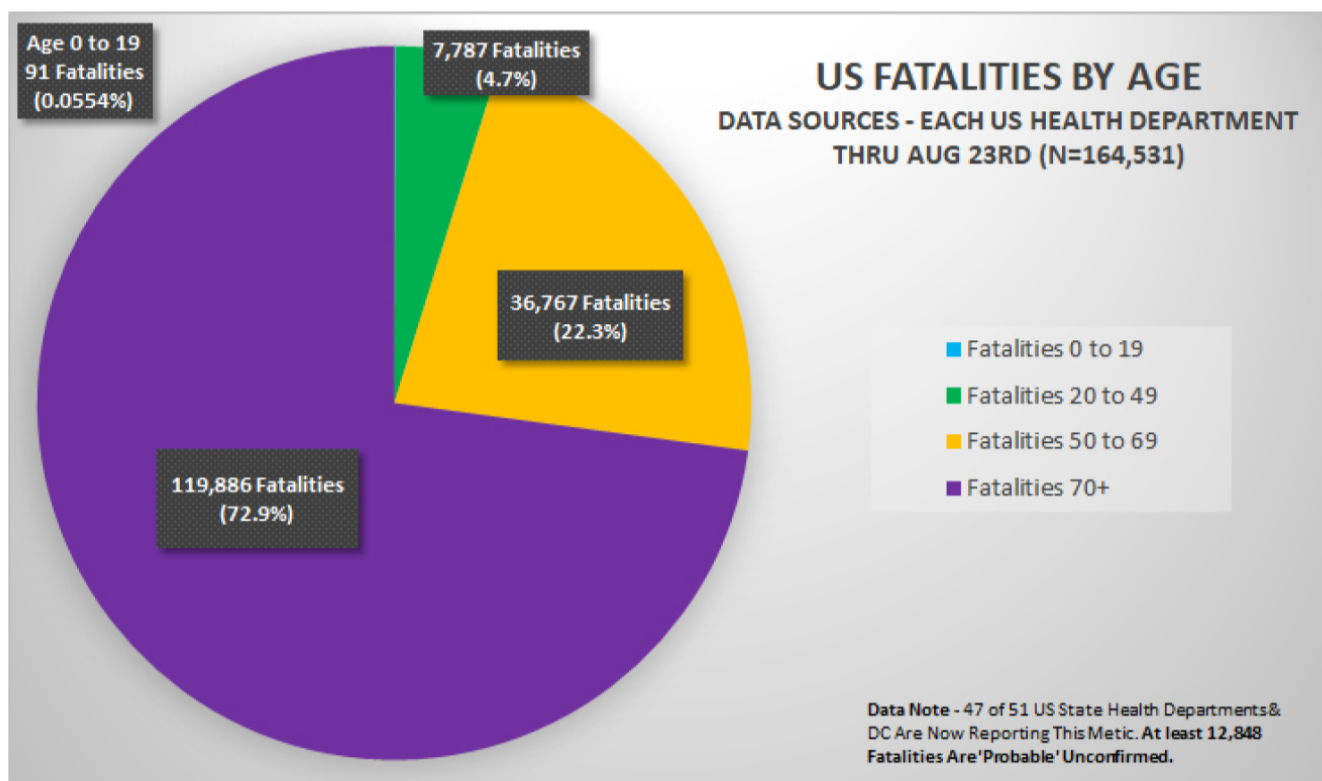


Figure 6. US Fatalities By Age. Note: The age 70+ demographic makes up the largest percentage of fatalities (72.9%). This is alarmingly disproportionate to their relatively small percentage of cases (12.7%), and thus defines them as a high-risk population. The opposite is true for the age 0 to 19 demographic which makes up a small percentage of fatalities (0.0554%).[30][State & Territory Health Departments]

Comorbidities

Table 3 shows the types of health conditions and contributing causes mentioned in conjunction with deaths involving coronavirus disease 2019 (COVID-19). For 6% of the deaths, COVID-19 was the only cause mentioned. For deaths with conditions or causes in addition to COVID-19, on average, there were 2.6 additional conditions or causes per death. The number of deaths with each condition or cause is shown for all deaths and by age groups. For data on comorbidities,

[Click here to download](#).

Table 3. Conditions contributing to deaths involving coronavirus disease 2019 (COVID-19), by age group, United States. Week ending 2/1/2020 to 8/22/2020.*

Updated August 26, 2020

		Number of Conditions								
		Age Group								
Conditions Contributing to Deaths where COVID-19 was listed on the death certificate ¹	ICD-10 codes	All ages 	0-24 years 	25-34 years 	35-44 years 	45-54 years 	55-64 years 	65-74 years 	75-84 years 	85 years and over 
Total COVID-19 deaths ² , as of 8/22/2020	U071	161,392	330	1,241	3,228	8,501	20,295	34,334	42,587	50,867
Respiratory diseases		-	-	-	-	-	-	-	-	-
Influenza and pneumonia	J09-J18	68,004	111	564	1,428	3,967	9,438	15,389	18,116	18,989

Figure 7. CDC Conditions Contributing to Deaths involving Coronavirus Disease (COVID-19)

Data from the CDC shows that only 6% of 161,392 COVID fatalities had no mention of any comorbidity. This calculates to approximately 9,684 total fatalities in the US directly due to **COVID-19**. [1]

in favor of recording comorbidities in Part 2, so COVID-19 could be listed exclusively in Part 1. This has had a significant impact on data collection accuracy and integrity. It has resulted in the potential false inflation of COVID-19 fatality data and is a potential breach of federal laws governing information quality. 18

8. Implications for Public Health Policy As a result of state policies based on potentially compromised data published and promoted by the CDC, Americans have lost jobs and businesses in historically unprecedented numbers. At the peak of the crisis, an estimated 20.5

to 42 million Americans had lost their jobs without having any voice in the decision-making process due to shelter in place mandates issued by every state with the exceptions of Arkansas, Iowa, Nebraska, South Dakota, Utah & Wyoming.[30][31]

Anxiety, depression, suicide rates, domestic violence, and alcoholism have all reportedly risen significantly due to the economic hardships brought on by how state governors decided to exercise their authority in response to the potentially compromised data published by the CDC.[32] Tens of thousands of Americans have died without access to potentially life-saving medications like hydroxychloroquine or nutrient therapies like intravenous Vitamin C. Couple this with the tragic reality that so many Americans passed away alone, without the comfort of their family members, and the collateral damage of our one-size fits all policies becomes even more unpalatable.[47]

All non-COVID related healthcare priorities have also suffered including elective surgeries, proper monitoring of medications, and checkups for the elderly and our children. De-prioritizing all non-COVID cases created collateral damage that far outweighs the infective damage of the SARSCOV- 2 virus. Public health policies that create more collateral damage while attempting to avoid an infection with a 99.05%

rate of recovery in the vast majority of citizens must be objectively investigated

12/15/20

[BIG PHARMA](#) › [VIEWS](#)

‘TRUTH’ With RFK, Jr. and Dr. Zach Bush: Shifting Away From Big Pharma Health Paradigm

Robert F. Kennedy, Jr. interviews Dr. Zach Bush about alternative routes to achieving optimal health, including how improving the gut microbiome can strengthen the immune system.

By

[Children's Health Defense Team](#)



What You Can Do About the Coronavirus Cover-up

We have no doubt that by working together we can and will [build a brighter future](#). When we step out of fear, secrecy, and polarization, we choose to join with the ever increasing numbers of people dedicated to working together for the good of all in our world. **You can make a difference right now by sharing this revealing information with your family, friends, and colleagues.** Click on the "share" link at the top or bottom of this or

any page on this website to help spread this valuable information far and wide.

To contact your political representatives and the media about this information, [click here](#). Together, we are making a difference. And thanks for caring!

Resilience Guide for Coronavirus Times

- 1) Check-in so you don't check-out – be mindful of when you feel afraid and overwhelmed and how that might affect your ability to balance your thinking with different perspectives.
- 2) Question what you read – don't fall for the old maxim "if it bleeds, it leads!"
- 3) Follow the money. Who is profiting both financially and politically from this so-called pandemic?
- 4) Find the people in your life who can question WITH you what part of the narrative is being left out.
- 5) Practice self-care – any activity, hobby or way of eating that helps you remember your best self. We need to feel well in order to think well.
- 6) Physical distancing does *not* mean social distancing. Crisis brings out the humanity in us so that we are closer and more connected than ever. We are all in this together.
- 7) Recognize this is a powerful opportunity for learning and growth. And we always have a choice between fear and love. Let us acknowledge any fear that arises, yet then choose love.

[Humanitarian Crisis in Ontario Nursing Homes Denounced by Medical Professionals](#)

Posted on [January 27, 2021](#) by [covexit](#)

A new group called “Doctors for Justice in LTC” – LTC standing for Long Term Care Facilities – has launched a website, stating their views

<https://covexit.com/humanitarian-crisis-in-ontario-nursing-homes-denounced-by-medical-professionals/>

Coronavirus Videos



There is a huge amount of information being thrown at us on the coronavirus, much of it conflicting and confusing. Sometimes it's hard to know who and what to believe. The selection of excellent

videos below will help you to unravel some of this mystery and leave you better informed to make good choices in these troubled times.

Robert F. Kennedy, Jr. on the coronavirus

[Robert F. Kennedy, Jr.](#) (nephew of JFK) is a renowned lawyer who shifted from serving as a successful environmental lawyer to focus on advocating for [safe vaccines for our children](#). In the 24-minute video at the link below, he reveals excellent inside information on the possible origins of the coronavirus, how virology labs develop vaccines, and the risks of developing a vaccine for the coronavirus. **Though some of his information is not easily verifiable, his access to inside sources and thorough knowledge of the topic make this well worth listening to.**



Dr. Zach Bush interviewed by Robert F. Kennedy, Jr.

Zach Bush is an amazing, triple board certified MD. He's brilliant and has led a most unique and colorful life. Interviewed by Robert F. Kennedy, Jr. (two great heroes of our time), Zack explains how viruses function and the roots of diseases like AIDS, autism, COVID-19, and more. He covers the crucial role of inflammation in disease, how glyphosate disrupts the gut microbiome, the widely misunderstood history of the polio virus, big Pharma's takeover of the federal regulatory health system, and more. At 46 minutes, he directly addresses the coronavirus. **He states that ultimately people are dying from the results of hypoxic injury due**

misshapen red blood cells. And he gives solutions that are both elegant and quite doable. So inspiring!

<https://childrenshealthdefense.org/defender/truth-rfk-jr-dr-zach-bush/>

Another Zach Bush interview is even more inspiring

An earlier wonderfully inspiring interview with Dr. Zach Bush about the coronavirus is most fascinating! **He even describes how he publicly predicted a year ago that the next major epidemic would originate in Wuhan.** The interview gets deeper as it goes and ends on an incredibly inspiring note. Don't miss this awesome tour de force by one who is incredibly knowledgeable in this field. And if you want just the last 9 minutes which are most incredibly, see [this clip](#). Strangely, the original video was pulled from facebook. Below is a link that hopefully will not be censored.

<https://www.bitchute.com/video/4pJdKbkZpHvZ/>

I

Indoctrination: Follow the money

This thoroughly researched and highly censored documentary is a game changer. *Indoctrination* explores the meticulous work of [Dr. David E. Martin](#), who tracks a three decade-long money trail that leads directly to the key players behind the COVID 19 pandemic. It connects the dots between many layers of the media, big pharma, government, and the financial industry to unmask the major conflicts of interests with the decision-makers that are currently managing this crisis. **This feature-length piece may end up censored even more than Willis' earlier video *Plandemic*. What is it they don't want you to see?**

<https://plandemicseries.com>

Excellent video on Bill Gates program to vaccinate the world

To understand how the coronavirus is being used to monitor and better control humanity, don't miss the important 40-minute video at the link below. **This well researched video shows how Bill Gates is using fear around the coronavirus to push through his long-held agenda to [vaccinate the whole world](#) and to [require a "digital certificate"](#) as a way to ensure everyone has been vaccinated.** The coronavirus is the perfect storm for him to bulldoze ahead with his agenda. For other verifiable information showing how Gates' vaccine agenda has already harmed countless thousands of children read [this excellent article](#) by Robert F. Kennedy, Jr..

<https://www.youtube.com/watch?v=c4Aps2NPe54&t=4m12s>

Revealing video on potential forced quarantines

The educational and well researched 20-minute video at the link below gives **undeniable evidence for plans to test and track everyone in the U.S. on the coronavirus, and even to remove people from their homes and mothers from their children if they test positive for the virus** and there is no separate bathroom for home quarantine. The presentation reveals detailed plans spelled out in video clips of government officials speaking and screenshots of government websites.

<https://vimeo.com/416137465>

The above video doesn't mention the bill proposed in the U.S. House of Representatives - HR. 6666, which you can find on the

the website of the US Congress at [this link](#). It authorizes \$100 billion (yes *billion*!) for 2020 "to conduct diagnostic testing for COVID–19, to trace and monitor the contacts of infected individuals, and to support the quarantine of such contacts." That is more than the entire 2019 budget ([\\$68.4 billion](#)) of Health and Human Services. Is there something fishy here?

For those who want more

A controversial banned [video interview with Dr. Judy Mikovits](#) also raises many questions. Renowned lawyer [Robert F. Kennedy, Jr.](#) wrote an [riveting forward](#) to [Mikovits' book](#) revealing how Anthony Fauci and others stole some of her research and destroyed her career to prevent an important treatment she co-discovered from moving forward. [This webpage](#) also supports many of her claims.

<https://banned.video/watch?id=5eb3062575314400169f3e6c>

In his thorough research, [Jeremy Hammond](#) found **a presentation by CDC's media relations chief [Glen Nowak](#) titled, "Recipe for Fostering Public Interest and High Vaccine Demand."** It **promotes using fear to increase public demand:** "Medical experts and public health authorities (e.g. via the media) state concern and alarm (and predict dire outcomes) - and urge influenza vaccination." And this: "Health literacy is a growing problem." Watch this part of the very well researched longer video at [this link](#). Verify the CDC presentation on [this webpage](#).

Some of these videos raise as many questions as they do answers, but at least you will be better informed to make decisions about your health and that of your loved ones as this crisis unfolds.

I wish you all the very best in moving through these most intense and challenging times. And remember, we're all in this together.

Resilience Guide for Coronavirus Times

- 1) Check-in so you don't check-out – be mindful of when you feel afraid and overwhelmed and how that might affect your ability to balance your thinking with different perspectives.
- 2) Question what you read – don't fall for the old maxim "if it bleeds, it leads!"
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- 7) Recognize this is a powerful opportunity for learning and growth. And we always have a choice between fear and love. Let us acknowledge any fear that arises, yet then choose love.

YouTube CENSORED: DOCTORS IN BLACK / PlanDemic

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<div class="ifw-player" data-video-id="5eb3062575314400169f3e6c"></div><script src="https://infowarsmedia.com/js/player.js" async></script>
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<https://banthis.tv/watch?id=5eb3062575314400169f3e6c>

Libby Handros John Kirby

Del Bigtree - with Erin:



17 minute version -

**The NYC Metro area
makes up 4.5% of the
US population but had
30% of US CoVid deaths**



<https://covexit.com/>

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Billionaire wealth soars as 255 million of world's jobs lost in pandemic

2021-01-25, CBS News

<https://www.cbsnews.com/news/oxfam-billionaire-wealth-poverty/>

The pandemic has worsened income inequality, with the world's richest people regaining their losses from COVID-19 shutdowns in nine months while **the number of people living in poverty has doubled to more than 500 million**, according to a new report from the anti-poverty group Oxfam. Almost 9% of total working hours were lost last year when compared with the levels of employment at the end of 2019, before the pandemic shuttered the economy, according to a separate report from the International Labour Organization (ILO), a United Nations agency. That's the equivalent of 255 million full-time jobs lost across the globe, or about four times greater than the impact from the Great Recession of 2009. **The world's poorest could take a decade to regain their financial footing. Oxfam describes the pandemic's impact as "the greatest rise in inequality since records began."** The International Labour Organization said the crisis has been the most severe on work since the Great Depression in the 1930s. "Its impact is far greater than that of the global financial crisis of 2009," said ILO Director-General Guy Ryder.

America's richest people have seen their wealth soar during the pandemic by [more than \\$1 trillion](#), thanks to a booming stock market and a K-shaped recovery that has benefited the rich, while poorer people have struggled with lost wages and jobs and future opportunities. It's a rich vs. poor phenomenon that is replicating across the globe.

Note: The media continue to blame the pandemic for these dire consequences when it is clearly not the virus, but the lockdown policies that are the main reason for this huge increase in poverty and income inequality. For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) and [income inequality](#) from reliable major media sources.

The lack of evidence lockdowns actually worked is a world scandal

2020-05-29, *The Telegraph* (One of the UK's leading newspapers)

<https://www.telegraph.co.uk/politics/2020/05/28/lack-evidence-lockdowns-actua...>

Bill Gates and his coronavirus conflicts of interest

2020-04-02, *Washington Times*

<https://www.washingtontimes.com/news/2020/apr/2/bill-gates-and-his-coronaviru...>

Bill Gates ... just called for a complete and utter shutdown and quarantining of the entire American nation. “Despite urging from public health experts,” Gates wrote in a [Washington Post opinion piece](#), “some states and counties haven’t shut down completely. This is a recipe for disaster. Because people can travel freely across state lines, so can the virus. The country’s leaders need to be clear: Shutdown anywhere means shutdown everywhere. Until the case numbers start to go down ... no one can continue business as usual or relax the shutdown.” He then added that the impacts of the new coronavirus could linger another 18 months or so, until a vaccine was developed. For the peons of America, work isn’t an option. It’s food. It’s survival. The fate of a hard-earned dream shouldn’t rest with a globalist billionaire who’s warning of dire coronavirus consequences to come — all the while making hands-over-fist coronavirus money. It’s a conflict of interest. WHO didn’t announce the coronavirus as a pandemic until the very day after Gates ... made a very large donation to a cause that benefits WHO. In a 2017 piece titled, “Meet the world’s most powerful doctor: Bill Gates,” Politico wrote: “Some billionaires are satisfied with buying themselves an island. Bill Gates got a United Nations health agency. **Over the past decade, the world’s richest man has become the World Health Organization’s second-biggest donor, second only to the United States. ... This largesse gives him outsized influence over its agenda. ...** The result, say his critics, is that Gates’ priorities have become the WHO’s.”

Very Important Note: To understand how the coronavirus is being used to exert more control over humanity, **don't miss [this incredibly important video](#)** focused on how **Bill Gates** is using fear around the coronavirus to push through his agenda to **vaccinate everyone on the planet and then require a "digital certificate" to ensure they've been vaccinated.** For other reliable, verifiable informing demonstrating how Gates' vaccine agenda has already harmed hundreds of thousands of children read [this excellent article](#) by Robert F. Kennedy, Jr.

US suffers sharpest rise in poverty rate in more than 50 years
2021-01-26, *Chicago Tribune*

<https://www.chicagotribune.com/business/ct-biz-covid-19-poverty-rate-20210126...>

The end of 2020 brought the sharpest rise in the U.S. poverty rate since the 1960s, according to a [new study](#). Economists Bruce Meyer from the University of Chicago and James Sullivan of the University of Notre Dame found that the poverty rate increased by 2.4 percentage points during the latter half of 2020 as the U.S. continued to suffer the economic impacts of COVID-19. That percentage-point rise is nearly double the largest annual increase in poverty since the 1960s. This means an additional 8 million people nationwide are now considered poor. Moreover, the poverty rate for Black Americans is estimated to have jumped by 5.4 percentage points, or by 2.4 million individuals. The scholars' findings, released Monday, put the rate at 11.8% in December.

While poverty is down from readings of more than 15% a decade earlier, the new estimates suggest that the annual Census Bureau tally due in September will be higher than the last official, pre-pandemic level of 10.5% in 2019. **Black Americans were more than twice as likely to be poor than their white counterparts in December** – an improvement from the summer months when they were nearly three times more apt to live in poverty – but an increase from before the pandemic, when the differential was under two. Despite improvements in the overall poverty rate since the middle of the 20th century, Black Americans had been about three times as likely to be poor as white Americans for most of the past 60 years.

Note: Meanwhile, as the [Washington Post reported](#) on Jan. 1, 2021, "billionaires as a class have added about \$1 trillion to their total net worth since the pandemic began." The CDC also reports overdose deaths hit a [record high last year](#). For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) and [income inequality](#) from reliable major media sources.

We have detonated the global economy to pursue a lockdown experiment that may not have worked, according to the latest evidence. **World-class studies that suggest lockdown did not alter the pandemic's course are mysteriously vanishing into internet obscurity on first contact with the official narrative. This is a scandal so overwhelming that there is only one good place to start: the evidence as it stands.** In accordance with

pro-lockdown theory, if stay at home orders worked, you might have expected to see daily deaths spike 3-4 weeks after such measures were implemented. But, in Britain, infections may have peaked a week before lockdown, according to [Prof Carl Heneghan](#) of Oxford University, with daily deaths in hospitals plateauing a fortnight after it was introduced. We are not an anomaly: peak dates across Europe also seem to confound the official theory. Don't just take my word for it. A University of the East Anglia study posits that Europe's "stay-at-home policies" were not effective. A JP Morgan investigation suggests the virus "likely has its own dynamics" which are "unrelated to often inconsistent lockdown measures". Nobel prize-winning bio-physicist Michael Levitt ... has claimed, sensationally, that the modelling that justified lockdown made the fatally incorrect assumption that Covid-19's spread is continuously exponential. In fact, his research has found an uncanny pattern across numerous countries whereby the virus grows exponentially for two weeks, before slowing seemingly irrespective of ... social distancing measures.

Note: For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) from reliable major media sources.

Dr. Fauci Backed Controversial Wuhan Lab with Millions of U.S. Dollars for Risky Coronavirus Research

2020-04-28, *Newsweek*

<https://www.newsweek.com/dr-fauci-backed-controversial-wuhan-lab-millions-us-...>

Last year, the National Institute for Allergy and Infectious Diseases, the organization led by Dr. Fauci, funded scientists at the Wuhan Institute of Virology and other institutions for work on gain-of-function research on bat coronaviruses. Many scientists have criticized gain of function research, which involves manipulating viruses in the lab to explore their potential for infecting humans, because it creates a risk of starting a pandemic from accidental release. The work entailed risks that worried even seasoned researchers. More than 200 scientists called for the work to be halted. Dr. Fauci played an important role in promoting the work. In 2019, with the backing of NIAID, the National Institutes of Health committed \$3.7 million over six years for research that included some gain-of-function work. The program followed another \$3.7 million, 5-year project for collecting and studying bat coronaviruses ... bringing the total to \$7.4 million. [One] phase of the project [included] gain-of-function research for the purpose of understanding how bat coronaviruses could mutate to attack humans. According to Richard Ebright, an infectious disease expert at Rutgers University, **the project ... would enhance the ability of bat coronavirus to infect human cells and laboratory animals using techniques of genetic engineering. SARS-CoV-2, the virus now causing a global pandemic, is believed to have originated in bats. U.S. intelligence, after originally asserting that the coronavirus had occurred naturally, conceded last month that the pandemic may have originated in a leak from the Wuhan lab.**

Note: [Newsweek reported](#) that in 2017, **Anthony Fauci predicted a "surprise outbreak" during Trump's presidency.** How could he have known this? [This Washington Post article](#) has the title "State Department cables warned of safety issues at Wuhan lab studying bat coronaviruses." For more along these lines, see concise summaries of deeply revealing [news articles on government corruption](#) and the [coronavirus pandemic](#) from reliable major media sources.

Canadian expert's research finds lockdown harms are 10 times greater than benefits

2021-01-09, *Toronto Sun*

<https://torontosun.com/opinion/columnists/canadian-experts-research-finds-loc...>

There are a few reasons why I supported lockdowns at first. Initial data falsely suggested that the infection fatality rate was up to 2-3%, that over 80% of the population would be infected, and modelling suggested repeated lockdowns would be necessary. But emerging data showed that the median infection fatality rate is 0.23%, that the median infection fatality rate in people under 70 years old is 0.05%. In addition, it is likely that in most situations only 20-40% of the population would be infected before ongoing transmission is limited (i.e., herd-immunity). Emerging data has shown a staggering amount of so-called 'collateral damage' due to the lockdowns. This can be predicted to adversely affect many millions of people globally with food insecurity [82-132 million more

people], severe poverty [70 million more people], school closures for children [affecting children's future earning potential and lifespan], and intimate partner violence for millions of women. In high-income countries adverse effects also occur from delayed and interrupted healthcare, unemployment, loneliness, deteriorating mental health ... and more. **A formal cost-benefit analysis of different responses to the pandemic was not done by government. Once I became more informed, I realized that lockdowns cause far more harm than they prevent. The costs of lockdowns are at least 10 times higher than the benefits. Lockdowns cause far more harm to population wellbeing than COVID-19 can.**

Note: The above was written by Dr. Ari Joffe, a specialist in pediatric infectious diseases at the Stollery Children's Hospital in Edmonton. For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) from reliable major media sources.

World's richest men added billions to their fortunes last year as others struggled

2021-01-01, *Washington Post*

<https://www.washingtonpost.com/business/2021/01/01/bezos-musk-wealth-pandemic/>

The pandemic has forced untold hardships onto many Americans, with tens of millions of families [now reporting](#) that they don't have enough to eat and millions more out of work on account of layoffs

and lockdowns. America's wealthiest, on the other hand, had a very different kind of year: **Billionaires as a class have added about \$1 trillion to their total net worth since the pandemic began. And roughly one-fifth of that haul flowed into the pockets of just two men: Jeff Bezos, chief executive of Amazon (and owner of *The Washington Post*), and Elon Musk of Tesla and SpaceX fame.** Musk has quintupled his net worth since January, [according to estimates](#) put together by Bloomberg, adding \$132 billion to his wealth and vaulting him to the No. 2 spot among the world's richest with a fortune of about \$159 billion. Bezos's wealth has grown by roughly \$70 billion over the same period, putting his net worth estimate at roughly \$186 billion as the year came to an end. Such a rapid accumulation of individual wealth hasn't happened in the United States since the time of the Rockefellers and Carnegies a century ago, and we as a society are only just beginning to grapple with the ethical implications. What does it mean, for instance, that two men amassed enough wealth this year to end all hunger in America (with a price tag of [\\$25 billion](#)) eight times over? Or that the \$200 billion accumulated by Bezos and Musk is greater than the amount of coronavirus relief allocated to state and local governments in the Cares Act?

Note: The new richest man in Asia reached his position partially through making [vaccines for the coronavirus](#). For more along these lines, see concise summaries of deeply revealing [news articles on income inequality](#) from reliable major media sources.

Tech's top seven companies added \$3.4 trillion in value in 2020

2020-12-31, CNBC News

<https://www.cnbc.com/2020/12/31/techs-top-seven-companies-added-3point4-trill...>

Tech's biggest companies just wrapped up a huge year. The seven most valuable U.S. technology companies – Apple, Microsoft, Amazon, Alphabet, Facebook, Tesla and Nvidia – picked up a combined \$3.4 trillion in market cap in 2020, powering through a global pandemic and broader economic crisis. Between continued optimism over iPhone sales, Microsoft's growing Teams collaboration product, Amazon's ongoing control of e-commerce and the strength of Google and Facebook's online ad duopoly, **Big Tech was neither slowed by Covid-19 nor the rising number of [investigations](#) into its dominance.** By far the biggest increase in market cap went to Apple, which jumped by almost \$1 trillion in value, thanks to its stock climbing 81%. Amazon, which benefited from growth in its consumer and cloud-computing business, rose by \$710 billion. Microsoft picked up \$480 billion, while Alphabet gained \$268 billion and Facebook \$193 billion. The gains are clearly reflected in the ranks of the richest people. Amazon's Jeff Bezos is the wealthiest person in the world, followed by Tesla's Elon Musk and Microsoft co-founder Bill Gates. Facebook CEO Mark Zuckerberg is fifth. Also in the top 10 are Google founders Larry Page and Sergey Brin and Microsoft ex-CEO Steve Ballmer.

Note: For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) from reliable

major media sources.

Big Pharma Prepares to Profit From the Coronavirus

2020-03-13, The Intercept

<https://theintercept.com/2020/03/13/big-pharma-drug-pricing-coronavirus-profits/>

As the new Coronavirus spreads illness, death, and catastrophe around the world, virtually no economic sector has been spared from harm. Yet amid the mayhem ... one industry is not only surviving, it is profiting handsomely. "Pharmaceutical companies view Covid-19 as a once-in-a-lifetime business opportunity," said Gerald Posner, author of "[Pharma: Greed, Lies, and the Poisoning of America](#)." The world needs ... treatments and vaccines and, in the U.S., tests. Dozens of companies are now vying to make them. The ability to make money off of pharmaceuticals is already uniquely large in the U.S., which lacks the basic price controls other countries have, giving drug companies more freedom over setting prices for their products than anywhere else in the world. During the current crisis, pharmaceutical makers may have even more leeway than usual because of language industry lobbyists inserted into an \$8.3 billion coronavirus spending package, passed last week, to maximize their profits from the pandemic. Initially, some lawmakers had tried to ensure that the federal government would limit how much pharmaceutical companies could reap from vaccines and treatments for the new coronavirus that they developed with the use of public funding. But many Republicans opposed adding language to the bill that would restrict the

industry's ability to profit, arguing that it would stifle research and innovation. **The final aid package not only omitted language that would have limited drug makers' intellectual property rights, it specifically prohibited the federal government from taking any action if it has concerns that the treatments or vaccines developed with public funds are priced too high.**

Note: For glaring examples of how big Pharma and select public officials made money hand over fist during previous virus scares, see concise summaries of deeply revealing [news articles on the avian and swine flu](#) from reliable major media sources.

Coronavirus Brings China's Surveillance State Out of the Shadows

2020-02-07, *New York Times*/Reuters

<https://www.nytimes.com/reuters/2020/02/07/technology/07reuters-china-health-...>

When the man from Hangzhou returned home from a business trip, the local police got in touch. They had tracked his car by his license plate in nearby Wenzhou, which has had a spate of coronavirus cases. Stay indoors for two weeks, they requested. **After around 12 days, he was bored and went out early. This time, not only did the police contact him, so did his boss. He had been spotted ... by a camera with facial recognition technology, and the authorities had alerted his company as a warning.** “I was a bit shocked by the ability and efficiency of the mass surveillance network. They can basically

trace our movements ... at any time and any place,” said the man, who asked not to be identified for fear of repercussions. Chinese have long been aware that they are tracked by the world's most sophisticated system of electronic surveillance. The coronavirus emergency has brought some of that technology out of the shadows, providing the authorities with a justification for sweeping methods of high tech social control. Artificial intelligence and security camera companies boast that their systems can scan the streets for people with even low-grade fevers, recognize their faces even if they are wearing masks and report them to the authorities. If a coronavirus patient boards a train, the railway's "real name" system can provide a list of people sitting nearby. Mobile phone apps can tell users if they have been on a flight or a train with a known coronavirus carrier, and maps can show them ... where infected patients live.

Note: The *New York Times* strangely removed this article. Yet it is also [available here](#). Is there something they don't want us to know? Read an [excellent article](#) showing how this virus scare is being used to test China's intense surveillance technologies in very disturbing ways. For more along these lines, see concise summaries of deeply revealing [news articles on government corruption](#) and the [disappearance of privacy](#) from reliable major media sources.

America, Can We Talk? “Biden’s Track & Trace”

November 12, 2020



These Coronavirus Trials Don't Answer the One Question We Need to Know

2020-09-22, *New York Times*

<https://www.nytimes.com/2020/09/22/opinion/covid-vaccine-coronavirus.html>

If you were to approve a coronavirus vaccine, would you approve one that you only knew protected people only from the most mild form of Covid-19, or one that would prevent its serious complications? The answer is obvious. You would want to protect against the worst cases. But that's not how the companies testing three of the leading coronavirus vaccine candidates, Moderna,

Pfizer and AstraZeneca ... are approaching the problem. **According to the protocols for their studies ... a vaccine could meet the companies' benchmark for success if it lowered the risk of mild Covid-19, but was never shown to reduce moderate or severe forms of the disease, or the risk of hospitalization, admissions to the intensive care unit or death.** To say a vaccine works should mean that most people no longer run the risk of getting seriously sick. That's not what these trials will determine. Influenza vaccines ... reduce the risk of mild disease in healthy adults. But there is no solid evidence they reduce the number of deaths. In fact, significant increases in vaccination rates over the past decades have [not been associated](#) with reductions in deaths. Moderna and Pfizer acknowledge their vaccines appear to induce side effects that are similar to the symptoms of mild Covid-19. In Pfizer's [early phase trial](#), more than half of the vaccinated participants experienced headache, muscle pain and chills. If the vaccines ultimately provide no benefit beyond a reduced risk of mild Covid-19, they could end up causing more discomfort than they prevent.

Note: Did you know that the FDA allows [cancer cells to be used in vaccines](#)? And the [Vatican has stated](#) "It is morally acceptable to receive Covid-19 vaccines that have used cell lines from aborted fetuses." For more along these lines, see concise summaries of deeply revealing [news articles on coronavirus vaccines](#) from reliable major media sources. Then explore the excellent, reliable resources provided in our [Coronavirus Information Center](#).

Sweden's approach to COVID-19 may have something to offer

2020-09-20, MSN

<https://www.msn.com/en-us/health/wellness/swedens-approach-to-covid-19-may-ha...>

More states and countries are coming to the conclusion that COVID-19 lockdowns like those in China and New Zealand are overly restrictive and too costly. People in democracies will simply not tolerate them. Sweden has "[flattened the curve](#)" of COVID-19 without ordering its citizens to stay inside. It has kept open its shops, schools for those under 16, and restaurants and bars. Its health authorities trusted its citizens to wash their hands and social distance without imposing laws. Anders Tegnell, the Swedish epidemiologist [said,] "We see no point in wearing a face mask." Swedish health authorities ... pride themselves on "following the science" and are highly respected. Sweden made a mistake ... when it, like the state of New York, sent recovering patients back to their nursing homes too soon (in the U.S., nursing home residents [and staff] account for ... [45% of COVID-19 fatalities](#)). [Yet Swedish] **schools stayed open with [little risk to students](#). Studies from Sweden and the Netherlands ... have found teachers at [no greater risk](#) than the overall population.** Sweden is approaching record lows while its European neighbors are seeing increasing rates. Sweden had about 30,000 new cases in June ... and was down to 7,000 new cases in August. During this time, cases took off in Spain, France and Germany. Sweden's current rate of positive tests is lower than those in Norway and Denmark. **[Its] economy will [contract by about 4.6%](#). In contrast, the European Union economy is**

expected to [contract 11.9%](#). The U.S. economy contracted at a [32.9% annual rate](#) between April and June. New Zealand's GDP [contracted by 13.8%](#) in the April-June period and has entered a recession, which Sweden has not.

Note: Explore a [revealing article](#) in the BMJ (formerly *British Medical Journal*) for more on Sweden's unusual success. [This chart](#) shows that Sweden is now doing much better on the number of COVID-19 cases and deaths per million than most other countries that have instituted a lockdown. Read a balanced, informative [New York Times article](#) written by a Swede about her experience there. For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) from reliable major media sources.

WHO condemn lockdowns and say they 'only make poor people poorer'

2020-10-12, MSN News

<https://www.msn.com/en-ie/health/medical/who-condemn-lockdowns-and-say-they-o...>

A COVID-19 envoy appointed by Director-General of the World Health Organisation (WHO) Dr Tedros Adhanom Ghebreyesus has appealed to world leaders to stop resorting to lockdown to control the pandemic. Dr David Nabarro, who has spent his career working for the WHO and the United Nations (UN), seems to have marked a [departure](#) from the global health body's early stance on the COVID-19 pandemic, warning about the economic and social consequences of lockdown as a means of controlling the spread of

the disease. On Sunday, **Dr Nabarro** appealed to world leaders to stop "using lockdowns as your primary control method", insisting that such drastic measures can have a dire impact on global poverty rates. The British doctor stated: "We in the World Health Organisation do not advocate lockdowns as the primary means of control of this virus. The only time we believe a lockdown is justified is to buy you time to reorganise, regroup, rebalance your resources, protect your health workers who are exhausted, but by and large, we'd rather not do it." Dr Nabarro went on to say that developing economies had been indirectly affected by lockdown measures, adding: "Look what's happened to smallholder farmers all over the world -- look what's happening to poverty levels. "It seems that we may well have a doubling of world poverty by next year. We may well have at least a doubling of child malnutrition. Lockdowns just have one consequence that you must never ever belittle, and that is making poor people an awful lot poorer."

Note: For more along these lines, see concise summaries of deeply revealing [news articles on the coronavirus](#) and [income inequality](#) from reliable major media sources.

Why are there protests in Europe over new Covid-19 restrictions?

2021-01-30, MSN News

<https://www.msn.com/en-in/news/in-depth/explained-protests-in-europe-of-new-c...>

Over the weekend, protests against Covid-19 lockdowns rocked the Netherlands, Denmark and Spain, just as several European governments began the new year by stepping up restrictions on movement amid concerns over more contagious variants of the coronavirus. On Saturday, Netherlands began its first nighttime curfew of the pandemic, said to be the country's first since World War II. Saturday evening, protesters set afire a Covid-19 testing centre. Protests rocked capital Madrid on Saturday as 1,300 gathered at the city center, leading police to fine 216 people with penalties of up to 700 euros. Carnegie Endowment for International Peace experts Thomas Carothers and Benjamin Press have categorized the anti-lockdown protests seen in several parts of the world in recent months into three types. **The first are libertarian "pro-citizen" movements ... where participants have taken issue with governments restricting their personal freedoms. These attract large crowds— an example being the August 29 protest in Germany, when 38,000 protested in front of the national parliament in Berlin.** The second type is seen taking place in developing economies with large informal sectors, where agitators target the impact of lockdowns on their livelihoods. Such protests were seen in Mexico, South Africa and Belgium. The third kind of protests are those objecting to how the lockdown restrictions are being enforced, accusing authorities of acting arbitrarily or of using excessive force.

Note: Why are virtually no major media in the US reporting on these large demonstrations against the lockdowns? For more along these lines, see concise summaries of deeply

revealing [news articles on the coronavirus](#) from reliable major media sources.

Dear friends,

In this time of the coronavirus, social distancing and lockdown policies have saved many thousands of lives. Yet what is the cost? Is the damage from these policies greater than the damage from the virus itself?

What would happen if governments continued these two policies indefinitely? If social distancing and lockdown policies were implemented permanently, many thousands of lives could be saved worldwide every year from decreased deaths due to the seasonal flu and other contagious diseases.

Yet is this really how we want to live our lives?

The vast majority of people would not likely be comfortable with making these policies permanent, even if they would save thousands of lives worldwide. The cost to humanity socially and spiritually would significantly outweigh the cost of those lives. Society as we know it would be drastically different and great freedoms would be lost. Not to mention the many deaths that would result from these policies due to suicide, domestic violence, poverty, and how many people's jobs and careers would be ruined or lost.

This raises an important and profound question in these most challenging times. When is it beneficial to implement these policies? Are the economic and social damage caused by the lockdown greater than the damage caused by the virus itself? **How do we weigh the balance between the number of lives saved as a result of these policies and the number of deaths actually caused by the policies in addition to the suffering caused socially, economically, and spiritually?**

A [New York Times article](#) titled "Coronavirus Crisis Could Plunge Half a Billion People Into Poverty" states that according to an Oxfam report, "Estimates show that, regardless of the scenario, global poverty could increase for the first time since 1990. This could throw some countries back to poverty levels last seen some three decades ago."

David Beasley, the winner of the 2020 Nobel Peace Prize and executive director of the World Food Program, [has stated](#), "At the beginning of this year [2020], 135 million people already faced starvation. Now, 270 million people are on the brink of starvation." If he is anywhere near accurate, this means well over 100 million people have been pushed to the brink of starvation not by the virus, but by the lockdown measures.

Why are so many focused on deaths from the coronavirus and so few talking about the deaths from starvation, suicide, domestic violence, and much more due to lockdown policies that have already left over 100 million with not enough food to eat?

These factors are being weighed seriously by the few countries not implementing shelter in place and lockdown policies. This despite intense pressure from the major media and governments worldwide. Notable examples are Sweden, the Netherlands, and Japan.

The risk here is great. **Not implementing a lockdown will most certainly result in more deaths. The question is: How many more deaths will there be? Will the number of excess virus deaths be outweighed by the number of deaths caused by the lockdown in the long run?** Is it worth it in the long term if say 25% more people die from the virus, but millions of businesses go bankrupt and millions die from poverty, suicide, and more? This certainly seems possible.

I've been following three countries which have not instituted lockdowns to see how they compare with other countries which have. The countries are Sweden, Japan, and the Netherlands.

Sweden's top epidemiologist believes lockdown will do more harm than good. [This CNN article](#) relates how "life goes on as usual" there, despite a relative high per capita rate of infection. Here's a quote from the article:

Restaurants and bars are open in the Nordic country, playgrounds and schools too, and the government is relying on voluntary action to stem the spread of Covid-19. The Swedish government is confident its policy can work. Sweden's actions are about encouraging and recommending, not compulsion. Much of Sweden's focus has been to protect the elderly. Anyone aged 70 or older has been told to stay at home and limit their social contact as much as possible.

Note that the media, which seems intent on painting Sweden in a negative light, regularly compares this Nordic country to its immediate neighbors Finland and Norway, who are doing much better than most countries. Yet unlike these two, **Sweden was hit hard in the beginning before any countries (other than China) locked down. It is much more reasonable to compare Sweden to Italy, Spain, and Belgium, which were also hit hard in the beginning. Sweden is doing better on deaths per million than all of these, yet the media consistently fails to mention this.**

Then there is Japan. According to [this Washington Post article](#):

Tokyo's coronavirus "state of emergency" is as surreal as they come. Though the streets are noticeably quieter than normal, subways and buses are still jammed with commuters. Stock trading goes on as normal. Many bars, restaurants and cafes are abuzz. So are barbershops, beauty salons and home improvement centers.

And this [Dec. 12, 2020 article](#) in *The Economist* states:

Japan has suffered just 18 deaths per million people ... by far the lowest in the G7, a club of big, industrialised democracies. (Germany comes in second, at 239.) Most strikingly, Japan has achieved this success without strict lockdowns or mass testing—the main weapons in the battle against covid-19 elsewhere.

The Netherlands is calling their policy an "intelligent lockdown" in which, according to [this Forbes article](#), "only the most important sources that may spread the coronavirus are closed." In [my extensive research](#), I've been following the coronavirus number of deaths closely both globally and in eight countries, including these three. The number of cases reported is not very reliable, since testing in the U.S. and elsewhere has been woefully inadequate. The numbers of hospitalizations and deaths are a much more accurate measure of how the disease is progressing. As data comparing the number of hospitalizations per country is almost impossible to find, I've been following the number of deaths very closely in these countries. **Many would expect these three countries with their more lax policies to experience a far greater increase in fatalities than most, if not all other countries. Yet this has not been the case.**

For a comparison, here's [an informative graph](#) showing the rank of countries worldwide by deaths per million population from the coronavirus. As of late January, Sweden is ranked #17, Netherlands is #34, while Japan is near the bottom of the chart.

Without lockdown and mandatory social distancing, we would fully expect these three countries to have much higher death rates than those which have implemented lockdowns. They were willing to take the risk of more deaths, feeling that the social, economic, and emotional cost of these policies would be too great. And yet surprisingly, their death rates have been similar to or lower than other key countries implementing these policies. It doesn't make sense, but there it is. Why isn't this being talked about at all in the media? ([Possible answer here](#)) And what does this suggest about the effectiveness of the lockdowns?

With the great economic loss, many millions losing their jobs, and the rate of poverty, suicide and domestic violence rising all as a result of lockdown and social distancing policies, how wise is it to lock things down so tightly when the few countries which aren't doing this are showing lower death rates than many of the rest? Not to mention the literally *trillions of dollars* being thrown around (due almost solely to the lockdown), the large majority of which is going into the pockets of the uber rich.

[This Sept. 30, 2020 Forbes article](#) states, "the combined wealth of all U.S. billionaires increased by \$821 billion or 28% between March 18, 2020 and September 10, 2020." Yet for the majority of citizens, average income has dropped, and unemployment and bankruptcies have soared worldwide.

There are many important factors to consider here in addition to the numbers of people dying and being hospitalized by the virus. How much do we [give up our freedoms](#) in the name of safety and security? How will the fear of germs and the fear of being close to others play out once the pandemic fades? And then there are the countless small and medium-sized businesses that have gone or will go bankrupt, with a high likelihood that – as in previous recessions – many will eventually be bought out by the wealthy elite for pennies on the dollar. And what about our children. Do we really want them to grow up afraid to hug and touch and play with each other? Do we want them to live in fear of disease and death. Children need in person socialization to grow into healthy adults. Why isn't anyone talking about this?

Many thousands of lives have been saved, yet how much emotional damage are the lockdowns causing to our children. And how many more jobs and lives will be damaged and lost in the long run as a result of these policies that infringe on our civil liberties?

May calmer heads prevail as we face these huge challenges. And may we remember that we're all in this together, even when we may disagree sharply about how to go about doing this.

If this information raises questions about how and why all of this is happening, remember that fear is used by many groups, corporations, and even governments to gain greater control and reap immense profits. **Explore an [excellent two-page essay](#) titled "Creating a New Paradigm," which shows how and why we are controlled through fear, and – more importantly – what we can do about it.** By educating ourselves and spreading the word, we can rise above the fear and make a difference in our world. Thanks for caring.

With best wishes for a transformed world,

[Fred Burks](#) for [PEERS](#) and [WantToKnow.info](#)

Former [White House interpreter](#) and [whistleblower](#)

Updated January 23, 2021

Note: For lots more important information on this, see our [Coronavirus Information Center](#).

The thought-provoking article at [this link](#) explores how the power elite are taking advantage of this shock to the system to forward their agendas of power and control. [This penetrating essay](#) explores the long-term implications for humanity of the coronavirus and the choices we have right now.

Resilience Guide for Coronavirus Times

- 1) Check-in so you don't check-out – [be mindful of when you feel afraid](#) and overwhelmed and how that might affect your ability to balance your thinking with different perspectives.
- 2) [Question what you read](#) – don't fall for the old maxim "if it bleeds, it leads!"
- 3) [Follow the money](#). Who is profiting [both financially and politically](#) from this pandemic?
- 4) Find the people in your life who can question WITH you what part of the narrative is being left out.
- 5) Practice self-care – any activity, hobby or way of eating that helps you remember your best self. We need to feel well in order to think well.

6) Physical distancing does *not* mean social distancing. Crisis brings out the humanity in us so that we are closer and more connected than ever. We are all in this together.

7) Recognize that [crisis can be a powerful opportunity](#) for learning and growth. And we always have [a choice between fear and love](#). Let us acknowledge any fear that arises, yet then choose love.

Tracing and tracking

<https://vimeo.com/416137465>

**H.R. 6666 a devil of a COVID-19 government surveillance plot
2020-05-12, *Washington Times***

<https://www.washingtontimes.com/news/2020/may/12/hr-6666-a-devil-of-a-covid-1...>

What's more devilishly un-American than launching one of the most massive government surveillance programs of private citizens in U.S. history, all under the guise of protecting people from the coronavirus? That's the "COVID-19 Testing, Reaching, And Contacting Everyone (TRACE) Act" in all its \$100 billion grant giveaway glory. According to [H.R. 6666's text](#): The taxpayer funds will be used to "trace and monitor the contacts of infected individuals, and to support the quarantine of such contacts, through mobile health units and, as necessary ... at [citizens'] residences." That means government comes to your home, taps on your door and demands you take a COVID-19 test. And if you test positive, that means the government makes sure

you stay at home. The top dogs at the Health and Human Services and the Centers for Disease Control and Prevention are in control of disbursing the \$100 billion to local governments to carry out the COVID-19 testing — more specifically, to “hire, train, compensate and pay the expenses of individuals” to staff mobile health units and to knock on citizens’ doors and to enforce compliance with quarantining. This is nothing but a massive government surveillance program cloaked in a cure-the-coronavirus label. A petition at Change.org to stop the nonsense has generated about 28,000 signatures. “HR 6666 violates inalienable rights to one’s person, home and property, to one’s life, freedoms, privacy and security,” the [petition states](#).

Note: Why the huge price tag of \$100 billion, which is more than the entire 2019 budget for the US Dept. of Health and Human Services? Explore this bill which greatly threatens privacy and civil rights on the website of the US Congress at [this link](#). This excellent and [well researched video](#) leaves little doubt that some people will be taken from their homes and children taken from their mothers. For those concerned about being traced and quarantined, this article has good information on [who is behind it all](#). Sign a petition opposing this bill on [this webpage](#).

ACT NOW: Send this Notice of Non-Consent! Say NO to the "Big Brother" bill (HR 6666) AND preserve your Constitutional rights & medical freedoms!

https://oneclickpolitics.global.ssl.fastly.net/messages/edit?promo_id=8778

<https://oneclickpolitics.global.ssl.fastly.net/promo/2Ha>

On May 1, 2020, 45 congress members co-sponsored [Bill HR 6666](#), proposing to spend **\$100 BILLION dollars in 2020** to hire **"contact tracers", coronavirus testers, and reporting agents**. If passed, this would create an unprecedented new mega-industry for what appears to be a type of "medical martial law". Proponents of this bill apparently want to hire a massive number of staff to enforce "social distancing", administer tests in our homes — apparently whether we consent or not, and apparently — if we perceive the bill correctly — even grant themselves the right to take people who "test positive" from their homes!

The full name of this bill HR 6666 is the "COVID-19 Testing, Reaching, And Contacting Everyone (TRACE) Act". As many of you know, what is referred to as "contact tracing" is more aptly called **Big Brother surveillance**.

Ventura, California recently announced their own draconian measure threatening to forcibly test and remove people from their homes if "necessary"... though they subsequently [backtracked](#) probably due to the massive pushback. As many of us have come to realize (not a comfortable process), there indeed appears to be an agenda to lock humanity into a so-called "new normal" reality of technocratic policing and constant monitoring. **Globalist technocrats, their pocketed elected reps, and their organizations appear highly motivated to force us and our children to accept wireless tracking,**

unproven vaccinations and, it strongly appears, creepy biometrics.

But *millions* are waking up and sharing information. This is a fight for the soul of humanity, and we're learning what it means to combine love and action.

» YOU'VE AWAKENED. NOW LET'S COME TOGETHER AND ACT.

This instant action is the first step. It will be sent to each of YOUR federal elected reps. (NOTE: This action has been edited to focus in on HR 6666. Additional actions are forthcoming, to address state and local elected reps.)

We have about 80% coverage at the local level... i.e. so for most of you, you'll be able to instantly send to your Mayor and Councillors. Also, we currently have **USA** nationwide coverage, and will add **several other countries shortly**.

In this action, we'll use strong yet respectful language to 1) ask them to stop HR 6666 and all similar legislation, *AND* 2) remove our consent for all violations to our Constitutional Rights — including those occurring during this crisis.

» PRINCIPLES OF NON-CONSENT

Doing this simple action is powerful! In legal and contractual terms, there's a mechanism called "implied consent", or "tacit acceptance." That means that, once you've been notified of (or even learned about) a thing, if you haven't said NO, you've essentially said YES.

Because this is a free-will universe, those that pull the strings in our society want us to be informed of their agenda... to be in fear about it... *and to not go further than* sharing information, signing petitions (which do not remove our consent), and perhaps demonstrating.

These types of actions are foundational but they alone do not go deep enough, because we can do all of these things and still be in a position of legally / contractually having consented to the situation — or, in contractual terms, to their "offer".

But when we begin to realize who we are, the power we have, and the terrible charade happening in our world that is intended to bind us, we can turn the tables, then create what we want instead.

Removing our consent and standing with our **unalienable* rights**, granted by our Creator (as recognized in the Constitution), is a significant and powerful first step. The steps that follow include embodying and *walking this out* — i.e. acting in alignment with the powerful, responsible beings that we are — throughout our day-to-day lives.

Addressing fear-based agendas.

2000 – Y2K is going to kill us all.

2001 – Anthrax is going to kill us all.

2002 – West Nile Virus is going to kill us all.

2003 – SARS is going to kill us all.

2005 – BIRD Flu is going to kill us all.

2006 – ECOLI is going to kill us all.

2008 – The bad economy is going to kill us all.

2009 – SWINE Flu is going to kill us all.

2010 – BP Oil is going to kill us all.


2012 – The Mayan Calendar is going to kill us all.

2013 – North Korea is going to kill us all.

2014 – Ebola Virus is going to kill us all.

2015 – Disney Measles and ISIS are going to kill us all.

2016 – Zika Virus is going to kill us all.

2020 – Corona Virus is going to kill us all,
but really Fear Is Killing You... Turn off
the tv 

A Brief History of Recent Epidemic Scares

Anthrax – 2001

When letters containing anthrax were mailed to two U.S. senators shortly after the 9/11 attacks, government and media sources immediately fanned widespread fear of massive infections around the U.S.. People around the country. greatly feared the deadly anthrax. Yet in the end, as stated in [this 2011 NPR article](#), "Five people died from inhaling anthrax and 17 others were infected."

[This Oct. 26, 2001 New York Times article](#) states "Bayer agreed ... to sell 100 million tablets of its anthrax medicine, Cipro, to the government for 95 cents apiece. But while Bayer nearly halved its previous price, three big pharmaceutical companies have since stepped forward to offer large quantities of their antibiotics free."

So the U.S. government turned down the free drugs and spent the \$95 million, yet the vast majority of those Cipro pills were never taken and have now passed their expiration date and so were wasted. So who profited from all the fear?

Avian Flu – 2005-06

[2005 BBC News article](#) titled "**Bird flu 'could kill 150m people'**": "A flu pandemic could happen at any time and kill between 5 – 150 million people, a UN health official has warned. David Nabarro, who is charged with coordinating responses to bird flu, said a mutation of the virus affecting Asia could trigger new outbreaks. The WHO spokesman on influenza, Dick Thompson, told a news conference in Geneva that the WHO's official estimate of the number of people who could die was between two million and 7.4 million."

[2008 article in Nature](#) on avian flu: "The 88 cases and 59 deaths reported last year are lower than the 2006 peak of 115 cases and 79 deaths."

[2006 article in UK's Independent](#) titled "**Donald Rumsfeld makes \$5m killing on bird flu drug**": "The US Defence Secretary has made more than \$5m (£2.9m) in capital gains from selling shares in the biotechnology firm that discovered and developed Tamiflu, the drug being bought in massive amounts by Governments to treat a possible human pandemic of the disease. **More than 60 countries have so far ordered large stocks of the antiviral medication.** The drug was developed by a Californian biotech company, Gilead Sciences. Mr Rumsfeld was on the board of Gilead from 1988 to 2001, and was its chairman from 1997. He then left to join the Bush administration, but retained a huge shareholding."

The final tally of avian flu fatalities was under 200 for the "pandemic" of 2005 and 2006. So when the UN and WHO officials who were charged with handling these matters fomented fear by claiming many millions could die, they exaggerated by more than 10,000 times the number who actually died. So how much can we trust the UN and WHO in these matters? And who profited from all the fear spread around the word?

Swine Flu (H1N1) – 2009-10

[2010 article in the *Washington Post*](#) titled "Reports accuse WHO of exaggerating H1N1 threat, possible ties to drug makers": "European criticism of the World Health Organization's handling of the H1N1 pandemic intensified ... with the release of two reports that accused the agency of exaggerating the threat posed by the virus and failing to disclose possible influence by the pharmaceutical industry on its recommendations for how countries should respond. **The WHO's response caused widespread, unnecessary fear and prompted countries around the world to waste millions of dollars. At the same time, the Geneva-based arm of the United Nations relied on advice from experts with ties to drug makers.**"

[2010 article in the UK's *Guardian*](#) titled "Swine flu was as elusive as WMD": "Health chiefs should admit they were wrong – yet again – about a global pandemic. Virologist John Oxford said half the population could be infected [in the UK]. Chief medical officer Sir Liam Donaldson [warned that] '65,000 could die', peaking at 350 corpses a day. The media went berserk. **The World Health Organisation declared a 'six-level alert' so as to 'prepare the world for an imminent attack'. If anyone dared question this drivell, they were dismissed by Donaldson as 'extremists'. In the UK, [only] 360 people have died under its influence, most with prior 'non-flu' conditions. Swine flu is not nice ... but bears no relation to the government hysteria.**"

[2012 article in the *Los Angeles Times*](#) titled "No magic bullet on the flu": "Two employees of a communications company [revealed] they had been paid to ghostwrite some of the Tamiflu studies [and] had been given explicit instructions to ensure that a **key message was embedded in the articles: Flu is a threat, and Tamiflu is the answer.**"

[2014 Reuters article](#) titled "**Stockpiles of Roche Tamiflu drug are waste of money**": "Scientists from the respected research network the Cochrane Review said that the medicines had few if any beneficial effects, but did have adverse side effects. The United States has spent more than \$1.3 billion buying a strategic reserve of

antivirals including Tamiflu, while the British government has spent almost 424 million pounds (\$703 million) on a stockpile of some 40 million Tamiflu doses."

Thanks to the huge fear generated worldwide, literally billions of dollars were spent by more than 60 countries around the world stockpiling Tamiflu to prevent both the avian and swine flus. As the meds had a [shelf life of seven years](#), almost all of those millions of doses eventually went down the drain, while the billions of dollars spent flowed straight into the coffers of big Pharma and into the pockets of the politicians who supported them. Fomenting fear clearly can be very profitable for some.

Zika Virus – 2015-16

[2016 New York Times article](#) titled "**Zika Virus a Global Health Emergency, W.H.O. Says**": "The World Health Organization declared the Zika virus and its suspected link to birth defects an international public health emergency on Monday, a rare move that signals the seriousness of the outbreak. The main worry is over the virus's possible link to microcephaly, a condition that causes babies to be born with unusually small heads and, in the vast majority of cases, damaged brains."

[2016 article in BMJ](#) (*British Medical Journal*) titled "Zika Virus – Fear is the Key": "Remember the WHO's pandemic alert on swine flu some years ago? When the WHO was proactive to announce a pandemic then without any scientific justifications I was the one who wrote that that was a business stunt! People did not believe and the *British Medical Journal* rejected my paper. After one long year what I had predicted came true. **The link between microcephaly and the zika virus is only a hypothesis without much backing in science. This unproven allegation is neither a proper logical nor legal basis for the WHO Global Health Emergency Declaration. There are many signs that there is close cooperation between the WHO and pharmaceutical companies.**"

[2016 Associated Press article](#) titled "Brazil: 270 of 4,180 suspected microcephaly cases confirmed": "Researchers have been looking at 4,180 suspected cases of microcephaly reported since October. On Wednesday, officials said they had done a more intense analysis of more than 700 of those cases, confirming 270 cases and ruling out 462 others. **Six of the 270 confirmed microcephaly cases were found to have the virus.**"

Fear mongering around the zika virus causing microcephaly in babies led to governments spending [more than \\$1 billion](#) allegedly to combat the virus. Yet

the link to microcephaly was never clearly established and the WHO removed the global emergency status in November of 2016. Where did all that money go?
Coronavirus – 2020

The coronavirus has affected and killed many more people than the examples above, yet could it be that the power elite are using the same tactics to rake in profits and achieve greater control?

March 11, 2020 [CNBC article](#) titled **"Up to 150 million Americans are expected to contract the coronavirus, congressional doctor says"**: Dr. Brian Monahan, the attending physician of Congress and the U.S. Supreme Court, said he expects 70 million to 150 million people in the U.S. will become infected with COVID-19. Marc Lipsitch, professor of epidemiology at Harvard, said ... he thinks about 40% to 70% of the world's population could become infected with the virus, and of those, 1% will die." (Note that **he's predicting 30 to 50 million deaths worldwide**)

March 13, 2020 [article in the Intercept](#) titled "Big Pharma Prepares to Profit From the coronavirus": "During the current crisis, pharmaceutical makers may have even more leeway than usual because of language industry lobbyists inserted into an \$8.3 billion coronavirus spending package, passed last week, to maximize their profits from the pandemic. **The final aid package not only omitted language that would have limited drug makers' intellectual property rights, it specifically prohibited the federal government from taking any action if it has concerns that the treatments or vaccines developed with public funds are priced too high.**

March 18, 2020 [Newsweek article](#) titled "Inside the Military's Top Secret Plans if coronavirus Cripples Government.": "Above-Top Secret contingency plans already exist for what the military is supposed to do if all the Constitutional successors are incapacitated. **Standby orders were issued more than three weeks ago to ready these plans, not just to protect Washington but also to prepare for the possibility of some form of martial law. The various plans ... are so secret that under these extraordinary plans, 'devolution' could circumvent the normal Constitutional provisions for government succession.**"

Dec. 16, 2020 [Washington Post article](#) titled "America's biggest companies are flourishing during the pandemic and putting thousands of people out of work.

A *Post* analysis found 45 of the 50 biggest U.S. companies turned a profit since March. The majority of firms cut staff and gave the bulk of profits to shareholders."

Nov. 25, 2020 [New York Times article](#): **"\$1 trillion. That is the amount of new wealth American billionaires have amassed since March, at the start of the**

devastating lockdowns that state and local governments imposed to curb the pandemic. Billionaires amassed their new billions just as millions of other Americans plunged into dire financial straits."

So billionaires have amassed over \$1 trillion in the U.S. alone, yet for the majority of citizens, average income has dropped, and unemployment and bankruptcies have soared worldwide. Not to mention the fact that depression, suicide, domestic violence, and poverty have all risen sharply. 2020 Nobel Peace Prize winner [David Beasley](#) [stated](#), **135 million people have been pushed to "the brink of starvation" since the start of the pandemic. Yet all of this not from the coronavirus, but rather than from the policies instituted by the elite around the coronavirus.**

Official [Johns Hopkins statistics](#) state that over two million have died around the world and many more are dying every day. Caution is clearly warranted to protect our health and that of our loved ones, yet what if...

What If...

What if the power elite in their quest for ever more money and control are working in a variety of ways to spread fear and exaggerate the real level of danger of this coronavirus?

What if they are secretly using each succeeding crisis to see how much we are willing to voluntarily give up our freedoms?

What if the power elite is preparing us to accept martial law where Congress abdicates its power and the U.S. president becomes the supreme leader and other countries are doing the same?

What if as a counterbalance to the power elite, there are millions of people worldwide committed to [revealing the deeper levels of deception](#) and to [empowering us all](#) to open our eyes and do the right thing?

What if you are one of those?

The truth about FACUI!

<https://spectator.org/fauci-new-york-did-it-correctly-covid-19-spanish-flu/>



Just in.

In 2008, Dr. Anthony Fauci co-authored a paper about the Spanish Flu Epidemic that rates as the most devastating modern pandemic. It swept the entire planet in the wake of the First World War and caused millions of deaths.

So in studying this major and actual pandemic, what did Dr. Fauci and his colleagues find?

They discovered that most of the victims of the Spanish Flu didn't die from the Spanish Flu. They died from bacterial pneumonia. And the bacterial pneumonia was caused by... wait for it, wait for it... wearing masks.

The intention then, as now, was to halt the spread of the disease by wearing masks, but what actually

Fauci Finally, Falsely, Invokes the 'Spanish Flu'

It's not the first time he's cried wolf about a disease.

Ten years ago I published [an article](#) called "No More Crying 'Spanish Flu,'" in part because with every pandemic or potential pandemic that's exactly what public health service gurus and the media were doing. And in part because the comparison to the [1918–19 flu](#) was always ludicrous, based not on science but primal fear. Well, it's happened again. And this time the klaxon-ringer is no less than the nation's top health official, National Institutes of Allergies and Infectious Diseases Director Dr. Anthony Fauci.

Even a virus far more deadly than that of the Spanish flu would not pose a similar threat because of tremendously different conditions then and now.

Fauci's advice and counsel during the coronavirus pandemic [has been "uneven,"](#) to say the least. Most recently, he [said](#) of New York, the state with the second-highest COVID-19 deaths per capita, [that the state did it "correctly."](#) But he's never been particularly reliable. In 1983, he made a huge splash with a [medical journal article](#) stating that AIDS could be transmissible through casual contact. Fauci repeated the pattern during successive disease panics, such as when he declared 16 years ago that we're "[due](#)" for "[massive person-to-person](#)" spread of Avian flu H5N1. While Fauci didn't define "massive," [according to one estimate by a CDC modeler](#) "even in the best-case scenarios" it would "cause 2 to 7 million deaths" worldwide. British epidemiologist Neil Ferguson (whose prediction of 500,000 coronavirus deaths in Britain and two million in the U.S. would lead to economically ruinous nationwide lockdowns in both countries) [scaled that back](#) to "only" 200,000. As it turned out, the disease [killed 440](#) worldwide.

More recently, Fauci sounded the threat of the Zika virus, [demanding billions more](#) in taxpayer funds. It barely touched two U.S. states before burning out on its own. As to his Spanish flu comparison, on Tuesday [he told a Georgetown University webinar](#), "If you look at the magnitude of the 1918 pandemic where anywhere from 50 to 75 to 100 million people globally died (325 to 430 million adjusted to today's population), that was the mother of all pandemics and truly historic. I hope we don't even approach that with this, but it does have the makings of, the possibility of ... approaching that in seriousness."

Granted, he's still ahead of CDC Director Robert Redfield, who has already [indirectly stated](#) that coronavirus is *worse than* the Spanish flu. But that may not be saying much.

We already know that COVID-19 has a far lower mortality rate than even lesser 20th-century flu pandemics. The CDC's "best estimate" [is around 0.26 percent](#). That compares to about 0.67 percent for the "[Asian flu](#)" of 1957–58, which in turn was vastly milder than Spanish flu.

Further, even a virus far more deadly than that of the Spanish flu would not pose a similar threat because of tremendously different conditions then and now.

In 1918, the world was at war. In part because of that, people were in far poorer general health than we are today, with malnourishment commonplace. We know malnourishment is a powerful factor in infectious disease severity. Apparently [only 10 to 15 percent](#) of Irish people who died during the great potato famine of 1845–50 actually starved, with the [rest carried off by diseases such as typhus](#).

Far from "social distancing," soldiers were packed like veritable sardines in barracks, box cars, ships, and trenches. The [first identified outbreak](#) of the disease, curiously associated with Spain, was actually in the crowded environs of Fort Riley, Kansas. Back then, medicine was not so advanced as it is today: "The arsenal of available medical countermeasures to treat pandemic influenza virus infections in 1918 was quite basic and largely limited to supportive care," [notes one medical journal paper](#). Common "treatments" included aspirin, fresh air, and sunshine.

We've come a long way. Among other things, we've developed flu vaccines, pneumonia vaccines, and pulmonary intubation. There were no effective antivirals [until fairly recently](#), and, rather amazingly, even use of IV tubes for hydration, nourishment, and continuous medicine injection wasn't common in the U.S. [until the 1960s](#).

Unfortunately, development of new medicines remains agonizingly slow compared to, say, incredible advances with electronics. So despite [almost countless new drugs being developed against COVID-19](#), don't expect any miracles in the near future. But in the last century we've certainly done a lot of pharmaceutical shelf-stocking, and there's nothing a pharma company loves more than getting new tricks out of old drugs. Thus one such, the steroid dexamethasone, [appears to make pulmonary intubation significantly safer](#) and thus more effective for coronavirus patients, while

another, [the antiviral remdesivir](#), appears to at least shorten coronavirus hospital stays [and may also reduce mortality](#).

Although there are about [140 COVID-19 vaccine candidates](#) and some [now approaching Phase III](#) (usually the final phase) of testing, it shouldn't be [simply assumed](#) we'll shortly have one that's both safe and reasonably effective shortly. So it would be questionable to base policies on that assumption. But advances in the studies of virology, immunology, and computing power, especially artificial intelligence, mean we can probably expect such a vaccine in record time.

And this is rather important: There were no antibiotics in 1918–19, and, [as one medical journal paper put it](#), “The majority of deaths in the 1918-1919 influenza pandemic likely resulted directly from secondary bacterial pneumonia caused by common upper respiratory-tract bacteria.” The chief researcher for that paper? Dr. Anthony Fauci.

Michael Fumento (www.fumento.com) is an author and journalist who has specialized in writing on epidemics for 35 years.





More than a century ago, epidemiologist Dr. Thomas Tuttle prescribed face masks and social distancing to slow the influenza pandemic. He made a lot of enemies—but it worked.

^{IN} January 1919, Washington's health commissioner urged legislators in the state capital, Olympia, to enforce strict measures against the spread of the Spanish flu, which had just ended a deadly second wave in America. Recommended restrictions included banning dances and other social gatherings, as well as limits on how many people could attend public meetings and how far apart they should sit from one another. Both the city and county voted against those measures. In response, the commissioner

sought to get the State Board of Health to enforce its police powers against the county.

Instead, he lost his job.

A public health official getting fired over unpopular social distancing measures during a pandemic has an eerie echo today, when business leaders and politicians are chafing against restrictions urged by authorities to contain the COVID-19 pandemic. But it was precisely these restrictions that enabled Seattle and other cities in Washington to protect themselves from the Spanish flu—and similar actions helped Kansas abate another influenza wave in the fall of 1919.

At the center of public health efforts in both states was a practical, plainspoken, bespectacled scientist: Dr. Thomas Dyer Tuttle, who became a powerful, if polarizing, figure in the fight against the Spanish flu—not unlike Dr. Anthony Fauci is perceived today, in the battle against COVID-19.

Apart from the passing physical resemblance, both Dr. Tuttle and Dr. Fauci fought global pandemics late in their long public health careers and the perilous balance of science and sociology that entails. Both men attended Ivy League medical schools. Both were commissioned officers in the United States Public Health Service. And both had experience fighting previous epidemics. Fauci first came to prominence in the 1980s as the leading HIV/AIDS researcher for Ronald Reagan and George H.W. Bush. For Tuttle, it was a resurgence of smallpox at the turn of the 20th century. Tuttle was born in Fulton, Missouri, in 1869. He was the son of a grocer who had married into wealth—his mother's family,

according to a local history, had a home encompassing about a quarter of a city block. He received his bachelor's degree at local Westminster College (where Winston Churchill would deliver his famous "Iron Curtain" speech some 56 years after Dr. Tuttle had graduated). Tuttle then moved to New York City in 1889 to obtain a medical degree at what was then known as Columbia College.





During that first year of medical school, he unwittingly found himself in the midst of one of the deadliest flu pandemics, [the so-called “Russian flu,”](#) which had killed tens of thousands in Europe that fall and arrived in New York in December. That flu would end up causing more than 2,500 deaths in New York before subsiding in February 1890.

Battle Ready in 1918: Soldiers under quarantine in Washington state during the Spanish flu and Red Cross volunteers sewing masks. (*Washington State Historical Society, Gregg Courtwright Collection*)

After graduating from Columbia in 1892, Tuttle worked at New York’s Mount Sinai hospital. He later returned to Missouri, where

he married his wife, Lucile, in 1896. A few years later, the couple moved to Montana where Tuttle pursued a medical career and became Secretary and Executive Officer of the state's Board of Health in 1903.

QUARANTINE ABOLISHED

A notice from T. D. Tuttle, secretary of the state department of public health, has been received by Drs. Houston and Lees, calling attention to the fact that after the first of the coming year there will be no more quarantining of small-pox cases in Montana.

It is their opinion that the new rule will eventually prove a good thing for the reason that it will bring people to realize the importance of vaccination. They state that once the quarantine is done away with, the public will be

brought face to face with the necessity of preventing the disease in a manner in which they have not been before, in that they will understand that they must either be vaccinated or take more chances than they have been required to do in the past.

The new regulations require that houses where smallpox patients are living shall be placarded, but persons may enter and leave the house as they please. Persons afflicted with smallpox will not be allowed to enter any common carrier, such as railway trains and street cars.

The letter sent out by Dr. Tuttle follows:

It was in this role that Dr. Tuttle first learned to value science over unpopular public opinion. In 1909, Tuttle made headlines in local Montana newspapers—ironically, by coming out *against* quarantines—much to the consternation of the public. Smallpox had ravaged the population in the early 1900s, but Dr. Tuttle's reasoning behind the order was that lifting quarantines would encourage people to vaccinate. (In 1905, the Supreme

Court case [Jacobson v. Massachusetts](#) upheld states' authority to require smallpox vaccinations in the interest of public health.)

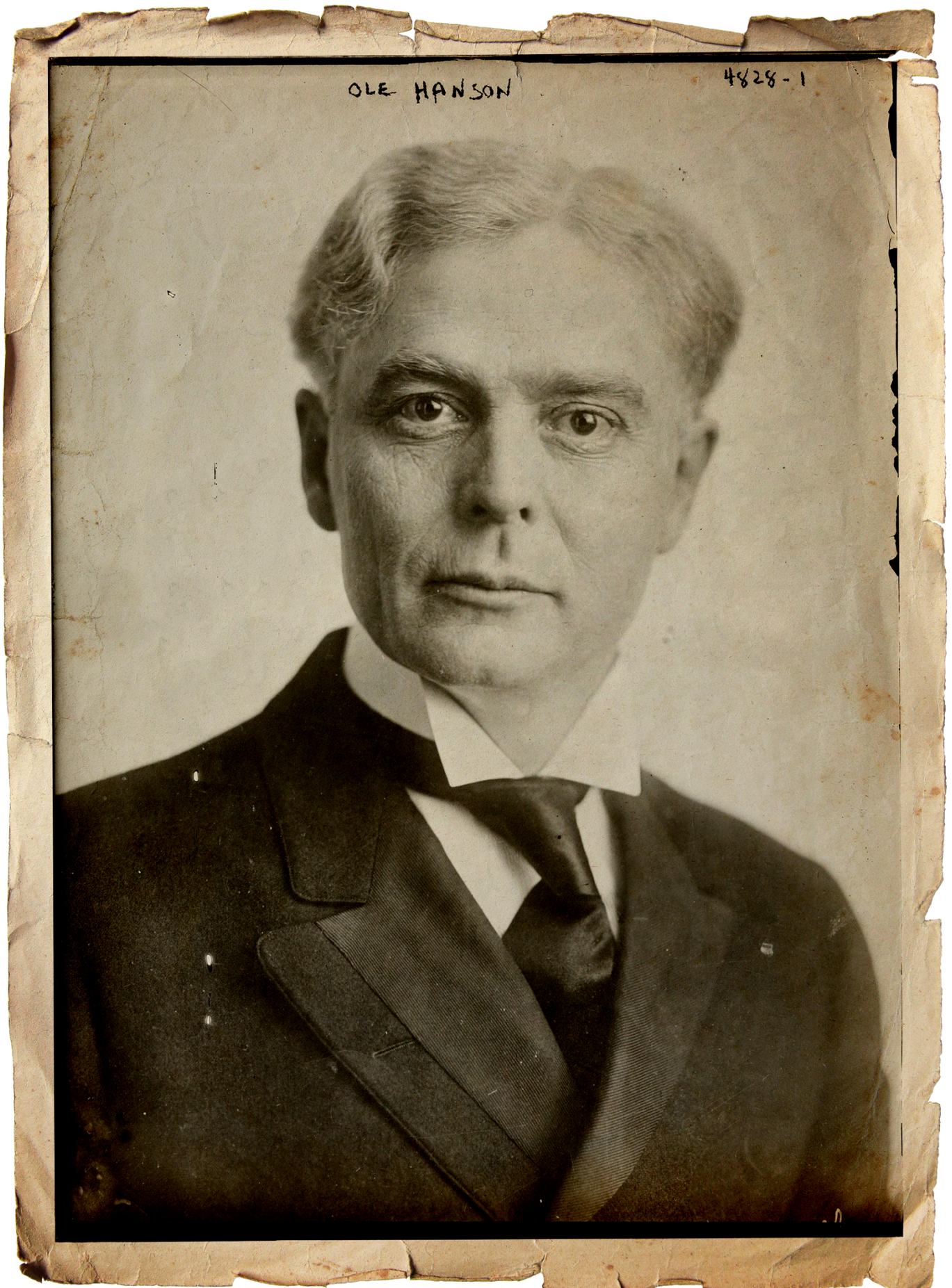
Tuttle and the state's Board of Health had promoted mandatory smallpox vaccinations by offering them free of charge and by circulating a Tuttle-penned pamphlet touting their benefits. Those instructions included [sharp words](#) for the anti-vaxxers of the day: "It is the firm belief of the author that the most effectual way to rid this country of smallpox would be to give a few months warning, in order that all might have time to be successfully vaccinated," Dr. Tuttle wrote. "And then let any cases of smallpox that might appear go at large, without disinfection, so that those who would not be vaccinated might have the disease and be done with it. Such a move would result in a radical 'change of heart' on the part of many, if not all, 'anti-vaccinationists.'"

In 1915, with smallpox under control in America, Dr. Tuttle accepted a new position as health commissioner of Washington. Three years later, in July 1918, the Spanish flu reached the state. The first set of infections hit the Army's Camp Lewis, where more than 300 cases were reported. As summer went on, the number of cases appeared to decline and the "alarm went down," says historian Gwen Whiting.

**In Seattle, churches
and public gatherings
were closed. Citizens
could also be fined
for not wearing a
mask on the streetcar.**

But the numbers started to creep up again in September, and public health officials became concerned about a second wave. The state's Board of Health met in late September specifically to discuss concerns over the flu, and after the meeting Tuttle spoke to a newspaper to warn citizens that the flu would return. Because of limitations on the state Board of Health's authority, Dr. Tuttle wasn't able to enforce many orders until November, says Whiting. But he did use his position to encourage local officials to announce stringent measures to contain the pandemic in early October. Dr. Tuttle, who lived in Seattle, worked closely with the local health commissioner, Dr. J.S. McBride, to manage the trajectory of flu cases. Alarmed by hundreds of hospitalized cases of flu in the nearby Naval training station, Tuttle declared that the Spanish flu

had arrived in the city. Both McBride and Seattle's mayor, Ole Hanson, acted quickly in response—taking advice from Dr. Tuttle.



Thoughts and Prayers: After closing Seattle's churches in 1918, Mayor Ole Hanson said, "Religion which won't keep for two weeks is not worth having."

On October 5, 1918, Mayor Hanson laid out his measures to curb the epidemic in Seattle. "He closed the churches. He shut down public places. They even raised fines for spitting on the sidewalk," explains Whiting. "You could be fined if you weren't wearing a mask to get on the streetcar. All of these strict restrictions were put into place in Seattle. And other cities followed suit."

Meanwhile, Dr. Tuttle took to the newspapers to spread health advice— sending letters to the press statewide, proclaiming that the flu might be prevented from becoming epidemic with "the earnest, conscientious and intelligent help of every citizen of the State" following a now-familiar set of precautions: Don't sneeze or cough in your hands, keep away from crowds, and stay at home if you have any symptoms.

SAYS TO BEWARE OF BAD COLD

State Health Department Warns of Influenza Outbreak.

Topeka.—Warning that another outbreak of influenza may be expected in a short time was sent out to county

FLU RECOMMENDATIONS

The committee on influenza research composed of Dr. T. D. Tuttle, Dr. Earle G. Brown, Dr. F. L. Loveland, and Dr. H. A. Alexander have reported the following recommendations for influenza control, from Topeka.

A policy of strict quarantine is to be enforced.

No permit shall be issued to wage earner until health officer has investigated the feasibility of his remaining isolated from the sick person.

They express the opinion that if these two things are done it will be unnecessary to require the closing of schools, churches and businesses.

Soda fountains and restaurants must boil glasses and spoons. If this is not done at fountains, individual containers that may be destroyed must be used.

All places of business, schools and other institutions should provide for daily medical inspection by a nurse or physician.

Hospitals are urged to provide ample facilities for taking care of a large number of influenza patients, arranged so as to isolate those afflicted with pneumonia from those who have not.

The health officer should be empowered to take such action as he deems necessary.

Keep Away From Crowds—Dr. Tuttle

T. D. Tuttle, state commissioner of health, has issued a list of rules for the public to follow in combatting Spanish influenza, which citizens are asked to follow in order to prevent the spread of infection. Here they

FIGHT INFLUENZA NOW

STATE BOARD OF HEALTH URGES COUNTY ACTION.

Must Anticipate Another Outbreak
It is Warned—Quarantines Important.

The state board of health is starting early on the campaign against the dreaded influenza which was the cause of so many deaths in this country last year. The state board is urging prompt and forceful action on the part of all officers who have any work in connection with the health department in case influenza is found to get a start. Following is the communication from the state board of health to the county commissioners urging upon them the importance of being on the alert and of strictly enforcing quarantine regulations:

State of Kansas. Dept. of the State Board of Health, Topeka, Aug. 9, 1919.

Hon. Board of County Commissioners:

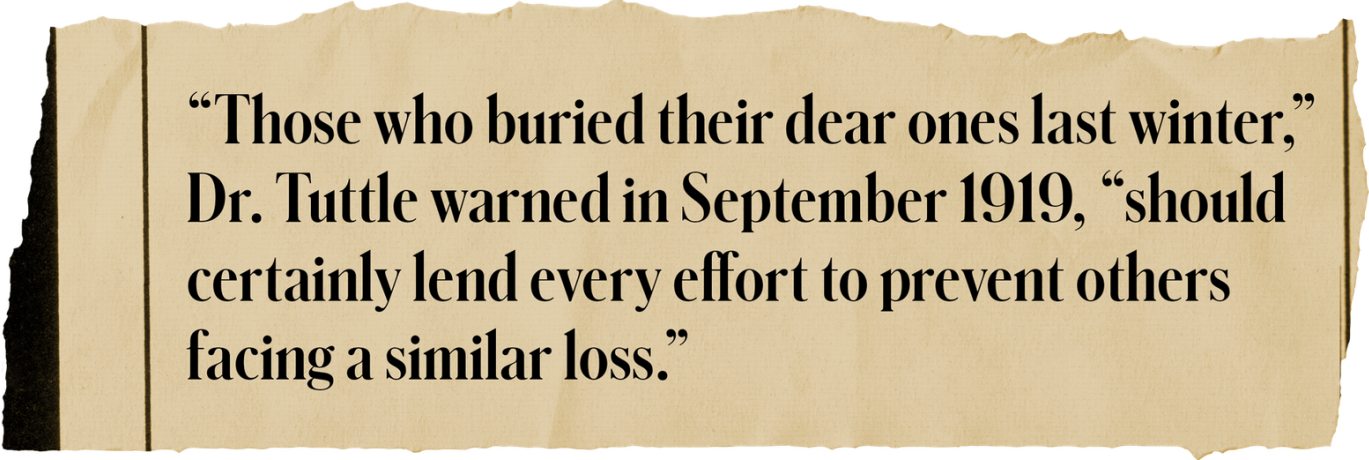
Gentlemen:

History of various outbreaks of influenza, with which the world has been confronted, indicates

The Cold War: To warn Kansans of the perils of another Spanish flu wave, Dr. Tuttle took his message to the local papers.

As with the COVID-19 pandemic, the response to Spanish flu in Seattle, Spokane and other Washington cities had parallels across the country. New York, St. Louis and Los Angeles also saw success through the use of austere public health measures, while

cities such as San Francisco and Philadelphia were less restrictive and saw increased flu deaths as a result. But those higher mortality rates are also due, in part, because the severe measures simply weren't popular. Even in Seattle, "there was a lot of protest" over public health restrictions, says Whiting.



“Those who buried their dear ones last winter,” Dr. Tuttle warned in September 1919, “should certainly lend every effort to prevent others facing a similar loss.”

Although Dr. Tuttle gave advice to local authorities behind the scenes, he tended to act more pragmatically as the flu progressed. He never issued a statewide lockdown, for example, because the U.S. Surgeon General [had advised against it](#). He also lifted a statewide order to wear masks in public after Armistice Day in November 1918—partly because citizens weren't adhering to it anyway. The end of World War I also saw an easing of health restrictions in Seattle. But it came at a cost. In early December, the flu came back. Although this time, rather than ban public gatherings, people exposed to influenza were ordered to remain in their homes.

That month, Dr. Tuttle traveled to Chicago for a national conference of the [American Public Health Association](#) dedicated to combating the disease, and that meeting appears to have hardened his resolve to be even more aggressive. Tuttle may have

been pragmatic earlier in the epidemic, but he began to be more publicly exasperated at the lack of enforcement of public health laws. Tuttle's frustrations pepper reports he prepared after this period, and he was later described by a contemporary as belonging "to that old-fashioned school of citizens who believe laws and regulations were made to be enforced."



Such a resolute attitude likely cut short his position as health commissioner in Washington. The restrictions Dr. Tuttle was trying to enforce were "pretty controversial ideas at the time," says Whiting, "so he made a lot of enemies."

After being ousted from Washington, Dr. Tuttle moved to Kansas, where he accepted a position as Epidemiologist for the State Board of Health. In that role, he began to fear another influenza epidemic would appear in the state by the fall of 1919 and minced no words in encouraging the public to follow public health guidelines.

"Those who buried their dear ones last winter should certainly lend every effort to prevent others facing a similar loss," Dr. Tuttle wrote

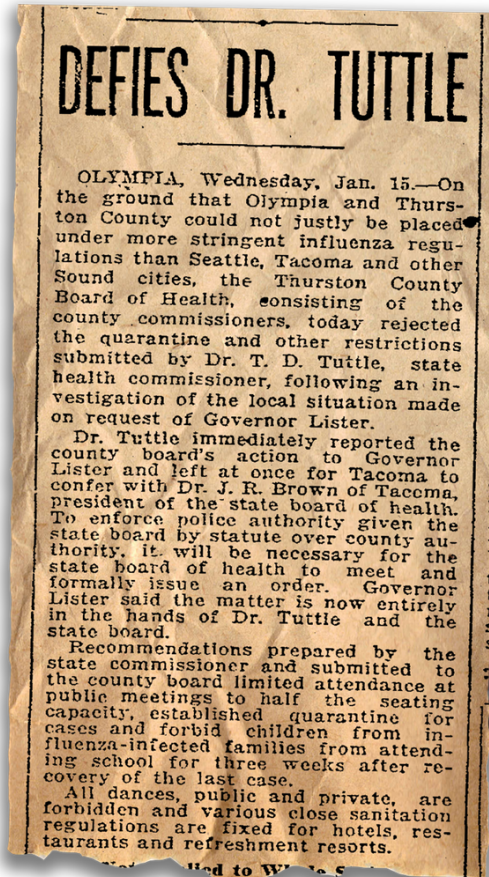
in a Topeka paper on September 11, 1919. He also wrote letters to county health commissioners, urging strict enforcement of quarantines. Though not considered part of the Spanish flu pandemic, Kansas did see a high level of influenza cases in the winter of 1919-20, and Dr. Tuttle did his best to ensure local communities were prepared.

Despite the work he had done to save lives in Washington and Kansas, it's clear that Tuttle was pessimistic about his country's ability to prepare for the next pandemic. "As a matter of fact, we know about as little with regard to the etiology and epidemiology of influenza today as we knew two years ago," he wrote in one report, "and owing to the inclination of our government (city, county, state and national) to provide funds for operating only when sickness is present, and to absolutely cut off any support whatsoever for the study of the epidemiology of the disease after an epidemic has passed, renders it very probable that we will meet our next epidemic (probably 20 or 30 years hence) with as little knowledge of the true nature of the disease as we had when we confronted the epidemic in the fall of 1918."

Two years later, Tuttle resigned his role in Kansas, citing a need for a bigger salary so he could afford to pay for his son's college education. In its biennial report, the Board of Health lamented his departure and urged that the legislature increase the salary for the role in order to secure "a man of the quality and training Kansas desires."

His next job took Dr. Tuttle back to Montana to start a veterans hospital at Fort Harrison, which still exists today. He later moved to

Chicago to practice medicine. In 1933, he and his wife retired to San Diego, where Dr. Tuttle spent his golden years gardening—on the 1940 census, he wryly noted his occupation as “orchidist” with an income of zero—before passing away in 1942.



Second Opinions: Like Dr. Tuttle’s stringent measures, Dr. Fauci’s guidelines haven’t always been popular. (*Jeremy Hogan/SOPA Images/LightRocket via Getty Images*)

Nearly 80 years after Dr. Tuttle’s death, his legacy in fighting pandemics lives on, which might have come as a surprise to him, given the pessimism he expressed in his lifetime. In 2009, a group of researchers [wrote a paper](#) comparing existing CDC guidelines on managing pandemics to those developed during the Spanish

flu. The paper noted that of all the recommendations, measures Dr. Tuttle promoted—encouraging the closing of public spaces and social distancing—were still relevant in fighting epidemics today. The report even cited findings from the 1918 December meeting Dr. Tuttle attended before insisting on the draconian health measures that got him fired.

One of the coauthors of that 2009 paper?

Dr. Anthony Fauci.

<https://thetrureporter.com/no-the-great-reset-is-not-good-for-you-nesara-gesara-are-very-dangerous>

COVID-19 And Vaccines- Interview with Robert F. Kennedy Jr.

28,557 views

•May 8, 2020

1.6K50SHARESAVE



For Those Who Want To Know



Special note on the coronavirus: For our best information on COVID-19, see our [Coronavirus Information Center](#). Be well, and remember [the bigger picture](#).



What You Can Do About the Coronavirus Cover-up

We have no doubt that by working together we can and will [build a brighter future](#). When we step out of fear, secrecy, and polarization, we choose to join with the ever increasing numbers of people dedicated to working together for the good of all in our world. **You can make a difference right now by sharing this revealing information with your family, friends, and colleagues.** Click on the "share" link at the top or bottom of this or any page on this website to help spread this valuable information far and wide.

To contact your political representatives and the media about this information, [click here](#). Together, we are making a difference. And thanks for caring!

Resilience Guide for Coronavirus Times

- 1) Check-in so you don't check-out – be mindful of when you feel afraid and overwhelmed and how that might affect your ability to balance your thinking with different perspectives.
- 2) Question what you read – don't fall for the old maxim "if it bleeds, it leads!"
- 3) Follow the money. Who is profiting both financially and politically from this so-called pandemic?
- 4) Find the people in your life who can question WITH you what part of the narrative is being left out.
- 5) Practice self-care – any activity, hobby or way of eating that helps you remember your best self. We need to feel well in order to think well.
- 6) Physical distancing does *not* mean social distancing. Crisis brings out the humanity in us so that we are closer and more connected than ever. We are all in this together.
- 7) Recognize this is a powerful opportunity for learning and growth. And we always have a choice between fear and love. Let us acknowledge any fear that arises, yet then choose love.

Del Bigtree The Highwire “One of the Greatest Censorship Events in Modern History”

https://www.americafrontlinedoctors.com/custom_videos/america-frontline-doctors-press-conference-washington-dc/

ccasTalks: “Brave Doctors, Threatened, Come Forth”

https://www.instagram.com/tv/CFVGV0bDfJF/?utm_source=ig_embed&utm_campaign=loading

Million Man March | Washington, DC

November 14, 2020

https://www.americafrontlinedoctors.com/custom_videos/rally-in-washington-dc/

Beverly Hills Freedom Rally

October 26, 2020

https://www.americafrontlinedoctors.com/custom_videos/rally-in-washington-dc/

Turning Point USA COVID Panel

December 20, 2020

https://www.americafrontlinedoctors.com/custom_videos/turning-point-usa-covid-panel/

America’s Frontline Doctors’ COVID Panel | Atlanta, Georgia

https://www.americafrontlinedoctors.com/custom_videos/aflids-panel-in-atlanta-georgia/

https://www.americafrontlinedoctors.com/custom_videos/rally-in-washington-dc/

https://www.americafrontlinedoctors.com/custom_videos/aflids-panel-in-atlanta-georgia/

Don't follow Europe's lockdown model on COVID-19

Lockdowns are medically, socially and economically devastating

<https://www.washingtontimes.com/news/2020/nov/14/dont-follow-europes-lockdown-model-on-covid-19/>

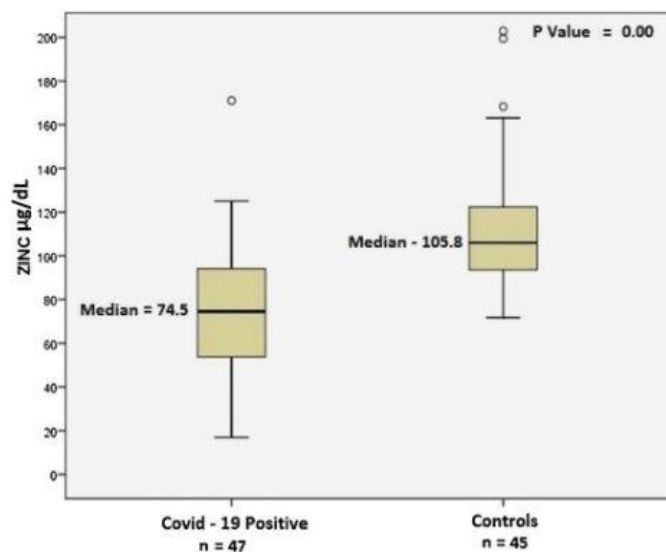
#MalkinLive: Stop Medical Discrimination

February 11, 2021

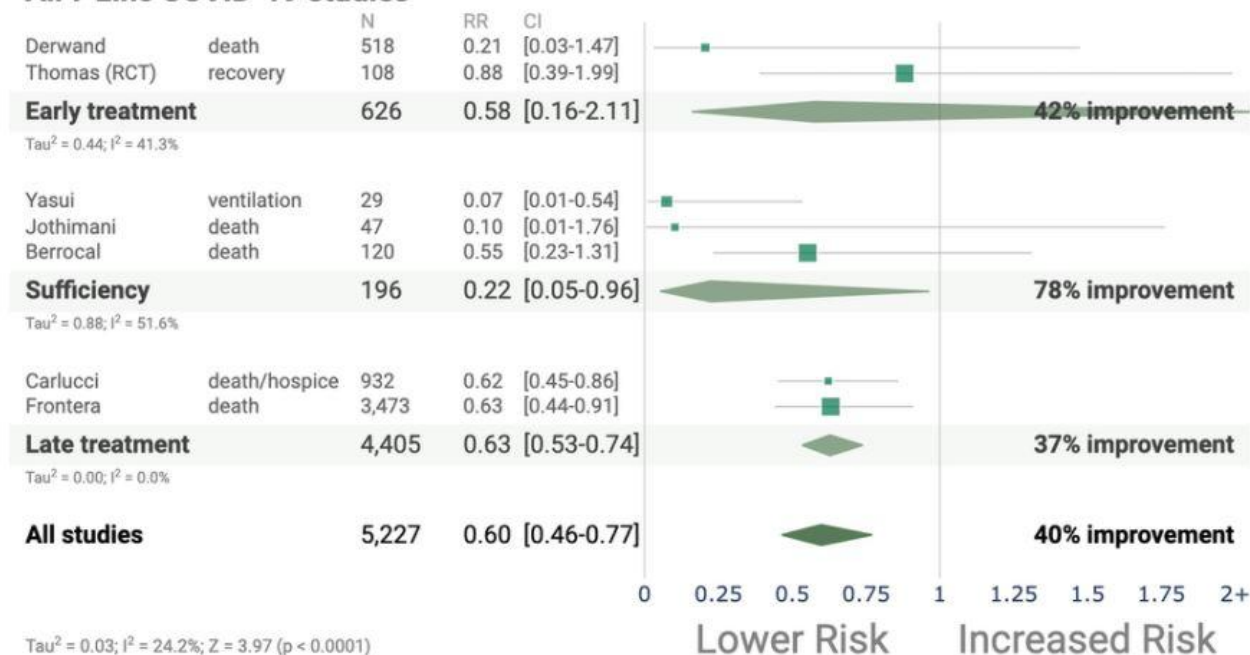


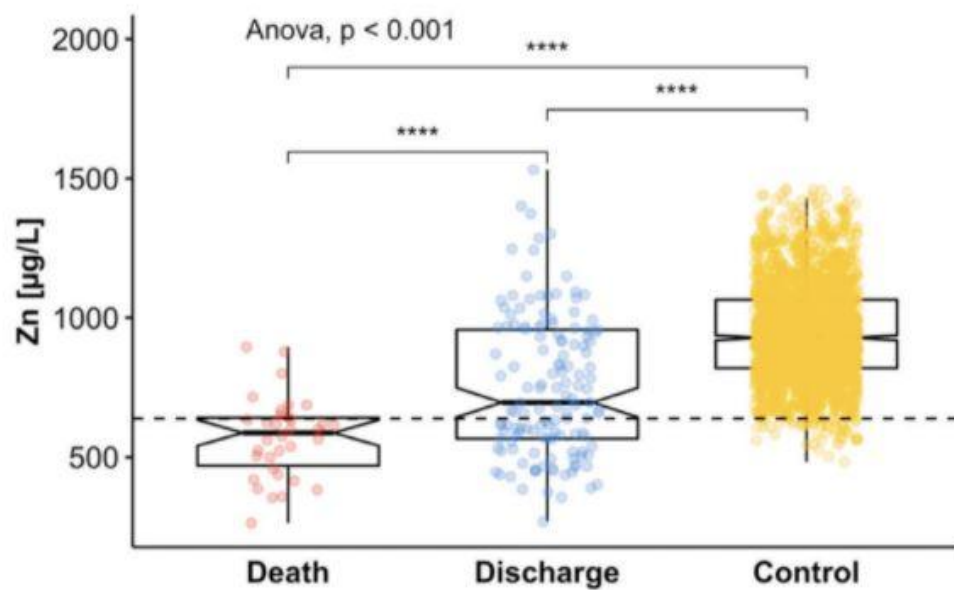
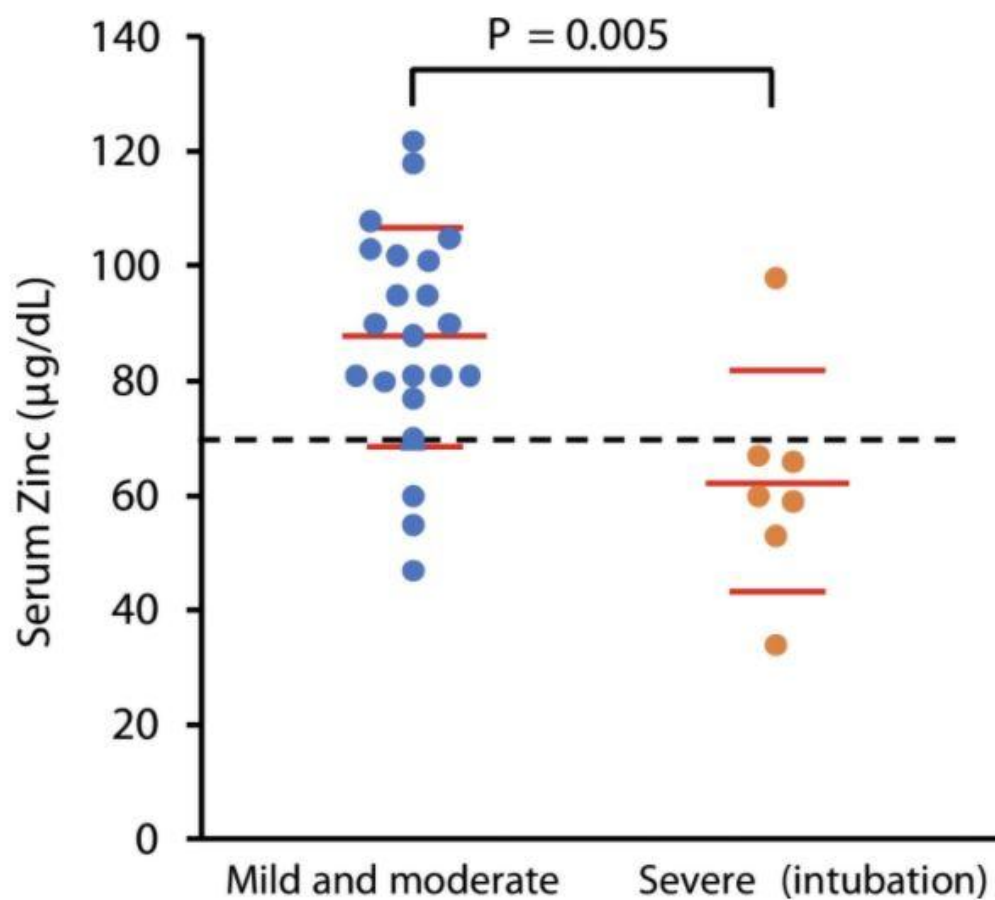
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All 7 zinc COVID-19 studies





VITAMIN D FOR COVID-19

49 STUDIES BY 402 SCIENTISTS

33 SUFFICIENCY STUDIES WITH 5,331 PATIENTS

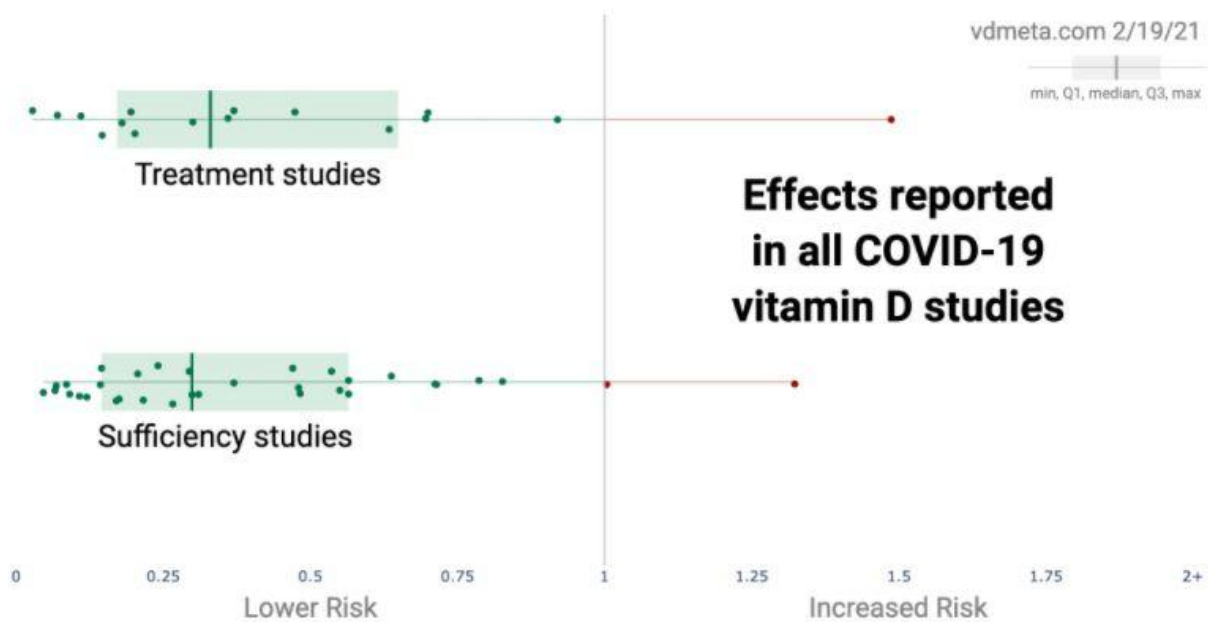
16 TREATMENT TRIALS WITH 11,066 PATIENTS

64% IMPROVEMENT IN 16 TREATMENT TRIALS RR 0.36 [0.24-0.52]

62% IMPROVEMENT IN 33 SUFFICIENCY STUDIES RR 0.38 [0.30-0.48]

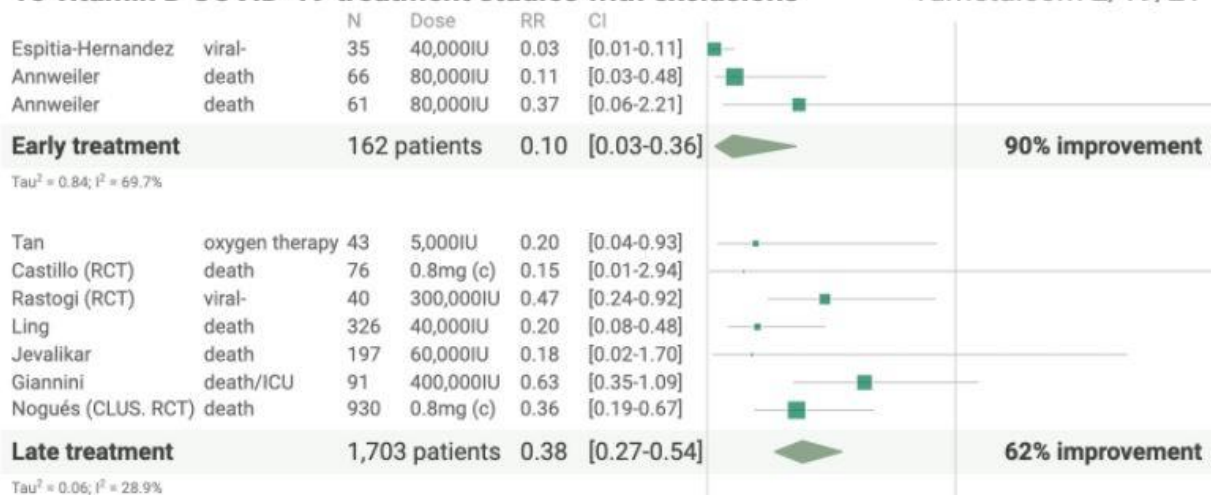
70% IMPROVEMENT IN 10 TREATMENT MORTALITY RESULTS RR 0.30 [0.17-0.52]

SUFFICIENCY STUDIES ANALYZE OUTCOMES BASED ON SERUM LEVELS. 02/20/21. VDMETA.COM



15 vitamin D COVID-19 treatment studies with exclusions

vdmeta.com 2/19/21



VITAMIN D FOR COVID-19

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SUFFICIENCY STUDIES ANALYZE OUTCOMES BASED ON SERUM LEVELS. 02/20/21. VDMETA

IVERMECTIN FOR COVID-19

41 TRIALS, 304 SCIENTISTS, 14,833 PATIENTS

20 RANDOMIZED CONTROLLED TRIALS

89% IMPROVEMENT IN 11 PROPHYLAXIS TRIALS RR 0.11 [0.05-0.23]

83% IMPROVEMENT IN 13 EARLY TREATMENT TRIALS RR 0.17 [0.11-0.26]

72% IMPROVEMENT IN 30 RANDOMIZED CONTROLLED TRIALS RR 0.28 [0.17-0.47]

78% IMPROVEMENT IN 15 MORTALITY RESULTS RR 0.22 [0.12-0.41]

POTENTIAL WEEKLY LIVES SAVED*: 52,852

*BASED ON WEEKLY DEATHS AND EFFECTIVENESS OF EARLY TREATMENT WHERE NOT USED. 02/20/21. IVAMETA.COM

HCQ FOR COVID-19

207 TRIALS, 3,239 SCIENTISTS, 183,144 PATIENTS

66% IMPROVEMENT IN 26 EARLY TREATMENT TRIALS RR 0.34 [0.27-0.44]

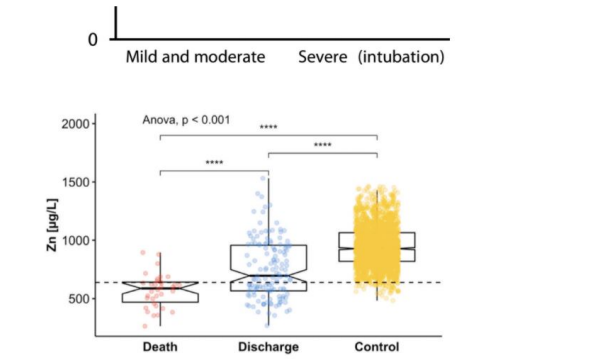
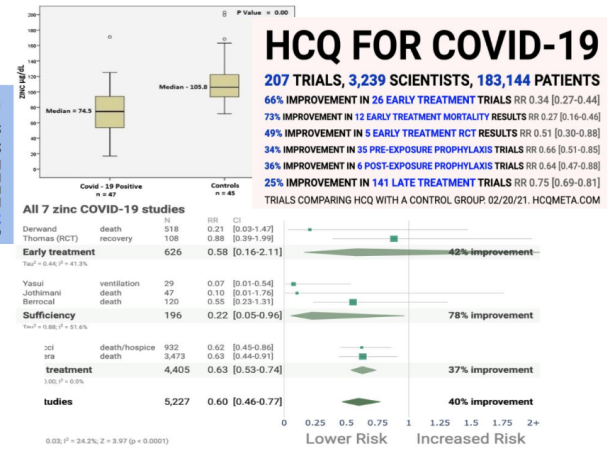
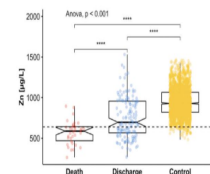
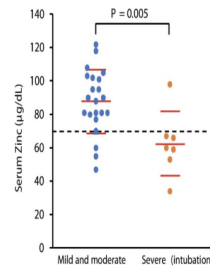
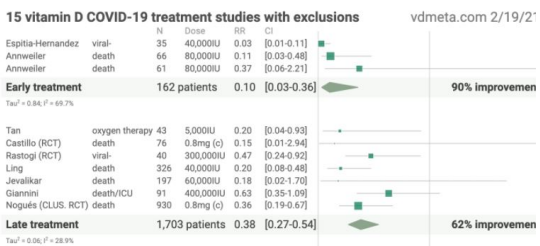
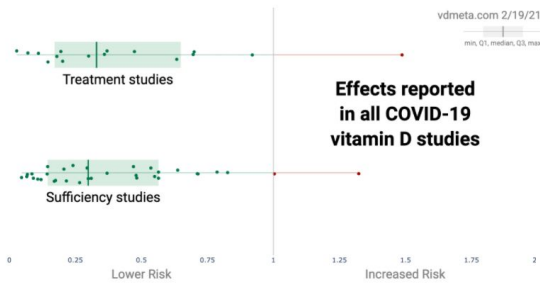
73% IMPROVEMENT IN 12 EARLY TREATMENT MORTALITY RESULTS RR 0.27 [0.16-0.46]

49% IMPROVEMENT IN 5 EARLY TREATMENT RCT RESULTS RR 0.51 [0.30-0.88]

34% IMPROVEMENT IN 35 PRE-EXPOSURE PROPHYLAXIS TRIALS RR 0.66 [0.51-0.85]

25% IMPROVEMENT IN 141 LATE TREATMENT TRIALS RR 0.75 [0.69-0.81]

TRIALS COMPARING HCQ WITH A CONTROL GROUP. 02/20/21. HCQMETA.COM



Science, Public Health Policy,
and The Law
Volume 2:4-22
October 12, 2020

An Institute for Pure
and Applied Knowledge (IPAK)
Public Health Policy
Initiative (PHPI)



COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective

Henry Ealy [†], Michael McEvoy ^{§§}, Daniel Chong [§], John Nowicki [§], Monica Sava [¶], Sandeep Gupta ^{||}, David White ^{**}, James Jordan [§], Daniel Simon ^{††}, Paul Anderson ^{‡‡}

COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective

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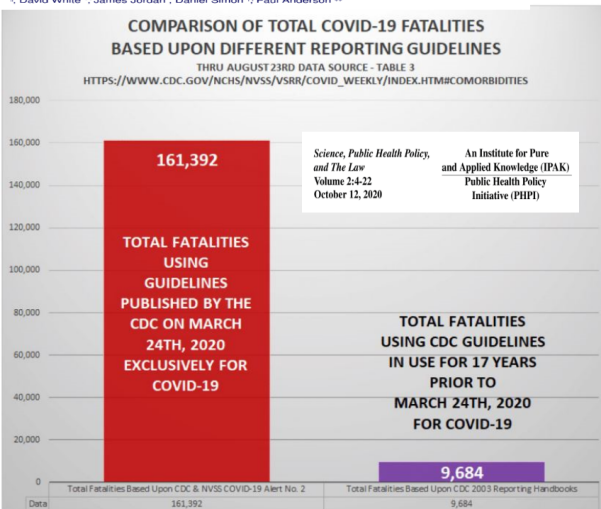


Figure 9. COVID-19 Using the March 24 Exclusive Guidelines vs Using the 2003 Guidelines. Had the CDC used the 2003 guideline, the total COVID-19 be approximately 16.7 times lower than is

HCQ FOR COVID-19

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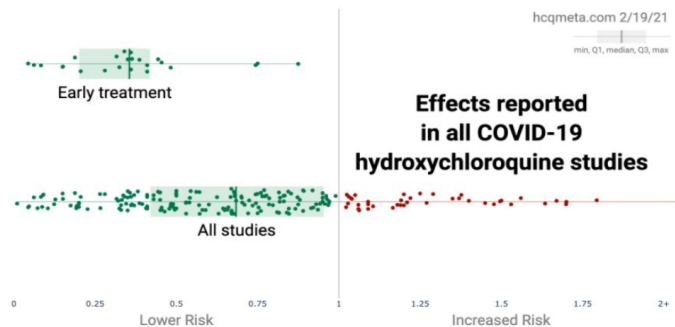
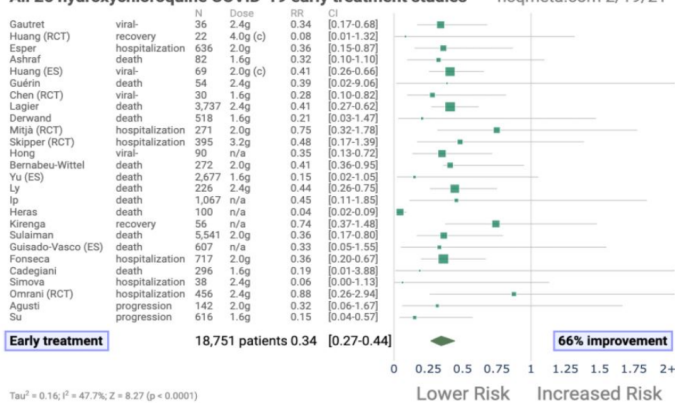
36% IMPROVEMENT IN 6 POST-EXPOSURE PROPHYLAXIS TRIALS RR 0.64 [0.47-0.88]

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TRIALS COMPARING HCQ WITH A CONTROL GROUP. 02/20/21. HCQMETA.COM

All 26 hydroxychloroquine COVID-19 early treatment studies

hcqmeta.com 2/19/21



address in detail.

Select a jurisdiction:

United States

Select age group(s):

(All)

Weekly counts of deaths by age group

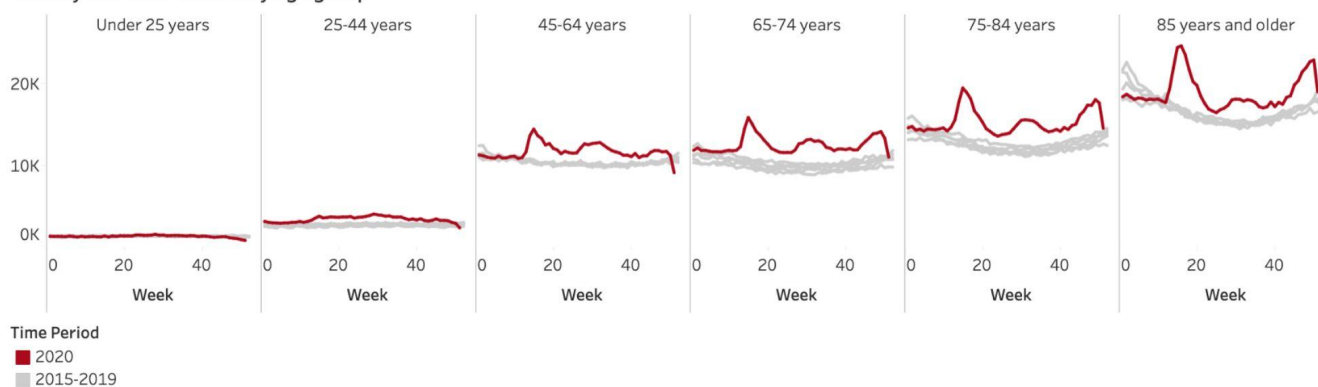


Figure 6. Weekly death counts by age group (source: CDC).

Deaths and Mortality

Data are for the U.S.

- Number of deaths: 2,854,838
- Death rate: 869.7 deaths per 100,000 population

Source: [National Vital Statistics System – Mortality Data \(2019\) via CDC WONDER](#)

- Life expectancy: 78.8 years
- Infant Mortality rate: 5.58 deaths per 1,000 live births

Source: [Mortality in the United States, 2019, data tables for figures 1, 5](#)

Number of deaths for leading causes of death:

- Heart disease: 659,041
- Cancer: 599,601
- Accidents (unintentional injuries): 173,040
- Chronic lower respiratory diseases: 156,979
- Stroke (cerebrovascular diseases): 150,005
- Alzheimer’s disease: 121,499
- Diabetes: 87,647
- Nephritis, nephrotic syndrome, and nephrosis: 51,565
- Influenza and Pneumonia: 49,783

Cases and deaths in long-term care facilities, by state

	FACILITIES	CASES	DEATHS	SHARE OF COVID-19 DEATHS ▼
United States	28,000+	787,000+	106,000+	38%
New Hampshire	44	3,059	440	81%
Rhode Island	103	4,450	1,025	73%
Connecticut	346	14,543	3,566	70%
Minnesota	892	11,885	2,522	65%
Massachusetts	703	27,868	6,843	63%
Pennsylvania	1,300	44,351	6,751	60%
Kentucky	394	18,448	1,296	59%
North Dakota	167	8,292	586	59%
Maine	38	1,372	125	56%
Delaware	39	1,648	436	56%
Vermont	13	380	42	55%
Oregon	442	6,418	524	54%
Ohio	1,415	44,793	3,494	51%

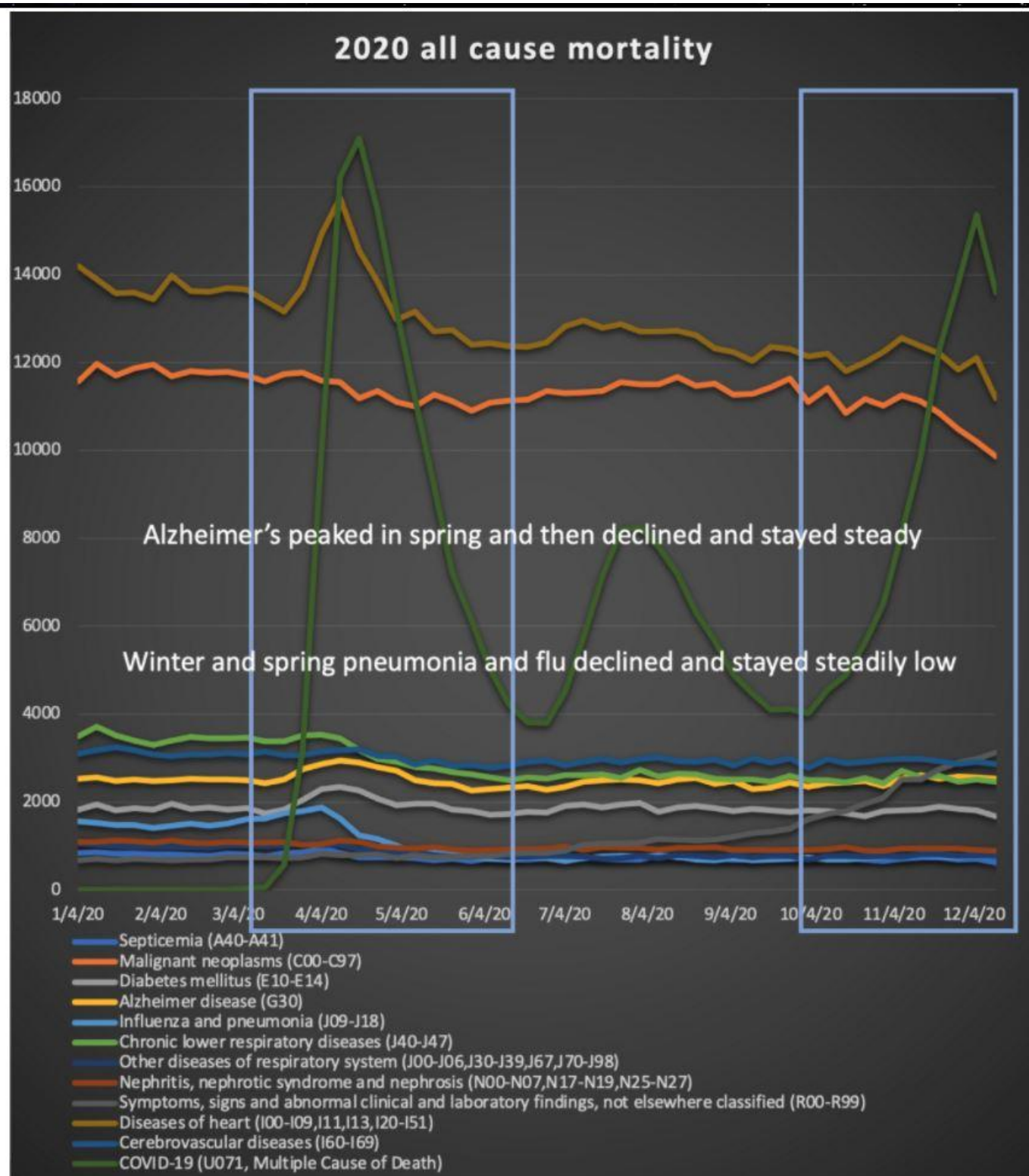


Figure 4. US provisional all cause mortality data for 2020 through mid-December (chart compiled by Tam Hunt).

<https://www.notion.so/Mortality-77859166f4f249158a5c0a19b5ca1279>

<https://justpaste.it/TheActualScienceOfCOVID>

<https://www.cdc.gov/nchs/data/databriefs/db395-tables-508.pdf#page=4>

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Data Brief 395: Mortality in the United States, 2019

Data table for Figure 3. Number of deaths and death rates for ages 1 year and over: United States, 2018 and 2019

Age group (years)	2018		2019	
	Number	Rate ¹	Number	Rate ¹
1–4	3,830	24.0	3,676	23.3
5–14	5,450	13.3	5,497	13.4
15–24	30,154	70.2	29,771	69.7
25–34	58,844	128.8	59,178	128.8
35–44	80,380	194.7	82,986	199.2
45–54	164,837	395.9	160,393	392.4
55–64	374,836	886.7	374,937	883.3
65–74	543,778	1,783.3	555,559	1,764.6
75–84	675,205	4,386.1	688,027	4,308.3
85 and over	880,280	13,450.7	873,746	13,228.6

¹Deaths per 100,000 U.S. population.

SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

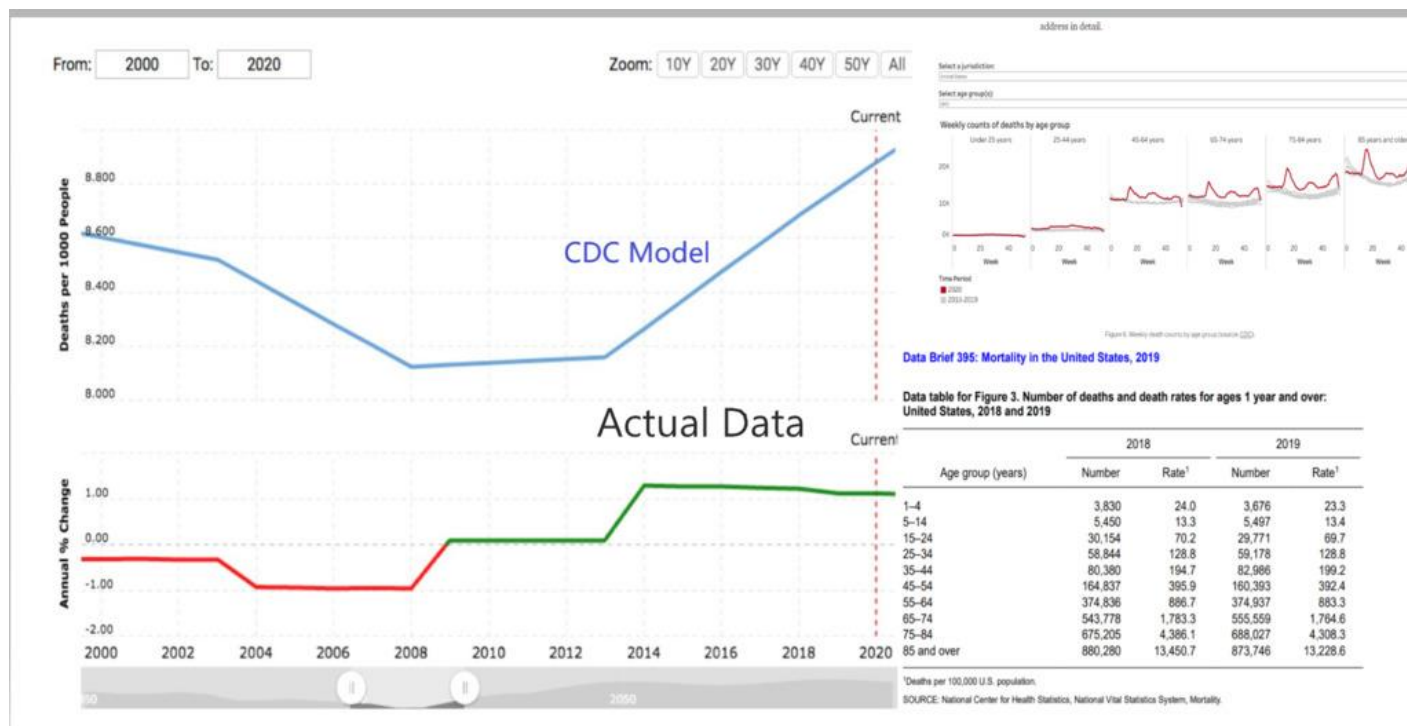
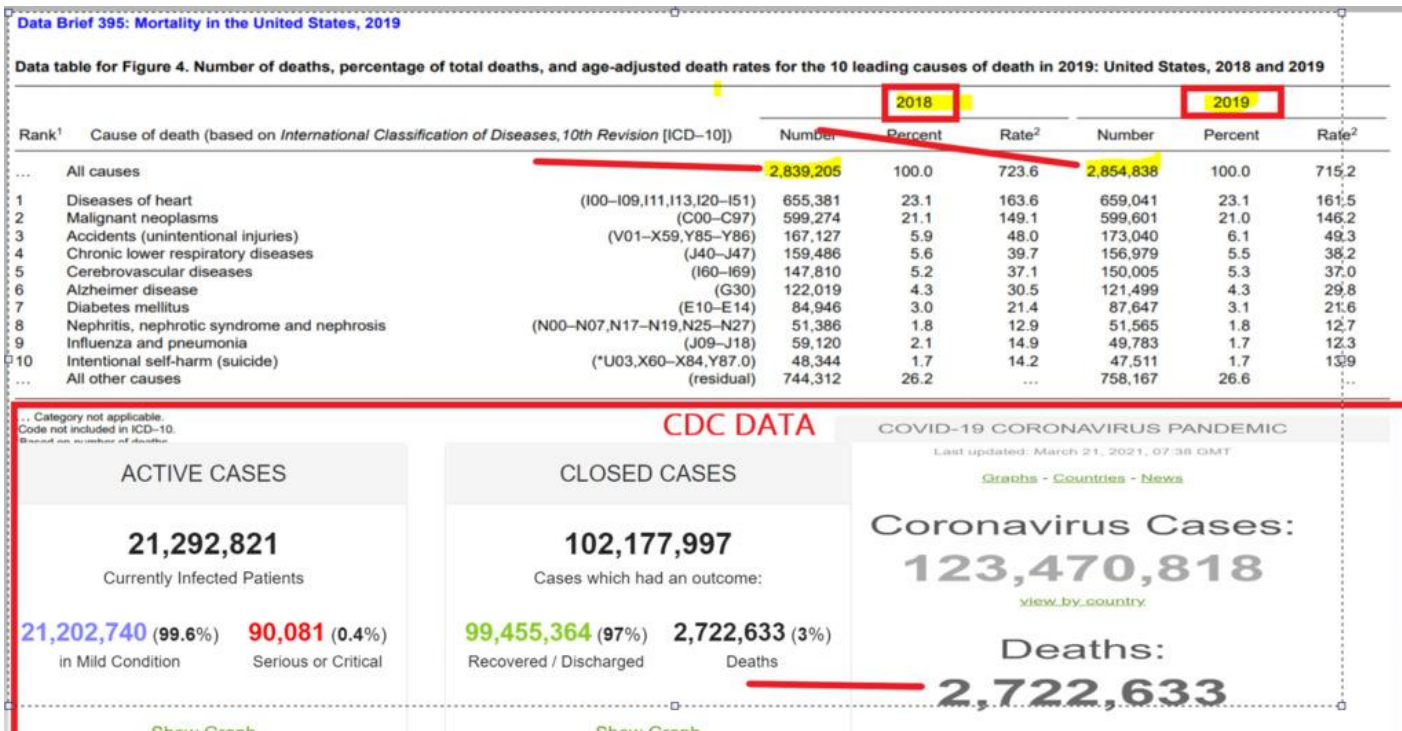
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45–54	164,837	395.9	160,393	392.4
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¹Deaths per 100,000 U.S. population.

SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.



My Posts:

The CDC owns patents not only on all the Vaccines they say we need, but also the Corona Virus

https://www.minds.com/newsfeed/1208641565713084416?referrer=shane_st_pierre

On March 26, 2020, Microsoft filed a patent for a body-interfaced cryptocurrency. That's right, a human body implanted microchip connected to a cloud computer system, harvesting biometric data. The crazy part? The patent number is 060606.

IG: CONNECTING CONSCIOUSNESS



(List of 19 Patents at bottom, 100% verifiable)

Besides the CDC inflating their fear porn death numbers 96% (1600% in November) they have been proven as completely corrupt several times in the very recent past. They have astounding amounts of conflicts of interest, as they have several patents not only on the vaccines they insist we all need, but on the fucking corona virus as well. (No one can patent anything completely biological) In addition to the CDC's ownership of

dozens of vaccine-related patents, the agency's involvement with vaccine manufacturers also extends to licensing agreements and collaboration on projects to develop new vaccines.

Besides the CDC, the WHO should also be ignored, simply because the CCP installed their genocidal happy order follower (his friends and locals call him the Ethiopian Terrorist)? "Dr. Tedros has been accused of being "China's man", but on closer inspection, an extremely ugly picture emerges in which he also turns out to be very much the UK's man, illustrating that country's particular influence over WHO. When I say ugly – Dr Tedros is without question a political thug of the highest order. As a senior member of the Tigray People's Liberation Front (TPLF) he was personally responsible for brutal repression of the Amhara people, using aid money selectively to starve them out and deny them access to basic services." While he was health minister of Ethiopia from 2005–2012, Dr Tedros covered up three cholera epidemics in his country, endangering surrounding countries. There are claims that 2 million Amhara people disappeared off census records over this period. So while he has been criticized for supporting China, there's no doubt that Dr. Tedros is also playing the tunes the West wants to hear. Most of WHO's funding comes from Western countries, as well as from Bill and Melinda Gates. Ethiopia has been a massive recipient of Chinese aid, and all the major development projects in that country have been underwritten by China. Ethiopia has shown a genuine talent for playing the West off against China Essentially, it is one giant self pleasuring circle

jerk with the WHO, the UN, the CCPD, and everyone's favorite Psychopathy Bill Gates. WHY would anyone listen to anything they say? They try to start a fake pandemic every 10 years like clockwork and we finally fell for it? That makes us far more culpable in this disaster, but we need to wake up and go Politician Huntin'.. Final note, that patent number in the picture belongs to the WHO and CDC largest contributor Bill Gates. Before they write more laws without even any pretense of procedures or votes.

America's Frontline Doctors Hold 2nd Summit in DC

<https://odysee.com/@OYENEWS:e1/censored-frontline-doctors:9>



Download: [https://odysee.com/\\$/download/censored-frontline-doctors/9c088d6e14c30b53d8df77ff960887fe803c1dfa](https://odysee.com/$/download/censored-frontline-doctors/9c088d6e14c30b53d8df77ff960887fe803c1dfa)

America's Frontline Doctors Hold 2nd Summit in DC (free version)

https://www.minds.com/newsfeed/1201745772697300992?referrer=shane_st_pierre



Heavily suppressed by all social media and mainstream news. Why? Well every single DR other than Schill Anthony Fauci is a defacto fraud, conspiracy theorist, or far right extremists... just like every American who disagrees with bullshit. The second White Coat Summit was held in Washington D.C. October 16-17, 2020. Its purpose was to have frontline doctors talk directly to the American public, educate and inform policy leaders, and create alliances to enable physicians to heal our nation. Its emphasis was on the proven success of early treatment

<https://odysee.com/@stpierrs:f/2nd-Summit-in-DC---America%27s-Frontline-Doctors-Hold--10.19:d>

Download: [https://odysee.com/\\$/download/2nd-Summit-in-DC---America's-Frontline-Doctors-Hold--10.19/d44954118e3f9fccccedab91b2a5c958bc4e8418f](https://odysee.com/$/download/2nd-Summit-in-DC---America's-Frontline-Doctors-Hold--10.19/d44954118e3f9fccccedab91b2a5c958bc4e8418f)

Andrew Kaufman M.D. - The Rooster in the River of Rats - Koch's Postulates

<https://youtu.be/loywNPXANi4>

Viruses don't make you sick, most energy is already free, 5G is killing everyone, they installed 5g emitters near every school as soon as lockdowns started!

https://www.minds.com/newsfeed/1213736064180535296?referrer=shane_st_pierre

My Links:

Videos everyone needs to see... please watch and share:

(MUST WATCH) AMERICAS FRONT-LINE (**S: ** SIMONE GOLD - "THE TRUTH ABOUT

CV19 V**** x"

<https://www.bitchute.com/video/P2sSal9ZgThy/>

The False Narrative the Corporate Media Wants You to Believe

https://www.minds.com/newsfeed/1208170110892171264?referrer=shane_st_pierre

BUSTED: CDC Inflated COVID Numbers, Accused of Violating Federal Law

https://www.minds.com/newsfeed/1208182917996163072?referrer=shane_st_pierre

Actual results for the coronavirus are lower than the flu.

https://www.minds.com/newsfeed/1208140083974692864?referrer=shane_st_pierre

Covid Hoax for Mandatory Lockdowns! WAKE UP!

https://www.minds.com/newsfeed/1200233435267125248?referrer=shane_st_pierre



US vs. Microsoft - https://en.wikipedia.org/wiki/United_States_v._Microsoft_Corp.#Judgment

https://money.cnn.com/1998/05/18/technology/microsoft_suit/ - U.S. targets Microsoft

5/18/1998

Vandana Shiva scathing discussion on Bill Gates:

 Video thumb

- “biggest financial or geoengineering projects.

 Video thumb

- continuing Monsanto's work

Bill Gates warns of 10 million deaths - 2/15/20 -

<https://www.telegraph.co.uk/news/2020/02/15/coronavirus-bill-gates-warns-10-million-deaths-virus-spreads/>

<https://www.youtube.com/watch?v=c4Aps2NPe54&t=21m30s> - Bill Gates vaccinate everyone

Watch an [in-depth, well researched presentation](#) revealing

the nefarious activities of the Gates Foundation, Clinton Foundation, and more.

<https://www.cbsnews.com/news/coronavirus-vaccine-bill-gates-multiple-doses/> -

Multiple vaccine doses could be necessary to protect from coronavirus, Bill Gates says
- CBS - 7/23/20

Bill Gates describing his vaccine in his own words.. Yea.. Whoops! Since its your life, just TRY searching covid Vaccine after switching your search engine to anything BUT GOOGLE

<https://www.bitchute.com/video/3XFopurdbAe/> <https://www.stopworldcontrol.com/cures>

<https://www.stopworldcontrol.com/fraud/> https://roxycast.com/post/5071_the-sociopath-that-is-bill-gates.html

https://en.wikipedia.org/wiki/List_of_largest_pharmaceutical_settlements

List of largest pharmaceutical settlements - fines in the billions of dollars

<https://abcnews.go.com/Business/pfizer-fined-23-billion-illegal-marketing-off-label/story?id=8477617> - Pfizer fined \$2.3 billion for illegal marketing in off-label drug case

US has about 2.8 million deaths per year, about 8.5 deaths per thousand -

<https://www.cdc.gov/nchs/fastats/deaths.htm>

Reinfection - <https://www.bbc.com/news/health-55338875> - Coronavirus doctor's diary: 'Have I got Covid for a second time?'

"Cases of people having Covid-19 twice appear to be rare. [The first confirmed case was recorded in August](#), when a patient in Hong Kong tested positive for a second time. Since then, a Dutch news agency has counted only [27 other cases of reinfection from Qatar to Brazil](#). Although it's likely that many cases have gone unrecorded this is an extremely small number, which tends to suggest it doesn't happen often. My first instinct was therefore to conclude that I didn't actually have Covid in spring and that my first antibody test was a false positive."

Nearly 1 million (924K) staffed beds in the U.S. <https://www.aha.org/statistics/fast-facts-us-hospitals>

35 to 37.5 million total hospitalizations per year from 2005 to 2018 -

<https://www.statista.com/statistics/459718/total-hospital-admission-number-in-the-us/>

COERCIVE METHODS FOR ELICITING INDIVIDUAL COMPLIANCE

Attempts to extort false confessions* Korean War

COVID-19

<p>Isolation</p> <ul style="list-style-type: none">• Deprives victim of social support of his ability to resist• Victim develops an intense concern with self• Makes victim dependent upon the captor <p>Monopolization of Perception</p> <ul style="list-style-type: none">• Fixes all attention upon immediate predicament• Frustrates all actions not consistent with compliance• Eliminates stimuli competing with those controlled by the captor <p>Induced Debility and Exhaustion</p> <ul style="list-style-type: none">• Weakens mental and physical ability to resist• People become worn out by tension and fear <p>Threats</p> <ul style="list-style-type: none">• Cultivates anxiety and despair• Gives demands and consequences for non compliance <p>Occasional Indulgences</p> <ul style="list-style-type: none">• Provides motivation for compliance• Hinders adjustment to deprivation.• Creates hope for change, reduces resistance• Keeps people unsure of what is happening <p>Demonstrate Omnipotence</p> <ul style="list-style-type: none">• Demonstrates futility of resistance• Shows who is in charge• Provides positive motivation for compliance <p>Degradation</p> <ul style="list-style-type: none">• Makes cost of resistance appear more damaging to self-esteem than capitulation• Reduces prisoner to "Animal Level" concerns <p>Enforcing Trivial Demands</p> <ul style="list-style-type: none">• Develops habit of compliance• Demands made are illogical and contradictory• Rules on compliance may change• Reinforces who is in control	<p>Isolation</p> <ul style="list-style-type: none">• Social distancing• Isolation from loved ones, massive Job loss• Solitary confinement semi-isolation• Quarantines, containment camps <p>Monopolization of Perception</p> <ul style="list-style-type: none">• Restrict movement• Create monotony, boredom• Prevent gathering, meetings, concerts, sports• Dominate all media 24/7, censor Information <p>Induced Debility and Exhaustion</p> <ul style="list-style-type: none">• Forced to stay at home, all media is negative• not permitted to exercise or socialize <p>Threats and Intimidation</p> <ul style="list-style-type: none">• Threaten to close business, levy fines• Predict extension of quarantine, force vaccines• Create containment camps <p>Occasional Indulgences</p> <ul style="list-style-type: none">• Allow reopening of some stores, services• Let restaurants open but only at a certain capacity• Increase more people allowed to gather• Follow concessions with tougher rules <p>Demonstrate Omnipotence</p> <ul style="list-style-type: none">• Shut down entire economies across the world• Create money out of nowhere, force dependency• Develop total surveillance with nanochips and 5G <p>Humiliation or Degradation Techniques</p> <ul style="list-style-type: none">• Shame people who refuse masks, don't distance• Make people stand on circles and between lines• Make people stand outside and wait in queues• Sanitation stations in every shop <p>Enforcing Trivial Demands</p> <ul style="list-style-type: none">• Family members must stay apart• Masks in home and even when having sex• Arbitrary limits on people allowed to be together• Sanitizers to be used over and over in a day
---	---

* Albert D. Biderman, COMMUNIST ATTEMPTS TO ELICIT FALSE CONFESSIONS FROM AIR FORCE PRISONERS OF WAR, (1956) Bull. N. Y. Acad. Med., pages 616-625.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1806204/pdf/bullnyacadmed00378-0046.pdf>

What government and media won't tell you about how to protect you and your loved ones from COVID

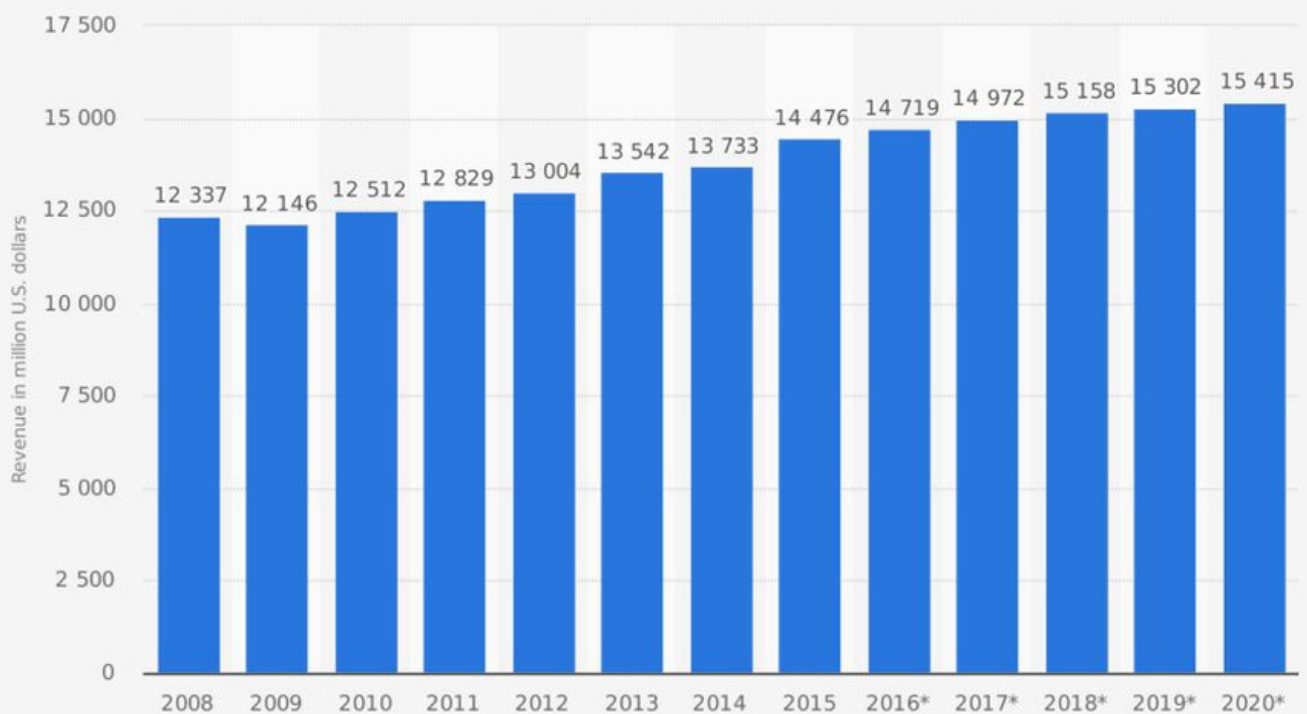
There are four basic possible approaches for dealing with the pandemic, but only three are being sanctioned by the government. Here's the missing management option.

Mon Nov 16, 2020 - 11:54 am EST

- <https://www.lifesitenews.com/opinion/what-government-and-media-wont-tell-you-about-how-to-protect-you-and-your-loved-ones-from-covid>

<https://c19study.com/#early>

**Revenue of funeral homes and services (NAICS 81221) in United States
from 2008 to 2020 (in million U.S. dollars)**



Sources

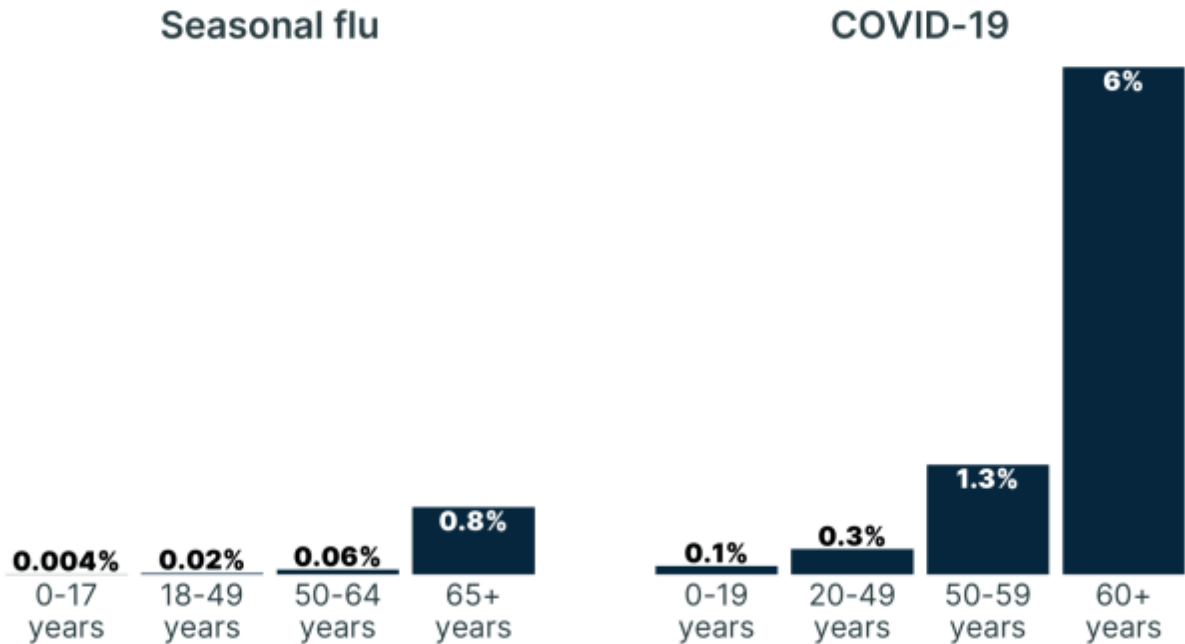
Statista; US Census Bureau
© Statista 2018

Additional Information:

United States; 2008 to 2015

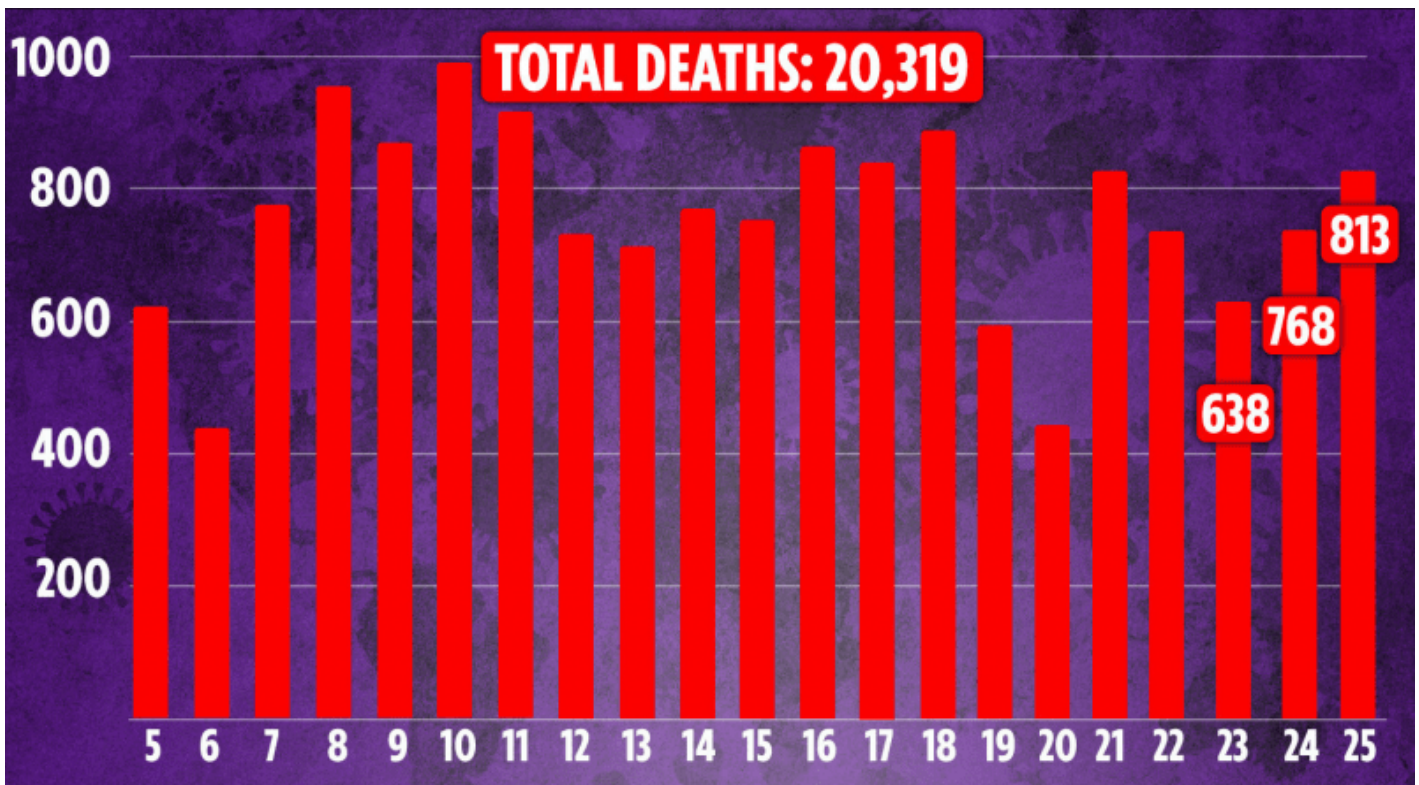
Deadliness of COVID-19 vs. the seasonal flu

Chart compares COVID-19 mortality rate from China with seasonal flu mortality in the United States by age group.



Source: Novel Coronavirus Pneumonia Emergency Response Epidemiology Team, "Viral surveillances: the epidemiological characteristics of an outbreak of 2019 novel coronavirus diseases (COVID-19)— China, 2020," China CDC Weekly; U.S. Centers for Disease Control and Prevention. Via Our World in Data.
Graphic by David H. Montgomery | MPR News

MPRnews



Censored Dr. Goes Off On Fauci, CDC and NIH

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This is Google's cache of http://www.cdc.gov/vaccinesafety/updates/archive/polio_and_cancer_factsheet.htm. It is a snapshot of the page as it appeared on 11 Jul 2013 06:49:38 GMT. The [current page](#) could have changed in the meantime. [Learn more](#)

Tip: To quickly find your search term on this page, press **Ctrl+F** or **⌘-F** (Mac) and use the find bar.

These search terms are highlighted: **cdc** **polio** **cancer** **fact sheet**

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Department of Health and Human Services

Centers for Disease Control and Prevention

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Vaccine Safety

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Vaccine Safety Basics

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- › [Why It's Important to Monitor Vaccine Safety](#)
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- › [Vaccine Safety Updates](#)
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Public Health Activities

- › [Vaccine Adverse Event Reporting System \(VAERS\)](#)
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Cancer, Simian Virus 40 (SV40), and Polio Vaccine Fact Sheet

- SV40 is a virus found in some species of monkey.
- SV40 was discovered in 1960. Soon afterward, the virus was found in **polio** vaccine.
- More than 98 million Americans received one or more doses of **polio** vaccine from 1955 to 1963 when a proportion of vaccine was contaminated with SV40; it has been estimated that 10–30 million Americans could have received an SV40 contaminated dose of vaccine.
- SV40 virus has been found in certain types of **cancer** in humans, but it has not been determined that SV40 causes these cancers.
- The majority of scientific evidence suggests that SV40-contaminated vaccine did not cause **cancer**; however, some research results are conflicting and more studies are needed.
- **Polio** vaccines being used today do not contain SV40. All of the current evidence indicates that **polio** vaccines have been free of SV40 since 1963.

Additional Facts

- In the 1950s, rhesus monkey kidney cells, which contain SV40 if the animal is infected, were used in preparing **polio** vaccines. Because SV40 was not discovered until 1960, no one was aware in the 1950s that **polio** vaccine could be contaminated.
- SV40 was found in the injected form of the **polio** vaccine (IPV), not the kind given by mouth (OPV).
- Not all doses of IPV were contaminated. It has been estimated that 10–30 million people actually received a vaccine that contained SV40.
- Some evidence suggests that receipt of SV40-contaminated **polio** vaccine may increase risk of **cancer**. However, the majority of studies done in the U.S. and Europe which compare persons who received SV40-contaminated **polio** vaccine with those who did not have shown no causal relationship between receipt of SV40-contaminated **polio** vaccine and **cancer**.

More Information

- For in-depth information about SV40, **polio** vaccine, and **cancer**, see our [frequently asked questions](#).
- National Immunization Hotline:
English 1 (800) 232-2522
Spanish 1 (800) 232-0233

Page last modified: October 22, 2007

Content source: [Immunization Safety Office](#)

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Centers for Disease Control and Prevention

1600 Clifton Rd, Atlanta, GA 30333, U.S.A.

Public Inquiries: 1-800-CDC-INFO (232-4636); 1-888-232-6348 (TTY)




Department of Health
and Human Services

Search Results

From the 1/15/2021 release of VAERS data:

Found 181 cases where Vaccine is COVID19 and Patient Died

Table

 Age	Count	  Percent
17-44 Years	5	2.76%
44-65 Years	29	16.02%
65-75 Years	25	13.81%
75+ Years	87	48.07%
Unknown	35	19.34%
TOTAL	181	100%

Dr. Didier Raoult, MD, PhD

- Director, Research Unit in Infectious & Tropical Emergent Diseases
- Professor of Infectious Disease Faculty of Medicine of Aix-Marseille University
- Classified Among the Ten Leading French Researchers by the Journal, Nature
- Has over 2000 scientific publications
- Has discovered over 90 new bacteria
- First to discover large sized viruses

"Actually, from all respiratory infections it's probably the easiest to treat.

So there is really no reason to get excited anymore.

There is really no reason to get excited and rush to produce a vaccine.."

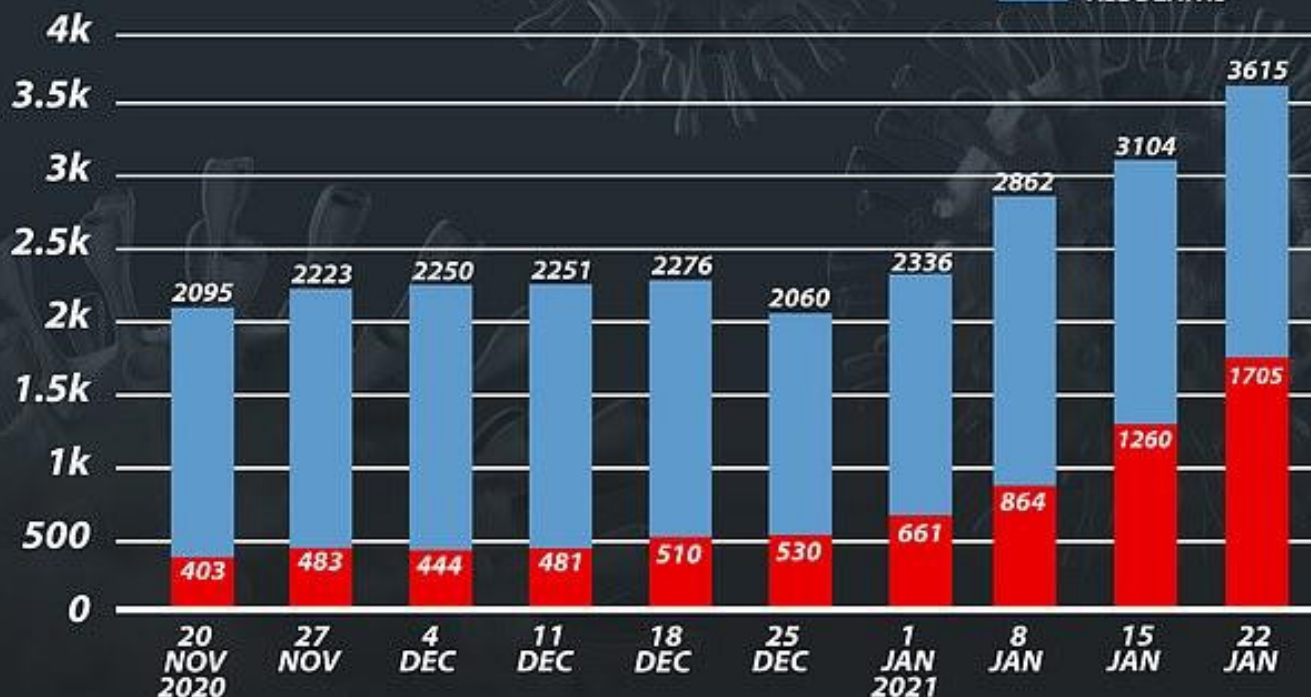


SURGING DEATHS FROM COVID-19 IN CARE HOMES

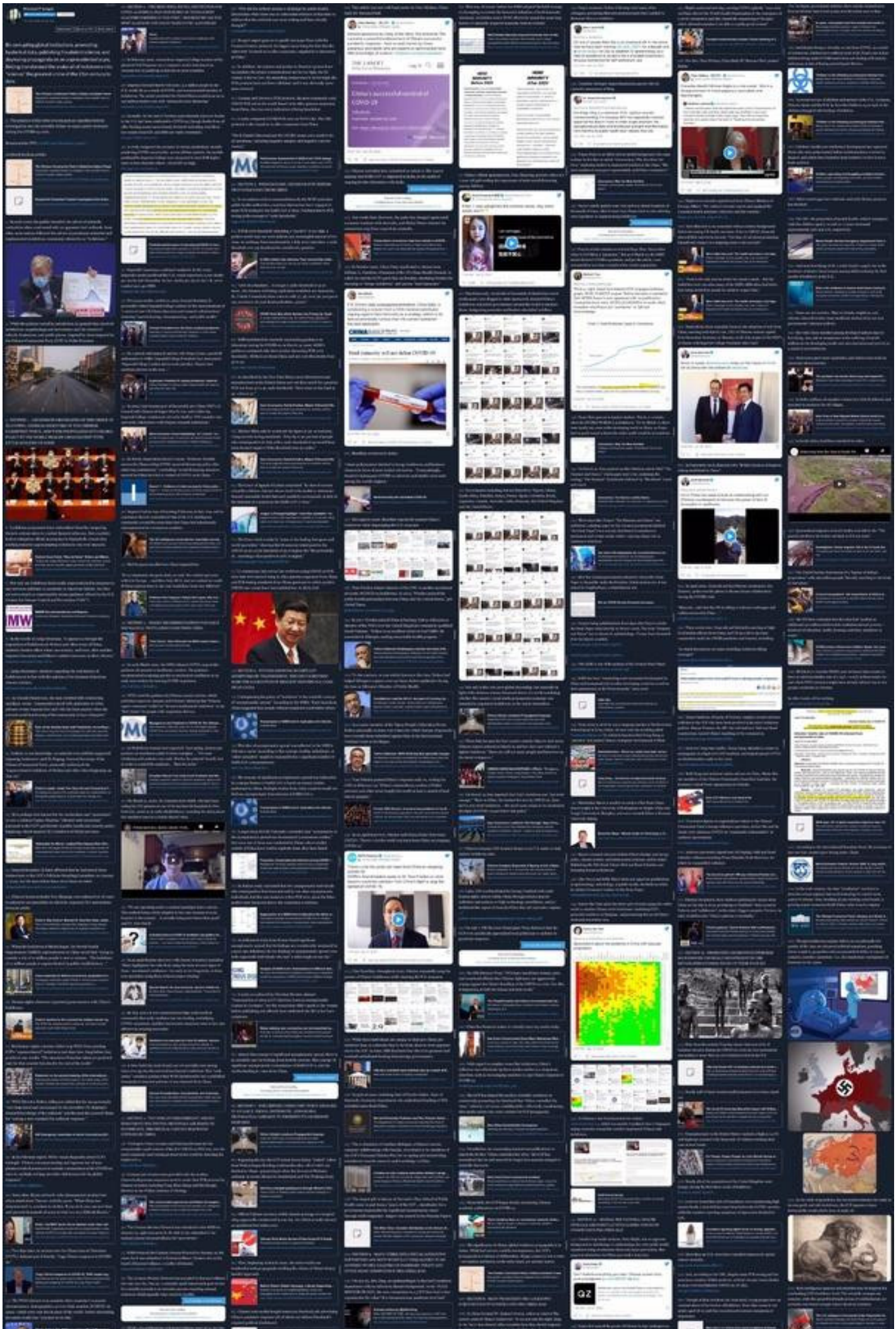
TOTAL NUMBER OF COVID DEATHS: 23,081

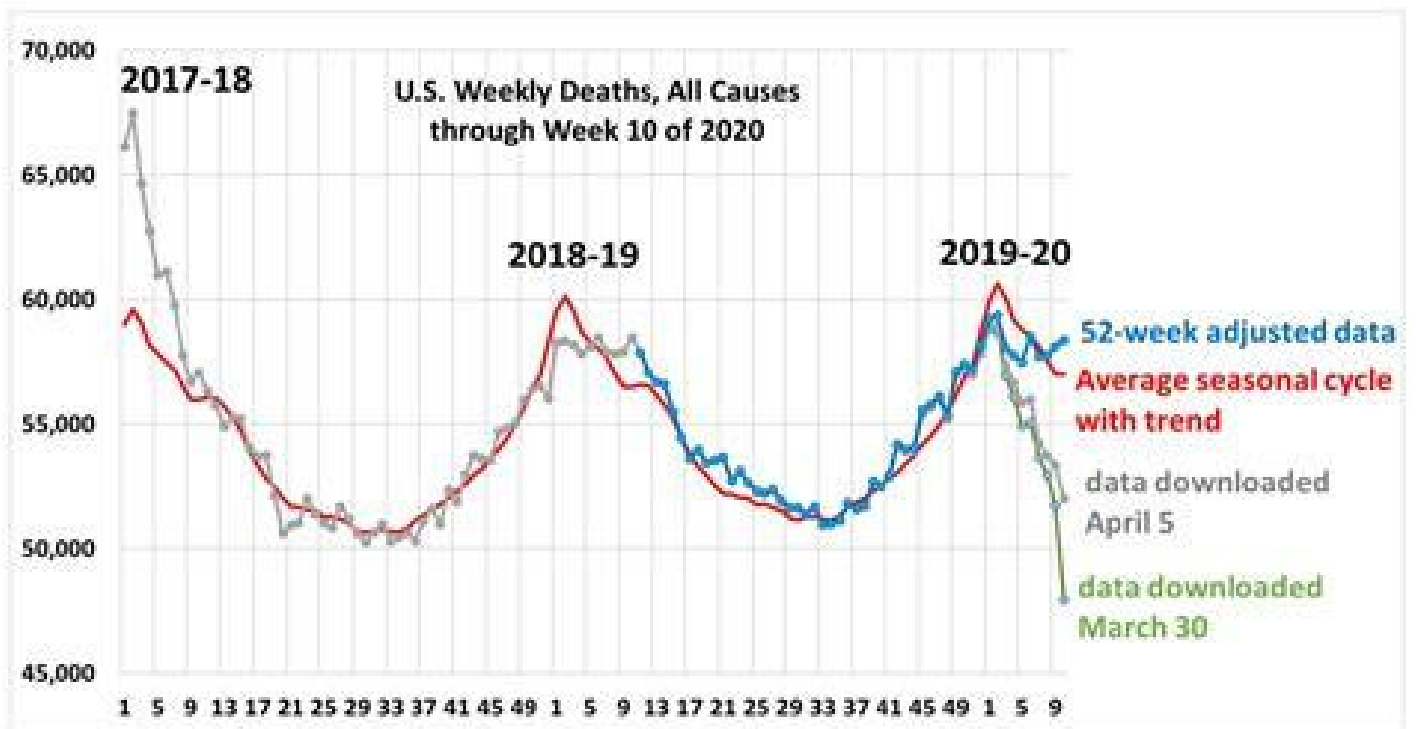
COVID-19 DEATHS

ALL DEATHS



DATA IS FROM THE OFFICE FOR NATIONAL STATISTICS





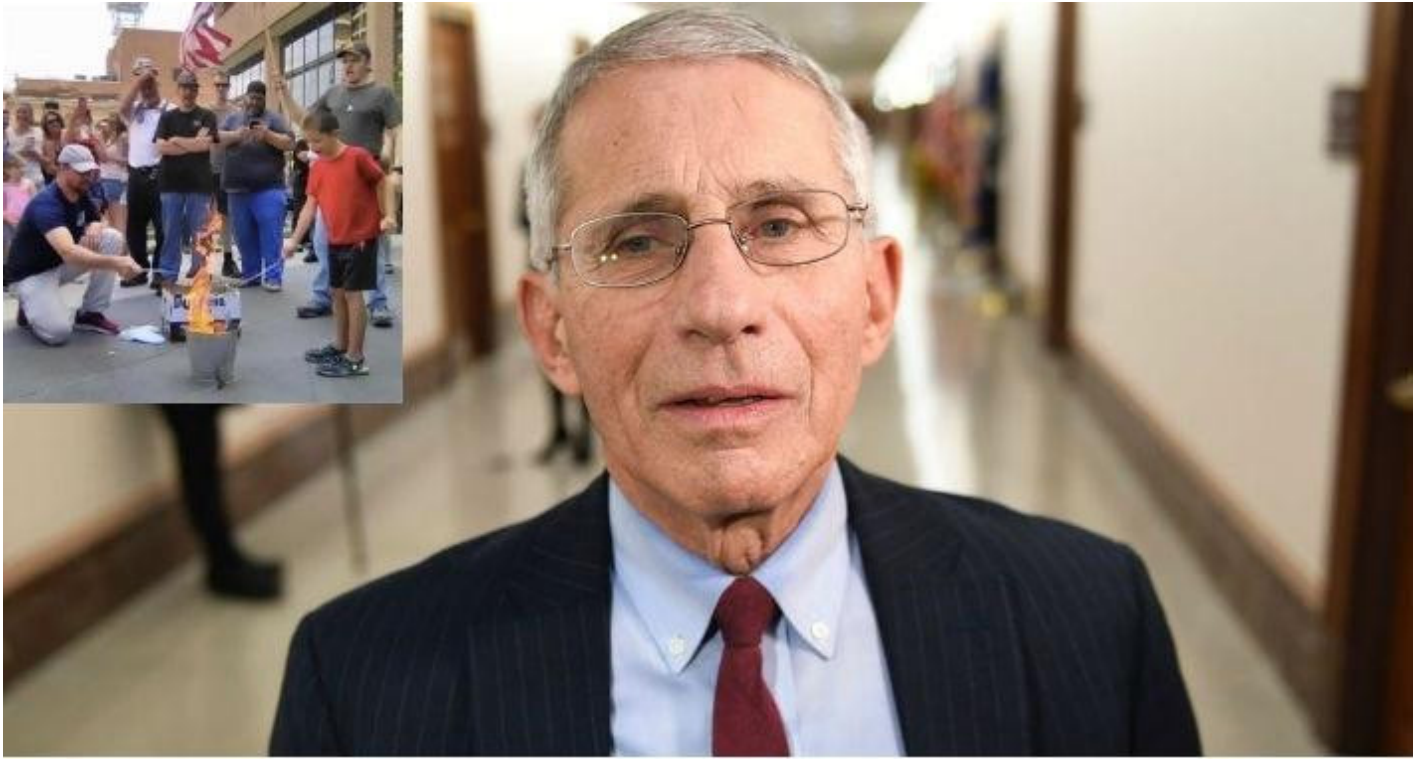
Numbers In The New CDC Report DESTROY The Case For Mask Mandates

Stunning Revelation. Game Over.



by [PATRICK HOWLEY](#)

[March 8, 2021](#)



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The Centers for Disease Control and Prevention (CDC) [released a report Friday](#) in which it quietly admitted that the mask mandates in America were allegedly responsible for less than a 2 percent decrease in COVID case growth after ONE HUNDRED DAYS. But still the CDC advises wearing masks, despite their own numbers. [\(READ: CDC Caught Inflating COVID Death Numbers By At Least 1600 Percent While Trump Was President\)](#).

The CDC claims that between March 1 and December 31 of 2020 the mask mandates, which were executed in the vast majority of United States counties, stopped COVID case growth rates by one half of one percent after 20 days and by less than 2 percent after 100 days.

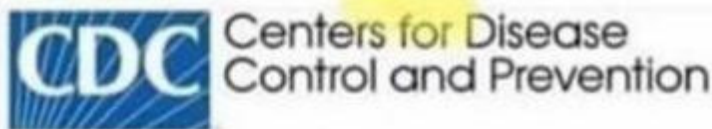
During March 1–December 31, 2020, state-issued mask mandates applied in 2,313 (73.6%) of the 3,142 U.S. counties. Mask mandates were associated with a 0.5 percentage point decrease ($p = 0.02$) in daily COVID-19 case growth rates 1–20 days after implementation and decreases of 1.1, 1.5, 1.7, and 1.8 percentage points 21–40, 41–60, 61–80, and 81–100 days, respectively, after implementation ($p < 0.01$ for all) ([Table 1](#)) ([Figure](#)). Mask mandates were associated with a 0.7 percentage point decrease ($p = 0.03$) in daily COVID-19 death growth rates 1–20 days after implementation and decreases of 1.0, 1.4, 1.6, and 1.9 percentage points 21–40, 41–60, 61–80, and 81–100 days, respectively, after implementation ($p < 0.01$ for all). Daily case and death growth rates before implementation of mask mandates were not statistically different from the reference period.

NATIONAL FILE REPORTED:

The Centers for Disease Control and Prevention (CDC) stands accused of violating federal law by inflating Coronavirus fatality numbers, according to stunning information obtained by NATIONAL FILE.

CDC illegally inflated the COVID fatality number by at least 1,600 percent as the 2020 presidential election played out, according to a study published by the Public Health Initiative of the Institute for Pure and Applied Knowledge. The study, “COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective,” was authored by Henry Ealy, Michael McEvoy, Daniel Chong, John Nowicki, Monica Sava, Sandeep Gupta, David White, James Jordan, Daniel Simon, and Paul Anderson. ([READ THE LANDMARK RESEARCH HERE](#))

The CDC is now legally requiring red-blooded Americans to wear face masks on all public transportation as globalists try to push the concept of “double-masking” on the populace. Since the election, the [World Health Organization admits](#) that PCR tests are not totally reliable on the first try and a second test might be needed. This corresponds with CDC’s quiet [admission](#) that it blended viral and antibody test results for its case numbers and that people can test [positive on an antibody test if they have antibodies from a family of viruses that cause the common cold](#). Hospitals in Florida had so many accuracy complications that [Orlando Health had to admit](#) that its 9.4 percent positivity rate got recorded at 98 percent. ([READ: The TRUTH About Fauci and Gates And NIH Owning A Stake in the Vaccine](#)).



What do your results mean?

- A positive test result shows you might have antibodies from an infection with the virus that causes COVID-19. However, there is a chance a positive result means that you have antibodies from an infection with a virus from the same family of viruses (called coronaviruses), such as the one that causes the common cold.

“The groundbreaking peer-reviewed research...asserts that the CDC willfully violated multiple federal laws including the Information Quality Act, Paperwork Reduction Act, and Administrative Procedures Act at minimum. (Publishing Journal – Institute for Pure and Applied Knowledge / Public Health Policy Initiative) **Most notably, the CDC illegally enacted new rules for data collection and reporting exclusively for COVID-19 that resulted in a 1,600% inflation of current COVID-19 fatality totals,**” the watchdog group All Concerned

Citizens declared in a statement provided to NATIONAL FILE, referring to the Institute for Pure and Applied Knowledge study.

“The research demonstrates that the CDC failed to apply for mandatory federal oversight and failed to open a mandatory period for public scientific comment in both instances as is required by federal law before enacting new rules for data collection and reporting. The CDC is required to be in full compliance with all federal laws even during emergency situations. The research asserts that CDC willfully compromised the accuracy and integrity of all COVID-19 case and fatality data from the onset of this crisis in order to fraudulently inflate case and fatality data,” stated All Concerned Citizens.

“On March 24th the CDC published the **NVSS COVID-19 Alert No. 2** document instructing medical examiners, coroners and physicians to deemphasize underlying causes of death, also referred to as pre-existing conditions or comorbidities, by recording them in Part II rather than Part I of death certificates as “...the underlying cause of death are expected to result in COVID-19 being the underlying cause of death more often than not.” This was a major rule change for death certificate reporting from the CDC’s 2003 **Coroners’ Handbook on Death Registration and Fetal Death Reporting** and **Physicians’ Handbook on Medical Certification of Death**, which have instructed death reporting professionals nationwide to report underlying conditions in Part I for the previous 17 years. This single change resulted in a significant inflation of COVID-19 fatalities by instructing that COVID-19 be listed in Part I of death certificates as a definitive cause of death regardless of confirmatory evidence, rather than listed in Part II as a contributor to death in the presence of pre-existing conditions, as would have been done using the 2003 guidelines. The research draws attention to this key distinction as it has led to a significant inflation in COVID fatality totals. By the researcher’s estimates, COVID-19 recorded fatalities are inflated nationwide by as much as 1600% above what they would be had the CDC used the 2003 handbooks,” stated All Concerned Citizens.

“Then on April 14th, the CDC adopted additional rules exclusive for COVID-19 in violation of federal law by outsourcing data collection rule development to the Council of State and Territorial Epidemiologists (CSTE), a non-profit entity, again without applying for oversight and opening opportunity for public scientific review. On April 5th the CSTE published a position paper **Standardized surveillance case definition and national notification for 2019 novel coronavirus disease (COVID-19)** listing 5 CDC employees as subject matter experts. This key document created new rules for counting probable cases as actual cases without definitive proof of infection (section VII.A1 – pages 4 & 5), new rules for contact tracing allowing contact tracers to practice medicine without a license (section VII.A3 – page 5), and yet refused to define new rules for ensuring that the same person could not be counted multiple times as a new case (section VII.B – page 7),” stated All Concerned Citizens.

“By enacting these new rules exclusively for COVID-19 in violation of federal law, the research alleges that the CDC significantly inflated data that has been used by elected officials and public health officials, in conjunction with unproven projection models from the Institute for Health Metrics and Evaluation (IHME), to justify extended closures for schools, places of worship, entertainment, and small businesses leading to unprecedented emotional and economic hardships nationwide. A formal petition has been sent to the Department of Justice as well as all US Attorneys seeking an immediate grand jury investigation into these allegations,” All Concerned Citizens stated.

So...do you still trust the globalist oligarchs?

<https://twitter.com/i/status/1355174116542849027>

NATIONAL FILE reported: National Institutes of Health (NIH) own a financial stake in the Bill Gates-funded Moderna Coronavirus vaccine, raising big questions about the supposed impartiality of the federal government’s policy decisions during the Coronavirus outbreak. NIAID director Dr. Anthony Fauci, a financial ally of Bill Gates whose institute is part of NIH, has been critical of Hydroxychloroquine and the FBI even raided a health spa serving intravenous vitamin C, which are competitors to a vaccine. ([RELATED: Eight NIH Coronavirus Panel Experts Disclose Financial Relationships With Price-Hiking Drugmaker Gilead](#)).

“We do have some particular stake in the intellectual property” for the Moderna vaccine stated Francis Collins, the director of NIH, [in a revelatory recent Economic Club panel discussion](#). “One of the vaccines– the one that’s furthest along– what started, actually, at the federal government in our own Vaccine Research Center at NIH– then worked with a biotechnology company called Moderna to get to where we are now, with very impressive Phase I results and getting ready to go into a large-scale trial as early as July. That one, of course, we do have some particular stake in the intellectual property. Others, though, come from companies who’ve invested their efforts into getting them to the point where they might now be ready for a trial,” [Collins stated](#).

Newly published documents from Public Citizen have massive implications. [Public Citizen states](#):

“The U.S. government may jointly own a potential coronavirus vaccine. The National Institutes of Health (NIH) has played a critical role in coronavirus research for years. Building off this work, federal scientists have helped design and test mRNA-1273—a vaccine candidate developed in partnership with Moderna.^[2] The federal government has filed multiple patents

covering mRNA-1273. In this report, we describe two patent applications that list federal scientists as co-inventors.[\[3\]](#) If the government successfully pursued its patent filings, the resulting patents would likely confer significant rights. We also review recently disclosed contracts between NIH and Moderna. The agreements suggest that NIH has not transferred its rights, but instead maintains a joint stake.”

Journalist Patrick Howley exposes the Coronavirus “Contact Tracing” program in the first-ever episode of *NATIONAL FILE TV*. Dr. Anthony [Fauci funded the Coronavirus bat research at the Wuhan Institute of Virology](#), believed to be the source of the outbreak, then the Political Class tried to suppress treatment as Fauci’s friend and associate Bill Gates prepared mass vaccinations and the economy got battered. And the whole episode was written out, planned, in advance.

Here is the remarkable true story:

 Video thumb

Why did the Bill and Melinda Gates Foundation [fund research at MIT](#) on how to implant people's vaccination history under their skin? Why did Fauci meet with Bill Gates' father, George Soros, and other globalist heavyweights all the way back in 2001? Why did the Stephen King-created television series *The Dead Zone* predict the Coronavirus outbreak — and a Chloroquine cure for it — back in 2003?

Why did Dr. Anthony Fauci's NIAID fund the Coronavirus bat research at the Wuhan Institute of Virology, which President Trump and Secretary of State Pompeo and others have identified as the source of the worldwide outbreak?

<https://twitter.com/HowleyReporter/status/1247613431617912832>

HERE'S THE REAL STORY OF CONTACT TRACING

Some Republicans are voicing concern after Texas state health officials granted a \$295 million Coronavirus Contact Tracing deal to MTX Group, a firm run by a man named Das Nobel, which faces criticism for [previous work](#) it did for the state of Kentucky. It turns out the firm is a partner of Google, *NATIONAL FILE* has learned. MTX Group got the contract without conservative Republican Lieutenant Governor Dan Patrick being "[in the loop](#)" to the decision process, and Patrick is just [one of numerous](#) policymakers questioning the company's deal with the state, which authorizes MTX to serve as virus investigators charting people's contacts and relationships. MTX [has also partnered](#) during the Coronavirus outbreak with New York State and built Contact Tracing technology employed in Georgia. So what's really going on here? It turns out [MTX is bigtime partners with Google](#):

[Company](#)[Products](#)[Services](#)[Partners](#)[Customers](#)[News & Blog](#)

Strategic Partnership

Google and MTX

Google Cloud and MTX

are helping clients **accelerate their digital transformation** with Maverick AI.



Google Cloud



MTX Group

Client success with Google Cloud



I reported: Department of Health and Human Services (HHS) and Centers For Disease Control and Prevention (CDC) policy confirms that “Contact Tracing” data may be sent to the World Health Organization (WHO) and to law enforcement authorities “to place someone under quarantine or isolation.” The Contact Tracing records, stored at the CDC and elsewhere, can also be sent to the Department of Justice, State Department, Department of Homeland Security, congressional offices, and to various medical and legal departments and contractors. Democrats are currently [seeking \\$100 billion in a bill](#) that would authorize grants to conduct contact tracing at people’s homes. Meanwhile, Americans are fearing the political implications of contact tracing, considering that Chelsea Clinton [is on the board of trustees](#) of one official contact tracing group that has accepted large sums of money from Bill Gates and George Soros organizations.

HHS records show a [System of Records Notice \(SORN 09-20-0171\)](#) in the Federal Register marking the creation of the record system called “Quarantine- and Traveler-Related Activities, Including Records for Contact Tracing Investigation and Notification...” **The records pertain to** “Individuals subject to quarantine or isolation orders, ill travelers (i.e., passengers and crew), contacts of ill travelers, and/or individuals exposed or suspected of being exposed to serious communicable diseases.” **The records include:** “Passenger and crew manifests from conveyances carrying individuals subject to 42 CFR parts 70 and 71, case reports, illness response forms, medical assessments, medical records (including but not limited to clinical, hospital and laboratory data and data from other relevant tests), name, address, date of birth, and related information and documents collected for the purpose of carrying out agency responsibilities under sections 311 and 361-368 of the Public Health Services Act.” **The records are being stored at:** “Division of Global Migration and Quarantine, National Center for the Preparedness, Detection, and Control of Infectious Disease (NCPDCID), Coordinating

Center for Infectious Diseases (CCID), Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Building 16; MS E03, Atlanta, GA 30333. Records may occasionally be stored at Quarantine Stations located at key ports of entry and at contractor sites.”

[**READ THE HEALTH AND HUMAN SERVICES PRIVACY GUIDELINES HERE \(emphasis added\):**](#)

“(1) **Records may be disclosed to contractors** to handle program work duties, performing many of the same functions as FTEs within DGMQ in situations where additional staff is required. Contractors are required to maintain Privacy Act safeguards with respect to such records.

(2) **Records may be disclosed to state and local health departments** and other cooperating medical and public health authorities and their counsel to more effectively deal with outbreaks and other significant public health conditions.

(3) Personal information from this system may be disclosed as a routine use to appropriate conveyance personnel, Federal agencies, state and local health departments, **Department of State** and embassy personnel (U.S. and foreign), and health authorities in foreign countries for contact tracing investigations and notifications of possible exposures to serious communicable diseases in connection with travel.

(4) **Records may be disclosed to the Department of Homeland Security** to restrict travel of persons who pose a public health risk and in the instance of suspected domestic or international terrorism.

(5) Disclosure may be made to **medical personnel** providing evaluation and care for ill or exposed persons, including travelers.

(6) **Records may be disclosed to the World Health Organization** in accordance with U.S. responsibilities as a signatory to the International Health Regulations or other international agreements.

(7) **Personal information may be disclosed to federal, state, and local authorities for taking necessary actions to place someone under quarantine or isolation, for enforcement of other quarantine regulations, or to protect the public’s health and safety.**

(8) Records may be disclosed to cooperating **state and local legal departments** enforcing concurrent legal authority related to quarantine or isolation activities.

(9) In the event that a system of records maintained by this agency to carry out its functions indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule or order issued pursuant thereto, the relevant records in the system of records may be referred, as a routine use, to the appropriate agency, whether federal, foreign, state or local, charged with the responsibility of investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation or order issued pursuant thereto.

(10) **Disclosure may be made to a congressional office** from the record of an individual in response to a verified inquiry from the congressional office made at the written request of that individual

(11) In the event of litigation where the defendant is: (a) The Department, any component of the Department, or any employee of the Department in his or her official capacity; (b) the United States where the Department determines that the claim, if successful, is likely to directly affect the operations of the Department or any of its components; or (c) any Department employee in his or her individual capacity where the Justice Department has agreed to represent such employee, **disclosure may be made to the Department of Justice** to enable that Department to present an effective defense.

(12) **Records may be disclosed to appropriate Federal agencies and Department contractors** that have a need to know the information for the purpose of assisting the Department's efforts to respond to a suspected or confirmed breach of the security or confidentiality of information disclosed is relevant and necessary for that assistance."

Officials with Broward County Department of Health and the Florida Surgeon General's Office have created a process to force-quarantine people who have not even tested positive for Coronavirus, according to a memo from inside the Broward County Department of Health obtained by *NATIONAL FILE* after a source filed a public information request. The March 27 memo written by Joshua D. Lenchus, shortly before he was named [chief medical officer](#) this month of Broward Health Medical Center, confirms that the process allows for a "Quarantine Order" to be issued for "Persons Under Investigation" who have not even tested positive. This scoop comes amid public outcry after we exposed Broward County Administrator Bertha Henry [caught on tape](#) discussing going into "family homes" and assisted living facilities to isolate people during the Coronavirus outbreak. Freedom protesters wielding petitions were [shut out of the Broward Commissioners meeting on Tuesday](#).

Here is Broward County Administrator Bertha Henry discussing going into "family homes" to isolate people.

 Video thumb

[HERE IS THE MEMO ISSUED BY JOSHUA LENCHUS: browardorder](#)
SOROS, GATES, AND CLINTONS

Partners in Health was recently selected by Massachusetts governor Charlie Baker to conduct Coronavirus “contact tracing,” a process that involves teams of investigators finding out who infected people have come into contact with. The group is already [“training and deploying hundreds of contact tracers.”](#) Some citizens fear the potential for mass surveillance posed by contact tracing, especially in light of [a Democrat-introduced bill in Congress to authorize contact tracing “at individuals’ residences.”](#) Partners In Health’s involvement will not assuage many fears, considering the group has received funding from George Soros and Bill Gates organizations and counts Chelsea Clinton on its [board of trustees](#).

<https://twitter.com/i/status/1258125685014568960>

Partners in Health [lists George Soros’ Open Society Foundations as an official partner](#), along with the Bill and Melinda Gates Foundation. Partners In Health lists Open Society Foundations [on its 2015 annual report](#) as a supporter to the tune of \$1 million or above, along with the Gates Foundation. Chelsea Clinton serves on Partners in Health’s Board of Trustees, [according to its 2019 annual report](#).

Partners in Health co-founder Paul Farmer’s [achievement.org bio notes](#): “Farmer’s work attracted the support of philanthropists, including George Soros and Bill and Melinda Gates. In 2002, PIH received a \$13 million grant from the Global Fund for improvements in the Cange complex. In 2005 the William J. Clinton Foundation funded a Partners in Health AIDS program in Rwanda.” Farmer and Chelsea Clinton did a [Clinton Foundation podcast together in 2019](#). In response to a 2007 tuberculosis outbreak in Africa, [NBC News reported](#): “Soros’ Open Society Institute announced a \$3 million grant to the non-profit organization Partners in Health and Brigham and Women’s Hospital in Boston. The donation will be used to design a model project of community-based XDR-TB treatment in Lesotho. Once treatment guidelines are developed, experts hope the program will be adopted in other poor countries.”

Soros [personally announced the grant](#) and said he hoped it would spark a larger project. For this initiative, Partners In Health was cited by name in the propaganda book [The Philanthropy of George Soros: Building Open Societies](#).

In 2011, International Women’s Health Coalition noted, [“YP Foundation Founder to Join Paul Farmer, George Soros, at IWHC Gala.”](#) Farmer was honored at the gala, which [Guest of a Guest](#) noted had David Rockefeller in attendance.

In 2014, Partners In Health co-founder Paul Farmer secured multi-million dollar Soros financing for a coalition project in Africa. Farmer [was featured in an October 2014 video](#)

[interview](#) on Soros' Open Society Foundations website, which stated, "In between trips to Liberia, Paul Farmer of Partners In Health visited Open Society's offices to discuss his work on Ebola. Paul talked about the need to ensure sustainable health systems for people in nations where the virus has spread." Farmer blasted "fear and conspiracy theories around fatal illnesses" in the video and talked about how to "attack" conspiracy theories with activism.

 Video thumb

[Forbes reported in September 2014](#): “There’s never been a connection between Ebola and first-rate medical care,” says Paul Farmer, the renowned co-founder of Partners in Health, before pointing out that none of the health care workers flown back to the U.S. for treatment have died. Could the answer to the outbreak lie in the care regiment for those afflicted? We’ll soon find out. Farmer landed in Liberia this morning, at the center of a coalition quietly formed to specifically – and quickly – test that thesis. In the next few weeks, the Farmer group will open a top-notch treatment facility in one of Liberia’s most rural provinces, along with strategies designed to maximize its effectiveness.

“This has been coming together for years,” Farmer tells Forbes, a few hours before departing on the trip. “The Ebola crisis pushed it over the edge.”

The impetus for this coalition began with a meeting two weeks ago, convened by Farmer’s co-founder at Partners in Health, [Jim Kim](#), who is now president of the [World Bank](#). Attendees included Director-General Margaret Chan of the World Health Organization, Tom Frieden, Director of the Centers for Disease Control and Francis Collins, Director of the National Institute for Health. Dismayed by the global response – Kim told the group that the outbreak already ranks among the worst health crises in world history — Kim tabbed Farmer as the World Bank’s special Ebola advisor and also enlisted another attendee at the meeting, [Raj Panjabi, who runs Last Mile Health in Liberia](#). (Full disclosure: [Panjabi was mentored at last year’s Forbes 400 Summit on Philanthropy](#) and I now chair the advisory board for Last Mile Health, which hires, trains and manages front-line health care workers in remote villages.) George Soros’ Open Society Foundations quickly provided \$4 million to fund this project. “The coalition got us a proposal the next day, they answered all our questions the day after, and we got them the funds they needed before the week was out,” says Chris Stone, the organization’s president. The project was appealing to Soros’ team because it features a local group familiar with the turf, an entrepreneurial mentality and the ability to scale.”

Forbes passage ends

Meanwhile...

Prospective Coronavirus contact tracers in New York City are required to understand “institutional and structural racism” and to support immigrants and the LGBTQ community. The government is employing contact tracers to investigate who infected persons come into contact with, leading to civilian concerns that privacy is being attacked. ([RELATED: Democrats Introduce Bill To Authorize Contact Tracing At People’s Homes](#)).

A [job posting on Columbia University School of General Studies states](#): “The Fund for Public Health in New York City (FPHNYC), in partnership with the New York City Department of Health and Mental Hygiene (DOHMH), is seeking contact tracers to perform case interviews and contact tracing to support the citywide COVID-19 response. using a trauma-informed, culturally respectful approach that builds trust and facilitates the free sharing of information.” The job includes “Conducting in-person investigations into congregate settings and selected cases and contacts.”

Listed requirements include: “Ability to understand the concepts of institutional and structural racism and bias and their impact on underserved and underrepresented communities” and “Have a demonstrated commitment to supporting communities who have experienced systemic oppression and bias (e.g. people of color, LGBTQ people, immigrants, justice involved persons, etc.)”

Democrat Rep. Bobby Rush has introduced a bill in Congress to authorize the federal government to grant approved entities the right to conduct contact tracing for Coronavirus at “individuals’ residences.” Contact tracing involves investigators tracing every interaction that infected people have.

Rep. Rush introduced HR 6666, [“COVID-19 Testing, Reaching, and Contacting Everyone \(TRACE\) Act”](#) on May 1, 2020 and it has been referred to the House Committee on Energy and Commerce. The bill has 45 co-sponsors. According to the text of the bill: “To authorize the Secretary of Health and Human Services to award grants to eligible entities to conduct diagnostic testing for COVID-19, and related activities such as contact tracing, through mobile health units and, as necessary, at individuals’ residences, and for other purposes.”

People are concerned that the government might be angling to use contact tracing to remove people from their homes and place them in quarantine, after a Ventura County, California health official suggested doing just that (and later walked it back, though it’s unclear what his proposed policy actually is at this time).

Former Democrat president Bill Clinton extensively discussed contact tracing recently in video interviews with Democrat leaders including governors Andrew Cuomo and Gavin Newsom:

CHILDREN AT RISK

Child Protective Services (CPS) agencies are facing national scrutiny as Salem, Oregon salon owner Lindsey Graham [accuses CPS](#) of questioning her children in a politically motivated targeting operation. Graham is fighting Democrat governor Kate Brown’s state government in

an effort to re-open her business during the government-imposed Coronavirus lockdown. Graham's crusade, predictably, is making her a target of the political establishment.

 Video thumb

I led the way in exposing Child Protective Services with my 2019 investigative journalism series. I spotlighted the massive problems in Oregon, interviewing [pro-life activist Heather Hobbs regarding her claim](#) that a nurse targeted her with a vindictive CPS report in the hospital due to her pro-life conservative beliefs, and I showed how [the Oregon Treasury invested in a foster care provider](#) accused of lording over patient abuse.

Meanwhile: Washington state's Department of Children, Youth and Families (DCYF, also known as "CPS" for "Child Protective Services") posted a job listing for existing CPS workers to volunteer to supervise children in quarantine centers during the Coronavirus outbreak.

The job posting states: "DCYF is seeking current DCYF employees in King, Snohomish, and Benton counties to volunteer to supervise and support children and youth in Emergency Quarantine Centers. While this is a voluntary effort, you will be compensated four ranges (approximately 20%) above your current base salary while performing these duties, and return to your normal position and salary once concluded. We are looking for current DCYF Social Service Specialist 3's to care for children who are either COVID-19 positive, or who may have been exposed to COVID-19. There are three locations..."

One of the listed locations, Cedar Springs Camp, clarified that they were falsely listed by the state of Washington as a quarantine center, and they asked the state to remove them. The job posting closed on May 11.

Responding to social media uproar, the Washington state's DCYF put out a clarifying statement that the ad was only referring to children currently in the system. But their clarifying statement contradicts itself, at first stating that the quarantined children will be kids who have tested positive, and then stating that quarantined children will also be kids who may have been exposed to Coronavirus.

DCYF's clarifying statement reads: *"In light of some concerns from the public regarding two recent job postings by the Washington State Department of Children, Youth, and Families (DCYF), the agency would like to clarify the intent of these job listings and address misinformation spreading as a result of the job description."*

The job postings targeted current staff interested in Social Service Specialist 3 and Social Service Specialist 5 positions. The post prematurely included sites of potential locations in the community where we could house children in our legal care and authority who've tested positive for COVID-19 in the event that a placement home was not available. The facilities listed are not affiliated with DCYF and had not signed off on this job listing.

The listings have since been taken down to avoid further confusion.

In response to the COVID-19 pandemic, DCYF began internal recruitment of social service specialists to care for foster children who are either COVID-19 positive or may have been exposed to COVID-19 in the event a placement home was not available.

To clarify, those facilities that ultimately open their doors to this effort would only house State-dependent children and youth in out-of-home care who due to being COVID positive or COVID exposed do not currently have a foster home available. These facilities are for this limited scope and not considered quarantine centers or intended for the general public.”

Meanwhile...

Multiple mothers have had their children taken away from them as a direct result of working in the medical profession during the Coronavirus outbreak. Will these disturbing cases register with our political leaders, who are voicing public calls to stand with our medical workers during the pandemic?

Additionally, *NATIONAL FILE* caught a Child Protective Services worker attempting to use the Coronavirus outbreak to suspend all visits for parents of a child in the government system, citing a statewide policy that the state government says does not exist. What is going on?

(UPDATE: Dr. Theresa Greene, profiled below, [got her children back after an appeals court ruling](#))

The [Washington Examiner](#) previously reported:

“A divorced emergency room physician temporarily lost custody of her daughter because of the coronavirus pandemic.

Dr. Theresa Greene, a doctor in South Florida, previously shared custody of her 4-year-old daughter with her ex-husband, Eric Greene, but a judge granted an emergency order granting him sole custody until the ordeal is over, according to [NBC Miami](#).

In the court’s decision, Circuit Judge Bernard Shapiro wrote, “In order to protect the best interests of the minor child, including but not limited to the minor child’s safety and welfare, this Court temporarily suspends the Former Wife’s timesharing until further Order of Court. The suspension is solely related to the outbreak of COVID-19.”...

...Theresa Greene responded to the judge’s ruling by saying that “the family court system now is stressing me almost more than the virus.”

“I was just shocked that the judge would take this stance without talking to medical experts and knowing the facts and take it so lightly, take my child from me, and not think of the effect on her, her mental and psychological well-being,” she added.

The doctor noted that the custody battle will not stop her from following the “oath” she took to help people.”

Washington Examiner passage ends

Greene appealed the decision, and an appeals court ruled in her favor.

Meanwhile, I recently reported:

An Oklahoma medical worker has been stripped of her parental custody at this time because she works in a medical clinic and could possibly be exposed to Coronavirus

during the outbreak, according to court documents.

A district judge for the Sac and Fox District Court took medical worker Katherine Spencer's children after the father petitioned the court. "The Petitioner alleged, and submitted documents in support, that the Respondent alleged proximity to Coronavirus," the court order states. Court dockets [show no record](#) of a hearing on March 20, the day the court laid down its order to confiscate Spencer's children.

IN THE DISTRICT COURT IN AND FOR THE SAC AND FOX NATION
256159 EAST 926 ROAD, STROUD, OK 74079

RAYMOND BLAKE SELLERS,

Petitioner,

v.

KATHERINE ELIZABETH
SPENCER,

Respondent.

Case No. JFD-16-30

FILED
DATE 3/20/20
DOCKET SAC V. PETITION
BY C. Smith COURT CLERK
DEPUTY

ORDER

This matter is before the Court on the Petitioner's ex parte *Emergency Motion to Modify Custody and for Pick-Up Order Due to Respondent Spencer's Exposure to Coronavirus*. The Petitioner alleged, and submitted documents in support, that the Respondent alleged proximity to Coronavirus. The Court takes judicial notice there is at present no vaccination, though children are generally less susceptible to the virus' effects it is highly contagious and lethal. Combined with the pre-existing health issues of one of the minor children and a proffered history of alleged neglect by the Respondent Spencer (mother), the Court finds that it is in the best interests of the minor children of this above-styled matter for an *ex parte* order for the Children to be immediately picked-up and placed into the custody of the Petitioner Sellers (father).

IT IS THEREFORE ORDERED.

Spencer R. Spencer
DISTRICT JUDGE
Sac and Fox District Court

Katherine Spencer told her story on Facebook and denied that she has any history of "neglect" prior to getting hit with a gag order by the judge.



Katie Spencer

March 21 at 4:04 PM · 🌐

The police showed up on my doorstep at 10 PM and took my kids from me because I WORK IN A CLINIC and a judge signed off on this because of my "exposure to the coronavirus." Just a heads up to nurses, doctors, firefighters, police officers, and other first responders who have children and sneaky exes...watch your backs!

Edited to say: I do NOT have a history of abuse, he does though - his current girlfriend and I have both had VPO's for domestic abuse by strangulation against him and she has had him arrested in Oklahoma County for it. I also have NO history of neglecting my children.

NATIONAL FILE recently reported...

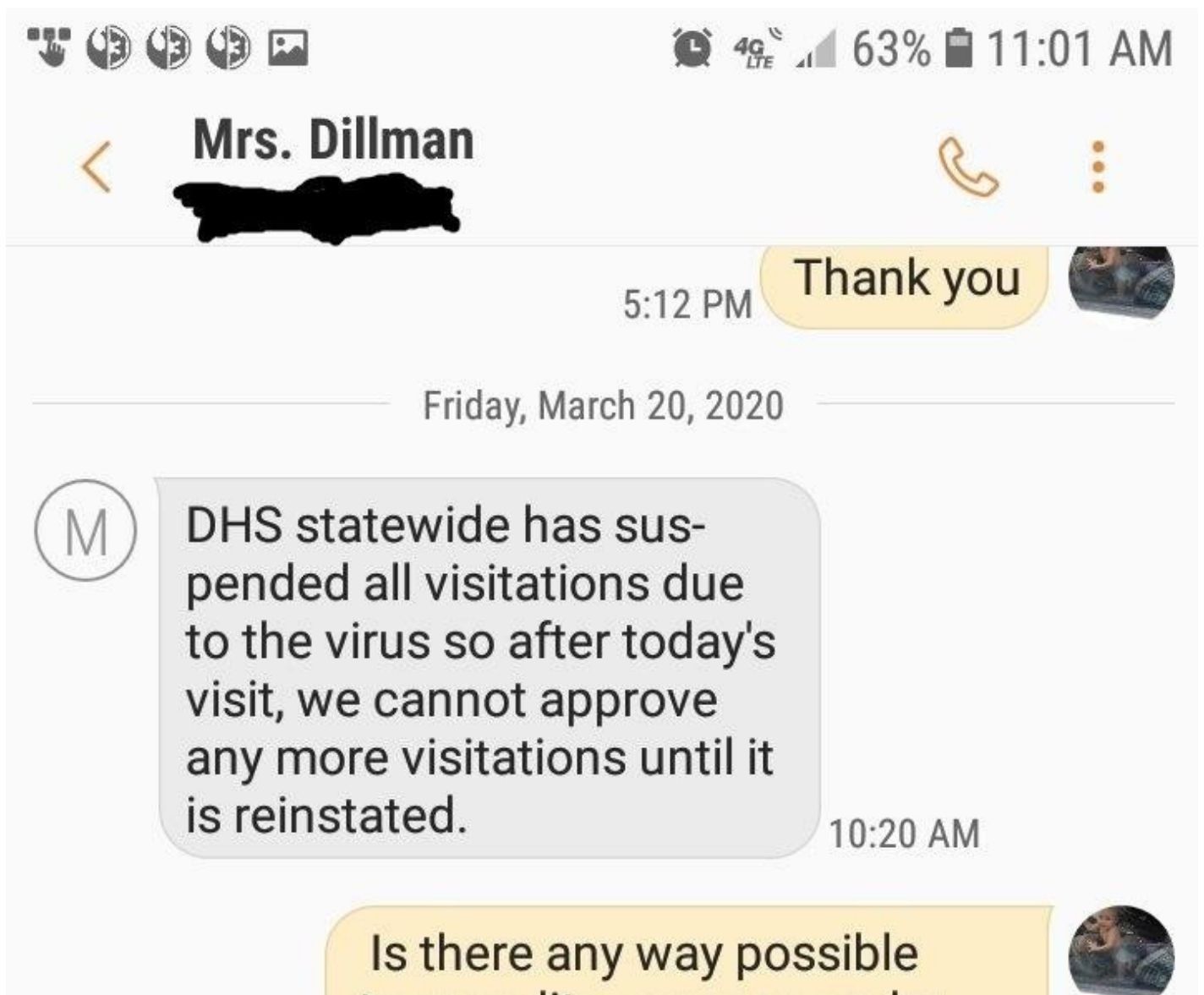
UPDATE: Since *NATIONAL FILE* broke this story, the parents in question have had multiple short video visits with their daughter)

A Child Protective Services (CPS) worker in Oklahoma used the Coronavirus outbreak to cut off a mother and father's visits with their 20-month old daughter, even though the Department of Human Services, the state agency that oversees CPS, claims to be keeping parental visits open.

"DHS statewide has suspended all visitations due to the virus so after today's visit, we cannot approve any more visitations until it is reinstated," said CPS permanency worker Danelle Dillman in a Friday morning text message to Andrew Ritter regarding his 20-month old daughter, who was seized by the government for "Failure To Thrive" due to low infant birth weight after the girl's mother chose to breastfeed her. Ritter and his wife said they preferred not to place their daughter on a particular appetite enhancer due to perceived conflict with the girl's Zyrtec Antihistamine.

An Oklahoma DHS official told National File in a confusing, defensive interview that the state agency does not have a policy in place to suspend all visitations at this time, but rather to

continue visitations using technology like Skype and FaceTime. But the official does not know if visitations are actually still occurring. Ritter and his wife never received an offer to hold a cyber-visit. Here is the text that permanency worker Dillman sent to Ritter:



When *National File* called up the headquarters for Oklahoma DHS, a woman who answered the phone told us that parental visits were indeed “suspended” for the time being, “until they get this virus under control.” The woman refused to give us her name. But Keeley McEwan, head of the Oklahoma DHS communications office, told *National File* that “We have not suspended visitation across the board in any way.” She pointed to the agency’s daily guidance for case workers, which she noted is “fluid” and “changes day to day.” “As of today we are highly encouraging continuing visitation” utilizing iphones and programs including Skype and FaceTime. “Whether a visitation is cancelled is on a case by case basis.” She did not know whether any visitations have been recently held since the Coronavirus outbreak using Skype or FaceTime. Permanency worker Danelle Dillman did not respond to repeated requests for comment. McEwan did not confirm whether or not she spoke to Dillman or Dillman’s supervisor following our conversation.

I have been reporting on the nationwide scourge of CPS removing children from parents' homes for highly disputable reasons or no reason at all, which many parents feel is due to the for-profit nature of the government's child removal industry.

BUSTED: FAUCI, BIRX, AND GATES: HERE IS MY ORIGINAL REPORT THAT CHANGED THE WORLD

President Donald Trump is fighting to find a medical solution for Coronavirus in the short term, expressing hope that the anti-malaria drug Chloroquine/hydroxychloroquine can help patients suffering from the Chinese virus.

The truth is that President Donald Trump is locked in an intense power struggle with Bill Gates, who is pushing his vaccines, which may not be available to the public until after November's election.

Gates has a lot of pull in the medical world, he has a multi-million dollar relationship with Dr. Fauci, and Fauci originally took the Gates line supporting vaccines and casting doubt on Chloroquine. Coronavirus response team member Dr. Deborah Birx, appointed by former president Obama to serve as United States Global AIDS Coordinator, also sits on the board of a group that has received billions from Gates' foundation. The Bill and Melinda Gates Foundation [recently provided funding to both IHME and Imperial College London](#), which put out wildly overblown models for the Coronavirus outbreak that caused mass panic and contributed to worldwide government lockdown. Gates [is a big proponent for](#) a population lockdown scenario for the Coronavirus outbreak.

National Institute of Allergy and Infectious Disease (NIAID, a division of National Institutes of Health, NIH) director Dr. Anthony Fauci, who is [represented by the Aurumn Speakers Bureau, initially criticized Trump's hopeful assessment of Chloroquine](#), saying in an interview with CNN's Anderson Cooper that "There's no magic drug for coronavirus right now," and lectured, "Let me put it into perspective for the viewers .. there has been anecdotal non-proven data that it [chloroquine] works... but when you have an uncontrolled trial you can never definitely say that it works."

Fauci then changed his tune and launched a public relations campaign huddling closer to Trump. Fauci [said that he would definitely prescribe Chloroquine for patients](#). "Yeah, of course, particularly if people have no other option. These drugs are approved drugs for other reasons. They're anti-malaria drugs, and they're drugs against certain autoimmune diseases like lupus. Physicians throughout the country can prescribe that in an off-label way. Which means they can write it for something it was not approved for."

Fauci makes his hostility toward the Trump-touted drugs clear:

Fauci is pushing the talking point that things will never go back to normal in our society until we have the ability to mass-vaccinate people, [echoing Bill Gates' assertion](#) that mass gatherings in our culture “may not come back at all” before mass-vaccinations.

Fauci downplayed the threat of Coronavirus on January 21 in a Newsmax TV interview, saying, “This is not a major threat for the people in the United States, and this is not something that the citizens of the United States right now should be worried about.” Since then, Coronavirus has exploded in the United States, boosting demand for a vaccine.

Fauci later said that people would not have to change their daily activities as a result of the Coronavirus outbreak:

But Fauci's NIAID actually funded a study on Bat Coronavirus, which was a project that included scientists at the Wuhan Institute of Virology, the Chinese lab at the center of controversy over their bat research. That study confirmed in 2018 that humans have died from coronavirus.

Here's an excerpt from the April 4, 2018 NIAID website entry entitled “[New Coronavirus Emerges From Bats in China, Devastates Young Swine](#)”: “A newly identified coronavirus that killed nearly 25,000 piglets in 2016-17 in China emerged from horseshoe bats near the origin of the severe acute respiratory syndrome coronavirus (SARS-CoV), which emerged in 2002 in the same bat species. The new virus is named swine acute diarrhea syndrome coronavirus (SADS-CoV). It does not appear to infect people, unlike SARS-CoV which infected more than 8,000 people and killed 774. No SARS-CoV cases have been identified since 2004. The study investigators identified SADS-CoV on four pig farms in China's Guangdong Province. The work was a collaboration among scientists from EcoHealth Alliance, Duke-NUS Medical School, Wuhan Institute of Virology and other organizations, and was funded by the National Institute of Allergy and Infectious Diseases, part of the National Institutes of Health. The research is published in the journal *Nature*. The researchers say the finding is an important reminder that identifying new viruses in animals and quickly determining their potential to infect people is a key way to reduce global health threats.”

Additionally, [the Daily Mail reported](#) that National Institutes of Health, of which Fauci's NIAID is a member, provided a \$3.7 million grant to the Wuhan Institute of Virology to study bat-borne coronavirus. That study was headlined, ‘Discovery of a rich gene pool of bat SARS-related coronaviruses provides new insights into the origin of SARS coronavirus.’

So what is really going on here?

The true behind-the-scenes story is coming to light:

Bill Gates Cast Doubt on Chloroquine And Said He Is Running A Study On It

[Here is what Gates said regarding Chloroquine in a Reddit Ask Me Anything session:](#)

“There are a lot of therapeutic drugs being examined. This is one of many but it is not proven. If it works we will need to make sure the finite supplies are held for the patients who need it most. We have a study going on to figure this out. We also have a screening effort to look at all the ideas for Therapeutics because the number being proposed is very large and only the most promising should be tried in patients. China was testing some things but now they have so few cases that that testing needs to move to other locations,” Gates said.

Gates Is Funding Coronavirus Vaccine Candidates That Would Compete With Chloroquine, And Dr. Fauci’s Agency Is Co-Partnering On The Project

The company Moderna is working on a Coronavirus vaccine, which they expect will go into clinical trials in April. Dr. Fauci has heaped praise on Moderna and said that a vaccine is the only way to definitively assure the end of the virus. Gates is working on multiple Coronavirus vaccine projects.

[The New Eastern Outlook journal reported:](#)

“Gates Foundation money is backing vaccine development on every front. Inovio Pharmaceuticals of Pennsylvania received \$9 million from the Gates-backed CEPI, Coalition for Epidemic Preparedness Innovations, to develop a vaccine, INO-4800, which is about to test on humans in April, a suspiciously rapid time frame. In addition Gates Foundation just gave the company an added \$5 million to develop a proprietary smart device for intradermal delivery of the [new vaccine](#).

In addition Gates Foundation monies via CEPI are financing development of a radical new vaccine method known as messengerRNA or mRNA.

They are co-funding the Cambridge, Massachusetts biotech company, Moderna Inc., to develop a vaccine against the Wuhan novel coronavirus, now called SARS-CoV-2. Moderna’s other partner is the US National Institute of Allergy and Infectious Diseases (NIAID), a part of the National Institutes of Health (NIH). Head of NIAID is Dr Anthony Fauci, the person at the center of the Trump Administration virus emergency response. Notable about the Fauci-Gates Moderna coronavirus vaccine, mRNA-1273, is that it has been rolled out in a matter of weeks, not years, and on February 24 went directly to Fauci’s NIH for tests on human guinea pigs, not on mice as normal. Moderna’s chief medical adviser, Tal Zaks, argued, “I don’t think proving this in an animal model is on the critical path to getting this to a [clinical trial](#)...

Add to this the fact that the Gates Foundation and related entities such as CEPI constitute the largest funders of the public-private entity known as WHO, and that its current director, Tedros Adhanom, the first WHO director in history not a medical doctor, worked for years on HIV with the Gates Foundation when Tedros was a government minister in Ethiopia, and we see that there is practically no area of the current coronavirus pandemic where the footprints of the omnipresent Gates are not to be found. If that is to the good of mankind or grounds to be worried, time will tell.”

New Eastern Outlook journal passage ends

[The Hill reported:](#)

“Going into a Phase One trial within three months of getting the sequence is unquestionably the world indoor record. Nothing has ever gone that fast,” [according to Fauci](#).

While it is uncertain that Moderna’s answer is the solution, Fauci notes that the only surefire way to stop an outbreak is to develop a vaccine. Moderna manufactures drugs around messenger RNA molecules that carry instructions to reprogram cells in the body to operate differently and beneficially. Currently, its genetic technology has not created a vaccine for humans.

The first study of the vaccine will take place at NIAID. If it is successful, a second trial would feature closer to hundreds of people. Pending the results of future studies and regulations, the vaccine may not be readily available until next year, [Fauci said](#).

Hill passage ends

[Genetic Engineering & Biotechnology News reported in 2016 on Gates’ relationship with Moderna:](#)

“Moderna Therapeutics said today it received an initial \$20 million grant from the Bill & Melinda Gates Foundation to develop a new affordable combination of messenger RNA–based antibody therapeutics geared toward preventing HIV infection.

The grant is intended for use in the antibody combination’s preclinical study and a Phase I clinical trial. Gates Foundation’s \$20 million funding could potentially grow into a total \$100 million commitment—including the HIV antibody project—toward development of additional mRNA-based treatments for various infectious diseases, Moderna said.

“The foundation’s mission to help all people lead healthy and productive lives is well aligned with Moderna’s mission to deliver on the promise of transformative mRNA science to bring new medicines to patients,” Moderna CEO Stéphane Bancel said in a statement.

Moderna said the development effort would be led by its infectious disease–focused venture company, Valera...”

Fauci Is Tight with Bill Gates

“He’s very good about not overpromising,” [Gates said](#) of Fauci in 2018 as Gates worked on a universal flu vaccine. [NIAID Council minutes from 2019](#) show Fauci’s agency identifying a Gates Foundation workshop as being of interest. Gates [met with Fauci in 2017](#) “to discuss research opportunities in global health.” In 2010, Fauci was named [to the Leadership Council of the “Decade of Vaccines” Collaboration](#), which the World Health Organization, Fauci’s agency NIAID, UNICEF, and the Bill and Melinda Gates Foundation convened.

Fauci [delivered a keynote opening address on “The Challenge of Pandemic Preparedness”](#) in Washington, D.C. at the October 2, 2017 Grand Challenges meeting, which is [a project of the Bill and Melinda Gates Foundation](#).

Fauci hung out with Gates in 2018 at an NIH workshop:

Gates Admitted That He Stopped President Trump's Planned Vaccine Safety Commission With Robert Kennedy Jr. in the Early Days of the Trump Administration

In October 2019, Fauci Announced A Partnership Between the Gates Foundation and Fauci's Agency, In Which The Gates Foundation Pledged To Spend \$100 Million

[The American Journal of Managed Care reported on October 28, 2019:](#)

"The National Institutes of Health (NIH) has announced plans to invest at least \$100 million over the next 4 years to develop gene-based therapies for 2 diseases: HIV and sickle cell disease (SCD). The Bill and Melinda Gates Foundation (Gates Foundation) will also contribute \$100 million to the goal of advancing these potential cures, with an aim toward providing affordable, globally available treatment that will be accessible to patients in low-resource settings.

According to the NIH, the collaboration between the organizations will focus on 2 key areas. First, it will identify potential candidate cures for preclinical and clinical evaluation, and second, it will define long-term opportunities to partner with organizations in Africa...

"This collaboration is an ambitious step forward, harnessing the most cutting-edge scientific tools and NIH's sizable global HIV research infrastructure to one day deliver a cure and end the global HIV pandemic," said NIAID director **Anthony S. Fauci, MD**, in a statement announcing the initiative. "We are taking into account those with the greatest need at the foundation of this effort, to ensure that, if realized, this exceptional public health achievement will be made accessible to all."

Dr. Fauci Is Slated to Speak At The World Vaccine Congress in September 2020 Alongside A Coterie of Public Sector and Private Sector Folks From WHO, CDC, FDA, Merck, Pfizer, etc.

[The event is in Washington, D.C.](#)

GLOBAL VACCINE LEADERS SPEAKING



Dr Anthony S. Fauci,
M.D.
NIAID Director
NIH



Dr Kate O'Brien
Director, Department of
Immunization, Vaccines and
Biologicals
WHO



Dr Richard Hatchett
CEO
CEPI



Professor Jean-Jacques
Muyembe-Tamfum
Director-General, National
Institute for Biomedical
Research, Democratic Republic



Dr Paul Stoffels
Vice Chairman of the Executive
Committee and Chief Scientific
Officer
Janssen

Fauci is a Hillary Clinton Admirer

Fauci and fellow Coronavirus response team member Deborah Birx Have Democrat and Globalist Elite Friends Including Gates and Nancy Pelosi

Fauci was [a presenter at the 2001 Andrew Carnegie Medals ceremony](#), where he hobnobbed with George Soros, Bill Gates' father, David Rockefeller, and other globalist masters of the universe.

<https://twitter.com/BenHill4NV/status/1247276721180532736>

Dr. Deborah Birx is [garnering criticism](#) for [touting](#) a disputed model for the Coronavirus outbreak prepared by the University of Washington's IHME, [a project of the Bill and Melinda Gates Foundation](#). Birx's license to practice medicine in the state of Pennsylvania [expired in 2014](#).

Deborah Birx [Sits on the Board of The Global Fund](#), which is heavily funded by Bill Gates' organizational network, as journalist Jordan Schactel discovered. The Bill and Melinda Gates Foundation [gave the Global Fund a \\$750 million promissory note in 2012](#).

[The Global Fund explains](#), "The Bill & Melinda Gates Foundation is a key partner of the Global Fund, providing cash contributions, actively participating on its board and committees, and supporting the Global Fund's advocacy, communications and fundraising efforts. The Gates Foundation has contributed US\$2.24 billion to the Global Fund to date, and pledged US\$760 million for the Global Fund's Sixth Replenishment, covering 2020-2022."

United States of America



Board Member – Deborah L. Birx

U.S. Global AIDS Coordinator & U.S. Special Representative for Global Health Diplomacy

Ambassador-at-Large, Deborah L. Birx, M.D., is a world-renowned medical expert and leader in the field of HIV/AIDS. Her three-decade-long career has focused on HIV/AIDS immunology, vaccine research, and global health. She previously served Director of Centers for Disease Control and Prevention's Division of Global HIV/AIDS, and as the Director of the U.S. Military HIV Research Program at the Walter Reed Army Institute of Research.

Fauci Holds Numerous Patents That Present More Potential Conflicts of Interest For Him In The Medical Field, As Many of these Patents Directly Pertain To HIV Treatment

[Here Is A List of Patents Held Or Pending Patent Applications Filed By Anthony S. Fauci](#)

Fauci was [previously accused of a conflict of interest](#) regarding one of his patents in 1999.

FAUCI'S FRIEND PELOSI [GALLIVANTED AROUND CHINATOWN DURING THE OUTBREAK](#)

Democrat House Speaker Nancy Pelosi impeached President Donald Trump during the spread of the Coronavirus outbreak in the United States of America, while also encouraging people to socialize with her in the Chinatown district of San Francisco, where she visited a fortune cookie factory to portray her supposed opposition to bigotry and xenophobia.

The [CDC confirmed](#) the first U.S. case of the Chinese virus on January 21, in Seattle from a man who got back from Wuhan, China. Incidentally, the House impeachment managers kicked off opening arguments in the Trump "Ukraine"-focused impeachment trial two days later on January 23.

Pelosi told people to "Come join us!" during her Chinatown jaunt on February 24, which featured her aforementioned fortune cookie factory visit.

During the most recent round of stimulus spending, Pelosi attempted to stall the Republican-backed plan in an effort to pass elements of the Green New Deal.

[National File reported:](#)

Speaker of the House Nancy Pelosi's 1,119 page coronavirus stimulus proposal includes a vast amount of hidden, nakedly partisan political provisions and regulations that are unrelated to family and small business relief.

Several sharp-eyed social media users who had the fortitude to browse through the massive bill found bizarre provisions, including writer Rachel Bovard.

"Pelosi's [#COVID19](#) bill is 1,119 pages and contains provisions for "conducting risk-limiting audits of results of elections" so yeah it's really very focused on the crisis at hand," Bovard said in a thread that compiled screenshots of various provisions in the bill.

After proposing a bailout for the postal service, the Democratic bill includes sections about paid studies of "pay equity" between "racial and ethnic minorities"

and their “white counterparts,” as well as a “comparison of pay between and women for similar roles and assignments.”

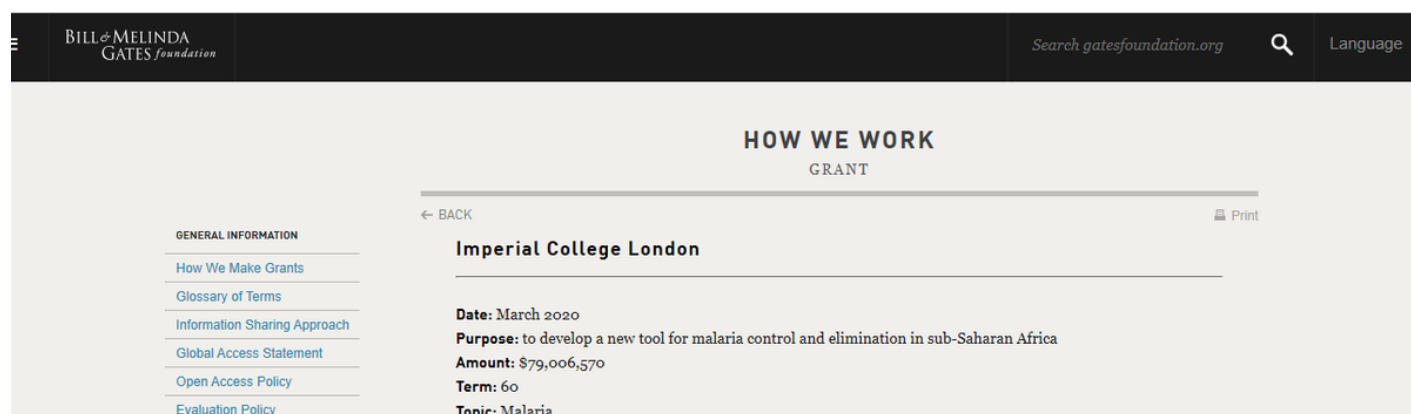
GATES IS EVERYWHERE

The Bill and Melinda Gates Foundation recently provided massive amounts of funding to both the Institute for Health Metrics and Evaluation (IHME) and Imperial College in London, which both produced wildly incorrect models for the Coronavirus outbreak that sparked worldwide panic and provided false justification for government leaders to shut down the American economy, creating mass unemployment. Bill Gates is a vaccine oligarch who recently laughed at America’s economic devastation, so committed he is to his vision of vaccinating the world’s population and keeping society locked down until that becomes possible. Gates, like his crony Dr. Anthony Fauci, has fought the use of hydroxychloroquine to treat the virus and has claimed that society will never fully return to normal until a vaccine is ready. ([READ: The Dark Truth About Fauci, Birx, Bill Gates and the Globalist Elites](#)).

White House Coronavirus task force member Dr. Deborah Birx [touted the IHME’s “Chris Murray Model”](#) in April. IHME is housed at the University of Washington and was reportedly founded by the Gates Foundation, [according to a Fox 9 report](#). In 2017, the [Gates Foundation provided a ten-year, \\$279 million grant](#) to IHME. Birx, meanwhile, sits on the board of the Global Fund, which has received more than \$2 billion from the Bill and Melinda Gates Foundation. The IHME model proved to be a total disaster. [In Georgia](#), where Republican governor Brian Kemp led the charge for re-opening his state, the model previously predicted 1,783 new cases per day on June 12 and hundreds of new cases per day into August. That model, just revised, shows 367 new cases per day on June 12 and zero new cases per day by August.

In March 2020, during the Coronavirus outbreak, [the Gates Foundation awarded a more than \\$79 million grant](#) to Imperial College London. The Imperial College London model, spearheaded by team leader Neil Ferguson, projected 2.2 million American casualties. The disastrous model [led to Elon Musk lambasting Ferguson](#), who resigned as an adviser to the British government when he was caught flaunting the very lockdown that his numbers inspired. [Imperial College London admits on its website](#) that its research on arboviruses, which includes work on vaccine projections undertaken by Neil Ferguson himself is Gates-funded, stating, “Our research is funded by the Bill and Melinda Gates Foundation, the US National Institutes of Health and the MRC.” [Business Insider reports](#) that Neil Ferguson’s MRC Center for Global Infectious Disease at Imperial College “gets tens of millions of dollars in annual

funding from the Bill & Melinda Gates Foundation, and works with the UK National Health Service, the US Centres for Disease Prevention and Control (CDC), and is [tasked with supplying](#) the World Health Organization with “rapid analysis of urgent infectious disease problems.” [A job posting that opened in December 2019 and closed in January 2020 stated](#) (emphasis added): “We are seeking an outstanding Research Lead for the Vaccine Impact Modelling Consortium (<https://www.vaccineimpact.org/>). This major collaborative **initiative directed by Professor Neil Ferguson**, is based within the MRC Centre for Global Infectious Disease Analysis **at Imperial College London** and **funded jointly by the Bill and Melinda Gates Foundation** (BMGF) and Gavi, the Vaccine Alliance (\$11 million over 2016-22).”



The screenshot shows the Bill & Melinda Gates Foundation website. The header includes the foundation's name, a search bar, and a language selector. The main content area is titled "HOW WE WORK" and "GRANT". A sidebar on the left lists "GENERAL INFORMATION" links: "How We Make Grants", "Glossary of Terms", "Information Sharing Approach", "Global Access Statement", "Open Access Policy", and "Evaluation Policy". The main content area displays details for a grant to Imperial College London, including the date (March 2020), purpose (to develop a new tool for malaria control and elimination in sub-Saharan Africa), amount (\$79,006,570), term (60), and topic (Malaria). Navigation links for "BACK" and "Print" are also visible.

A Chinese government entity that has partnered with the Bill and Melinda Gates Foundation led a delegation of public health experts to the Wuhan Institute of Virology in December 2018, after the lab had already [begun its bat coronavirus research funded by Dr. Anthony Fauci's](#) National Institute of Allergy and Infectious Diseases (NIAID). This discovery was made by citizen journalist Amazing Polly ([@99freemind](#)). President Donald Trump and Secretary of State Mike Pompeo have emboldened the narrative that Coronavirus originated at the Wuhan lab.

[\(READ: The Full Story of Dr. Fauci, Birx, Bill Gates, and The Globalist Elites\)](#)

The Chinese government's Center for Global Public Health (CGPH) guided ten experts from Africa to the Wuhan lab and other Chinese institutions and reached a consensus on “training of biosafety personnel.” The information on the trip from Wuhan Institute of Virology's website [can be READ HERE](#). According to the website, “CGPH has managed and implemented foreign aid mission assigned by the National Health and Family Planning Commission and the Ministry of Commerce, as well as international cooperation projects

funded by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation.”



中国科学院武汉病毒研究所
WUHAN INSTITUTE OF VIROLOGY, CAS

Experts of public health from 10 African countries visited WIV, CAS

Date : 21-11-2018 | 【Print】【close】

By the invitation of the Center for Global Public Health (CGPH) of Chinese Center for Disease Control and Prevention, 10 African experts of public health from Ghana, Senegal, South Africa, Zambia, Côte d'Ivoire, Cameroon, Mozambique, Ethiopia, Uganda and Gabon visited China from November 11th to 21st, 2019. On November 13th, the African experts visited Wuhan Institute of Virology (WIV), Chinese Academy of Sciences (CAS), and visited Wuhan National Biosafety Laboratory of CAS (Wuhan P4 Laboratory).

teams, and strengthening international cooperation. Since its establishment, CGPH has managed and implemented foreign aid mission assigned by the National Health and Family Planning Commission and the Ministry of Commerce, as well as international cooperation projects funded by the United Kingdom Department for International Development and the Bill & Melinda Gates Foundation.



[Patrick Howley](#)

How does the PCR test work?

https://www.minds.com/newsfeed/1208173334120280064?referrer=shane_st_pierre

The COVID-19 RT-PCR Test: How to Mislead All Humanity. Using a "Test" To Lock Down Society

https://www.minds.com/newsfeed/1208175561579020288?referrer=shane_st_pierre

PCR Fraud: Tests Recycled Into Lies 12.7

https://www.minds.com/newsfeed/1196293373449478144?referrer=shane_st_pierre

PCR Inventor Says Facui is "Not a Scientist"

https://www.minds.com/newsfeed/1196294502286086144?referrer=shane_st_pierre

The CDC's History of Research Fraud Regarding Vaccines and Autism

https://www.minds.com/newsfeed/1208164027555688448?referrer=shane_st_pierre

Honest Experts Are Trying to Warn You!

https://www.minds.com/newsfeed/1208150605236473856?referrer=shane_st_pierre

THIS IS THE BIGGEST SCAM EVER PERPETRATED ON THE HUMAN RACE

https://www.minds.com/newsfeed/1208129513140707328?referrer=shane_st_pierre

Top Canadian Pathologist On CO V ID: 'Greatest Ho ax Ever Perpetrated' ** Roger H threatened with death since

https://www.minds.com/newsfeed/1196286188901777408?referrer=shane_st_pierre

Censored Dr. Goes Off On Lying Fauci, CDC and NIH

https://www.minds.com/newsfeed/1203518785888681984?referrer=shane_st_pierre

The Report that Fauci said he never filed, 10 years after He published it., confirming hydrochlorwuin as treatment and vaccine.

Why was it banned in USA again?

https://www.minds.com/newsfeed/1200308811332587520?referrer=shane_st_pierre

CDC

CDC Owns over 20 vaccine patents (20 on CORONA VIRUS)

This one boggles my mind. How did they Patent a virus YEARS In ADVANCE? Oh well they aren't for THIS corona... Turns out you can Patent a VIRUS as well as a vaccine, as long as the VRIS has tech!

<https://www.greenmedinfo.com/blog/examining-rfk-jrs-claim-cdc-owns-over-20-vaccine-patents>

<https://stillnessinthestorm.com/2020/01/19-coronavirus-patents-going-back-to-the-80s-filed-before-the-wuhan-outbreak/>

If You Still Believe The W.H.O. & Dr Tedros Adhanom Ghebreyesus, You Probably Wear A Face Mask. The Man IS A Terrorist!

https://olymanifesto.com/wp-content/endurance-page-cache/red-pill/dr-tedros-adhanom-ghebreyesus-tplf/_index.html

Charge of the World Health Organization — Dr. Tedros Adhanom

<https://frankreport.com/2020/04/14/the-ethiopian-terrorist-in-charge-of-the-world-health-organization-dr-tedros-adhanom/>

WHO chief Tedros in the eye of the storm

CDC Corruption: A Betrayal Of Public Trust

<https://www.honeycolony.com/article/cdc-corruption-a-betrayal-of-public-trust/>

Organized Confusion by the WHO

<https://drsircus.com/general/organized-confusion-by-the-who/>

<https://www.epatienthealthcare.com/organized-confusion-by-the-who/>

4+ YEARS AGO They tried the same bullshit

<https://youtu.be/wi-yjArfuil>

Thanks to COVID-19, the sleazy, corrupt inner workings of the U.S. CDC are being exposed

<https://corruption.news/2020-09-01-corrupt-inner-workings-of-us-cdc-being-exposed.html>

CDC and WHO Corrupt Financial Entanglements with the Vaccine Industry

<https://childrenshealthdefense.org/cdc-who/>

Alliance at

<https://worlddoctorsalliance.com> Heiko Schoening at <https://acu2020.org> Martin Byrne at

<https://lawlibrary.ie> Dolores Cahill at <https://irishfreedom.ie> Mads Palsvig at <https://JFK21.dk>

Filmed in 4K by Oracle Films <https://oraclefilms.com>

https://www.minds.com/newsfeed/1203243644262182912?referrer=shane_st_pierre

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Doctors Around the World Issue Dire WARNING: DO NOT GET THE COVID VACCINE!!

https://www.minds.com/newsfeed/1203242475623526400?referrer=shane_st_pierre

The Truth about vaccines with all the proof you could ever want

https://www.minds.com/newsfeed/1200401440546729984?referrer=shane_st_pierre

Plandemic 2: Indoctrination

https://www.minds.com/newsfeed/1201175051860221952?referrer=shane_st_pierre

Doctors first reaction to Covid and Fauci Recommendations

Dan Erickson and Artin Massihi 4/22 CA

https://www.minds.com/newsfeed/1201120636515307520?referrer=shane_st_pierre

1st Summit, America's Frontline Doctors in DC 7.28.20 - (free version)

https://www.minds.com/newsfeed/1201753005489369088?referrer=shane_st_pierre

America frontline DR

https://www.minds.com/newsfeed/1201753005489369088?referrer=shane_st_pierre

America's Frontline Doctors Hold 2nd Summit in DC (free version)
https://www.minds.com/newsfeed/1201745772697300992?referrer=shane_st_pierre

Covid911 - INSURGENCY where did it come from? How did it spread? 6.20.20 (free version)
https://www.minds.com/newsfeed/1201992064317333504?referrer=shane_st_pierre

Dr Hodgkinson
https://www.minds.com/newsfeed/1201991371915501568?referrer=shane_st_pierre

Drs in black the true accomplishments of anthony (free version)

https://www.minds.com/newsfeed/1201998940688424960?referrer=shane_st_pierre

DR trying to shout to us

https://www.minds.com/newsfeed/1201998940688424960?referrer=shane_st_pierre

Seniors Are DYING LIKE FLIES After COVID Injections! SPEAK OUT!!!

<https://www.minds.com/newsfeed/1203236415076900864>

Doctors Around the World Issue Dire WARNING DO NOT GET THE COVID VACCINE
<https://healthimpactnews.com/2020/doctors-around-the-world-issue-dire-warning-do-not-get-the-covid-vaccine/>

Bill gates all info

https://www.minds.com/newsfeed/1200401440546729984?referrer=shane_st_pierre

bill g ates deleted interview

https://www.minds.com/newsfeed/1202766833210433536?referrer=shane_st_pierre

Vaccine testimonials

https://www.minds.com/newsfeed/1202823117431447552?referrer=shane_st_pierre

https://www.minds.com/newsfeed/1202823246205386752?referrer=shane_st_pierre

https://www.minds.com/newsfeed/1202822946550947840?referrer=shane_st_pierre

https://www.minds.com/newsfeed/1202822946550947840?referrer=shane_st_pierre

Bonus Videos Still worth a view

Fall of the Cabalhttps://www.minds.com/newsfeed/1202805792146927616?referrer=shane_st_pierre

About Mark & Cathy - TRANCE Formation Of America on MK Ultra

https://www.minds.com/newsfeed/1201038896295391232?referrer=shane_st_pierre

The Cathy O'Brien tales (MK Ultra + Mockingbird)

https://www.minds.com/newsfeed/1201035883799265280?referrer=shane_st_pierre

Facebook page set as store with all this content (for now)

<https://www.facebook.com/TGA-100375908747272>

HELP US SAVE OUR WORLD FROM EVIL

Urgent Mass Global Action To Stop Unlawful Government

https://www.minds.com/newsfeed/1208159056922611712?referrer=shane_st_pierre

Drs in black the true accomplishments of anthony (free version)

https://www.minds.com/newsfeed/1201992303404089344?referrer=shane_st_pierre

How a False Hydroxychloroquine Narrative Was Created. "Dangerous" When Used for Covid-19

https://www.minds.com/newsfeed/1208156497924272128?referrer=shane_st_pierre

BILL GATES BANNED Agenda

https://www.minds.com/newsfeed/1197929368878403584?referrer=shane_st_pierre

A DELETED BILL GATES DOCUMENTARY HAS BEEN REVIVED

https://www.minds.com/newsfeed/1206222583617277952?referrer=shane_st_pierre

Camera WHO Scientist trutha

https://www.minds.com/newsfeed/1198834292673699840?referrer=shane_st_pierre

ON THE ORIGINS OF THE 2019-NCOV VIRUS, WUHAN, CHIN (BUT REALLY WE
OUTSOURCED IT THEM PRIOR)

https://www.minds.com/newsfeed/1208163350479486976?referrer=shane_st_pierre

CONFIRMED: CHINESE PROPAGANDA CAMPAIGN FORCED WORLD INTO
DRACONIAN LOCKDOWN

https://www.minds.com/newsfeed/1208147584426237952?referrer=shane_st_pierre

Doctors Around the World Issue Dire WARNING DO NOT GET THE COVID VACCINE

https://www.minds.com/newsfeed/1203243644262182912?referrer=shane_st_pierre

What really happened to Hank Aaron?

https://www.minds.com/newsfeed/1200218218467205120?referrer=shane_st_pierre

More "side affects" from the cure that's 10x worse than the disease...

https://www.minds.com/newsfeed/1207163499635650560?referrer=shane_st_pierre

Fall of Cabal

https://www.minds.com/newsfeed/1202805792146927616?referrer=shane_st_pierre

Child Trafficking Survivor Speaks Out – Katie Groves

https://www.minds.com/newsfeed/1204490983883837440?referrer=shane_st_pierre

Amazon has a Dark Side - The truth behind Jeff Bazos 'stepping down' from Amazon

https://www.minds.com/newsfeed/1206319878738292736?referrer=shane_st_pierre

Fall of Cabal

https://www.minds.com/newsfeed/1202805792146927616?referrer=shane_st_pierre

https://www.minds.com/newsfeed/1208641565713084416?referrer=shane_st_pierre

Lastly: My Web Page Feel free to Join

<https://goodcitizen2021.wixsite.com/website/about>

Here's the list of patents (or the picture of just hard hard they have been publicly fucking us)

Below is a quick list of patents which deal with this 'new' coronavirus. Well there is a pretty recent patent as of July 4th, 2019 with this coronavirus. We know how most of these viruses are lab created and this provides some more reach or information to research!

20080076115 Abstract The invention provides compositions and methods for detecting the presence of SARS-coronavirus, for screening anti-SARS coronavirus agents and vaccines, and for reducing infection with plus-strand RNA viruses such as SARS-coronavirus. Type Application Filed November 3, 2004 Publication date March 27, 2008 Inventors

CORONAVIRUS PROTEINS AND ANTIGENS Publication number 20160339097 Abstract Disclosed herein are embodiments of a method for collecting, extracting or eluting proteins and antigens from cells infected with coronavirus. The coronavirus may be a porcine coronavirus, such as porcine epidemic diarrhea virus (PEDV) or porcine delta coronavirus (PDCoV). Also disclosed are embodiments of a composition comprising the coronavirus proteins and antigens, and embodiments of a method of using such a composition. Applications for the composition include, but are not limited to, use in the preparation of antibodies against the proteins and antigens, use as reference markers for coronavirus proteins, and/or use in an immunogenic composition, such as in a vaccine composition. Type Application Filed August 4, 2016 Publication date November 24, 2016 Applicant

CORONAVIRUS PROTEINS AND ANTIGENS Publication number 20190202868 Abstract Disclosed herein are embodiments of a method for collecting, extracting or eluting proteins and antigens from cells infected with coronavirus. The coronavirus may be a porcine coronavirus, such as porcine epidemic diarrhea virus (PEDV) or porcine delta coronavirus (PDCoV). Also disclosed are embodiments of a composition comprising the coronavirus proteins and antigens, and embodiments of a method of using such a composition. Applications for the composition include, but are not limited to, use in the preparation of antibodies against the proteins and antigens, use as reference markers for coronavirus proteins, and/or use in an immunogenic composition, such as in a vaccine composition. Type Application Filed March 15, 2019 Publication date July 4, 2019 Applicant

Coronavirus proteins and antigens Patent number Publication number 10280199 Abstract Disclosed herein are embodiments of a method for collecting, extracting or eluting proteins and antigens from cells infected with coronavirus. The coronavirus may be a porcine coronavirus, such as porcine epidemic diarrhea virus (PEDV) or porcine delta coronavirus (PDCoV). Also disclosed are embodiments of a composition comprising the coronavirus proteins and antigens, and embodiments of a method of using such a composition. Applications for the composition include, but are not limited to, use in the preparation of antibodies against the proteins and antigens, use as reference markers for coronavirus

proteins, and/or use in an immunogenic composition, such as in a vaccine composition. Type Grant Filed August 4, 2016 Date of Patent May 7, 2019 Assignee

Vaccine compositions and methods of treating coronavirus infection Publication number 20060286124 Abstract The present disclosure relates to compositions and methods for treating or preventing coronavirus infections. For example, compositions are provided that comprise a coronavirus S protein or N protein, fragment, or variant thereof, capable of eliciting a protective humoral and/or cell-mediated immune response, which compositions are useful for treating or preventing infection by coronavirus, such as the causative agent of SARS. Also, coronavirus S protein and N protein immunogen compositions are provided that include an adjuvant, such as Proteosome or Protollin, which may be used for treating or preventing infection caused by a coronavirus, such as a SARS coronavirus. Type Application Filed June 30, 2005 Publication date December 21, 2006 Applicant

Uncharacterized ORF3 in SARS-coronavirus is a cyclic-AMP-dependent kinase and a target for SARS therapy Publication number 20050276818 Abstract The present invention relates to novel methods for identifying antiviral agents which selectively interfere with viral proteins that cause the unique infectivity activity of the SARS-coronavirus in comparison to other non-SARS strains of coronavirus. In particular, the present invention relates to screening assays that identify agents which selectively inhibit cyclic-AMP dependent protein kinase activity of the SARS-coronavirus ORF3. The present invention also relates to screening assays that identify agents which selectively inhibit the interaction between SARS-coronavirus cyclic-AMP dependent protein kinase and a calcium dependent targeting molecule. Therefore the agents identified using the assays of the invention may have utility as antiviral agents. The present invention also relates to treatments for sever acute respiratory syndrome caused by a coronavirus, and particularly to treatments that affect the infectivity activity of the SARS-coronavirus. Type Application Filed May 17, 2005 Publication date December 15, 2005 Inventors

Uncharacterized ORF3 in SARS-coronavirus is a cyclic-AMP-dependent kinase and a target for SARS therapy Patent number Publication number 7504205 Abstract The present invention relates to novel methods for identifying antiviral agents which selectively interfere with viral proteins that cause the unique infectivity activity of the SARS-coronavirus in comparison to other non-SARS strains of coronavirus. In particular, the present invention relates to screening assays that identify agents which selectively inhibit cyclic-AMP dependent protein kinase activity of the SARS-coronavirus ORF3. The present invention also relates to screening assays that identify agents which selectively inhibit the interaction between SARS-coronavirus cyclic-AMP dependent protein kinase and a calcium dependent targeting molecule. Therefore the agents identified using the assays of the invention may have utility as antiviral agents. The present invention also relates to treatments for sever acute respiratory syndrome caused by a coronavirus, and particularly to treatments that affect the infectivity activity of the SARS-coronavirus. Type Grant Filed May 17, 2005 Date of Patent March 17, 2009 Assignee

Inactivated canine coronavirus vaccine Patent number Publication number 4567042 Abstract
An efficacious parenterally administered inactivated canine coronavirus vaccine which provides systemic, humoral protection and also protection of the intestinal tract in dogs from infection by virulent canine coronavirus is produced. A method for propagation of the canine coronavirus and its attenuation and a method of evaluating the effectiveness of a canine coronavirus vaccine in canines is also disclosed. Type Grant Filed June 7, 1984 Date of Patent January 28, 1986 Assignee

CANINE RESPIRATORY CORONAVIRUS (CRCV) SPIKE PROTEIN, POLYMERASE AND HEMAGGLUTININ/ESTERASE Publication number 20090081780 Abstract A canine respiratory coronavirus (CRCV) that is present in the respiratory tract of dogs with canine infectious respiratory disease and which has a low level of homology to the enteric canine coronavirus, but which has a high level of homology to all bovine coronavirus strains (e.g., Quebec and LY138) and human coronavirus strain OC43. Type Application Filed September 26, 2008 Publication date March 26, 2009 Applicant

PEPTIDE COMPOUNDS FOR DETECTING OR INHIBITING SARS CORONAVIRUS AND APPLICATION THEREOF Publication number 20100304363 Abstract Disclosed herein are peptide compounds and the application thereof to the detection and inhibition of SARS coronavirus. Composed of dipeptides, the compounds for detecting and inhibiting SARS coronavirus can be readily synthesized and produced at low cost. In addition, they can be stored safely for a long period of time. The dipeptide compounds are useful as inhibitors of SARS coronavirus as well as acting as excellent capturing materials of SARS coronavirus. Type Application Filed May 26, 2010 Publication date December 2, 2010 Applicant

Canine Respiratory Coronavirus (Crcv) Spike Protein, Polymerase and Hemagglutinin/Esterase Publication number 20070248616 Abstract A canine respiratory coronavirus (CRCV) that is present in the respiratory tract of dogs with canine infectious respiratory disease and which has a low level of homology to the enteric canine coronavirus, but which has a high level of homology to all bovine coronavirus strains (e.g. Quebec and LY138) and human coronavirus strain OC43. The CRCV spike, polymerase and hemagglutinin/esterase cDNA and protein partial sequences are listed in FIGS. (1) to (4), (13) and (14). Type Application Filed July 1, 2003 Publication date October 25, 2007 Inventors

Canine respiratory coronavirus (CRCV) spike protein Patent number Publication number 7981427 Abstract A canine respiratory coronavirus (CRCV) that is present in the respiratory tract of dogs with canine infectious respiratory disease and which has a low level of homology to the enteric canine coronavirus, but which has a high level of homology to all bovine coronavirus strains (e.g., Quebec and LY138) and human coronavirus strain OC43. Type Grant Filed September 26, 2008 Date of Patent July 19, 2011 Assignee

Methods and compositions for infectious cDNA of SARS coronavirus Publication number 20060240530 Abstract The present invention provides a cDNA of a severe acute respiratory syndrome (SARS) coronavirus, recombinant SARS coronavirus vectors, and SARS

coronavirus replicon particles. Also provided are methods of making the compositions of this invention and methods of using the compositions as immunogens and/or vaccines and/or to express heterologous nucleic acids. Type Application Filed January 19, 2006 Publication date October 26, 2006 Inventors

Compositions and methods for detecting severe acute respiratory syndrome coronavirus Publication number 20050095582 Abstract The invention provides compositions and methods for detecting the presence of SARS-coronavirus, for screening anti-SARS coronavirus agents and vaccines, and for reducing infection with plus-strand RNA viruses such as SARS-coronavirus. Type Application Filed November 3, 2003 Publication date May 5, 2005

Applicants

Compositions And Methods For Detecting Severe Acute Respiratory Syndrome Coronavirus Publication number 20110223659 Abstract The invention provides compositions and methods for detecting the presence of SARS-coronavirus, for screening anti-SARS coronavirus agents and vaccines, and for reducing infection with plus-strand RNA viruses such as SARS-coronavirus. Type Application Filed December 7, 2010 Publication date September 15, 2011 Inventors

Ribozyme to cleave coronavirus gene Publication number 20100273997 Abstract Provided is a ribozyme to cleave a coronavirus gene and a therapeutic agent for a coronavirus infectious disease. A common base sequence in coronaviruses such as SARS-CoV and MHV was searched to design a ribozyme including a base sequence complementary thereto. Moreover, a therapeutic agent for a coronavirus infectious disease including such ribozyme was obtained. Type Application Filed August 9, 2006 Publication date October 28, 2010 Inventors

Compositions and methods for treating coronavirus infection and SARS Publication number 20050002901 Abstract The present invention provides methods of treating a coronavirus infection, and methods of reducing viral load, or reducing the time to viral clearance, or reducing morbidity or mortality in the clinical outcomes, in patients suffering from a coronavirus infection. The present invention further provides methods of reducing the risk that an individual will develop a pathological coronavirus infection, that has clinical sequelae. The present invention further provides methods of reducing the risk that an individual will develop SARS.

The present invention further provides methods of treating SARS. The methods generally involve administering a therapeutically effective amount of a Type I or Type III interferon receptor agonist and/or a Type II interferon receptor agonist for the treatment of a coronavirus infection. Type Application Filed March 30, 2004 Publication date January 6, 2005 Inventor

FUSION PROTEINS OF RECOMBINANT SARS CORONAVIRUS STRUCTURAL PROTEINS, THEIR PRODUCTION AND USES Publication number 20100150923 Abstract Fusion proteins of recombinant SARS coronavirus structural proteins, their production and uses are provided.

An optimized SARS coronavirus S protein gene which can be highly expressed in the mammalian cell strains and SARS coronavirus S protein variants comprising deletion, modification or mutation amino acids 318-510 corresponding to SARS coronavirus S protein

are also provided. Type Application Filed June 13, 2006 Publication date June 17, 2010

Applicant


Civet animal model system for Severe Acute Respiratory Syndrome (SARS) coronavirus infection and uses thereof Publication number 20060123499 Abstract The present invention is directed towards the use of the masked palm civet *Paguma larvata* ("civet") as an animal model system for SARS, and is based on the novel demonstration of the present invention that civets may be infected with exogenous coronavirus, and that such infection produces SARS-like symptoms in these infected animals. The present invention is directed to a civet model system for the study of the infection, replication, and clinical effects of exogenously introduced human SARS-CoV coronavirus strains, civet SARS-CoV-like coronavirus strains, or variants or derivatives thereof, and to the development of vaccines (or other methods of prevention) or treatment of infection or transmission to other civets or humans of these human SARS-CoV coronavirus strains, civet SARS-CoV-like coronavirus strains, or variants or derivatives thereof.

Type Application Filed December 6, 2004 Publication date June 8, 2006 Inventors

METHODS AND COMPOSITIONS FOR CORONAVIRUS DIAGNOSTICS AND

THERAPEUTICS Publication number 20160238601 Abstract The present invention provides methods and compositions for detecting a coronavirus in a sample and identifying the subgroup of the coronavirus in the sample. Type Application Filed October 14, 2014

Publication date August 18, 2016 Inventors



I KNOW MILLIONS OF YOU LOST YOUR JOBS BECAUSE I SCARED YOU WITH FAKE VIRUS MODELS

BUT THIS IS A COMPLICATED PSYCHOLOGICAL OPERATION AND ECONOMIC COLLAPSE WAS PART OF OUR AGENDA

"Ready for the rabbit hole that connects all rabbit holes? CHECK THIS OUT:
As many of you heard Moderna is in the 3rd and final stage of their vaccine development. Here's something many of you don't know, guess who the first CEO of Moderna was? A Cornell graduate by the name of Anthony Fauci, who was a roommate with none other than Bill Gates. Are you paying attention? It was at Cornell that Bill Gates designed the RFID (Radio-frequency identification) and patented it under US2006257852. Are you awake yet? Now let's really go down the rabbit hole. Moderna was a pharmaceutical company that started in Germany under the name IG Farben. IG Farben is infamous for its mass production of Zyklon-B, the primary gas used to kill millions during the Holocaust. After Germany fell, IG Farben was dissolved and its assets sold off by a Nazi turned American by the name of, you guessed it, George Soros. Soros rebranded the company as Moderna. And who was the primary stockholder of Moderna until his death? Jeffrey Epstein. His role in Moderna is where he made his fortune and established his connections. Let that sink in. Wake up people! You are being conditioned and controlled.