

COVID Realities – long version

version 3.4 – August 22, 2021

Post to be updated continually. The original quotations and links were last checked June 14, 2021. Others added since then.

- A. **Seniors and Death Panel Policies, Denial of Healthcare (not shortage), Rationing, Criminal Negligence, Euthanasia**
- B. **Cell-programming Vaccines: New gene therapy technology never approved before**
- B.1. **Nature of the New Vaccines and Adverse Reactions**
- C. **The Facts Don't Add Up. Contradictions**
- D. **Agenda, Upheaval**
- E. **Articles by Researchers**
- F. **Legal Cases**
- G. **Overview / Conclusions**

A. Seniors and Death Panel Policies, Denial of Healthcare (not shortage), Rationing, Criminal Negligence, Euthanasia

Death Panel Policies

Ontario government "COVID" death panel policy: <https://www.thestar.com/news/canada/2020/03/29/ontario-developing-last-resort-guidelines-on-which-patients-to-prioritize-if-hospitals-are-overwhelmed-by-critical-covid-19-cases.html> "triage protocol' for doctors who may soon be forced to make ethically fraught decisions over **how to ration critical care beds ... life-or-death choices**" "**long-term-care [LTC] patients who meet specific criteria will also no longer be transferred to hospitals.**"

Canadian government "COVID" death panel policy: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/covid-19-pandemic-guidance-health-care-sector.html> "**LTC facilities ...admission of non-COVID-19 hospital patients**" "If COVID-19 does develop in LTC facility residents, they should be cared for **within the facility**" "resource allocation ... If patients are **not eligible** ...provided with **palliative care and/or pain management.**"

Canadian Medical Association "COVID" death panel policy: <https://policybase.cma.ca/en/viewer?file=%2Fdocuments%2FPolicypdf%2FPD20-03.pdf> "difficult decisions have to be made about

who receives critical care (e.g., ICU beds, ventilators)“ **“triage teams or committees ... lessening the moral burden”** “physicians receive **legal protection”** to remove **“fear of civil or criminal liability or professional discipline”** “giving **priority to younger patients and those with fewer coexisting conditions. ...”**

“COVID” death panel policies in action

<https://www.theglobeandmail.com/canada/article-how-shoring-up-hospitals-for-covid-19-contributed-to-canadas-long/> “one of **thousands of seniors discharged to nursing- and retirement homes as Ontario Quebec and other provinces rushed to clear beds”** “some hospitals, physicians and long-term care facility administrators were **discouraging families from sending infected nursing-home residents to the hospital, saying little could be done** to effectively treat [them].”**“most of the nursing- and retirement-home residents who have succumbed to COVID-19 ... *died inside the virus-stricken, understaffed facilities, while many of the hospital beds opened for coronavirus patients sat empty.*”**

<https://fao-on.org/en/Blog/Publications/health-2020> Financial Accountability Office: Before the COVID-19 outbreak: Ontario had “906 acute care beds, 357 critical care beds” “unoccupied.” By April 14, **measures “made available an additional 9,349 acute care beds, 2,077 critical care beds”** Measures included: **“cancelling elective surgeries** and other measures taken to free-up existing beds (including ***moving existing hospital patients to alternative places of care***.” “As of April 23, there were approximately **9,345 unoccupied acute care and 2,191 unoccupied critical care beds.**”

<https://www.ctvnews.ca/health/coronavirus/all-of-our-rooms-are-empty-hospital-ers-vacant-during-pandemic-1.4918208> Apr 29/20: “All of our rooms are empty’: Hospital ERs vacant during pandemic” “The lights have ... been turned off in some ... corridors,” **“not even staffing it with nurses”** **“more than 11 thousand unoccupied beds in hospitals across Canada...surgeries—almost 53 thousand—have been cancelled.”** Ontario: “35 people have died waiting for ...”

B. Cell-Programming Vaccines: New Gene Therapy technology never approved before

Informed Consent Treaties, Protection of Vaccine Manufacturers and Vaccine Coercion

<https://www.ft.com/content/13ddacc4-0ae4-4be1-95c5-1a32ab15956a> Bill Gates, Apr 9/20: we **“don’t have a choice”** about the

lock-downs. **“normalcy only returns when we’ve largely vaccinated the entire global population.”**

UNESCO Treaty and Informed

Consent: http://portal.unesco.org/en/ev.php-URL_ID=31058&URL_DO=DO_TOPIC&URL_SECTION=201.html Universal Declaration on Bioethics and Human Rights Article 6: 1. **“Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned . . .”**

Immunity or Vaccine Passports: Ontario government coercing COVID-19 vaccination via proof of vaccination

proposals: <https://globalnews.ca/news/7508640/ontario-to-issue-proof-of-coronavirus-vaccine/> Ontario’s health minister Christine Elliott: Proof of vaccination is **“going to be really important for people to have for travel purposes, perhaps for work purposes, for going to theatres or cinemas** or any other places where people will be in closer physical contact” *–even* **“when we get through the worst of the pandemic.”** No indication this novel situation will end.

Canada gives liability protection to COVID-19 vaccine

manufacturers: <https://globalnews.ca/news/7521148/coronavirus-vaccine-safety-liability-government-anand-pfizer/> **“The government has confirmed that coronavirus vaccine manufacturers are protected from liability”** Procurement Minister Anand: **“indemnification clauses** in vaccine contracts are standard” **“novel technologies like this.”**

Canadian government offers financial compensation for COVID-19 vaccine

adverse reactions: <https://nationalpost.com/news/liberals-announce-a-vaccine-harms-compensation-program> Government **“financial support for anyone who suffers an ‘adverse reaction’ from a COVID-19 vaccine** approved by Health Canada”

B.1. Nature of the New Vaccines and Adverse Reactions

Canada, UK release Pfizer-BioNTech, adverse

reactions: <https://www.msn.com/en-ca/news/canada/covid-19-health-canada-approves-pfizer-biontech-vaccine-ontario-reports-1-890-new-cases/ar-BB1bMIIZ> **“Health Canada approves Pfizer-BioNTech vaccine”** **“Health Canada is reviewing three other vaccine candidates, including one from Moderna”** **“expedited the review”** **“assessment of the evidence”** **“never zero risk in taking any kind of pharmaceutical”** UK **“warned that two people had severe allergic reactions on the first day”** UK **“asked people who are prone to severe allergic reactions to**

not get the vaccine for now "Priority ... to residents and workers in long-term care, front-line health workers, adults in Indigenous communities ... seniors over the age of 80."

COVID-19 Vaccines Released in Canada

Government of Canada Drug Product

Database: <https://www.canada.ca/en/health-canada/services/drugs-health-products/drug-products/drug-product-database.html>. Click "Search the Drug Product Database." Specify "COVID-19 Vaccine" in Product name field and click "Search."

Results for "COVID-19 Vaccine" (as of June 14, 2021) show:

1. Two DIN numbers for ASTRAZENECA COVID-19 VACCINE. Both are on the "COVID-19 – IO – Authorization" and on "Schedule D." One has a "Marketed" status and the other has the status of "Authorized by Interim Order. Main active ingredient is "CHADOX1-S [RECOMBINANT]." Both link to the same product

monograph: https://pdf.hres.ca/dpd_pm/00060604.PDF

2. One DIN comes up for "COVID-19 VACCINE MODERNA". Same two schedules: D and "COVID-19 – IO – Authorization," status "Marketed". Main active ingredient: "MRNA-1273 SARS-COV-2". Product

monograph: https://pdf.hres.ca/dpd_pm/00061538.PDF

3. One DIN comes up for "JANSSEN COVID-19 VACCINE". Same two schedules: D and "COVID-19 – IO – Authorization," status "Authorized by Interim Order." Main active ingredient is "AD26.COVS.S [RECOMBINANT]".

Product monograph: https://pdf.hres.ca/dpd_pm/00060600.PDF.

4. One DIN comes up for "PFIZER-BIONTECH COVID-19 VACCINE." Same two schedules: D and "COVID-19 – IO – Authorization," status "Marketed." Main active ingredient is "TOZINAMERAN." Product monograph

is: https://pdf.hres.ca/dpd_pm/00060921.PDF. (This document has "Date of Revision: May 19, 2021" whereas the original document described above is https://pdf.hres.ca/dpd_pm/00059112.PDF which just has the "Initial Date of Authorization: Dec. 9, 2020"). The contents of the earlier version of this document is summarized above.

Pfizer-Biontech COVID-19 Vaccine monograph

How to find product monograph for Pfizer-Biontech COVID-19 Vaccine and others: <https://www.canada.ca/en/health-canada/services/drugs-health-products/drug-products/drug-product-database.html> Search Drug Product Database. The monograph for Pfizer-Biontech COVID-19

Vaccine https://pdf.hres.ca/dpd_pm/00059112.PDF. The following information was recorded in December 2020 (noted in case the document information has changed since then).

->a) From Product Monograph for Pfizer-Biontech COVID-19 Vaccine:
"The **nucleoside-modified messenger RNA** in Pfizer-BioNTech COVID-19 Vaccine is formulated in lipid **nanoparticles**, which enable delivery of the RNA into host cells to allow expression of the SARS-CoV-2 S **antigen**.
...elicits both neutralizing antibody and cellular immune responses to the spike (S) antigen, which **may contribute to protection ...**" "**new method (messenger RNA -mRNA**, the genetic code for a piece of the virus) to help our bodies make"

->b) "**Non-medicinal ingredients** *ALC-0315 = ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate) *ALC-0159 = 2-[(**polyethylene glycol**)-2000]-N,N-ditetradecylacetamide *1,2-Distearoyl-sn-glycero-3-phosphocholine *cholesterol *dibasic sodium phosphate dihydrate *monobasic potassium phosphate *potassium chloride [etc.]

->c) "It may take until **7 days after the second dose** ... to develop protection against COVID-19. As with any vaccine, ... **may not fully protect all those who receive it.**" "should be postponed in individuals suffering from **acute severe febrile illness.**" "The **safety** and efficacy ... **in children under 16 years of age** have not yet been established." "You should not receive ... if: *you are **allergic to any of the ingredients** ... *have **any symptoms** that could be due to COVID-19."

->d) "**talk to your healthcare professional before** you receive [this vaccine]. Talk about any health conditions or problems ... including if you: *have had any problems following previous administration of [it] such as an allergic reaction or breathing problems. *have a weakened immune system due to ... *have a bleeding problem, bruise easily or use a blood thinning medication. ***are pregnant, think you may be pregnant or plan to become pregnant** *are breast-feeding." "**Reproduction and developmental toxicology studies in animals have not been completed.**"

->e) **Summarizing 2nd dose results (7 days) for "56 years years of age+"** 1660 people replied yes or no: Redness: 7.2%, **Severe: 0.5% (8 people)**. Swelling: 7.5%, **Severe: 0.2% (3 people)**. Pain at the injection site: 66.1%, **Severe: 0.5% (8 people)**. Fever: $\geq 38.0^{\circ}\text{C}$: 10.9% (181 people), **>38.9°C: 0.3% (5 people)**. Fatigue: 50.5% (**838 people**), **Severe: 2.8% (46 people)**. Headache: 39% (**647 people**), **Severe: 0.5% (8 people)**. Chills: 22.7%

(377 people), **Severe: 1.0% (16 people)**. Vomiting: 0.7% (11 people), **Severe: 0.1% (2 people)**. Diarrhea: 8.3% (138 people), **Severe: 0.1% (2 people)**. New/worsened muscle pain: 28.7% (476 people), **Severe: 1.0% (16 people)**. New/worsened joint pain: 18.9% (313 people), **Severe: 0.4% (6 people)**.

->f) For "unsolicited adverse events" over 30 days: "In Study 2, in participants 56 years of age and older (Pfizer-BioNTech COVID-19 Vaccine = 7960, placebo = 7934), **serious adverse events were reported by 0.8% of participants**" **0.8% of 7960 is 64 people**. (For the "placebo" 0.6% of 7934 is 48 people).

UK government advice on Pfizer COVID-19 vaccine:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/943417/Information_for_health_care_professionals.pdf "Reg 174 Information for UK Healthcare Professionals"

Earlier version of this document from Dec, 2020: "COVID-19 mRNA Vaccine BNT162b2 is not recommended during **pregnancy**." "should be advised to **avoid pregnancy** for at least 2 months ..." "should not be used during **breast-feeding**." "**unknown** whether ...[it]... has an impact on **fertility**." The May 2021 (and March 2021) update does not have those statements but does include the following: "It is unknown whether the COVID-19 mRNA Vaccine BNT162b2 is excreted in human milk." "There is limited experience with use of the COVID-19 mRNA Vaccine BNT162b2 in pregnant women. . . . Administration of the COVID-19 mRNA Vaccine BNT162b2 in pregnancy should only be considered when the potential benefits outweigh any potential risks for the mother and foetus."

Pfizer COVID-19 adverse reactions in UK and government allergy warnings, December 9,

2020: <https://www.theguardian.com/world/2020/dec/09/pfizer-covid-vaccine-nhs-extreme-allergy-sufferers-regulators-reaction> "after **two people with a history of significant allergic reactions responded adversely yesterday**." MHRA: "**Any person with a history of a significant allergic reaction to a vaccine, medicine or food ... should not receive the Pfizer/BioNtech vaccine. Resuscitation facilities should be available at all times** ..."

Concerns about new COVID-19 vaccines: <https://www.msn.com/en-us/news/us/doctors-and-nurses-want-more-data-before-championing-vaccines-to-end-the-pandemic/ar-BB1becTK?scrllybrkr=082d5c6b>

Jeffrey A. Hirschfield, pediatrician:

"These **mRNA vaccinations have never been approved before, so there is no reliable track record of safety ... It typically takes five to**

10 years to successfully develop and vet vaccine candidates, especially those relying on new technologies.”

Explanation of new vaccine technology and long-term safety concerns: <https://www.jpost.com/health-science/could-an-mrna-vaccine-be-dangerous-in-the-long-term-649253> **“Could mRNA COVID-19 vaccines be dangerous in the long-term?”** “these will be the **first-ever messenger RNA (mRNA) vaccines brought to market for human patients**” “**know virtually nothing about their long-term effects**” “It uses a sequence of genetic RNA material produced in a lab that, when injected into your body, must **invade your cells and hijack your cells’ protein-making machinery called ribosomes to produce the viral components** that subsequently train your immune system to fight the virus.” “Brosh said that this does not mean the vaccine changes people’s genetic code. ... it is more like a USB device (the mRNA) that is inserted into a computer (your body). It does not impact the hard drive of the computer but runs a certain program.” “**unique and unknown risks to messenger RNA vaccines, including local and systemic inflammatory responses that could lead to autoimmune conditions.**”

Nature of new vaccine technology and early reactions: https://www.theepochtimes.com/hundreds-sent-to-emergency-room-after-getting-covid-19-vaccines_3644148.html **“Hundreds Sent to Emergency Room After Getting COVID-19 Vaccines”** | January 5, 2021: “Hundreds of people who received one of the new vaccines, including one from Moderna, were sent to hospital emergency rooms, according to data that was reported to federal authorities through Jan. 5. . . . Both vaccines are **new types that use Messenger RNA, a molecule that teaches a body’s cells to make a spike protein that then triggers an immune response. That differs from vaccines of the past,** which deliver a weakened or inactivated germ into bodies to activate a response.”

Concerns about Pfizer COVID vaccine by scientists: https://www.scribd.com/document/487083552/Wodarg-Yeadon-EMA-Petition-Pfizer-Trial-FINAL-01DEC2020-en-Unsigned-With-Exhibits#from_embed Dec 1/20 petition to the European Medicines Agency (EMA) to suspend all SARS CoV 2 vaccine studies, particularly the BioNtech/Pfizer study. Filed by Dr. Michael Yeadon, ex-Pfizer head of respiratory research and Dr. Wolfgang Wodarg. They explain their concerns about the **validity of the PCR testing** (p. 2), the potential for **cytokine storms** (hyperinflammatory over-reactions) (p. 4), possible allergic reactions to **polyethylene glycol** (p.5), and the possibility of female **infertility** (p. 5).

Adverse Events Database(s) for Canada

1. Canada Vigilance Adverse Reaction Online Database: <https://www.canada.ca/en/health-canada/services/drugs-health-products/medeffect-canada/adverse-reaction-database.html>. As of June 14, 2021, this database only includes data up to February 28, 2021 so it only has earlier reports on the COVID-19 vaccines. See #2 for more up to date information. Click "Search the Adverse Reaction Database," specify Section 3: Keyword Search: "COVID-19 VACCINE". Click "Find Health Products" next to that. Select "Select All Below" in the list. Click "Search" at the bottom. Click "Standard View" and "Continue". Read through the 116 results (I think only two of the vaccines were available at the time).

2. Government of Canada page that is updated weekly: **Reported side effects following COVID-19 vaccination in Canada:** <https://health-infobase.canada.ca/covid-19/vaccine-safety/>. Note the disclaimer: "Information is collected on individuals for whom an report was submitted, not on the total number of individuals who experience an adverse event as not every adverse event is reported." The weekly report (updated June 11, 2021) shows data collected up to and including June 4, 2021. Total adverse event reports: 6,864. 1,391 "were considered serious." In any case, the page admits that not every event is reported. Scroll down to Figure 4. Click "Show More Adverse Events" to see the complete list. Click "Figure 4: Text Description"

Most frequently reported adverse events (serious and non-serious combined) up to and including June 4, 2021 (n=19,591)

Most frequently reported adverse events Number of adverse events

Vaccination site pain 1,196
Pruritis (itching) 907
Vaccination site erythema (redness) 903
Paraesthesia (tingling or prickling) 898
Headache 831
Vaccination site swelling 702
Nausea 642
Fatigue 623
Urticaria (hives) 611
Dyspnoea (laboured breathing) 610
Vaccination site warmth 565
Erythema (redness) 531
Fever ≥ 38°C 524

Dizziness 523
Hypoaesthesia (numbness) 455
Chills 400
Pain 397
Vaccination site pruritus (itching) 367
Adenopathy/lymphadenopathy (swollen lymph nodes) 359
Throat tightness 355
Vaccination site reaction 353
Vomiting 334
Rash 318
Diarrhea 308
Chest discomfort 305
Vaccination site cellulitis 300
Arthralgia (joint pain) 287
Dysphagia (difficulty swallowing) 279
Rash generalized (non-allergic) 278
Myalgia (muscle pain) 255
Tachycardia (fast heartbeat) 243
Pain in extremity 236
Malaise (discomfort) 231
Cough 209
Swollen tongue 206
Vaccination site rash 203
Feeling hot 202
Vaccination site induration (hardness) 199
Swelling face 196
Asthenia (weakness) 188
Abdominal pain 186
Lip swelling 182
Flushing 180
Bell's Palsy/facial paralysis 175
Dysphonia (hoarse voice) 172
Chest pain 171
Oropharyngeal pain (throat pain) 145
Dermatitis allergic 139
Vaccination site inflammation 131
Hyperhidrosis (excessive sweating) 131
Pharyngeal swelling (throat swelling) 125
Hypoaesthesia oral (numbness oral) 113
Throat irritation 110
Extensive swelling of vaccinated limb 102

Thrombosis with thrombocytopenia syndrome (TTS) is characterized as blood clotting with low platelet levels. Vaccine-Induced Immune

Thrombotic Thrombocytopenia (VITT), also known as Vaccine-Induced Prothrombotic Immune Thrombocytopenia (VIPIT), is characterized as TTS that seems to be vaccine-induced due to the laboratory-confirmed presence of platelet factor (PF) 4 antibodies.

Up to and including June 4, 2021, there were 50 cases of TTS in Canada with reports submitted to PHAC or to Health Canada. Of the TTS cases:

- Six people died.

Myocarditis is inflammation of the heart muscle and pericarditis is inflammation of the lining around the heart.

Up to and including June 4, 2021, there were 35 cases of myocarditis/pericarditis with reports submitted to PHAC or Health Canada. Of the myocarditis/pericarditis cases:

- 25 cases received Pfizer-BioNTech COVID-19 vaccine, 6 cases received Moderna vaccine, 3 cases received COVISHIELD/AstraZeneca vaccines, and the vaccine name of one was not specified

To date, no clear association has been established between myocarditis/pericarditis and COVID-19 vaccines.

*Up to and including June 4, 2021, **a total of 104 deaths were reported after the administration of a vaccine.** Following medical case review using the WHO-UMC causality assessment categories, it has been determined that:*

- 43 are still under investigation
- 40 of these deaths are unlikely linked to a COVID-19 vaccine
- 15 deaths could not be assessed due to insufficient information.
- 6 deaths followed a diagnosis of TTS (refer to the Thrombosis with Thrombocytopenia Syndrome bullet above)

U.S. Adverse Events Database

Vaccine Adverse Event Reporting

System: <https://vaers.hhs.gov/data.html>. Check "I have read and understand the disclaimer" and click "Search CDC Wonder". Click "I Agree" at the bottom of the next page. Click "VAERS Data Search". In Section 1, "Group Results By" is set to "Symptoms" for first line. Then set next line "And By" to "Vaccine". In Section 3, in the Browse dialog, select "+COVID19 (COVID19 VACCINE)". Scroll to the bottom of the page and click "Send". The results as of June 14, 2021 (many reports) include **4,164 deaths**.

European Adverse Reactions Database: EudraVigilance

<https://www.adrreports.eu/en/index.html>: "EudraVigilance – European database of suspected adverse drug reaction reports"

Click <https://www.adrreports.eu/en/disclaimer.html>. Click "Accept."

Click "Suspected adverse drug reaction reports for

Substances" https://www.adrreports.eu/en/search_subst.html. Click

'C.' Scroll down to find the four COVID vaccines (as of August 22, 2021):

COVID-19 MRNA VACCINE MODERNA (CX-024414)

COVID-19 MRNA VACCINE PFIZER-BIONTECH (TOZINAMERAN)

COVID-19 VACCINE ASTRAZENECA (CHADOX1 NCOV-19)

COVID-19 VACCINE JANSSEN (AD26.COV2.S).

Click on one of them to see the data, for example, "COVID-19 MRNA VACCINE PFIZER-BIONTECH (TOZINAMERAN)." The tab for "Number of Individual Cases" comes up. "The number of individual cases identified in EudraVigilance for TOZINAMERAN is 370,390 (up to 21/08/2021)." Click "Number of Individual Cases By Reaction Groups." It will show a list of "Reaction Groups" or types of disorders. Click on any of them and click "Switch to Table". You can move the mouse to the horizontal bar for any of the reaction groups, e.g. "Nervous system disorders" and, moving from left to right, the pop-up window will show you the number of cases for each age range. Click on the list of reaction groups (any of them) and "Switch to Table" and it will show you the complete table. The first column is the name of the Reaction Group followed by the number of cases for each Age Group: Not Specified, 0-1 Month, 2 Months – 2 Years, 3-11 Years, 12-17 Years, 18-64 Years, 65-85 Years, More than 85 Years:

Blood and lymphatic system disorders 1,297 7 8 1 140 20,108 1,795 308 23,664

Cardiac disorders 1,276 4 4 2 303 15,650 4,527 1,477 23,243

Congenital, familial and genetic disorders 45 0 1 0 3 127 34 8 218

Ear and labyrinth disorders 593 1 1 1 51 8,603 1,953 218 11,421

Endocrine disorders 49 0 0 0 2 447 87 14 599

Eye disorders 865 4 2 2 107 9,726 2,402 350 13,458

Gastrointestinal disorders 3,811 21 56 11 545 60,563 10,397 2,198 77,602

General disorders and administration site conditions 13,461 62 106 26 1,260 174,646 30,862 7,678 228,101

Hepatobiliary disorders 50 0 0 0 11 491 307 81 940

Immune system disorders 706 2 4 1 80 7,255 1,173 230 9,451

Infections and infestations 3,822 7 19 6 169 15,936 6,474 2,195 28,628

Injury, poisoning and procedural complications 1,195 20 136 17 99 7,118 1,949 511 11,045

Investigations 1,506 9 12 1 187 14,456 4,306 1,240 21,717

Metabolism and nutrition disorders 358 1 21 2 54 3,816 1,571 606

6,429
 Musculoskeletal and connective tissue disorders 5,925 27 17 8 476
 93,949 13,848 1,693 115,943
 Neoplasms benign, malignant and unspecified (incl cysts and polyps)
 125 0 0 0 5 278 195 49 652
 Nervous system disorders 8,510 48 51 15 1,068 119,897 20,146
 3,844 153,579
 Pregnancy, puerperium and perinatal conditions 140 10 0 0 0 838 6 0
 994
 Product issues 23 0 0 0 3 106 19 6 157
 Psychiatric disorders 1,077 5 32 2 86 11,017 2,539 845 15,603
 Renal and urinary disorders 239 1 0 1 28 1,520 824 295 2,908
 Reproductive system and breast disorders 1,188 0 2 1 142 10,938 284
 32 12,587
 Respiratory, thoracic and mediastinal disorders 2,105 14 20 4 289
 26,761 7,095 2,114 38,402
 Skin and subcutaneous tissue disorders 2,322 11 26 10 358 30,901
 6,918 1,383 41,929
 Social circumstances 144 1 0 0 3 1,070 235 57 1,510
 Surgical and medical procedures 48 1 1 0 1 523 102 36 712
 Vascular disorders 1,316 5 6 3 133 15,227 6,021 1,526 24,237
Total 23,523 117 217 45 2,574 268,033 60,512 15,369

All of this makes me think there should be a choice, informed consent.

https://www.theepochtimes.com/us-starts-study-of-allergic-reactions-to-moderna-pfizer-covid-19-vaccines_3766106.html, "US Starts Study of Allergic Reactions to Moderna, Pfizer COVID-19 Vaccines" | April 7, 2021 | www.theepochtimes.com. "... The **phase two trial (https://clinicaltrials.gov/ct2/show/NCT04761822)** will examine whether people with a history of allergic reactions or who have a mast cell disorder are at increased risk of an immediate, systemic allergic reaction to the vaccines made by Moderna and Pfizer-BioNTech.... The agency didn't immediately respond to an inquiry asking why it's taken so long to launch a trial exploring allergic reactions to vaccines. . . Both Moderna and Pfizer received **emergency use approval** for the COVID-19 shots in December 2020. . . . More than 168 million doses have been administered in the United States as of April 6. All but 4.3 million are from Moderna or Pfizer. . . ."

Additional Reports of Adverse Reactions

https://www.cdc.gov/mmwr/volumes/70/wr/mm7002e1.htm?s_cid=mm7002e1_w, Allergic Reactions Including Anaphylaxis After Receipt of the First Dose of Pfizer-BioNTech COVID-19 Vaccine — United States, December 14–23, 2020 | January 15, 2021

From the Summary: "Anaphylaxis is a **severe, life-threatening allergic reaction** . . . During December 14–23, 2020, monitoring by the Vaccine Adverse Event Reporting System detected 21 cases of anaphylaxis after administration of a reported 1,893,360 first doses of the Pfizer-BioNTech COVID-19 vaccine . . . Locations administering COVID-19 vaccines should adhere to CDC guidance for use of COVID-19 vaccines, including **screening recipients for contraindications and precautions**, having the necessary supplies available to manage anaphylaxis, implementing the recommended postvaccination observation periods, and immediately treating suspected cases of anaphylaxis with intramuscular injection of epinephrine."

https://youtu.be/sSD_g4vCwIg **"Nurse faints after receiving COVID-19 vaccine"** Dec 17/20 "Nurse Manager Tiffany Dover faints while speaking to the media about receiving the Pfizer COVID-19 vaccine" (background shows: "Chi Memorial")

https://youtu.be/zp_zNSEW1wc **"COVID-19 vaccine reactions: Families describe adverse responses to shot"**. **NewsNOW from FOX** | June 28, 2021. "Sen. Ron Johnson holds a news conference in Milwaukee, Wisconsin, with families from across the country who share their experiences regarding adverse reactions to COVID-19 vaccines." In this video, the two women describe severe reactions and suffering. The first describes her own and the second describes her daughter's.

https://www.theepochtimes.com/mkt_morningbrief/4th-us-site-pauses-covid-19-vaccinations-after-adverse-reactions_3770213.html?utm_source=morningbriefnoe&utm_medium=email2&utm_campaign=mb-2021-04-11 **"4th US Site Pauses COVID-19 Vaccinations After Adverse Reactions"** By Zachary Stieber | April 10, 2021 | www.theepochtimes.com. "Injections at the Cumming Fairgrounds in Forsyth County have been halted after eight people experienced adverse reactions post-vaccination, the Georgia Department of Health said Friday. . . . All eight received Johnson & Johnson's COVID-19 vaccine. . . . A site in Iowa also experienced post-vaccination adverse reactions, Georgia officials said Friday. . . ."

https://www.theepochtimes.com/no-cause-for-concern-after-jj-vaccine-causes-site-to-shut-down-in-colorado_3769124.html **"No Cause for Concern' After J&J Vaccine Causes Site to Shut Down in Colorado** By Jack Phillips | April 9, 2021 | www.theepochtimes.com

https://www.theepochtimes.com/vaccination-site-halts-operations-after-adverse-reactions-to-johnson-johnson-vaccine_3768802.html **"Second Vaccination Site Halts Operations After Adverse Reactions to Johnson & Johnson Vaccine"** By Isabel van

Brugen | April 9, 2021 | www.theepochtimes.com. "Four people were taken to hospital for further observation. . . . A vaccination site in Wake County, North Carolina, paused operations on Thursday after 18 adverse reactions to the Johnson & Johnson [COVID-19 vaccine] . . ."

<https://www.nih.gov/news-events/news-releases/nih-begins-study-allergic-reactions-moderna-pfizer-biontech-covid-19-vaccines> "NIH begins study of allergic reactions to Moderna, Pfizer-BioNTech COVID-19 vaccines" | Wednesday, April 7, 2021 | nih.gov "The public understandably has been concerned about reports of rare, severe allergic reactions to the Moderna and Pfizer-BioNTech COVID-19 vaccines," said Anthony S. Fauci, M.D., director of the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health..."

https://www.theepochtimes.com/severe-allergic-reactions-to-covid-19-vaccines-happening-at-higher-rate-than-flu-vaccines_3646371.html "Severe Allergic Reactions to COVID-19 Vaccines Occurring at Higher Rate Than Flu Shots" | January 6, 2021 "Officials at the Centers for Disease Control and Prevention (CDC) said that the reactions, known as anaphylaxis, are happening at a rate of 11.1 per million vaccinations. With flu vaccines, anaphylaxis occurs at a rate of 1.3 per 1 million injections. ..." "Twenty-one people experienced severe allergic reactions out of those who received the first 1.89 million doses of the Pfizer-BioNTech COVID-19 vaccine, which were administered between Dec. 14 and Dec. 23, 2020."

https://www.theepochtimes.com/european-regulator-probing-possible-link-between-blood-clots-and-jj-covid-19-vaccine_3769199.html "European Regulator Probing Possible Link Between Blood Clots and J&J COVID-19 Vaccine" | April 9, 2021: "A small number of people who received Johnson & Johnson's COVID-19 vaccine have developed **blood clots**, the European Medicines Agency said Friday . . . Another COVID-19 vaccine, from the UK-based AstraZeneca, was previously investigated by the European Medicines Agency after reports of post-vaccination **blood clots**."

https://www.theepochtimes.com/covid-19-vaccine-possibly-linked-to-rare-blood-clots-eu-agency_3765935.html "COVID-19 Vaccine 'Possibly' Linked to Rare Blood Clots: EU Agency" | April 7, 2021 Referring to the AstraZeneca COVID-19 vaccine, the "European Medicines Agency (EMA) 'is reminding healthcare professionals and people receiving the vaccine to remain aware of the possibility of very rare cases of blood clots combined with low levels of blood platelets occurring within 2 weeks of vaccination'." "Last month, more than a dozen European countries—including France, Germany, Italy, and Spain—suspended usage of the AstraZeneca

vaccine following reports of blood clots as well as several deaths in people who had received the shot." A local Spanish health official said, "We are not questioning AstraZeneca. We need all the vaccines possible to reach the goal of 70 percent of the adult population."

https://www.theepochtimes.com/clear-link-between-astrazeneca-vaccine-and-rare-blood-clots-in-brain-ema-official-tells-paper_3763965.html "Clear Link Between AstraZeneca Vaccine and Rare Blood Clots in Brain, EMA Official Tells Paper" | April 6, 2021 "The regulator has consistently said **the benefits outweigh the risks** [?] as it investigates **44 reports** of an **extremely rare** [?] **brain clotting ailment known as cerebral venous sinus thrombosis (CVST)** out of **9.2 million people** [!] in the European Economic Area who have received the AstraZeneca vaccine."

Video: https://players.brightcove.net/4137224153001/6aIMRO3kiI_default/index.html?videoId=6223242859001 "Norway adjusts advice for elderly and frail people after COVID-19 vaccine deaths"

<https://nypost.com/2021/01/15/23-die-in-norway-after-receiving-pfizer-covid-19-vaccine/> "23 die in Norway after receiving Pfizer COVID-19 vaccine: officials" | January 15, 2021 "...13 of those deaths — all nursing home patients — apparently related to the side effects of the shots, health officials said." Their idea of adjusting policy: "Those who are very frail and at the very end of life can be vaccinated after an individual assessment." "Besides those who died, nine had serious side effects — including allergic reactions, strong discomfort and severe fever — while seven had less serious ones, including severe pain at the injection site." Pharma rep: "Norwegian authorities have prioritized the immunization of residents in nursing homes, most of whom are very elderly with underlying medical conditions and some which are terminally ill . . .the number of incidents so far is not alarming, and in line with expectations. . . . The Norwegian government will also consider adjusting their vaccination instructions to take the patients' health into more consideration." Note: "Health officials noted that around 400 people die each week in the nursing home population." Observation: Same caveat could be made for COVID deaths. Note that deaths in the nursing homes have been affected by isolation policies, health rationing policies that push them out of the hospitals, surgery cancellations, the assertion that there is no effective treatment for COVID other than ventilators, and also by the early distribution of COVID vaccines which targeted the elderly along with other groups.

<https://legemiddelverket.no/nyheter/expert-group-has-assessed-deaths-amongst-the-frail-elderly-following-covid-19->

vaccination “Expert group has assessed deaths amongst the frail elderly following COVID-19 vaccination” | May 19, 2021 “Despite some uncertainty the group believes that a small number of the deaths is likely to be linked to the vaccine.”

<https://legemiddelverket.no/english/covid-19-and-medicines/vaccines-against-covid-19/reported-suspected-adverse-reactions-of-covid-19-vaccines> “Reported suspected adverse reactions of covid-19 vaccines” (as of August 22, 2021) “The Norwegian Medicines Agency publishes overviews of suspected adverse reactions associated with corona vaccination in Norway...” “Status as of August 17: Number of persons vaccinated (first dose): 3,776,404; **Reported suspected adverse reactions: 26,498; Assessed suspected adverse reactions: 15,228.**” The details of the adverse reactions reported in Norway are included in weekly reports like this one from August 17, 2021 (<https://legemiddelverket.no/Documents/English/Covid-19/20210819%20Reported%20suspected%20adverse%20reactions%20coronavirus%20vaccines.pdf>).

C. The Facts Don't Add Up. Contradictions

<https://www.brighteon.com/42ace589-01fc-4a2b-9654-20b0bf0bc315> Dr. Roger Hodkinson, a Royal College certified pathologist and CEO of a COVID testing business, told the Edmonton City Council Community and Public Services Committee Nov 13, 2020: “greatest hoax ...**absolutely nothing that can be done to contain this virus.**” “**nothing more than a bad flu season.**” He said that masks and social distancing were useless. “**positive test results do not ... mean a clinical infection. ... driving public hysteria and all testing should stop.**” “**The scale of the response ... with no evidence for it is utterly ridiculous given the consequences ...All kinds of suicides, business closures, funerals, weddings etc.**”

Majority have mild symptoms:

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-children.html> (Dec 18/20) “**Most people** who have gotten COVID-19 **have not gotten very sick. Only a small group ... who get it have had more serious problems**”

Children: CDC: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html> (Dec 18/20) “Most children with COVID-19 have mild symptoms or they may have no symptoms at all ...Fewer children have been sick with COVID-19 compared to adults...” On July 30/20, this read: “While **some children and infants have been sick with COVID-19, adults make up most of the known cases.**”

WHO guidelines instructing doctors how to fill out "cause of death" on death certificates, biasing the COVID-19 death count: https://www.who.int/classifications/icd/Guidelines_Cause_of_Death_COVID-19-20200420-EN.pdf?ua=1 For example, see "Chronic conditions ...Part 2 (p. 4)" ([archived](#))

<https://twitter.com/TOPublicHealth/status/1275888390060285967>
"Individuals who have died with COVID-19, but not as a result of COVID-19 are included in the case counts for COVID-19 deaths in Toronto."

Death counts included people who died with COVID-19 but not as a result of it: City of Toronto: "Individuals who have died with COVID-19, but not as a result of COVID-19 are included in the case counts for COVID-19 deaths ..." <https://twitter.com/TOPublicHealth/status/1275888390060285967>

Canadian official "COVID-19" deaths by age snapshot up to August 2, 2020: <https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html> COVID-19 deaths by age: 0-19: 1 death (0.0%), 20-29: 9 (0.1%), 30-39: 15 (0.2%), 40-49: 49 (0.6%), 50-59: 208 (2.3%), 60-69: 635 (7.1%), 70-79: 1,616 (18.2%), 80+: 6,364 (71.5%).

Official Canadian government "Count of deaths related to COVID-19" by province up to Aug 7, 2020: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html> Quebec: 5,687, Ontario: 2,783, Alberta: 205, BC: 195, Nova Scotia: 64, Saskatchewan: 19, Manitoba: 8, Newfoundland: 3, New Brunswick: 2, PEI: 0, Yukon: 0, NWT: 0, Nunavut: 0.

Compare top ten causes of death in Canada in a typical year and compare specifically the number of deaths for "Flu/pneumonia" to 2020 COVID-19 deaths: <https://www.finder.com/ca/what-are-the-top-10-causes-of-death-in-canada> Causes of death, Canada 2018: Cancer 79536 (218/day), Heart 53134 (146/day), Cerebrovascular 13480 (37/day), Accidents 13290 (36/day), Lower respiratory 12998 (36/day), "Flu/pneumonia" 8511 (23/day), Diabetes 6794 (19/day), Alzheimer's 6429 (17/day), Suicide 3811 (10/day), Kidney 3615 (10/day).

CASHLESS policies based on weak/contradictory statements:
CDC: <https://www.cdc.gov/media/releases/2020/s0522-cdc-updates-covid-transmission.html> (May 22/20): "may be possible that a person can get COVID-19 by touching a surface or object ... but this isn't thought to be the main way the virus

spreads.” <https://www.cdc.gov/coronavirus/2019-ncov/faq.html> “Although the virus **can survive for a short period on some surfaces, it is unlikely to be spread from domestic or international mail, products or packaging.** . . .” (accessed Dec 18/2020).

<https://www.nejm.org/doi/full/10.1056/NEJMe2002387> Anthony Fauci (Director of U.S. National Institute of Allergy and Infectious Diseases) contradicted extreme predictions “If one assumes that the number of asymptomatic or minimally symptomatic cases is several times as high as the number of reported cases, the **case fatality rate may be considerably less than 1%**. This suggests that the overall clinical consequences of Covid-19 may ultimately be more akin to those of a severe seasonal influenza (which has a case fatality rate of approximately 0.1%) or a pandemic influenza (similar to those in 1957 and 1968) rather than a disease similar to SARS or MERS, which have had case fatality rates of 9 to 10% and 36%, respectively.” *New England Journal of Medicine*, Mar 26/20, “Covid-19–Navigating the Uncharted.”

Testing

More testing generates more false “cases”! Dr. Barbara Yaffe, Ontario’s Associate Chief Medical Officer at press conference, July 30, 2020: <https://youtu.be/bFMT9vedB1w> (36:30) “you’ll **get false positives almost half the time.** ... **Testing** will not actually achieve anything other than take resources”

The following announcement indicates a rejection and phasing out of the PCR test by the CDC so that more normal, accurate and scientific testing can resume in 2022: https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html **07/21/2021: Lab Alert: Changes to CDC RT-PCR for SARS-CoV-2 Testing. Audience: Individuals Performing COVID-19 Testing Level: Laboratory Alert** “After December 31, 2021, CDC **will withdraw** the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019–Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel, the assay first introduced in February 2020 for detection of SARS-CoV-2 only ...” “CDC is providing this advance notice for clinical laboratories to have adequate time to select and implement one of the many **FDA-authorized alternatives** ...” Visit the FDA website (<https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas>) for a list of authorized COVID-19 diagnostic methods. For a summary of the performance of FDA-authorized molecular methods with an FDA reference panel, visit this page [

[medical-devices/sars-cov-2-reference-panel-comparative-data](#)].” “In preparation for this change, CDC recommends clinical laboratories and testing sites that have been using the CDC 2019-nCoV RT-PCR assay select and begin their transition to another FDA-authorized COVID-19 test. CDC encourages laboratories to consider adoption of a multiplexed method that can **facilitate detection and differentiation of SARS-CoV-2 and influenza viruses**. Such assays can facilitate continued testing for both influenza and SARS-CoV-2 and can save both time and resources as we head into **influenza season**. Laboratories and testing sites should **validate and verify their selected assay within their facility before beginning clinical testing.**”

<https://cormandrostenreview.com/report/> Review report Corman-Drosten et al. Eurosurveillance 2020:

“In case of virus detection, >35 cycles only detects signals which do not correlate with infectious virus as determined by isolation in cell culture ...; **if someone is tested by PCR as positive when a threshold of 35 cycles or higher is used (as is the case in most laboratories in Europe & the US), the probability that said person is actually infected is less than 3%, the probability that said result is a false positive is 97% ...**”

<https://www.msn.com/en-us/health/medical/experts-us-covid-19-positivity-rate-high-due-to-too-sensitive-tests/ar-BB18wE8B> “Experts: US COVID-19 positivity rate high due to ‘too sensitive’ tests” dailymail.com | August 30, 2020

“PCR tests analyze genetic matter from the virus in cycles and today’s tests typically take 37 or 40 cycles, but experts say this is too high because it detects **very small amounts of the virus that don’t pose a risk**. ... New York’s state lab Wadsworth analyzed cycle thresholds values in already processed COVID-19 PCR tests and found in July that 794 positive tests were based on a threshold of 40 cycles. **With a cutoff of 35, about half of those tests would no longer qualify as positive. About 70 percent would no longer be judged positive if the cycles were limited to 30.** ...”

<https://www.nytimes.com/2020/08/29/health/coronavirus-testing.html> “Your Coronavirus Test Is Positive. Maybe It Shouldn’t Be.” *New York Times* | August 29, 2020:

“The usual diagnostic tests may simply be too sensitive ... The standard tests are **diagnosing huge numbers of people who may be carrying relatively insignificant amounts of the virus. Most of these people are not likely to be contagious ...**”

<https://www.scribd.com/document/487083552/Wodarg-Yeadon-EMA-Petition-Pfizer-Trial-FINAL-01DEC2020-en-Unsigned-With->

Exhibits#from_embed Dec 1/20 petition to the European Medicines Agency (EMA) to suspend all SARS CoV 2 vaccine studies, particularly the BioNtech/Pfizer study. Filed by Dr. Michael Yeadon, ex-Pfizer head of respiratory research and Dr. Wolfgang Wodarg. They explain their concerns about the **validity of the PCR testing** (p. 2), the potential for **cytokine storms** (hyperinflammatory over-reactions) (p. 4), possible allergic reactions to **polyethylene glycol** (p.5), and the possibility of female **infertility** (p. 5).

D. The Agenda

<https://www.wsj.com/articles/the-coronavirus-pandemic-will-forever-alter-the-world-order-11585953005> **The Coronavirus Pandemic Will Forever Alter the World Order** by Henry A. Kissinger, *The Wall St. Journal*, April 3, 2020 "The U.S. must protect its citizens from disease while **starting the urgent work of planning for a new epoch.**"

<https://www.weforum.org/agenda/2020/06/now-is-the-time-for-a-great-reset> "Now is the time for a **'great reset'**" Jun 3/20, Klaus Schwab, Founder and Executive Chairman, World Economic Forum: "**world must act jointly and swiftly to revamp all aspects of our societies and economies.**" "**silver lining of the pandemic . . . radical changes to our lifestyles**" "the pandemic represents a rare but narrow **window of opportunity to reflect, reimagine, and reset our world.**"

<https://globalnews.ca/news/6788223/coronavirus-prisons-inmates-released> Apr 8/20: "Judges release growing number accused of violent crimes due to COVID-19 fears"

<https://www.usatoday.com/story/money/2020/12/01/american-billionaires-that-got-richer-during-covid/43205617/> "Over a roughly seven-month period ... America's **614 billionaires grew their net worth by a collective \$931 billion.**" "more than half a year later, more than 11 million Americans remain **unemployed** and many shops and restaurants will **never reopen.**"

<https://www.ft.com/content/13ddacc4-0ae4-4be1-95c5-1a32ab15956a> Bill Gates, Apr 9/20: we "**don't have a choice**" about the lock-downs. "**normalcy only returns when we've largely vaccinated the entire global population.**"

<https://www.gatesfoundation.org/about/committed-grants?q=World%20Health%20Organization> Bill Gates, through his foundation is the **main donor to the World Health Organization (WHO)** **<https://www.who.int/images/default->**

<source/infographics/budget/top-20.jpg> and also funds the **CDC** Foundation.

<https://www.gatesfoundation.org/about/committed-grants?q=Imperial%20College> Gates funds Imperial College London whose March 26, 2020 report predicted 40 million deaths <https://www.imperial.ac.uk/media/imperial-college/medicine/sph/ide/gida-fellowships/Imperial-College-COVID19-Global-Impact-26-03-2020v2.pdf> if we didn't follow special protocols.

[https://www.gatesfoundation.org/ideas/media-center/press-releases/2010/01/bill-and-melinda-gates-pledge-\\$10-billion-in-call-for-decade-of-vaccines](https://www.gatesfoundation.org/ideas/media-center/press-releases/2010/01/bill-and-melinda-gates-pledge-$10-billion-in-call-for-decade-of-vaccines). In 2010, Gates made a \$10 billion donation to the WHO and called for a decade of vaccines.

<https://www.youtube.com/watch?v=JaF-fq2Zn7I> In the same year, Gates presented a very interesting **TED Talk "Innovating to Zero" about carbon use and lowering human population** in which he referred to vaccines, geengineering and other topics.

<https://www.centerforhealthsecurity.org/event201/about> and <https://www.centerforhealthsecurity.org/event201/event201-resources/200117-PublicPrivatePandemicCalltoAction.pdf> Event 201 was a pandemic exercise Oct 18, 2019 by the **Gates Foundation**, Johns Hopkins Center for Health Security and the **World Economic Forum**.

<http://www.newdemocracyworld.org/culture/gates.html> In 2009, there were Gates Foundation funded tests of **experimental HPV vaccines** on 23,000 girls in India and 1,200 suffered severe side effects. Just one example, tip of an iceberg.

<https://www.youtube.com/watch?v=2v3vlw14NbM> (46:20-50:50) Mar 30/20, Dr. Michael Ryan, the Executive Director of WHO's Health Emergencies Program: "Now we need to go and look in families to find those people who may be sick and remove them and isolate them . . ."

E. Articles by Researchers

<https://denisrancourt.ca/categories.php?id=1&name=covid>, Article s on COVID by scientist, Denis Rancourt, PhD, Ontario Civil Liberties Association:

- **2021-08-06 ::: Analysis of all-cause mortality by week in Canada 2010-2021, by province, age and sex: There was no COVID-19 pandemic, and there is strong evidence of response-caused deaths in the most elderly and in young males**
- **2021-02-22 ::: Review of scientific reports of harms caused by face masks, up to February 2021**
- **2021-02-06 ::: REPORT ::: Analysis of the scientific basis for Ontario, Canada's mandatory face masking and physical distancing law, 2020**
- **2021-01-04 ::: OPINION – What I believe about COVID**
- **2020-12-28 ::: Measures do not prevent deaths, transmission is not by contact, masks provide no benefit, vaccines are inherently dangerous: Review update of recent science relevant to COVID-19 policy**
- **2020-11-10 ::: The Great VIRAL Debate (Off-Guardian) – Dr Rancourt's Closing Statement**
- **2020-08-20 ::: Evaluation of the virulence of SARS-CoV-2 in France, from all-cause mortality 1946-2020**
- **2020-08-03 ::: Face masks, lies, damn lies, and public health officials: "A growing body of evidence"**
- **2020-06-21 ::: LETTER – OCLA Asks WHO to Retract Recommendation Advising Use of Face Masks in General Population**
- **2020-06-02 ::: All-cause mortality during COVID-19 – No plague and a likely signature of mass homicide by government response**
- **2020-04-18 ::: REPORT ::: Criticism of Government Response to COVID-19 in Canada**
- **2020-04-11 ::: Masks Don't Work – A review of science relevant to COVID-19 social policy**

F. Legal Cases

<https://vaccinechoicecanada.com/wp-content/uploads/vcc-statement-of-claim-2020-redacted.pdf> Statement of Claim filed by Vaccine Choice Canada et al in the Ontario Superior Court of Justice | July 6, 2020

G. Overview / Conclusions / Response Needed

COVID is an excuse for changing our way of life.

Current measures violate many laws—including the *Criminal Code* with genocide being a key example—and are contrary to the Canadian Charter of Rights and Freedoms: <https://laws-lois.justice.gc.ca/eng/const/page-12.html#h-40> **Read and defend the basic rights of your fellow human beings.**

Healthy people are never quarantined, free societies are never “locked down.” The story is full of holes. Rights and freedoms provide safety from abuse if they are being upheld. We are not accepting a trashed economy, isolation, muzzles, immunity passport manacles or brands, and coerced injections. We are not betraying the privacy of ourselves or our contacts, including family and friends.

If you realize there is a problem, share information, challenge restrictions, and reach out to others for mutual support in the short-term and long-term.

The perpetrators must be prosecuted.

Value for value: Contributions are *needed*. If you find information of value, please **support** this effort to inform the public .