# Covid Handbook for Stupid People Like Me



December 25th, 2021 Rev-0

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### Friend please know:

- <u>I respect your choice</u> in how you personally choose to deal with Covid and whether or not you choose to get vaccinated.
- You or a family member will likely get Covid several times, <u>Covid is not</u> going away, even if everyone on the planet gets vaccinated with these current vaccines 3x or 10x.
- It is not an "if" statement, <u>it's a "when" statement</u>. For 83% getting Covid will be something between a mild cold to a brawl, for roughly 15% it will be a battle that includes oxygen and hospital stay, <2% will die.
- Whether you are vaccinated or unvaccinated, your odds of staying out of the hospital are very good, but those odds <u>can still be greatly</u> <u>improved with information you are not being told.</u>
- Because of the initial viral load that gets into you and the way Covid rapidly replicates within your body, what you do or don't do within the 1st few days of infection quite literally will determine how severely your fight with Covid will be. Thus I continually stress "PROMPT ACTION"
- Question; would you want only one side of an important health decision to be made available or all sides? Currently censorship is at an all-time high. In our freedom loving America, nearly everything anti-Covid vaccine has been removed from search engines, it's not on Twitter, it's not on Facebook or YouTube. I'm not an anti-vax'r, but I can think of no greater threat to freedom, than eliminating opposing opinions.
- Some of us ask why all the <u>sudden restriction of free speech</u>. So what that the opinions of some are counter to others. Why such <u>a mass assault</u> on letting people speak freely. <u>True Science is not afraid of questions</u>, <u>legitimate science is always questioning</u>.
- There is no reason to live in fear without vaccination, but you do need to know more about what you are up against so you'll know how to fight it. In any trial, faith in God, trusting Him brings peace. The death toll and hospitalizations can be cut in half with good information.
- The information contained in this pamphlet is a tiny fraction of what's out there, but it's some of stuff you need to know then you can make your own choices when you or someone in your family gets Covid.
- Dec 2020, Joe Biden weeks before taken office, says he would not mandate vaccination or mask wearing.

Helpful hint - Use a **red** marker on page edges for to identify information that you deem important, then you will easily be able to find it again.

#### Why am I Not Getting the mRNA or Vector Covid Vaccine? 12/25/21

It is an entirely personal question, yet you nor I should need any reason not to have something injected into our body, it's our body, thus it's our choice and nobody else's, period. Answering this question turned into a 3 month long journey because I learned that Covid has many facets, it's new and much is still being discovered.

It's also highly political and frankly there is a wide variety of opinions even between hundreds of studies about how to deal with it. The agencies charged with handling it (monitor disease, drug approvals, enforcing administration objectives, etc) are indeed politicized. The politicization of Covid is the last thing we needed, but it has been supercharged to be full of it. My decision not to get vaccinated requires a significant amount of contextual information which are found in Parts 1-7. President Biden said: "And my message to unvaccinated

Americans is this: What more is there to wait for? What more do you need to see? We've made vaccinations free, safe and convenient. We've been patient, but our patience is wearing thin." Joe's patience got thin all right, for the 1st time in American history, we now have an American president purposefully killing the American dream of many Americans. The Biden/Harris team are not only the leaders of our country, they real life American dream Terminators.



I'll begin with several disclosures and confessions that undeniably shape my opinions and may shape your opinion about me.

- 1) I am not against vaccinations, rather I embrace many kinds of medical treatments and procedures.
- 2) I have not encouraged anyone to either get or refrain from getting an mRNA or vector Covid vaccine because I consider such matters a personal choice. But I do believe you should not make that decision until you are fully informed.
- 3) I am not worried that I will get Covid any more than I am concerned about getting any other disease. It will happen, because Covid is not going away. I am advanced in age, death is in my near future, but I remind you, death is in your future too.
- 4) I am predisposed to be very suspicious of hospitals and pharmaceutical companies, while both can offer healing, both function much like casinos, by the time they get done with you, they'll own everything you have worked your entire life for. Partaking of either can also make you sicker and even kill you. I do not consider hospitals or <u>pharmaceutical industries</u> compassionate, rather just the opposite, I do my best to refrain from interfacing with either. My wife and I have living wills that limit our stay to a maximum of 2 days or \$20,000 whichever comes first. We've been able to hold to this for all of our married lives. 62% of bankruptcies are related to medical debt.
- 5) A street kid, I am among the uneducated having only a 9<sup>th</sup> grade education.
- 6) Politically a conservative with a Biblically based worldview, my faith is in God not in men.
- 7) The single biggest threat to America's future is not climate change, it's the Biden/Harris team, they are literally destroying America.

With these disclosures, I become the target for those who rail against the "dumb uneducated religious idiot's espoused to believe in nonsense produced on the web." I have been despised, maligned, shamed and discriminated against many times in my life because of my lack of education so its same-o, same-o for me. You are all smarter and more intelligent if that makes you feel better. If the Biden/Harris represent educated people, I want none of it. What I do know is it is their responsibility as the much more highly educated people to help me and other Americans understand Covid, to date they've failed.

The political muscle attached to Covid has caused me and 60-80 million other Americans to distrust much of what is being said. The President is using the full weight of federal power and administration to attack and to harm the innocent good hard working citizens of the United States. The Biden/Harris team has literally sought to crush Americans who disagree with them, not just verbally, but by using the full power and weight of government. We are wondering what the hell is going on? Why turn your misplaced anger on us? You promised you would unite Americans, yet you are willfully destroying the dreams of many Americans. No hostile foreign power could have better tools to shatter democracy and freedom than the Biden/Harris team.

#### Covid may be a bad virus, but the Biden/Harris team redefined it from an environmental virus to a political weapon against 60+ million Americans."

The political muscle behind Covid response has become a giant fire storm consuming American workers and

our families. The Biden/Harris team have fanned the political flames encouraging Americans to turn on one another, to not trust one another. Thank-you Mr. President. Good job Mrs. V. President. Because of you we learned that Covid is mainly about politics. And you have weaponized it to destroy us.

Here is the truth: For millions of hard working Americans; America now has a leadership team that we fear more than a deadly disease, because they are literally attacking us not just with words, but with the full weight and power of the government.

The Biden/Harris Covid Response is: "Terminate them from their jobs, burn down their American Dream and crucify them if they do not submit"

The Biden/Harris administration literally appears to dream up new ways to target a specific group of Americans. With all sincerity, we are deeply troubled our leadership because they appear willing to stop at nothing to destroy our American dream. Mr. President, I don't care what you say, that you go to church, or what you believe, when you destroy the lives of good Americans, you are a tool of the devil if not possessed by Satan himself.

Our country is divided the last several elections have revealed that, but why does Covid response have to be about politics? President Biden is creating homegrown terrorists faster than the Covid virus can create new variants. I ask you Mr. President, when you forcefully terminate hard working Americans, take away their ability to earn an income, deny prepaid unemployment benefits, do you not expect that by your actions you create millions of American's who have nothing left to lose? You are indeed a breeding factory of your own hate. By your actions, you are literally teaching Americans to destroy those who don't agree with them.

Because of the politicalized polarizing Covid propaganda we are being force fed, most of the relevant medical truth is being suppressed, I had to start digging. This document is the result. I'll set the stage with a broad overview of applicable topics surrounding Covid and the Covid vaccine response in Parts 1-7.

My goal in providing the basis for my choice is twofold; first that you will come away saying you learned something that you did not know before. This document has hundreds of embedded hyperlinks to relevant sources, to provide you with a deeper understanding of Covid. Second, hopefully to encourage discourse.

President Biden has referred to me as stupid, he has encouraged others to likewise malign, shame and hate people like me (*unvaccinated*) to such a degree that my choice not get vaccinated is akin to being a murderer. **OK**, we get it, the Biden/Harris team hates us, we're no fan of theirs either. In just 11 months they have clearly revealed themselves to be the worst leadership team our nation has ever had. There is no way we can separate Biden/Harris from Covid because they are using their power to force us into submission. I've expressed this several times already. Covid is seen much more as a weaponized political virus than a disease.

While I reviewed many complex documents and literature, my text and graphics will be overly simplified to convey a basic of understanding about relevant aspects surrounding Covid. Please click the links to not only read the entire article or document, but also to support the journalist, scientist, or medical professional who took the time to investigate a wide variety of matters surrounding Covid-19. *Notice*, some of the links may no longer work if they were removed by the author or censored away. I emailed this to you because you requested it, what you do with it afterwards is your responsibility. Within here you will find the basis for my opinion and my choice. The research admittedly relies on the work done by others much smarter than I. My opinion is just one opinion in the millions of opinions out there.

This turned into a project "Covid handbook for stupid people like me", which records my journey. I make no money and received no money to create this. contact - covid@the9thgrader.com

The 9th grader

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#### **PART-1 Common Infectious Diseases**

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As humans, we represent an amazing work of creation and design. The formation of the human body is masterful and intricate allowing us to function at a level far above many other species. Our bodies work both in cooperation with and yet against, a large variety of microscopic organisms or agents. Things we cannot see with our eye can overwhelm us causing a variety of sicknesses, diseases and death. Our goal is to live with an unseen balance between these pathogens

and our bodies. There are four main areas of harmful pathogenic concerns, viral (Covid is in this group), bacterial, fungal and parasite. Each group will generally have different methods of treatment.

Over this last century, we increasingly live in a manner that vastly increases our risks for getting diseases because of; a) concentrated areas of population (very large cities) b) accessible low cost travel options and purposeful efforts at globalization (moving people across national boundaries as if there was no boundaries). In this modern age, we move around between states and other countries with ease.

|                     | Disease           | Pathogen                   |  |  |  |  |  |
|---------------------|-------------------|----------------------------|--|--|--|--|--|
| Viral Diseases      | common cold       | Rhinovirus                 |  |  |  |  |  |
|                     | influenza         | Myovirus                   |  |  |  |  |  |
|                     | measles           | Paramyxovirus              |  |  |  |  |  |
|                     | mumps             | paramyxovirus              |  |  |  |  |  |
|                     | chickenpox        | Varicella zoster virus     |  |  |  |  |  |
|                     | AIDS              | HIV                        |  |  |  |  |  |
| Bacterial Diseases  | tuberculosis      | Mycobacterium tuberculosis |  |  |  |  |  |
|                     | typhoid           | Salmonella typhi           |  |  |  |  |  |
|                     | cholera           | Vibrio cholerae            |  |  |  |  |  |
|                     | tetanus           | Clostridium tetani         |  |  |  |  |  |
|                     | whooping cough    | Bordetella pertussis       |  |  |  |  |  |
|                     | pneumonia         | Streptococcus pneumoniae   |  |  |  |  |  |
| ungal Diseases      | thrush            | Candida albicans           |  |  |  |  |  |
|                     | athletes foot     | Tinea pedis                |  |  |  |  |  |
|                     | ringworm          | Tinea capititis            |  |  |  |  |  |
| Protoctist Diseases | malaria           | Plasmodium vivax           |  |  |  |  |  |
|                     | amoebic dysentery | Entamoeba histolytica      |  |  |  |  |  |
|                     | sleeping sickness | Trypanosoma spp.           |  |  |  |  |  |

However, we also have a new concern, disease

pathogens that are purposefully created in laboratories. It may surprise you that governments across the world including our own actually recreate pathogens long since in history past and they very frequently modify existing viruses and thus create new ones. Scientists are quite purposefully creating new incurable diseases in labs,

While our government says this activity is going on as part of an effort to fight a new disease outbreak, communist and other bad actor governments are suspected of making them for use in a future war. While there are nuclear, chemical and biological treaties in place, some of the roughly 210 nation governments have not formally adopted these agreements and some that have signed on are suspected to be doing just the opposite. All three of these are extremely effective weapons of mass destruction and the use of chemical weapons dates back to 600BC. Even in recent times countries have used chemical weapons on large masses of people they don't want around anymore. Either purposeful or accidental the Covid virus is the second viral disease in recent times to originate and proliferate out of China and China is known to have a variety of biological labs creating and/or modifying various pathogens. Our government has even contracted with these Chinese bio-labs.

Once released, a pathogen (not just Covid) must achieve several important steps to infect a single person and ultimately one final step to achieve the uninhibited transmission into millions of people. (1) There must be exposure or contact. Thus isolation or abstinence as the case may be, is a way to stop exposure. Pathogen exposure may come from airborne particles, fluids like water or blood, insects, etc. (2) There must be attachment or union between the person and the pathogen. Once the pathogen enters the blood, mucus membrane, or gets under the skin, etc, the pathogen becomes joined to the person. (3) The pathogen must find a means to propagate within the body. It can do this by attaching to cells within the blood stream. (4) The pathogen must replicate. This can occur locally, or spread into several areas or systems of a body. (5) Depending upon the pathogen, the likely outcome is localized or systemic domination of a body. Domination overwhelms your body, interfering with many different organs, cells and tissues processes. As such, muscle tissue (heart & lungs) can become damaged digestive and liquid filtration processes begin to fail, cellular functions too are all potentially in great harm. An "infected person" often becomes carrier for the pathogen. The more an infected person interacts with others, the more the infectious agent spreads.

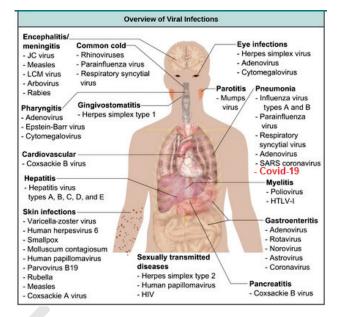
Understanding how the virus works is key to negating the carnage it is causing. People my age will remember the regional outbreaks of gonorrhea, syphilis and HIV in the 60's and 70's. Testing services where found even in some churches. The mantra in those days (and still today) was be monogamous, or at least practice safe sex.

Yet our bodies are not defenseless against pathogens. We have a barrier of skin that contains and protects our more sensitive tissues and organs. We have; the ability to cough and expel substances, a digestive system with acid to break

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down and kill pathogens and/or to vomit out substances. Some of our body organs work to filter out or collect pathogens to contain and or expel them.

Virus based pathogens are numerous and problematic. Some replicate very rapidly, others mutate and adapt to the defensive actions of vaccines, drugs and our own immune systems. The worst viruses are capable of both. Because viruses use the resources of the host cell (within the infected person) for replication and the production of new virus proteins, it is difficult to block their activities without damaging the host cell. In response to these infectious agents and other sicknesses, pharmaceutical companies seek to increase their footprint in global sales and profits by providing medications, vaccines and treatments to help people achieve a better (?) outcome. Antibiotics (for fighting bacterial infections) are one of the most important pharmaceutical achievements in human history and are responsible for adding decades to the average life span. Conversely opioid pain killers created a legal path for drug addiction and have killed millions. As we read in the fine print that comes with medications, some medications may only offer a



few months more of life, others may result in a full cure, others reduce pain. Pharmaceutical companies have spent billions of dollars "pumping" their products and quite naturally also "entertaining and courting" our congressmen and women. A mountain of profits comes when you get the government to approve a product for use. The holy grail of profits comes when you get government to force the consumption of your product as with Covid. And each patent on the drug ensures locked in profits for many years to come. Cheap drugs are despised and set aside by pharmaceutical companies because they offer little profit. Medicine is about money, lots of money ... ridiculous sums of money.

#### How we get to a Pandemic

Keep in mind that around the globe, tens of millions of people in any given day, will feel one or more symptoms of being sick. Some will actually go to a doctor and others will shrug it off. The CDC says that 85% of us Americans will visit a doctor sometime in a year. That amounts to about 750,000 visits every day of the year. Think about trying to keep records and trying to find trends in all that data. If we zoom in to one person, let's say this person ingested something that didn't agree with them, now they feel "sick." They may get better on their own, or be one of those who seek medical treatment. At this point, this is described as an "individual" or "isolated" event. Sickness could occur in a variety of other ways besides eating spoiled food, it could be an infected cut, inhaling mold spores, an insect or animal bite or caused by a host of other pathogens that "infect" us. Often infection occurs via the moist linings of our mouth, eyes, nose, vaginal/penal, or anal cavities, or entry via skin tissue or blood. So now we understand that there are many, many reasons to make us sick, but we've got to figure out if this is isolated event or something much bigger.

If several others are something and got sick, there may be a common food between these events that may indicate an "endemic" which could increase to an "outbreak" or "epidemic" if enough people in a given area acquire a similar set of symptoms. If this grows beyond national borders into several countries, with increasing numbers it becomes a "pandemic." Obviously the main explanation for how quickly the Chinese Wuhan Covid virus became a pandemic so quickly is the <u>ease of travel</u>. Here is a neat global timeline visual for the first <u>100 days of Covid</u>.

Of the major pandemics, some like Covid have been viral in nature. Smallpox (viral) is likewise transmitted by exhaled droplets but also by touching the infected lesions. Smallpox had reportedly been around for thousands of years with an estimated death rate of 30%, but fortunately Smallpox has been eradicated (1980) largely due to a worldwide vaccination program. Just because you or I may not like the new technology Covid vaccines, doesn't mean we have to throw out all vaccines, some are very effective. We can admit they are good, they have been tested by time, unlike the Covid vaccines. Small pox deaths are estimated <a href="between 300-500 million infections in the 20th century">between 300-500 million infections in the 20th century</a>.

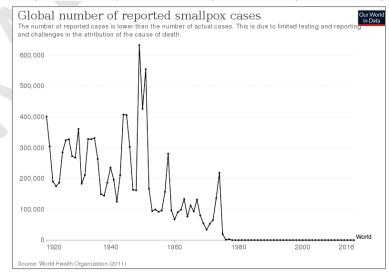
One smallpox shot provided lasting immunity. Below is a table of known pandemics. The accuracy of the table is in question (its way off regarding smallpox deaths which are collectively closer to 300-500 million). So while I question its accuracy, it does offer a perspective.

Notice that the Bubonic Plague may have killed 50% of the world's population at the time. Covid so far is < ½ %.

| Rank 🕏 | Epidemics/pandemics + Disease +     |                                  | Death toll \$                             | Global population lost            | Regional population \$                          | Date \$                           | Location                          |  |
|--------|-------------------------------------|----------------------------------|---|-----------------------------------|---|-----------------------------------|-----------------------------------|--|
| 1      | Black Death                         | Bubonic plague                   | 75–200 million                            | 17-54%[Note 1]                    | 30–60% of European population <sup>[4]</sup>    | 1346–1353                         | Europe, Asia, and North<br>Africa |  |
| 2      | Plague of Justinian                 | Bubonic plague                   | 15–100 million                            | 7–56%[Note 1]                     | 541–549   | Europe and West Asia              |                                   |  |
| 3      | Antonine Plague                     | Smallpox or measles              | 5–10 million                              | 3-6%[3]                           | 25–33% of Roman<br>population <sup>[14]</sup>   | 165-180 (possibly up<br>to 190)   | Roman Empire                      |  |
| 4      | Spanish flu                         | Influenza A/H1N1                 | 17–100 million                            | 1-5.4%[5][8]                      |   | 1918–1920                         | Worldwide                         |  |
| 5      | Cocoliztli epidemic of 1545–1548    | Cocoliztli                       | 5–15 million                              | 1_3%[Note 1]                      | 27–80% of Mexican population <sup>[13]</sup>    | 1545–1548                         | Mexico                            |  |
| 6      | 1520 Mexico smallpox epidemic       | Smallpox                         | 5–8 million                               | 1-2%[Note 1]                      | 23–37% of Mexican population <sup>[13]</sup>    | 1519–1520                         | Mexico                            |  |
| 7      | 735–737 Japanese smallpox epidemic  | Smallpox                         | 2 million                                 | 1%[3]                             | 33% of Japanese<br>population <sup>[17]</sup>   | 735–737                           | Japan                             |  |
| 8      | Cocoliztli epidemic of 1576         | Cocoliztli                       | 2–2.5 million                             | 0.4-0.5%[3]                       | 50% of Mexican population <sup>[13]</sup>       | 1576–1580                         | Mexico                            |  |
| 9      | 1772-1773 Persian Plague            | Bubonic plague                   | 2 million                                 | 0.2-0.3%[3]                       | [Note 6]  | 1772-1773                         | Persia                            |  |
| 10     | Naples Plague                       | Plague                           | 1.25 million 0.2% <sup>[3]</sup> [Note 6] |                                   | 1656–1658                                       | Southern Italy                    |                                   |  |
| 11     | 1629-1631 Italian plague            | Bubonic plague                   | 1 million                                 | 0.2%[3]                           | [Note 6]  | 1629–1631                         | Italy                             |  |
| 12     | COVID-19 pandemic                   | COVID-19 pandemic COVID-19       |   | 0.07-0.25%[2]                     | -   | 2019 <sup>[Note 4]</sup> _present | Worldwide                         |  |
| 13     | 1918–1922 Russia typhus<br>epidemic | Typhus                           | 2–3 million                               | 0.1-0.16% <sup>[15][Note 5]</sup> | 1–1.6% of Russian<br>population <sup>[16]</sup> | 1918–1922                         | Russia                            |  |
| 14     | 1846-1860 cholera pandemic          | Cholera                          | 1 million+                                | 0.08%[3]                          | -   | 1846–1860                         | Worldwide                         |  |
| 15     | 1889–1890 flu pandemic              | Influenza (disputed)<br>[18][19] | 1 million                                 | 0.07%[3]                          | -   | 1889–1890                         | Worldwide                         |  |
| 16     | 1957-1958 influenza pandemic        | Influenza A/H2N2                 | 1–4 million                               | 0.03-0.1%[2]                      | _   | 1957–1958                         | Worldwide                         |  |

The Chinese are thought to have invented the initial inoculation technique that led to further and better ways of preventing diseases. Using smallpox as an example, (chart to the right) the vaccination program is by all appearances a great success story and it actually resulted in eliminating a terrible disease. So we can thank China in one area, while despising the Chinese Communist Party leaders who like all prior communist leaders, imprison, torture and murder those unwilling to conform or who critique them. Let's remember too, that the Chinese people are the ones currently subject to these atrocities.

So we have a Covid pandemic with several variables; some sick people, some very sick, some dying, some not sick at all, a highly contagious disease and a basic understanding of how the disease works.



Measuring its progress. Ultimately we personally do want any intrusion into our personal medical information, ie it being shared, yet we understandably see the need to have health agencies monitor in a generic capacity, various pathogens and diseases and to have some authoritative oversight in aspects of food production, animal and insect infections. Health agencies also investigate, respond, monitor and provide guidance regarding infectious activity. For sure there will be times when a health department may need to dial down to specifically who is spreading some pathogen to insure they do not continue to spread a communicable disease. People who knowingly and purposefully infect others must be isolated, forcibly if necessary. (A couple of sexually transmitted diseases fall into that category) The faster these things are identified, the faster a response can be mounted. That said, the stealth aspect (being contagious before having symptoms) of Covid-19 presents a unique and difficult twist. We can catch Covid and have symptoms so mild we may not know we are spreading it to others. Let's take a closer look at Covid and get to know more about it.

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#### **COVID-19 Origins?**

At this point in time, there appears to be two possible reasons for why we are in a Covid pandemic; 1) it was an engineered "gain of function" virus that was either purposefully or accidently released from a lab in Wuhan China as China is strongly suspected to be actively engaged in researching/developing chemical/biological weapons, or 2) Covid accidently occurred when some fluid aspect of a bat crossed over to humans in a meat market in Wuhan, China that just happen to be in the same area as the Wuhan bio lab ... yea and they want us to believe is was the meat market?

Sadly, our government and the agency run by <u>Dr Fauci apparently played a role</u> in this activity. The <u>following is from an article in the NY Post</u>. "Starting in 2014, the NIH's National Institute of Allergy and Infectious Diseases, headed by Dr. Anthony Fauci, funded the New York-based research nonprofit EcoHealth Alliance with annual grants through 2020 for "Understanding the Risk of Bat Coronavirus Emergence." "Total funding was \$3,748,715. More than \$600,000 of that went to the Wuhan lab. Three other Chinese institutions received funding as well." We'll look deeper into this later.

It's ironic that the man (Fauci) pressing all of us to "mandatorily" get vaccinated has at least a hand in why we're all fighting it now. As a department head he "knows where the buck stops." Could there be a cover-up going on? Naah

#### The Chinese Covid Virus Spread so Quickly to Pandemic Because of Several Factors

- China was slow (perhaps understandably?) to recognize and contain (shut down internal/external travel) the virus,
   China was also slow to inform the world what had occurred in Wuhan, as such all other nations were not aware of the need to restrict travel to/from China,
  - 3) China is certainly a global powerhouse of industry and commerce, as well as having a thriving tourism industry, thus the shear amount of travelers in/out of China quickly circulated the virus around the globe,
    - 4) <u>The virus is stealthy</u>, you can get infected and not know it for several days, some people may not know it at all,
      - 5) the infection spreads easily because Covid pathogens nest in our nasal passages and lungs allowing the simple act of conversation and breathing to expel tiny infectious droplets with those near us, once in the lungs coughing then expels virus laden droplets,
        - 6) The very cramped high volume travel modes of airplanes, subways and busses ensured that those using them shared the same contaminated air,7) Public gathering places and large events also added fuel to the fire.

Consider this following report from ABC news to understand how frequent travel impacts the spread of disease.

"Disaster in motion: 3.4 million travelers poured into US as coronavirus pandemic erupted - Travel data of passengers arriving in the United States from China during the critical period in December, January and February, when the disease took hold in that country, shows a stunning 759,493 people entered the U.S." According to data listed on statista.com, over 79 million international visitors come to the USA in 2019. In 2018 a reported, 93 million Americans traveled outside the USA.

#### **Covid Pandemic Timeline**

#### Period Leading up To the Covid outbreak

Early 2014, The National Institute of Allergy and Infectious Disease (NIAID) under the management of Dr Fauci, issues a \$3.3 million dollar contract (award notice #1RO1AI110964-01) to EcoHealth Alliance Inc, for "Understanding the Risk of Bat Coronavirus Emergence" for the period of 2014-2019. Oddly, EcoHealth Alliance is described as a charity??? The EIN # are the same. Note A Other1,

Late 2014, Oct 17, 2014, the White House Office of Science and Technology Policy issued a stop work gain-of-function order. Note A (Note-A According to an opinion column published in the Epoch Times end of October 2021 weekly periodical. The author suggests it appears highly coincidental that the stop work order may have led to the work being shifted to Wuhan China, ie, outside of the federal oversight eyes)

Later 12-19-17 the NIH lifted the stop work on "gain of function" research, once again allowing it.

(back to index) **The Covid Outbreak** 

Dec 31, 2019, China informs the World Health Organization about an unknown virus causing pneumonia. Similar cases were later uncovered back into November.

Jan 6<sup>th</sup> 2020, China identifies the virus,

Jan 9th China records the first death from Covid,

Jan 21, the 1st confirmed case occurs in the USA, by February 28, 20 cases had been confirmed Jan 23, China places the city of Wuhan under lock down, the WHO says it appears to be contagious between humans,

> Jan 31, DHHS declares Covid-19 a public health emergency, the CDC issues a mandatory quarantine on the returning 195 American evacuees from Wuhan China Feb 2, Pres Trump restricts travel to/from China.

> > Feb 11, the infection is labeled Covid-19,

KEY - PROMPT ACTION

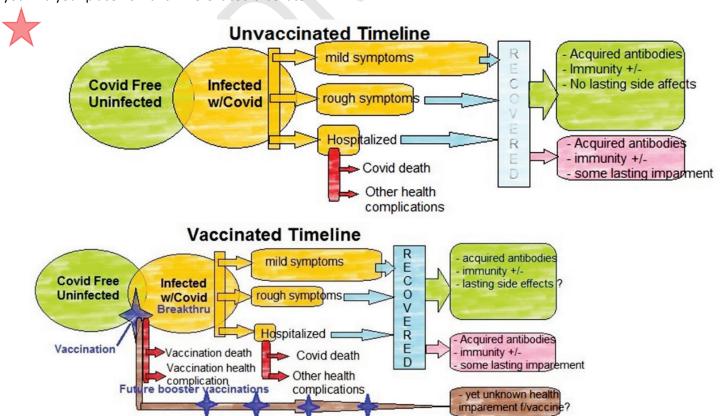
March 11<sup>th</sup>, the WHO declares Covid a pandemic,

Mar 25, congress passes \$2 trillion in emergency stimulus. Apr 2, 2020, 1-million worldwide cases, 75,000 deaths Nov 5, 2021, 249+ million cases, 5+ million deaths

When the totals are converted to a daily average over the period, from Jan 6<sup>th</sup>, to November 6 you get 830,000 new global cases and 16,600 global deaths, occurring every day due to Covid. For comparison, global road injuries are about 3,671 p/day, coronary heart disease accounts for 23,835 p/day and global strokes (16,986) is about equal to Covid.

In fairness, it's easier for all of us to armchair quarterback Covid actions or inactions nearly 2-yrs later. One would reasonably expect it to take several weeks to biopsy and identify dozens of cases with a few common symptom traits. All along the pathway as our knowledge and databases grew, the Covid virus churned forward not waiting for mankind to catch up.

You should understand that your place in regards to Covid isn't necessarily fixed, indeed you will move from one Covid group to another. Unvaccinated to vaccinated, or you'll move from one of those groups to being infected with Covid with few symptoms, or be hit hard by it. Even if you're vaccinated you're being told to get revaccinated. For the unvaccinated who get Covid it's still unknown if you'll have perpetual immunity. Like the flu or a cold, if you're doing much of anything, one day you and Covid will be joined and the odds are more than once. The following graphics help you find your place now and where it could be later.



#### **Covid, Jam-Packed with Politics**

(back to index)

So we have a lot of politics that surrounds this pandemic and I've learned much of what goes on in our America has little to do with doing what's right and more ta-do with people and businesses who are king makers, or as others call them, the puppet masters. And the Covid pandemic is filled with politics. The Biden/Harris team are certainly responsible for further dividing the country with their own politics, to wit, by attacking and encouraging others to attack unvaccinated people and further inciting division by ordering and compelling businesses to be the enforcers of the Biden/Harris vaccination mandate, all while simultaneously spending the USA into bankruptcy. I think better and proper leadership should be more focused on who and how this happened and what to do about it so that it never happens again. I'm going to select just four aspects of the political insanity, but several books could be written describing all the political poison around the Covid pandemic. Dr. Fauci has dirty hands for prior to Covid, discussing the need for a pandemic to make people more afraid and for pushing for mandatory forced vaccination. Mr Fauci is the highest paid Fed. employee.

- Gain of function laboratory research Oh yeah, it's real and it has been going on for a number of years. Dr Fauci has denied that it ever occurred, but there is plenty of evidence that he is either lying or was simply the uninformed director of his agency? We just happen to be dealing with a pandemic of a super contagious highly transmittable virus, which truly meets the definition of "gain-of-function" research. The paper trail leads directly from the agency Dr Fauci leads and the NIH to the Wuhan lab where the outbreak began. Remember when President Clinton under oath testified "I did not have sexual relations with that woman"? Well after a dress with his semen on it come to light, we knew that wasn't anywhere near the truth, he apparently just defined oral sex differently than all the rest of us. In his mind (apparently) oral sex was not sexual? Dr Fauci appears to be doing the same thing, playing with semantics rather than admit the truth. EcoHealth Alliance can't find \$40 million that it received from the feds.
  - Cite US National Library of Medicine, National Institutes of Health, PMC4996883 paper called "Gain-of-Function Research: Ethical Analysis", 2016 Gain-of-function (GOF) research involves experimentation that aims or is expected to (and/or, perhaps, actually does) increase the transmissibility and/or virulence of pathogens. Such research, when conducted by responsible scientists, usually aims to improve understanding of disease causing agents, their interaction with human hosts, and/or their potential to cause pandemics. The ultimate objective of such research is to better inform public health and preparedness efforts and/or development of medical countermeasures. Despite these important potential benefits, GOF research (GOFR) can pose risks regarding biosecurity and biosafety. GOFR is a subset of "dual-use research"—i.e., research that can be used for both beneficial and malevolent purposes. Following controversy surrounding research, published in 2012, that led to the creation of highly pathogenic H5N1 (avian) influenza virus strains that were airborne transmissible between ferrets—and more recent reports of biosafety mishaps involving anthrax, smallpox, and H5N1 in government laboratories—in 2014 the administration of US President Barack Obama called for a "pause" on funding (and relevant research with existing US Government funding) of GOF experiments involving influenza, SARS, and MERS viruses in particular. This pause applies specifically to experiments that "may be reasonably anticipated to confer attributes ... such that the virus would have enhanced pathogenicity and/or transmissibility in mammals via the respiratory route" (White House 2014). The proposal requests \$3.1 million for a project titled "Understanding the Risk of Bat Coronavirus Emergence," which involved screening thousands of lab workers for novel bat coronaviruses. The grant was awarded for five years, from 2014 to 2019, and was subsequently renewed before being suspended by the Trump administration. The proposal directs \$599,000 of the total grant to the Wuhan Institute of Virology for research designed to make the viruses more dangerous and/or infectious — and its author acknowledged the danger associated with such work.
  - Newly released documents appear to contradict Dr. Anthony Fauci's 'Gain-of-Function' Research Denials" 9-7-21
    Newly released documents appear to contradict Dr. Anthony Fauci's repeated claims that the NIH did not fund gain-offunction research on bat coronaviruses at the Wuhan Institute of Virology (WIV). After reviewing the documents, Gary
    Ruskin, executive director of a group probing Covid's origins called U.S. Right to Know, told the Intercept that the grant was
    a "road map to the high-risk research that could have led to the current pandemic." The proposal requests \$3.1 million for
    a project titled "Understanding the Risk of Bat Coronavirus Emergence," which involved screening thousands of lab workers
    for novel bat coronaviruses. The grant was awarded for five years, from 2014 to 2019, and was subsequently renewed
    before being suspended by the Trump administration. The proposal directs \$599,000 of the total grant to the Wuhan
    Institute of Virology for research designed to make the viruses more dangerous and/or infectious and its author
    acknowledged the danger associated with such work. "Fieldwork involves the highest risk of exposure to SARS or other
    CoVs, while working in caves with high bat density overhead and the potential for fecal dust to be inhaled," it read.
    After reviewing the documents, Gary Ruskin, executive director of a group probing Covid's origins called U.S. Right to Know,
    told the Intercept that the grant was a "road map to the high-risk research that could have led to the current pandemic.
  - Cite Daily Caller EXCLUSIVE: "Fauci Staffers Flagged Potential Gain-Of-Function Research At Wuhan Lab In 2016, Records Reveal" 11-3-21 Two subordinates of Dr. Anthony Fauci raised concerns in May 2016 that taxpayer dollars may be funding

(back to index) gain-of-function experiments on bat coronaviruses at a Wuhan lab, but dropped the issue after nonprofit group EcoHealth Alliance downplayed the concerns, documents show. Rutgers University Professor Richard Ebright told the DCNF that the NIAID's May 28, 2016, letter to EcoHealth proves that Fauci was "untruthful in his testimony to Congress" that NIH staff concluded up and down the line that the EcoHealth grant did not include gain of function research. "The NIH, incredibly, accepted EcoHealth's belief that this work would not be considered gain of function, and accepted EcoHealth's rationale for this belief, and accepted EcoHealth's policy-noncompliant proposal for a [10 times] allowance for increased viral growth before stopping work and reporting results," Ebright said.

Besides the above I decided to look into the historical funding out of Mr. Fauci's agency. Also to whom and what for. It was very interesting, I downloaded the entire Excel file, but I only reviewed the 4-yrs, from 2016-2019, the period just before the Covid-19 outbreak. Below are snapshots of the sorted spreadsheet data. The search terms I used were: "corona, mRNA, messenger, bat, China, Wuhan, & Covid" they are color coded and dis-played in that order. Later, I also did a search on the word "function" because of the "gain of function" controversy and found many instances of the word being used, although most uses seemed not to apply.

I apologize for not being able to paste these large enough to clearly read, but the results were striking. Many of these terms come up years before the first Covid-19 cases in December of 2019 and a ton of them in the yea 2019, the year the outbreak began. These terms increa every year, each y from 2016 to 2019 The linked website above allows you t down load the ent spreadsheet so you can do your own sorting and read everything clearly. These grants are a

| E d      |        | data at Name   | Ctata     | A        | Month         |                            | 1.  |                      |               |            |
|----------|--------|--|-----------|----------|---------------|----------------------------|---|----------------------|---------------|------------|
|          | _      | cipient Name   | State     |          |               | er Award Tit               |   | ction Amoun          |               |            |
|          | _      | IRDUE UNIVERSITY   | IN        | R01AIC   |               |                            | neration of Vaccine Candidates Against Novel Coronavirus (SARS-CoV-2) Using the Bacteriophage T   | \$0                  |               | 1=corona   |
| _        | _      | IRDUE UNIVERSITY   | IN        | R01AIC   |               |                            | neration of Vaccine Candidates Against Novel Coronavirus (SARS-CoV-2) Using the Bacteriophage T   | \$0                  |               | 2=mrna     |
|          |        |  |           |          | 18303         |                            | ing of ABL kinase inhibitors for treatment of Coronavirus infections  | -\$1                 |               | 2=messager |
| 20:      | 16 UN  | 6 UNIVERSITY OF MARYLAND MD R014                             |           |          | 95569         |                            | e Epithelial Growth Factor Receptor in SARS Coronavirus Pathogenesis  | -\$3                 |               | 3=bat      |
| 20:      | 16 TR  | USTEES OF THE UNIVER ITY OF LENI S                           | BA<br>A   | R21AI1   |               | _                          | f coronavirus pathogenesis by antagonism of RNase L   | -\$328               |               | 4=china    |
| 20:      | 16 UN  | IIVERSITY OF TEXAMENCAL BEAN                                 | x         | R01AI0   | 99107         | Analysis o                 | of Coronavirus-Host Cell Interactions   | -\$48,809            |               | 4=wuhan    |
| 20:      | 16 V A | INDERBILT UNIVERSITY MEDICAL CENT                            | TN        | R01AI1   | 08197         | Determin                   | ants of Coronavirus Fidelity in Replication and Pathogenesis  | -\$121,414           | 1             | 5=covid    |
| 20:      | 16 TR  | USTEES OF DARTMOUTH COLLEGE                                  | NH        | R01AI1   | .06937        | The role of                | of CshA and CshB in selective mRNA protection in S. aureus  | \$0                  | 2             |            |
| 20:      | 16 CA  | SE WESTERN RESERVE UNIVERSITY                                | ОН        | R01AI0   | 93569         | mRNA syr                   | nthesis and capping in nonsegmented negative strand RNA viruses   | \$0                  | 2             |            |
| 20:      | 16 RE  | SEARCH FOUNDATION FOR THE STATE                              | NY        | R21AI1   | 13587         | Regulatio                  | n of Alternative Pre-mRNA Splicing by the Adenovirus L4-22K Protein   | -\$4,141             | 2             |            |
| 20:      | 16 CH  | INA MEDICAL UNIVERSITY                                       |           | R01AI0   | 99611         | Transmiss                  | sion blocking vaccine study in Plasmodium vivax   | \$0                  | 4             |            |
| 20:      | 16 RE  | GENTS OF THE UNIVERSITY OF CALIFO                            | CA        | P30AI0   | 27763         | UCSF-Gla                   | dstone Center for AIDS Research   | \$9,990,848          |               |            |
| 20:      | 16 TR  | USTEES OF BOSTON UNIVERSITY                                  | MA        | UC7AI0   | 95321         | National                   | Emerging Infectious Diseases Laboratories Operations  | \$4,913,858          |               |            |
| 20:      | 16 BE  | TH ISRAEL DEACONESS MEDICAL CENT                             | MA        | U19AI0   | 96040         | Novel Ad                   | /MVA and Ad/Protein HIV-1 Vaccines  | \$2,985,881          |               |            |
| 20:      | 16 UN  | IIVERSITY OF WASHINGTON                                      | WA        | P30AI0   | 27757         | Universit                  | y of Washington/Fred Hutch Center for AIDS Research   | \$2,870,156          |               |            |
| _        | 16 RE  | _  |           |          | State I       | ward Number                |   |                      | nt            |            |
|          | 16 UN  |  |           |          | _             | 44A I118063                | CATHEPSIN LINHIBITORS AS PAN-CORONAVIRUS THERAPEUTICS   | Action Amou          |               | 1=corona   |
| _        | 16 EN  | ZOL7 FILLER THERAFLOTICS LLC                                 | DI IN A A | _        | $\overline{}$ | 01A I110700                | CALIFIERS IN LINHIBITORS AS PAN-COKONAVIKUS THEKAPEUTICS  Cell entry, cross-species transmission and pathogenesis of novel coronavirus from |                      |               | 2=mrna     |
|          | 16 DL  |  |           | CHAPE    |               | 01A I010/00<br>01A I085089 | Mechanisms of viral proteases in coronavirus replication and pathogenesis   |                      |               | 2=messager |
| _        | 16 EN  | EGZ7 EG TO GA GITTY EKSITT OT CTITE                          |           |          |               | 01A I127521                | Structure, Function and Antigenicity of Coronavirus Spike Proteins  | \$636,67             |               |            |
| 20:      | _      |  | OLLLGL    |          |               | 01A I110964                | Understanding the Risk of Bat Coronavirus Emergence   |                      |               | 4=china    |
|          | 16 SC  |  | AL DO A   |          |               | 01A I114657                | New Paradigm for Host and Viral Gene Regulation by MERS Coronavirus nsp1  |                      |               | 4=wuhan    |
|          | 16 BE  | NA 2017 REGENTS OF THE UNIVERSIT                             | V O MAIN  | N N ESOT | NAM C         | 01A I089728                | Receptor recognition and cell entry of coronaviruses  |                      |               | 5=covid    |
|          |        |  | E HI DIVI | A D COL  |               | 01A I104711                | Structure and Mechanism of Programmed Ribosomal Frameshifting in SARS coronavirus   | \$380,25             |               | 5-0040     |
| 20.      | 16 NE  | 2017 TEXAS A&MUNIVERSITY SYS                                 | TEM TH    |          |               | 21A I121807                | Conserved RNA Secondary Structures in three Betacoronaviruses: MHV, BCoV, and MERS-CoV  | \$224,37             |               |            |
|          |        | 2017 UNIVERSITY OF MARYLAND                                  | ,         | _        |               | 21A I126300                | Diabetic Comorbidity and MERS Coronavirus Pathogenesis  | \$195,38             |               |            |
|          |        | 2017 SCRIPPS RESEARCH INSTITUT                               | E. THE    |          |               | 99A I123498                | Structural Studies of the Coronavirus Life Cycle  | \$103,47             | $\rightarrow$ |            |
| r        |        | 2017 JOHNS HOP KINS UNIVERSITY                               |           |          |               | 32AI118303                 | Repurposing of A BL kinase inhibitors for treatment of Coronavirus infections   | \$59,16              |               |            |
|          |        | 2017 V AND ER BILT UNIVER SITY, TH                           | iE.       |          | TN F          | 31AI133952                 | Coronavirus antiviral nucleoside analogs: inhibition and reduced susceptibility   | \$28,72              | 25 1          |            |
|          |        | 2017 V AND ER BILT UN IVER SITY, TH                          | ·Ε        |          | TN F          | 30A1129229                 | Roles of replication fidelity in viral RNA synthesis, population diversity, and overall fitness of coronaviruses                            | \$28,71              |               |            |
|          |        | 2017 PRESIDENT AND FELLOWS OF                                | F HARVA   | ARD COL  | MA F          | 01A I104711                | Structure and Mechanism of Programmed Ribosomal Frameshifting in SARS coronavirus   | 9                    | 90 1          |            |
|          |        | 2017 UNIVERSITY OF MARYLAND                                  |           |          |               | 21A I126300                | Diabetic Comorbidity and MERS Coronavirus Pathogenesis  | 5                    | 50 1          |            |
|          |        | 2017 PHELIX THERAPEUTICS LLC                                 |           |          |               | 44A I118063                | CATHEPSIN LINHIBITORS AS PAN-CORONAVIRUS THERAPEUTICS   |                      | 0 1           |            |
| ased     | d      | 2017 TEXAS A&MUNIVERSITY SYS                                 |           |          |               | 21A I121807                | Conserved RNA Secondary Structures in three Betacoronaviruses: MHV, BCoV, and MERS-CoV  | -542                 |               |            |
|          |        | 2017 TRUSTEES OF DARTMOUTH C                                 |           |          |               | 01A I127521                | Structure, Function and Antigenicity of Coronavirus Spike Proteins  | -\$97,08             |               |            |
| ear      |        | 2017 TRUSTEES OF THE UNIVERSIT                               |           |          |               | 01A I124429                | Nucleoside modified mRNA based HIV vaccine  | \$842,14             |               |            |
|          |        | 2017 RESEARCH FOUNDATION FO                                  |           |          |               | 01A I123406                | Non-canonical mechanisms of translation of viral mRNAs  | \$618,49             |               |            |
|          |        | 2017 TRUSTEES OF BOSTON UNIVE<br>2017 RESEARCH FOUNDATION FO |           |          |               | 01A I113321<br>01A I131977 | Initiation and regulation of RSV mRNA transcription and genome replication  | \$414,99             |               |            |
| •        |        | 2017 RESEARCH FOUNDATION FO                                  |           |          |               | 01A I131977<br>01A I123136 | Stress Responsive Reprogramming of Translating mRNA Pools in C. neoformans Flavivirus non-coding RNAs and the Host mRNA Decay Machinery     | \$387,21<br>\$372,70 |               |            |
|          |        | 2017 YALE UNIVERSITY   |           | _        |               | 21A I123130                | Multifactor mRNA Mediated T Cell Reprogramming for Systemic Lupus Erythematosus   | \$293,12             |               |            |
| <u>!</u> |        | 2017 A CCELEVIR DIAGN OSTICS, LL                             | c         |          |               | 43A  131900                | Highly specific HIV-1 mRNA detection method with global subtype coverage to monitor latency reversal in pat                                 |                      |               |            |
|          |        | 2017 TRUSTEES OF BOSTON UNIVE                                |           | _        |               | 21A I128189                | Cytosolic mRNA Uridylation in Trypanosoma brucei  | \$205,62             |               |            |
| 0        |        | 2017 KANSASSTATE UNIVERSITY                                  |           |          | _             | 21A I128406                | Selective translation conferred by the poly(A) leader of vaccinia virus mRNAs   | \$187,50             |               |            |
| :        |        | 2017 MICHIGAN STATE UNIVERSIT                                | Υ         |          |               | 03A I130554                | Developing novel technologies to address fundamental questions about second messenger signaling   | \$72,15              |               |            |
| ire      |        | 2017 TRUSTEES OF BOSTON UNIVE                                |           |          | _             | 01A I113321                | Initiation and regulation of RSV mRNA transcription and genome replication  |                      | 50 2          |            |
|          |        | 2017 A CCELEVIR DIAGNOSTICS, LL                              |           |          |               | 43A I131900                | Highly specific HIV-1 mRNA detection method with global subtype coverage to monitor latency reversal in pat                                 |                      | 50 2          |            |
| u        |        | 2017 A CCELEVIR DIAGNOSTICS, LL                              | .c        |          | MD F          | 43A I131900                | Highly specific HIV-1 mRNA detection method with global subtype coverage to monitor latency reversal in pat                                 |                      | 20 2          |            |
|          |        | 2017 TRUSTEES OF BOSTON UNIVE                                | ERSITY    |          |               | 01A I113321                | Initiation and regulation of RSV mRNA transcription and genome replication  |                      | 20 2          |            |
|          |        | 2017 COLOR ADO STATE UNIVERSI                                |           |          | _             | 03A I128657                | Serologic and virologic surveillance of bat and non-human primate samples for Zika virus in East Africa                                     | \$76,00              |               |            |
|          |        | 2017 FRED HUTCHINSON CANCER                                  |           |          |               | M1A 1068635                | Co VPN 3003 A Phase 3 Study to Assess the Efficacy and Safety of Ad26.COV2.5 for the Prevention of SARS-Co V                                | \$16,985,42          |               |            |
|          |        | 2017 UNIVERSITY OF NORTH CARD                                |           |          |               | M1A 1069423                | HIV / AID S Clinical Trials Unit (CTU) COV ID-19 Admin Supplement   | \$3,028,80           |               |            |
|          |        | 2017 WEILL MEDICAL COLLEGE OF                                |           |          |               | M1A 1069419                | WC M-Rutgers NJ MS CTU Supplement for COVID Testing   | \$2,057,94           |               |            |
|          |        | 2017 NORTHWESTERN UNIVERSIT                                  |           |          |               | 01A I130348                | FOR WARD-COVID 19 Supplement  | \$848,35             | _             |            |
|          |        | 2017 REGENTS OF THE UNIVERSITY                               |           |          |               | 01A I120997                | Flu Dynamics COVID-19 Supplement  | \$706,59             |               |            |
| bοι      | ı÷     | 2017 UNIVERSITY OF SOUTH CARC                                | LINA      |          |               | 01A I127203                | Multilevel Determinants of Racial and Ethnic Disparities in Maternal Morbidity and Mortality in the Context of                              | \$655,55             |               |            |
| υυι      | ıι     | 2017 EMORY UNIVERSITY  |           |          | GA L          | 19AI110483                 | ACE Covid 19 Admin Supplement: Molecular Regulation of B cells and T cells in Human SLE   | \$443,68             | 34 5          |            |

money and money always moves with a reason.

Shortly after 9-11, there were a lot of conspiracy theories going around. One of the claims was that our government and a few other people knew in advance that this attack was going to occur. Because 9-11 devastated the airline industry and I was actively trading stocks and options in those days, I decided to look up the shorting of airline stocks, indeed in the 2-3 weeks immediately preceding 9-11, the negative bets on airlines rose dramatically, it convinced me that some people did indeed know what was about to happen. A lot of related funding activity preceded the Covid outbreak that is an undeniable fact and Dr Fauci and the people he gave funds to, both stated they needed a pandemic to get people to support their work. It may not be solid proof, but if you're the only one in the room and the cookies are laying all over the floor ... don't be surprised that we look at you with suspicion.

We need to be more cautious about the labs and activity we fund and monitor what other labs are up to!

| Fundi | Recipient Name   |                      | State A                         | Award Number                             | Award Tit               | le       |                            | Action  | Amount         |                  |                |                          |
|-------|--|----------------------|---------------------------------|--|-------------------------|----------|----------------------------|---|----------------|------------------|----------------|--------------------------|
| 2018  | NEW YORK BLOOD CENTER, INC.,   | THE                  | NY R                            | R01AI139092                              | Structure-              | base     | d design of co             | ronavirus subunit vaccines \$9  | 11,083         | 1=corona         |                |                          |
| 2018  | VANDERBILT UNIVERSITY MEDICA   | L CEN                | TN R                            | R01AI108197                              |                         |          |                            |   | 07,998 1       | 2=mrna           |                |                          |
| 2018  | UNIVERSITY OF NORTH CAROLINA   | AT CH                | NC R                            | R01AI110700                              | Cell entry              | , cros   | s-species trai             | smission and pathogenesis of novel coronavirus from \$7   | 27,370 1       | 2=messager       |                |                          |
| 2018  | UNIVERSITY OF TEXAS AT AUSTIN  |                      | TX R                            | R01AI127521                              | Structure,              | Func     | tion and Anti              | genicity of Coronavirus Spike Proteins \$7  | 24,246 1       | 3=bat            |                |                          |
| 2018  | LOYOLA UNIVERSITY OF CHICAGO   | )                    | IL R                            | R01AI085089                              | Mechanis                | ms of    | viral proteas              | es in coronavirus replication and pathogenesis \$7  | 15,409 1       | 4=china          |                |                          |
| 2018  | ECOHEALTH ALLIANCE INC.  |                      | NY R                            | R01AI110964                              | Understar               | nding    | the Risk of B              | t Coronavirus Emergence \$5   | 81,646 1       | 4=wuhan          |                |                          |
| 2018  | CORNELL UNIVERSITY, INC  |                      | NY R                            | R01AI135270                              | Structural              | and f    | functional an              | lysis of the coronavirus spike protein fusion peptide \$5   | 06,453 1       | 5=covid          |                |                          |
| 2018  | TRUSTEES OF THE UNIVERSITY OF  | PENN:                | PA R                            | R01AI140442                              |                         |          |                            |   | 197,163 1      |                  |                |                          |
| 2018  | TRUSTEES OF THE UNIVERSITY OF<br>REGENTS OF THE UNIVERSITY OF<br>UNIVERSITY OF TEX AS N EDITAL | MNNE                 | MN R                            | R01AI089728                              | Receptor                | recog    | nition and ce              | l entry of coronaviruses \$4  | 55,615 1       |                  |                |                          |
| 2018  | UNIVERSITY OF TEX IS N EDITAL  | 2∢NCI                | TX R                            | R01AI114657                              | New Para                | digm     | for Host and               | /iral Gene Regulation by MERS Coronavirus nsp1 \$4  | 154,256 1      |                  |                |                          |
|       | CORNELL UNIX PSIT VIC  | <del>_</del>         | NY R                            | R21AI135373                              | Developm                | nent o   | of a subunit v             | occine for MERS-CoV and other emerging coronaviruses \$1  | 96,146 1       |                  |                |                          |
| 2018  | SCRIPPS RESEARCH INSTITUTE, TH   | łΕ                   | CA K                            | K99AI123498                              | Structural              | Stud     | ies of the Cor             | onavirus Life Cycle \$1   | 03,478 1       |                  |                |                          |
| 2018  | UNIVERSITY OF MARYLAND   |                      | MD F                            | F32AI136390                              | The role o              | f dial   | betes in Midd              | le East Respiratory Syndrome Coronavirus pathogenesis \$  | 58,282 1       |                  |                |                          |
| 2018  | VANDERBILT UNIVERSITY, THE   |                      | TN F                            | F31AI133952                              | Coronavir               | us an    | tiviral nucleo             | side analogs: inhibition and reduced susceptibility \$  | 29,206 1       |                  |                |                          |
| 2018  | VANDERBILT UNIVERSITY, THE   |                      | TN F                            | F30AI129229                              | Roles of re             | eplica   | ation fidelity             | n viral RNA synthesis, population diversity, and overall fitness of coronaviru \$   | 29,192 1       |                  |                |                          |
| 2018  | SCRIPPS RESEARCH INSTITUTE, TH   | łE                   | CA K                            | K99AI123498                              | Structural              | Stud     | ies of the Cor             | onavirus Life Cycle   | \$0 1          |                  |                |                          |
| 2018  | VANDERBILT UNIVERSITY, THE   |                      | TN F                            | F30AI129229                              | Roles of re             | eplica   | ation fidelity             | n viral RNA synthesis, population diversity, and overall fitness of coronaviru  | \$0 1          |                  |                |                          |
| 2018  | SCRIPPS RESEARCH INSTITUTE, TH   | łΕ                   | CA K                            | K99AI123498                              | Structural              | Stud     | ies of the Cor             | onavirus Life Cycle   | \$0 1          |                  |                |                          |
| -     | DUKE UNIVERSITY  |                      |                                 | U19AI135902                              |                         |          |                            |   | 79,017 2       |                  |                |                          |
| 2018  | NEW YORK BLOOD CENTER, INC.,   | THE                  | NY R                            | R01AI137472                              |                         |          |                            |   | 344,900 2      |                  |                |                          |
| 2018  | TRUSTEES OF THE UNIVERSITY OF  | PENN:                | PA R                            | R01AI124429                              |                         |          |                            |   | 339,218 2      |                  |                |                          |
|       | RESEARCH FOUNDATION FOR THI  |                      | _                               | R01AI131977                              |                         |          |                            |   | 93,162 2       |                  |                |                          |
|       | COLORADO STATE UNIVERSITY  |                      |                                 | R01AI123136                              |                         |          |                            |   | 72,709 2       |                  |                |                          |
|       | TRUSTEES OF BOSTON UNIVERSIT   | Υ                    |                                 | R21AI128189                              |                         |          |                            |   | 47,063 2       |                  |                |                          |
|       | CARNEGIE MELLON UNIVERSITY   |                      | _                               | R21AI126222                              |                         |          |                            |   | 08,929 2       |                  |                |                          |
|       | UNIVERSITY OF CHICAGO, THE   |                      |                                 | R21AI140152                              |                         |          |                            |   | 202,500 2      |                  |                |                          |
| -     | YALE UNIVERSITY  |                      |                                 | R21AI121993                              |                         |          |                            |   | 67,500 2       |                  |                |                          |
|       | MICHIGAN STATE UNIVERSITY  |                      |                                 | R03AI130554                              |                         |          |                            |   | 71,945 2       |                  |                |                          |
| -     | MICHIGAN STATE UNIVERSITY  |                      | _                               | R03AI130554                              |                         | _        |                            | ies to address fundamental questions about second messenger signaling   | \$0 2          |                  |                |                          |
|       | TRUSTEES OF BOSTON UNIVERSITY  | v                    |                                 | R21AI128189                              |                         |          |                            | n Trypanosoma brucei  | \$0 2<br>\$0 2 |                  |                |                          |
|       | MICHIGAN STATE UNIVERSITY  |                      |                                 | R03AI130554                              |                         |          |                            | ies to address fundamental questions about second messenger signaling   | \$0 2<br>\$0 2 |                  |                |                          |
| -     | MICHIGAN STATE UNIVERSITY  |                      |                                 |  | - veropii               |          |                            |   | <b>Э</b> О 2   |                  |                |                          |
|       | YALE UNIVERSITY  |                      | Recipient                       |  |                         | _        | Award Number               |   |                | Action Ar        |                | 1 1-0000                 |
|       | KANSAS STATE UNIVERSITY  |                      | ORLANCE<br>NEW YOR              | E, INC.<br>RK BLOOD CENTER,              | INC THE                 |          | R44AI122371<br>R01AI139092 | Development of a rapid response nucleic acid vaccine strategy for coronavirusepidemics  Structure-based design of coronavirus subunit vaccines  |                |                  |                | 1 1=corona<br>1 2=mrna   |
|       | COLORADO STATE UNIVERSITY  |                      |                                 | ITY OF NORTH CAR                         |                         |          | R01AI119092<br>R01AI110700 | Structure-based design of coronavirus subunit vaccines  Cell entry, cross-species transmission and pathogenesis of novel coronavirus from   |                |                  |                | 1 2=mrna<br>1 2=messager |
|       | COLORADO STATE UNIVERSITY  |                      |                                 | UNIVERSITY OF CH                         |                         | II       | R01AI085089                | Mechanisms of viral proteases in coronavirus replication and pathogenesis   |                |                  |                | 1 3=bat                  |
| -     | SOUTHERN MEDICAL UNIVERSITY  |                      |                                 | BILT UNIVERSITY M                        |                         | TN       | R01AI108197                | Determinants of Coronavirus Fidelity in Replication and Pathogenesis  |                |                  |                | 1 4=china                |
|       | WUHAN UNIVERSITY   |                      |                                 | TH ALLIANCE INC.                         |                         | NY       | R01AI110964                | Understanding the Risk of Bat Coronavirus Emergence   |                |                  |                | 1 4=wuhan                |
| 2018  |  | 2019                 | PURDUE L                        | UNIVE SITY                               |                         | IN       | R01AI095366                | Rapid Generation of Vaccine Candidates Against Novel Coronavirus (SARS-CoV-2) Using the Bacterio  | phage T4 Na    | nopartic \$640   | 6,229          | 1 5=covid                |
|       | FRED HUTCHINSON CANCER RESE  | 2019                 | UNIVERSI                        | ITY O TE (AS AT A<br>UNIVERSITY, INC     | USTIN                   | TX       | R01AI127521                | Structure, Function and Antigenicity of Coronavirus Spike Proteins  |                |                  |                | 1                        |
|       | UNIVERSITY OF NORTH CAROLINA   | 2019                 | CORNELL                         | UNIVERSITY, INC                          |                         | NY       | R01AI135270                | Structural and functional analysis of the coronavirus spike protein fusion peptide  |                |                  |                | 1                        |
|       | WEILL MEDICAL COLLEGE OF COR   | 2019                 | REGENTS                         | OF THE UNIVERSE                          | IY OF MINNE             |          | R01AI089728                | Receptor recognition and cell entry of coronaviruses  |                |                  | .,             | 1                        |
|       | JOHNS HOPKINS UNIVERSITY, THI  |                      |                                 | S OF THE UNIVERSI<br>HUSETTS GENERAL     |                         |          | R01AI140442<br>R01AI146779 | MERS coronavirus: antagonism of double-stranded RNA induced host response by accessory proteins<br>Epitope focusing to the receptor binding motif for a universal coronavirus vaccine                     | <u> </u>       |                  | . ,            | 1                        |
|       | NORTHWESTERN UNIVERSITY  |                      |                                 | ITY OF TEXAS MED                         |                         |          | R01AI114657                | New Paradigm for Host and Viral Gene Regulation by MERS Coronavirus nsp1  |                |                  |                | 1                        |
|       | CASE WESTERN RESERVE UNIVER  | 2019                 | CORNELL                         | UNIVERSITY, INC                          |                         | NY       | R21AI135373                | Development of a subunit vaccine for MERS-CoV and other emerging coronaviruses  |                | \$23             | 5,500          | 1                        |
|       | REGENTS OF THE UNIVERSITY OF   |                      |                                 | ITY OF KANSAS CE                         |                         |          | K22AI134993                | Investigating How ADP-ribosylation Impacts Innate Immunity During Coronavirus Infection   |                |                  | 2,000          | 1                        |
| -     | UNIVERSITY OF SOUTH CAROLINA   |                      |                                 | ITY OF MARYLAND                          |                         | MD       | F32AI136390                | The role of diabetes in Middle East Respiratory Syndrome Coronavirus pathogenesis   |                |                  |                | 1                        |
|       | EMORY UNIVERSITY   |                      |                                 | BILT UNIVERSITY, T<br>BILT UNIVERSITY, T |                         | TN<br>TN | F31AI133952<br>F30AI129229 | Coronavirus antiviral nucleoside analogs: inhibition and reduced susceptibility  Roles of replication fidelity in viral RNA synthesis, population diversity, and overall fitness of corona                | wirusos        |                  | ,,,,,,,        | 1                        |
| 2018  | EMORY UNIVERSITY   |                      |                                 | US BIOSCIENCES, I                        |                         |          | R44AI122371                | Development of a rapid response nucleic acid vaccine strategy for coronavirusepidemics  | ivii uses      | ÇZ.              |                | 1                        |
|       |  |                      |                                 | ITY OF NORTH CAR                         |                         |          |                            | Cell entry, cross-species transmission and pathogenesis of novel coronavirus from   |                |                  |                | 1                        |
|       |  |                      |                                 | UNIVERSITY                               |                         |          | R21AI135373                | Development of a subunit vaccine for MERS-CoV and other emerging coronaviruses  |                |                  |                | 1                        |
|       |  |                      |                                 | TH ALLIANCE INC.                         |                         | NY       | R01AI110964                | Understanding the Risk of Bat Coronavirus Emergence   |                |                  |                | 1                        |
|       |  |                      |                                 | UNIVERSITY OF CHI<br>TH ALLIANCE INC.    | ICAGO                   | IL<br>NY | R01AI085089<br>R01AI110964 | Mechanisms of viral proteases in coronavirus replication and pathogenesis  Understanding the Risk of Bat Coronavirus Emergence  |                |                  |                | 1                        |
|       |  |                      |                                 | ITY OF MARYLAND                          |                         |          |                            | The role of diabetes in Middle East Respiratory Syndrome Coronavirus pathogenesis   |                | -\$              | _              | 1                        |
|       |  |                      |                                 | BILT UNIVERSITY, T                       |                         |          | F31AI133952                | Coronavirus antiviral nucleoside analogs: inhibition and reduced susceptibility   |                |                  | _              | 1                        |
|       |  | 2019                 | VANDERB                         | BILT UNIVERSITY, T                       | HE                      |          | F31AI133952                | Coronavirus antiviral nucleoside analogs: inhibition and reduced susceptibility   |                |                  | 4,779          | 1                        |
|       |  |                      |                                 | ITY OF MARYLAND                          |                         |          | F32AI136390                | The role of diabetes in Middle East Respiratory Syndrome Coronavirus pathogenesis   |                |                  |                | 1                        |
|       |  |                      |                                 | ITY OF NORTH CAR                         | ROLINA AT CH            |          |                            | Cell entry, cross-species transmission and pathogenesis of novel coronavirus from   |                |                  | -,             | 1                        |
|       |  |                      | DUKE UNI                        |  |                         | NC<br>NC | U19AI142596<br>U19AI135902 | Messenger RNA Immunogens for initiation of protective HIV non-neutralizing antibodies  Messenger RNA immunogens for initiation of HIV V3-glycan neutralizing B cell lineages                              |                | \$3,659          | 9,615<br>3.157 | 2                        |
|       |  |                      |                                 | S OF THE UNIVERSI                        | ITY OF PENNS            |          | R01Al124429                | Nucleoside modified mRNA based HIV vaccine  |                |                  |                | 2                        |
|       |  | 2019                 | NEW YOR                         | RK BLOOD CENTER,                         | , INC., THE             | NY       | R01AI137472                | Rational design and evaluation of novel mRNA vaccines against MERS-CoV  |                | \$82:            | 1,329          | 2                        |
|       |  |                      |                                 | S OF THE UNIVERSI                        |                         | _        | R01AI146101                | Development of Universal Influenza Virus Vaccines Using Nucleoside-Modified Messenger RNA   |                |                  | 0,818          |                          |
|       |  |                      |                                 | ATE UNIVERSITY, THE<br>TH FOUNDATION FO  |                         |          |                            | Messenger RNA capping and methylation in pneumoviruses  |                |                  | 8,053<br>2,662 |                          |
|       |  |                      |                                 | LLER UNIVERSITY,                         |                         |          | R01AI131977<br>R01AI140429 | Stress Responsive Reprogramming of Translating mRNA Pools in C. neoformans  Molecular and Functional Dissection of Distinct mRNA Export Pathways  |                |                  | 1,375          |                          |
|       |  |                      |                                 | DO STATE UNIVERS                         |                         |          | R01AI123136                | Flavivirus non-coding RNAs and the Host mRNA Decay Machinery  |                |                  | 2,709          |                          |
|       |  | 2019                 | UNIVERSI                        | ITY OF CHICAGO, T                        | HE                      | IL       | R21AI140152                | Macrophage m6A mRNA Methylation in Sepsis   |                | \$24             | 3,000          | 2                        |
|       |  |                      |                                 | E MELLON UNIVER                          |                         |          | R21AI126222                | REGULATION OF mRNA TRANSLATION IN CANDIDA ALBICANS DURING INFECTION OF A MAMMALIAN  | HOST           |                  |                | 2                        |
|       |  |                      |                                 | OF THE UNIVERSIT                         |                         |          | R21AI142140                | Identifying mosquito olfactory receptors for human odor by measuring mRNA expression levels   |                |                  |                | 2                        |
|       |  |                      |                                 | OF THE UNIVERSIT                         |                         |          | F32AI145112<br>F30AI143160 | Determining the specificity and biological functions of widespread host mRNA degradation by RNase<br>Defining Features of Bacterial Control in M. tuberculosis Granulomas Using Single-cell mRNA Sequer   |                |                  | 1,610<br>6,506 | 2                        |
|       |  |                      |                                 | E MELLON UNIVER                          |                         |          | R21AI126222                | REGULATION OF mRNA TRANSLATION IN CANDIDA ALBICANS DURING INFECTION OF A MAMMALIAN  |                | 331              |                | 2                        |
|       |  | 2019                 | TRUSTEES                        | S OF THE UNIVERSI                        |                         | PA       | R01AI124429                | Nucleoside modified mRNA based HIV vaccine  |                |                  | \$0            | 2                        |
|       |  |                      | DUKE UNI                        |  |                         | _        | U19AI135902                | Messenger RNA immunogens for initiation of HIV V3-glycan neutralizing B cell lineages   |                |                  |                | 2                        |
|       |  |                      |                                 | STATE UNIVERSITY                         |                         | KS       | R01AI134768                | Biology and infection of bats with novel bat influenza viruses  |                |                  |                | 3                        |
|       |  |                      |                                 | RN MEDICAL UNIVE                         | -N3IIY                  | $\vdash$ | R01AI136850<br>R01AI116442 | Impacts of Urbanization on Vector Biology and Transmission of Dengue in China  Versatile functions of LANA in KSHV pathogenesis   |                |                  | -              | 4                        |
|       |  |                      |                                 | UNIVERSITY                               |                         | t        | R01AI116442                | Versatile functions of LANA in KSHV pathogenesis  Versatile functions of LANA in KSHV pathogenesis  |                | -\$1             |                | 4                        |
|       |  | 2019                 | FRED HUT                        | TCHINSON CANCER                          |                         |          | UM1AI068635                | COVPN 3003 A Phase 3 Study to Assess the Efficacy and Safety of Ad26.COV2.S for the Prevention of S   | SARS-CoV-2-    | mediate \$21,276 | 6,122          | 5                        |
|       |  |                      |                                 | ITY OF NORTH CAR                         | ROLINA AT CH            |          |                            | HIV/AIDS Clinical Trials Unit (CTU) COVID-19 Admin Supplement   |                |                  | 4,003          |                          |
|       |  |                      |                                 | JNIVERSITY                               | E CODMEST :::           |          |                            | ACE Covid 19 Admin Supplement: Molecular Regulation of B cells and T cells in Human SLE   |                |                  | 4,108          |                          |
|       |  |                      |                                 | EDICAL COLLEGE OF<br>OF THE UNIVERSIT    |                         |          | UM1AI069419<br>R01AI150305 | WCM-Rutgers NJMS CTU Supplement for COVID Testing Interferon hyperactivity, COVID19, and Down syndrome  |                |                  | 2,563<br>0,725 |                          |
|       |  |                      |                                 | OPKINS UNIVERSIT                         |                         |          | UH3AI133669                | interieron hyperactivity, COVID19, and bown syndrome<br>LITE CONNECT: Addressing testing gaps and epidemiologic disparities of COVID-19 amongtransgende   | er people in   |                  | 4,550          |                          |
|       |  |                      |                                 | OPKINS UNIVERSIT                         |                         | MD       | U01AI138897                | COVID Protection After Transplant (CPAT) Multicenter Adaptive Trial   |                | \$1,68           |                | 5                        |
|       |  | 2019                 | NORTHW                          | /ESTERN UNIVERSI                         | TY                      | IL       | R01AI130348                | FORWARD-COVID 19 Supplement   |                | \$1,05           | 4,023          | 5                        |
|       |  |                      |                                 | E FOR SYSTEMS BIG                        |                         |          | R01AI141953                | Site Specific Immunophenotyping Assays of COVID19 Patients to Align with NIAID National Study   |                |                  | 7,560          |                          |
|       |  |                      |                                 | STERN RESERVE UN                         |                         |          | R01AI129709                | Epidemiology, transmission and immunology of COVID-19 in nursing home residents   |                |                  | 8,632          |                          |
|       |  |                      |                                 | OF THE UNIVERSIT                         |                         | SC       | R01AI120997<br>R01AI127203 | Flu Dynamics COVID-19 Supplement<br>Multilevel Determinants of Racial and Ethnic Disparities in Maternal Morbidity and Mortality in the C   | ontext of Co   |                  | 5,095<br>3,579 |                          |
|       |  |                      |                                 | OPKINS UNIVERSIT                         |                         | MD       | UH3AI133669                | Multilevel Determinants of Racial and Ethnic Disparities in Maternal Morbiolity and Mortality in the C<br>LITE CONNECT: Addressing testing gaps and epidemiologic disparities of COVID-19 amongtransgende |                |                  | _              | 5                        |
|       |  |                      |                                 | JNIVERSITY                               | ,                       |          | R01Al123126                | Innate immune responses to SARS-CoV-2 in the lung and blood of patients with severe COVID-19  | people III     |                  |                | 5                        |
|       |  |                      |                                 |  |                         |          |                            |   |                |                  |                | _                        |
|       |  | 2019                 | REGENTS                         | OF THE UNIVERSIT                         |                         |          | R01AI128775                | COVID R PA-18-591 NOT-AI-20-031 Administrative Supplement to Integrated Exchange and Storage of   | f Current- ar  |                  |                | 5                        |
|       |  | 2019<br>2019         | REGENTS<br>UNIVERSI             | OF THE UNIVERSIT                         | ICAL BRANCH             | TX       | R21AI140569                | Role of Pellino-1 in COVID-19 diseases  | f Current- ar  | \$23             | 7,000          | 5                        |
|       |  | 2019<br>2019<br>2019 | REGENTS<br>UNIVERSI<br>UNIVERSI | OF THE UNIVERSIT                         | ICAL BRANCH<br>A, DAVIS | TX<br>CA | R21AI140569<br>R21AI143454 |   | f Current- ar  | \$23<br>\$23     |                | 5<br>5                   |

President Biden Speech, Sept 9, 2021 "So, tonight, I'm announcing that the

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Department of Labor is developing an emergency rule to require all employers with 100 or more employees, that together employ over 80 million workers, to ensure their workforces are fully vaccinated or show a negative test at least once a week". "The bottom line: We're going to protect vaccinated workers from unvaccinated coworkers,"



Yep, you read it correctly, in spite of being vaccinated, the vaccinated workers are at risk, not the unvaccinated? Biden is a nut job, we all know that, but the greater risk is the other way around. Vaccinated workers are already protected ... are they not? If not, why get vaccinated? This Australian comedian Gabriel Rossi created a hilarious parody about political parrot chat surrounding Covid vaccination. It's less than 1-minute long and it's a must see. In contrast to Mr. Rossi's video, an attorney made a public records request to the CDC on behalf of the Informed Consent Action Network for any documentation regarding those with natural immunity being more infectious to those who had been vaccinated. The CDC replied back "the CDC has no data that establishes people with natural immunity from Covid, can or do pass Covid onto people who have been vaccinated". But your hearing just the opposite if you watch the news.

We have yet to see the amount of carnage that the Biden/Harris team will do to millions of American families whose breadwinner could not violate their conscious and bow to a man and woman who think they are gods. These actions against the American people by the Biden/Harris team is unprecedented. These American citizens have legally been convicted of nothing, they are truly innocent of any wrong doing. Think about it; firing people who are working, who want to work, who are productive in both the private and government sectors and firing them just because they will not be force injected with a substance. I've never been as ashamed of American leadership as I am now. At the same opening the borders to



millions of people who come here illegally. This is our president and vice president? This is insanity, this is treason and this is a crime against the American people. After we kick them out, we can prosecute and lock them up.

So according to the Biden/Harris team, the only way Covid gets eradicated is if everyone gets the shot (and it's now apparent, it's going to require "many shots") that's it, period. Biden says that's what the experts tell us. Well first of all that's not true. It's not true if for no other reason than the simple fact that everyone on the experts bench agrees including the vaccine makers, that these vaccines do not fully and completely protect people from Covid. These particular vaccines will not eradicate Covid. That alone insures that Covid is forever with us unless a better vaccine appears. However, some experts forgot Covid has been discovered in other animals like dogs and cats and we've just learned that Covid has been found in white tail deer too. Since deer don't have a job, Joe/Kamila can't fire them, the deer already live out in the cold, so Joe/Kamila can't expect they will submit after losing a home the deer don't have. If dogs, cats and deer got Covid, it's reasonable to assume that we may be able to catch it from them too and that may be already occurring. So using the Biden/Harris mantra, not only are unvaccinated Americans dangerous to vaccinated Americans, so are unvaccinated deer, dogs and cats! The insanity of this administration is clear, truly they are inept, but its worse, its deliberate and purposeful abuse of power against good American citizens and it literally plays out every week before our eyes. They are a clear and present danger to Americans.

Israeli Study Revealed that Natural Immunity is 13x better than Vaccine Immunity, then subjected to a following CDC Study Contradicting the Israeli Study. However the CDC is exposed as flawed and vastly inferior to the Israeli Study. The CDC study is deemed an apparent political effort to support the Biden/Harris vaccine agenda. Well the CDC Biden/Harris tyrants got caught with their pants down and the CDC study is now drawing criticism from multiple experts in the medical science community. Mind you, Israeli is more vaccinated than the USA and has one of the most in-depth medical databases on its citizens. The Conclusion of the large Israeli 8/25/21 study: This study demonstrated that *natural* immunity confers longer lasting and stronger protection against infection, symptomatic disease and hospitalization caused by the Delta variant of SARS-CoV-2, compared to the BNT162b2 two-dose vaccineinduced immunity. Individuals who were both previously infected with SARS-CoV-2 and given a single dose of the vaccine gained additional protection against the Delta variant.

The contradicting <u>much smaller</u> CDC 10/29/21 study concluded something quite the <u>(back to index)</u> opposite: "Unvaccinated people who had survived a previous COVID-19 infection were more than five times more likely to be re-infected with the virus compared to those who were fully vaccinated with the Pfizer or Moderna vaccines, according to a new study published by the Centers for Disease Control and Prevention."

#### Soon afterwards scientists and experts in the field began to rip the CDC study as flawed and propaganda.

Immunologist Hooman Noorchashm, the medical expert for multiple NCLA challenges, called the study "another teleological piece of propaganda by the CDC because it excludes the Johnson & Johnson vaccine and likely includes recovered people in the vaccinated group."

<u>Harvard Medical School</u> epidemiologist Martin Kulldorff a professor at Harvard Medical School, said the study "...has a major statistical flaw and the 5x conclusion is wrong."

Former New York Times journalist Alex Berenson argued the study "is meaningless gibberish that would never have been published if the agency did not face huge political pressure to get people vaccinated." It's not even clear enough naturally immune people were hospitalized to reach statistical significance, he said, noting there's no unadjusted odds ratio.

<u>The CDC study also received backlash</u> from a Virginia neurosurgeon named Dr. Mahesh Shenai, who said that it was a "confluence of methodological flaws that amplify to serve the predetermined message of the CDC".

#### **Covid Prevention** (mostly as it relates to the unvaccinated)

At the top of the list would seem to be vaccines. Vaccines are being credited with reducing serious Covid infection complications and overall reducing infections. But for millions of us, we are just not ready and it appears our delay is proving fruitful. An August a large Israeli study did confirm that vaccines protect very well from an initial Covid infection, however they also found that the vaccine immunity waned quickly and they recommended getting booster shots to keep immunity up. But in another key finding, they found that those who had not been vaccinated but recovered from Covid and thus had natural immunity, were 13x less likely to get re-infected with Covid and Covid variants, compared to those who had been vaccinated. Breakthrough Covid cases of those vaccinated are becoming much more common in US and worldwide. We'll discuss the current vaccines in more detail in Part- 4.

Friends, Covid-19 is real, it's not being made up or fake news. However, the lack of providing all useful Covid therapeutic information to citizens and not informing the public about the vaccine related death toll and adverse effects is what makes the news untrustworthy and the censorship is actually killing people. Covid is indeed real because it has struck my several members of my family, friends and my neighbors. So it is important to understand that it will eventually impact everyone one of us. It's a viral infection like the flu, so odds are we all are going to get it and likely more than once. So let's learn about our common enemy and learn how to recognize it when Covid comes to our door. We are dealing with a contagious disease and one that can kill. While we might disagree with our government on all kinds of things we individually need to understand that our common enemy is Covid even if our President is also attacking Americans, ie unvaccinated Americans. Our nation's leadership is promoting fear across our nation, (Coronaphobia or Covid Anxiety Syndrome) yet fear does nothing to stop Covid, however fear does indeed increase your chances of dying once you get Covid. Don't fear Covid, respect it and be prepared for it.

be ignored and it is not to be feared and you're very likely going to get it and you are very likely going to survive unless you have several other major health conditions and even then, you're still likely going to survive. But you have to be proactive with treatments right out of the gate. There is a tremendous peace that comes with putting our trust in God and anyone can have it. Live or die, I don't fear Covid. My wife and her sister (both unvaccinated and unmasked) spent a full week in a house with two seriously ill 80 yr old parents who tested positive with Covid, but neither sister got Covid (verified by tests and no symptoms) in spite of providing 24hr a day up-close-and-personal care. One parent was taken to the hospital for several weeks. We've known other couples and families who in spite of living in the same house, just one person gets Covid, the others do not. However in some other households several members will get it.

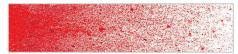
(back to index) While I am firmly against government ordered mandatory masking, vaccinations, passports, etc based upon aspects I outline in Part-8, doing some of what the CDC recommends is indeed logical but by personal choice not by mandate. We must use the brains God gave us and should a decision fails us, revive our faith and trust in God, that He will sustain us "as we trust in Him".

At this time the scientists and medical professionals don't seem to understand why some people have mild cases of Covid and others much more severe. Some of them are reaching way back for explanations and others bringing up other kinds of novel ideas. I'm not saying anybody is wrong in their theories, but I am saying I think I know at least one major piece of the puzzle. In my mind one for sure part of the answer is pretty simple and easy to demonstrate.



If you were forced to choose between one of these 3 options that you have spread in your nose, which would you choose? 1) A wet swab containing 2% microbe polluted water, 2) a wet swab containing 40% microbe polluted water, or a wet swab of 100% microbe polluted water, which would you chose? Now think of Covid as a wet swab, do you think you'll be just as sick no matter which swab you get or that the more pathogens you get, the sicker you'll be? Read on ... I think why some get it worse is based in math.

Common Sense Prevention - Covid is for the most part an airborne virus and that means the primary way it will be spread between people is via our noses and mouths. It may be helpful to think of Covid as a can of red aerosol spray



paint or an aerosol pump bottle of perfume. If you had a friend take either and spray it 20' away in front of you, can you smell it? How about at 10'? How about at 3'? The smell you're smelling is very super tiny unseen particles associated with the paint or perfume sprays. The further away they can be smelt proves that unseen particles do drift in the air. The unseen particles have to reach your nose for your nose to smell something. If a ceiling fan or heating or airconditioning system is running, the air flow from the ducts will aid in moving these tiny particles around the room, making them smell-able by others even further away. Now think of someone smoking a cigar at those same distances, each time they exhale the cigar smoke it moves and is carried directionally in the air, at some point your normal act of breathing through your nose will pick up these tiny smoke particles and you begin to smell cigar smoke even though the person smoking the cigar is 10' or 20' away. You do not have to be in the smoke, or get red spray paint on you to smell them. The unseen tiny particles make their way to your nose, which then is interpreted by your brain to reveal what entered your nose. The Covid viruses are even smaller than the unseen smoke particles that entered your nose.

Now let's again think about the red aerosol paint spray, put on your best all white suit or dress, go into your garage, how close would you be willing to be sprayed at with your spouse holding the spray paint, head high and spraying it towards you at 20' away? Would you be spot free 10' away? 5'? Your concern is that the tiny red specs of paint may land on your nice white clothing and stick to them. How far away would you be able to smell the paint? In this example we gain the understanding how tiny droplets of the virus can drift in the air and also land on surfaces by someone who sneezes or coughs. For the most part, all of the virus pathogens will fall to the floor or other surfaces, but if you're close enough,

you'll inhale some. The virus pathogens may indeed be on surfaces, but someone will have to touch the surface, then unwittingly move the virus pathogens from their fingers to their mouth, nose, or eyes, or the mouth, nose, or eyes of someone else.

Understand that viruses are likewise very tiny and will circulate around in the air the same way, but you won't be able to



see or smell the virus. But you are likely breathing the air around you into your nose or mouth (back to index) and into your throat and lungs. Also understand that if there is 1400 individual Covid virus pathogens concentrated in a single unhindered sneeze action, the effect of room air currents and the gravitational pull to bring the virus to the floor means that if you're not truly in front of that sneeze, most of the virus pathogens from the sneeze will end up on the floor. However, some small aerosol particles may remain in the air and be easily circulated within a room. If they are in the air, you might expect you'll suck a few in.

I want you to consider another way your body works, think about when you enter a woodworking shop where they are sanding lots of wood, or when you go out into a tall field of hay, or maybe even when you flip though reading a newspaper sitting in your easy chair, do you cough or sneeze? When you do your body is by design naturally trying to expel something it has inhaled and decided that it is irritating and not welcomed in your body. So, coughing out through your mouth and sneezing out though your nose is a defensive effort your body does to forcefully try to expel something bad within your airway or lungs. Think of a Covid infection like a fire in your home, the sooner you act, the less damage will occur. Nobody waits to put out a fire, cus it only gets bigger. Let's combine and apply what we've just learned.

<u>Prevention Point #1</u> So Covid is primarily spread beyond the infected person by; a) by forceful exhalation during coughing and sneezing, b) by deep exertion breathing that comes from work, c) normal breathing. And conversely, you'll most likely get Covid by inhaling Covid pathogens though your mouth or nose. Thus your goal is not to be in close vicinity of someone who might have Covid unless they are coughing into a towel. Distance from infected people is your friend. At the same time, if you have Covid and put on a mask, by default when you cough, you are trapping the virus in the mask to potentially be sucked back into your system. You do not want to spread the virus to others, but you also want to cooperate with your body in expelling Covid pathogens out of you. If I am asymptomatic and could be spreading the virus my preference would be to cough inside my jacket, t-shirt or a hand towel. Otherwise I cough in open air away from people. Now for the next point.

Let's say you were in the vicinity (home or office) of someone who has Covid, your daily interacting with them and Covid viruses are being circulated in the heating system and on surfaces, now what can you do? Understand that the virus being spewed about by coughing and sneezing is based upon a limited given quantity that the infected person has within his/her upper respiratory system. It's not an unlimited amount of virus pathogens, but a limited amount, at least until the pathogens have time to reproduce and reload the person's airway system. Let's say their nose is lined with hundreds of individual Covid pathogens. Some caught in the nose hairs, some in the mucus of the nose. Let's say they sneeze, then sneeze again and again. The largest quantity of the lose pathogens will be expelled first, then less and less with each sneeze after that. It won't be long before the nose gun is empty and firing mostly blanks. True, the virus is still replicating, but it will take at least 4-hours or so before more pathogens are available. Now let's pretend each of those viruses are like specs of cinnamon powder and you're again in a white suit. So maybe some of those specs stuck to you, but a few ended up in your nose and mouth, while most fell to the floor or on other surfaces. Crap, now what?

**Prevention Point #2** When you become aware that someone close to you has Covid and you've likely been sprayed with those Covid pathogens and that you've breathed them in, understand that the pathogens do not actually harm you until they can get inside you and into your cells. The Covid virus can only replicate within a cell inside your body. So the best defense is a prompt removal of the virus specs before they move past your mucus lining and into your cells. You may not get agreement about this from your doctor, but I would immediately (away from others) and forcefully cough and forcefully blow out through my nose into a Kleenex trying to expel the lose pathogens that I might have breathed in before they can burrow into mucus linings and begin replicating themselves inside my cells. Then as soon as possible after that, I'd use a 70% alcohol dipped Qtip to wipe the inside of each nostril, pushing it up the center and making circular motions against the nose wall

**Types of Alcohol?** I've always used <u>Isopropyl alcohol</u> on swabs, the kind readily available at any store near the Band-Aids. It's often used as a disinfecting agent to clean skin (*sometimes needles or other tools*) before an injection. <u>Ethyl alcohol</u> is the kind found in the liquor section, ie we drink it. 80 proof Vodka is about 40% alcohol by volume. <u>150 proof</u> moonshine might be about 75% alcohol. (*And capable of eating away portions of yer innards!*) <u>Denatured alcohol</u> contains additional ingredients to discourage people from drinking it and usual found in the paint section at a hardware store.

as its being pulled out, then dispose of it and then do the same to the other side. Even a plain Q-tip would likely remove some virus pathogens. You could also use a sinus flush system like a Nettie Pot. Next I'd take some Vodka or other 70% proof beverage and slowly gargle 1-2x with .5 ounce of the Vodka over 15-seconds, then

regardless no driving if impaired! I'd do this even if it was a day or more after I learned that someone near me had Covid. Our choices are; 1) do nothing, or b) do something that "may" reduce the pathogen load within your body. I'd repeat this process 2x p/day for 6-7 days, which roughly is the time period the virus is replicating. Think of catching Covid like a battery, you'll be infected until the virus battery goes dead, either because it exhausts itself, or your immune system took over and drained it out. While the Covid battery has strength, you want to be active draining the power out of it. So as long as you have active virus pathogens, keep flushing!

Why sneezing, coughing, swabbing and gargling you ask? Its math actually. If someone sneezed 2000 pathogens on me and I inhaled 1000 of them into my nose and mouth, they will within a day begin to make their way past mucus barriers and begin burrowing into my cells. Let's say 500 of them are in optimal positons to penetrate my mucus linings in my nasal canal, mouth and throat and the other 500 may take another day to bury in. Left untouched and assuming a 5x replication rate the viral load exponentially gets to 375,000 virus pathogens 4-days later. Recall it's about the 4<sup>th</sup> day that symptoms start to appear and you begin to have a fever. But with swift sneezing, coughing, mechanical swabbing and gargling out pathogens coupled with the additional contact destruction of virus pathogens by the alcohol, may result in a 60% reduction in virus pathogens, thus the viral load drops down to 150,000. Why does that matter? It matters because a lower initial viral load gives your body more time to create, accumulate and mount antibody defenses. Every day the Covid pathogens are replicating and yet it will take a few days for your body's immune system to begin making antibodies, so anything we can do to lower the initial pathogen loading, we dramatically help our body. In my mind, this is a major factor of why some people have milder cases of Covid and others get hit much harder. Initial viral pathogen load is certainly a major factor and a study confirmed this using nitric oxide nasal sprays, which reduced viral loads by 16x. Nitric oxide is a supplement often found in body building supplements. I found this ad for such a treatment.

Based on the prior information, we know that Covid pathogens for the most part get into our nose, mouth and throat. But there are additional areas that we need to be concerned about. These free floating virus pathogens can move from one place to another until they enter a cell. Nasal drainage and swallowing can move pathogens from our nasal, sinus and mouths to our throat, stomach, intestines and/or lungs. By the way, a study determined that those who used OTC nasal Inhaled corticosteroids sprays, had a reduced chance of catching a serious case of Covid.

**Prevention Point #3** If you've been near someone known to have Covid, spitting is preferred to swallowing. The goal is to get those pathogens out of your body, so assume there may be Covid pathogens in your nasal drainage and mouth and spit them out rather than swallow. Not everyone gets bad diarrhea and intestinal issues from Covid, but some do. For some the diarrhea is <u>pretty severe</u>. Remember the empty shelves for toilet paper? Yep, because people learned that intestinal Covid hits very hard and you'll need lots of toilet paper. It's very likely that the virus pathogens moved into the intestinal track due to swallowing them.

Prevention Point #4 If you are within the first few hours of potentially being infected, consider swallowing an ounce of the Vodka after the gargling activity. Who knows, maybe the alcohol might kill a few of those pathogens resting in your stomach lining or in the food in your stomach. But understand, you cannot drink enough booze of any kind to kill pathogens already inside the cells or other organs within your body. You will die 100x times over from alcohol poisoning before you kill the pathogens already buried into your cells. The method I use is an effort to kill or damage the virus pathogens while they are still free floating exteriorly from the mucus linings and before they have buried into the mucus linings of our body.

What about the Covid pathogens that might be on our clothing, floors, tables, glasses etc?

Prevention Point #5 Be careful not to touch surfaces that may have Covid viruses on them and then touch your nose, mouth, or eyes or those of someone else without first washing your hands. I don't worry about touching surfaces with Covid on them, but I am concerned I might inadvertently move them to my mouth or nose. The pathogens are not harmful to you on other surfaces unless you bring them to you. Are you a nose picker? Well be careful not to do that. Wipe down commonly used and shared surfaces like; door knobs, cell phones, computers, TV remotes, etc. with a surface sanitizer wipe. After 4 days or so, it's not likely gonna be an issue anyways as most of the virus pathogens will likely have degraded enough on their own. Wash your white clothing with a bleach or non-bleach sanitizing agent for your colored clothing if you desire.

Prevention Point #6 Consider getting a UV-C lamp to broadly kill viruses and bacteria's (back to index) in a room. While washing everything and wiping down everything will work, it can be time consuming. UV-C light will kill pathogens, but no animal or person should be in the room at the same time the light is on. Some hospitals are using UV-C lights on robots to kill virus and bacteria. For home use, always put the light on a short 15-30 minute timer, never run it more than 30 minutes. Move it to another spot in the room and run it again. It will only kill what is in direct line of sight with the light so you do have to move it around the room in 3-4 places to catch all areas. I've used UV-C light to kill massive populations of mold in a neighbor's home. UV-C lights are also sold in smaller portable wands too. Again, NO PERSON OR ANIMAL SHOULD BE IN THE ROOM WHEN THE LIGHT IS ON!

#### What to Expect for Symptoms

#### Mild Symptoms

- Fever 100-102F
- Dry cough
- Nausea/vomiting
- Diarrhea
- Headache
- Loss of taste and/or smell
- Sore throat
- Mild Fatigue/tiredness
- Body aches
- Chills
- Inflammation of the eye

#### More serious

- Difficulty Breathing
- Mild Chest Pain
- Difficulty with Speech
- Gastrointestinal pain
- **Profound Fatigue**
- Migraine headache
- Memory Loss
- Dizziness/blurred vision
- Night sweats
- Severe diarrhea

#### **Call 911**

#### **Emergency**

- Unable to walk on own
- Confusion-Delirious
- Penetrating chest pain
- Gasping for air
- Loss of control of body fluids
- Swelling of leg or arm
- Irregular heart beat
- Coughing up blood or fluids
- Dehydration

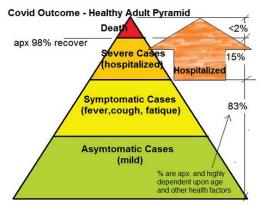
#### **KEY - PROMPT ACTION**

Especially if you are older or have other serious health conditions, getting good treatment early is imperative. The available supplements and drugs for counteracting the more severe infections with worsening symptoms are VERY useful and should be embraced as soon as possible. Literally, do not wait even a day. If you become one of the roughly 17% where Covid overwhelms your immune system, your pretty much along for the ride and you will be in the hospital. But it doesn't have to be like that if you get the correct supplements and meds as soon as things take a turn, each day you delay supportive antibody therapy, your odds get cut in half. The virus is replicating every day and exponentially at that, so be proactive. Several over the counter (OTC) items are very helpful to take before and after initial infection.

#### **Covid Disease Progression**

We are all different, to the timelines will be different, symptoms may be different, the following general information is not specific to anyone in known or unknown comorbidity risk groups.

A Covid infection is for 83% of us who get Covid it is going to be mild to moderate event and not really a big deal. For the other 17% of Covid infected people you'll have a tougher go of it. You're likely in one or more of the comorbidity groups. Only 6% of all Covid deaths are based solely on a Covid infection. Covid is going to slam your respiratory and/or intestinal systems. Once it's buried in one or both places, it can wreak havoc with



breathing, inflammation in tissues, heart arrhythmia and maybe cause massive amounts of blood clotting. It will be VERY IMPORTANT that you and your doctor work together as soon as symptoms appear (day#1) and you should be implementing preventative measures ASAP.

There are a variety of supplements and drugs that can hinder the Covid virus pathogens, or boost your immune system and even immediately populate your body with antibodies IF received very soon after symptoms begin. If you wait, your likely one of the people who will be in the hospital. Once the virus replicates it exponentially can overwhelm your immune system in just a few days. Much more specific information lies in the coming pages.

This a great video for those with some medical understanding. COVID-19 (SARS Coronavirus 2) - timeline, pathophysiology (ARDS), coronavirus life cycle, treatment

Remember the ABC's of first aid; <u>a</u>irway, <u>b</u>reathing, <u>c</u>irculation. Breathing difficulties are very (back to index) common with moderate to severe Covid cases. The Covid virus primary infection target is your lungs and airways. For the next 3 descriptions, we pick up after exposure **2-6 days before** when you were near a Covid contagious person.

#### Asymptomatic or mild case of Covid

1<sup>st</sup> day – no symptoms or onset of one or more mild to moderate symptoms, such as fever, dry cough, consider self-isolating.

**2<sup>nd</sup> to 4<sup>th</sup> day** – you get tested, or use a BinaxNow 15 minute self-test, to verify its Covid, test 3 days later if 1<sup>st</sup> test was negative. One of the two shows positive.

Thereafter to 6 days after symptoms started – usually in the vast majority of people will go thru Covid with mild symptoms and recover normally. Retest to verify yer no longer contagious.

#### **Moderate case of Covid**

**1**<sup>st</sup> day –onset of one or more mild to moderate symptoms, such as fever, dry cough, consider self-isolating.

2<sup>nd</sup> to 4<sup>th</sup> day – you get tested, or use a BinaxNow 15 minute self-test, to verify its Covid, test 3 days later if 1<sup>st</sup> test was negative. One of the two shows positive. (\* if you have one or more comorbidity health conditions, get the Regen-Cov cocktail ASAP)

**4-14**<sup>th</sup> day – you're finding it more difficult to breath, or your

diarrhea has continued for 6 or more times in any day, or the fatigue is debilitating. You're having pain in one or more areas. But you've been monitoring your blood oxygen levels, they are above 94%. No abnormal heart rhythms, you've been able to keep yourself hydrated and nourished. Bowl movements and unration are ok. May have hot and cold flashes and/or excessive night sweating.



1st day -onset of one or more mild to moderate symptoms, such as fever, dry cough, consider self-isolating.
 2nd to 4th day - you get tested, or use a BinaxNow 15 minute self-test, to verify its Covid, test 3 days later if 1st test was negative. (\* if you have one or more comorbidity health conditions, get the Regen-Cov cocktail ASAP)

**4-14**<sup>th</sup> day – may find it difficult to breath, or your diarrhea is 8 or more times a day over several days, or the fatigue is overwhelming. You're having pain in one or more areas. Your blood oxygen levels are below 90% and/or heart rhythms are abnormal, you're not hydrating or eating well. May have hot and cold flashes and/or excessive night sweating.

It's time see your doctor (that very day) or get to the ER. Your case is sizing up to be one of the severe ones. And you're likely going to need supplemental oxygen, a blood workup, perhaps a chest x-ray and/or EKG test. You're also going to need a variety of drugs to help counter the damage being done to your body.

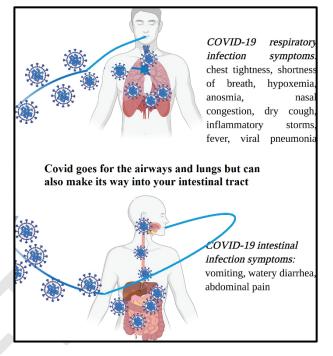
**18-24**<sup>th</sup> day – usually you'll be released from the hospital or have died.

\* If you have one or more other serious health conditions, (comorbidities) getting the <u>Regen-Cov cocktail</u> is highly suggested and if possible on or before day 6 from the onset of symptoms. Talk to your doctor in <u>all personal matters</u>.

**Critical cases of Covid** = respiratory failure even with moderate oxygen flows, one or more organ failures, sepsis, or septic shock.

**The WHO defines severe Covid infection as**: fever or suspected respiratory infection, + one of the following, a) respiratory rate of >30 breaths p/min, b) severe respiratory distress, or c) blood oxygen level of <93% on room air.

<u>Patients with severe Covid</u> were more likely to be older, have 2 or more comorbidities, decreased lymphocytes count, increased LDH, increased Bun, creatinine and high Serum cystatin C levels.



<u>Additional symptoms</u> associated with <u>pneumonia</u> is shortness of breath, increased heart rate, (back to index) low blood pressure. Regardless of what causes it, regaining strength after pneumonia can take quite a long time — from several weeks to many months. Pneumonia is a frequent condition in severe cases, it requires medical treatment.

<u>Generalized systemic inflammation.</u> The over reaction by your body's own immune system. C-reactive protein blood test will show this condition. Covid or no Covid, if C-reactive protein is abnormally high, you need to address the cause. When such a person contracts Covid, the cytokine mediation of his/her immune system has a good chance of going into an abnormal positive feedback, instead of a normal negative one and the whole immune system gets mobilized in a deadly event known as a "<u>cytokine storm</u>" which is responsible for the some hospitalizations, respirator dependence and deaths due to Covid infection. Your body literally begins to attack itself. Steroids are often the first line of defense to shut down overactive immune response. Some hospitals start steroid use just a precautionary measure.

#### **How Long Are You Contagious?**

So the **CDC** guidelines for being contagious is as follows:

- No symptoms, you test positive but didn't know you had it you're likely not contagious 6-days <u>after a positive</u> test.
- You had a mild to moderate case of Covid Available data suggest that nearly all Covid patients with mild-to-moderate COVID-19 remain infectious no longer than 10 days <u>after initial symptom onset.</u>
- **Severe to critical case of Covid** Most patients with more severe-to-critical illness or those who are severely immunocompromised likely remain infectious no longer than 20 days <u>after symptom onset</u>; however, there have been a handful of reports of severely immunocompromised people shedding replication-competent virus beyond 20 days, the longest known case still tested positive 54 days later.
- Patients who have recovered from COVID-19 can continue to have detectable SARS-CoV-2 RNA in upper respiratory specimens for up to 3 months after illness onset in concentrations considerably lower than during illness; however, replication-competent virus has not been reliably recovered and infectiousness is unlikely. The circumstances that result in persistently detectable SARS-CoV-2 RNA have yet to be understood. Studies have not found evidence that clinically recovered adults with persistence of viral RNA have transmitted SARS-CoV-2 to others. These findings strengthen the justification for relying on a symptom-based rather than test-based strategy for ending isolation of most patients.
- Other opinions on being contagious.

So the data indicates that the live Covid virus within our <u>respiratory tract, begins to decline each</u> day after the first onset of symptoms. In another contact tracing study <u>no positive cases resulted beyond 6 days of symptoms</u>. There are occasional outliers. Some of your symptoms (*dry cough, loss of taste/smell, etc*) may persist after but that does not mean you are contagious.

#### **Covid Immune System Response to Viruses and Virus mutations**

This topic is also covered in <u>Part-4</u> as it relates to vaccines. Books are written about our immune systems and how they work, most of them use words you and I cannot pronounce. So we are going to be sacrificing some accuracy for a simple understanding of what we have to work with.

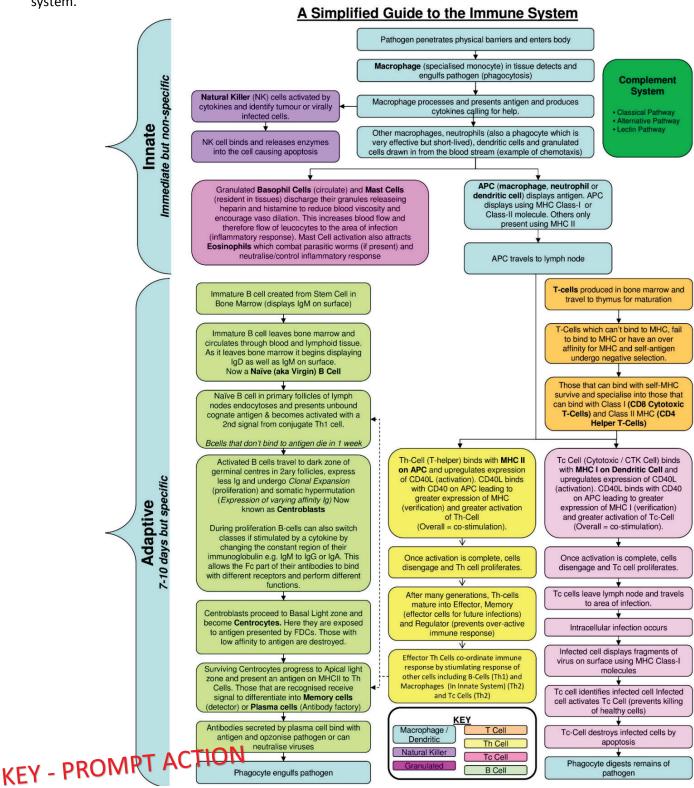
So a good general wants to know as much as he can about his enemy. What are the enemy's strengths and weaknesses? With good information the general can strategically mount an offensive that results in victory. So let's learn a little more about our enemy. The Coronavirus-19 is a stealthy virus, it sneaks in and then begins to replicate. Your body needs to identify it before it can mount any kind of a defense.

I spent a couple days reviewing a variety of simplified (?) immune response websites only to realize that our immune system is so complex, it's just not that easy for anybody to explain. Thus, anything I write is going to fall short, but I'll capture the essence of it the best I can:

Our immune system is robust, our body has the ability to literally identify a million kinds of threats and using a dozen or more tactics, isolate, neutralize, or otherwise prevent the pathogens from gaining total victory. It's often a race, between the pathogens ability to replicate and proliferate inside our body and our immune system's ability to ramp up defensive and offensive warriors. Our immune response includes advance scouts that identify foreign invaders, communications and logistics team members that carry info about the foreign pathogen invader to other helper troops and cells, many of which are capable of attacking or otherwise

interfering with the pathogens ability to invade our cells. These other team members are **(back to index)** capable of producing anti-bodies that are produced and released into our blood system to fight the pathogens. Then, like any good military, our immune system records all the info about the pathogen and stores it so it can more quickly respond if it were to show up again. While not fool proof, our body's immune system presents a very capable opponent to nearly everything that comes at us. Occasionally something can go awry and our immune system overreacts and may even attack organs of the body. We call it an "auto-immune" disease. The reason for the over reaction is not well understood.

While the following graphic is not totally spot on, it provides an overview of the complexity of our immune system.



**Virus Mutation** – Virus mutations can occur in a variety ways and for different reasons, (back to index) but let's break it down into something very simple. Consider what your immune system does is produce soldiers (antibodies) when needed to fight virus pathogens who show up and try to take over your body. But it takes a few days for your body to call in, equip them and send them out to the battle field where they are needed. So during the first battle, the virus pathogens show up for a fist fight, your immune system creates bigger soldiers and sends them over to kick the crap out of them. Your immune system wins the first battle, but a few of the virus soldiers escaped.

The virus soldiers learned that your antibodies were bigger, so they changed tactics, they equipped their virus soldiers with knives for the next battle. OK, they attack again, your antibody soldiers show up, but don't have knives, so they get beat up and report back to your immune system, "hey these guys are different and stronger than before, send us in more troops but give them swords so we can kill them". It takes a few days, but your immune system send the better equipped antibodies and they beat the crap out of the new virus pathogens.

However, a few pathogens escaped and they learned that you fought with bigger swords, so they changed from bringing knives to bringing spears. This is the process of mutations, where the virus changes and adapts to counter the forces of your immune system and your immune system does the same thing to counter the newly equipped antibodies. Depending upon the virus type, these mutation battles can occur one or many times, but our immune system is also very capable at readjusting to combat mutations.

So who wins the war? It's really a matter of each side's ability to very quickly adapt to the changes of the other and to marshal the troops faster than the other. The battle will be one by the virus if it can mutate and reproduce very rapidly and overcome more and more vital systems of your body. Our body's immune system is very good at counteracting all kinds of pathogens, but it can be overwhelmed if it isn't provided the time it needs to marshal better equipped and more plentiful troops than the virus.

| Human pathogenic novel coronaviridae species   |   |                                 |                                |   |  |  |  |  |  |  |  |
|--|---|---------------------------------|--------------------------------|---|--|--|--|--|--|--|--|
| Official name  | Other names   | Original<br>host <sup>[a]</sup> | Place (date) of discovery      | Disease caused  |  |  |  |  |  |  |  |
| Severe acute respiratory<br>syndrome coronavirus 2 (SARS-<br>CoV-2) <sup>[b][4][5]</sup> | 2019-nCoV; SARS virus 2;<br>Human coronavirus 2019<br>(HCoV-19) | pangolins,<br>bats              | Wuhan, China<br>(2019)         | coronavirus disease 2019 (COVID-<br>19)[0][4][6]  |  |  |  |  |  |  |  |
| Middle East respiratory<br>syndrome–related coronavirus<br>(MERS-CoV) <sup>[d]</sup>     | Middle East virus; MERS virus; camel flu virus                  | camels,                         | Jeddah, Saudi<br>Arabia (2012) | Middle East respiratory syndrome (MERS)   |  |  |  |  |  |  |  |
| Human coronavirus HKU1 (HCoV-<br>HKU1)   | New Haven virus   | mice                            | Hong Kong<br>(2005)            | unnamed, extremely rare, usually<br>mild variant of coronavirus<br>respiratory syndrome |  |  |  |  |  |  |  |
| Severe acute respiratory<br>syndrome coronavirus 1 (SARS-<br>CoV-1) <sup>[b]</sup>       | SARS virus  | civets, bats                    | Foshan, China<br>(2002)        | severe acute respiratory syndrome (SARS)  |  |  |  |  |  |  |  |

The significance of viral mutation rates

can be exemplified by HIV treatment. The drug (AZT) was the first approved anti-HIV drug but unfortunately, the appearance of drug-resistant variants rapidly frustrated this monotherapy. HIV-1 is a fast-mutating virus and produces every possible mutation (including AZT-resistance mutations) within a day. The influenza virus (common flu) is another example of a virus that mutates seasonally.

d. A Strains include MERS coronavirus EMC/2012 and London1 novel CoV/2012

The unvaccinated are to blame for Covid variants? Sadly the continuous obsessive assault on the unvaccinated by the Biden/Harris team and their administration are responsible for a lot of misplaced bigotry, discrimination, rage, hatred and anger against the unvaccinated. The Biden/Harris led bull-crap propaganda and misinformation engine includes blaming the unvaccinated for why Covid is still around. Some websites have furthered the mutation disinformation spread by falsely claiming that the unvaccinated are responsible for Covid mutations. Why is this going on? It's not because their opinions are true, for as you'll learn in the next section, that claim is false, it's because they need to blame something for the failure of the worshiped vaccines to provide the promised herd immunity and the unexpectedly high re-infection rates of those vaccinated. Imagine if the Biden/Harris team were to jump on the gay crowd for the continued HIV/AIDS infections.

**So what causes Covid virus mutations?** As discussed earlier, viruses replicate and they use the copy machines within our own cells to make more virus pathogens. If you will they hijack our cells reproductive engines to cause them to reproduce virus pathogens. But whether purposeful or by accident replication mistakes happen. Think about it like a McDonalds cheeseburger assembly line, the goal is to create the same exact cheeseburger everywhere in the world and at all times of the day, but sometimes that mass produced cheeseburger t doesn't come out the same, sometimes accidental or purposeful changes occur resulting in a customer getting a cheeseburger that is not the same as all the rest. Virus are likewise seeking to mass produce over and over again. We've learned in our efforts to battle

the <u>flu virus</u> and the <u>HIV virus</u> that these <u>viruses adapt to new pharmaceutical treatments</u>, (back to index) defeating treatments because the virus mutates and changes to frustrate the treatment. In simple terms, some viruses are smart, counteracting medical treatments like vaccine and drugs with mutations that more resistant to them, other viruses are dumb and they randomly mutate, sometimes in ways that evade medical treatments and others times mutating themselves out of existence. Bacteria (a different type of pathogen than a virus) is also capable of mutating its way around treatments designed to eradicate it. In industrial processes in which moist or wet (water) conditions exist, there is always a war with nasty bacteria's. While strong oxidizers (chlorine, bromine) and sodium hypochlorite (beach) are very effectively used to kill bacteria (other than in the human body) stagnate areas can cause the minimal treatment level to wane, the bacteria in that area is not fully destroyed and can develop a resistance to it the anti-bacterial treatments. Similarly, people who take an antibiotic to treat a bacterial infection, but do not take the full treatment or take it in a smaller than required dose, unknowingly allow some of the bacteria to survive, which can lead to the bacteria athogens to mutate into a drug resistant form, causing future doses of the specific antibiotic to be less effective.

#### In summary, there are three general causes for viral mutation;

- 1) Accidental errors injected when the virus is duplicating itself,
- 2) The virus will mutate in what is described as evolutionary changes (both weaker and stronger) in seeking to avoid extinction by our body's natural immune defenses,
- 3) The virus will mutate as a counter response to vaccine and drug treatments in the continued effort to survive.

American Council on Science and Health The idiot's guide to viral mutation - The clever little devils also mutate in response to a drug or vaccine, again ensuring that they thrive. The mechanism is the same, but in this case, selective pressure rather than random errors is the driving force behind mutation. Let's say that a person infected with Virus A is treated with an antiviral drug that prevents replication of Virus A. The drug works by stopping one of the essential steps (these are called targets) required to build new virus particles. Is this the end of Virus A? Hell, no. The virus doesn't give up. It is programmed to make multiple errors in its DNA or RNA synthesis, and eventually, a new variant or strain will emerge that is not inhibited by the drug. Virus 1A then becomes the predominant circulating strain (1,2). Since the COVID variants began emerging well before the first vaccines were administered, it is safe to say that the mutations we're now learning about were spontaneous, not caused by resistance to any therapy.

How will Covid-19 evolve in the future? We saw some remarkable changes in the virus over that time," says Ravinda Gupta, an infectious diseases consultant at the hospital and a clinical microbiologist at the University of Cambridge who analyzed the patient's samples. "We saw mutations that seemed to suggest the virus was showing signs of adaptation to avoid the antibodies in the convalescent plasma treatment. It was the first time we had seen something like this happening in a person in real time."... "To me these seem like a glimpse into the future where we are going to be in an arms race with this virus, just like we are with flu," says Michael Worobey, a viral evolutionary biologist at the University of Arizona. Each year the flu vaccine has to be updated as the influenza virus mutates and adapts to escape the immunity already present in the population, says Worobey. If the coronavirus shows similar capabilities, it could mean we will have to adopt similar tactics to keep it at bay, by regularly updating vaccines. ... In most viruses and disease-causing bacteria, the use of treatments and vaccines causes them to evolve ways of escaping them so they can continue to spread.

<u>How Do Viruses Mutate and What it Means for a Vaccine?</u> Coronaviruses do not have segmented genomes and cannot reassort. Instead, the coronavirus genome is made of a single, very long piece of RNA. <u>However, when two coronaviruses infect the same cell, they can recombine, which is different than reassortment</u>. In recombination, a new single RNA genome is stitched together from pieces of the two "parental" coronaviruses genomes. It's not as efficient as reassortment, but scientists believe that coronaviruses have recombined in nature.

While Covid virus mutations are most often discussed in a worrisome manner, some new treatments base their success on causing even more mutations of the virus. Sounds crazy right, but the plan is based upon causing the virus to mutate itself to death. Such is the case with one of the new Covid treatment pills developed by Merck which is in fact designed to create and induce more mutations into the Covid virus. Molnupiravir (Merck) induces many mutations into the virus,

(back to index) in the hopes the mutations will cause it to self-destruct. See this article in chemistry views. Another article describes another drug that induces purposeful mutations into RNA viruses.

Yet some are concerned that these two latest pills may spur even more mutations that survive rather than extinguish the Covid virus as reported in an article on Science.org, A prominent virologist warns COVID-19 pill could unleash dangerous mutants. Others see little cause for alarm.

Pfizer's Paxlovid pill falls into a different category of drugs called protease inhibitors, which block the protease enzyme that's responsible for packaging and multiplying a virus in the body. ... The way this drug works is it slows down the lifecycle of the virus so that we're making smaller numbers of new [virus] particles, which means we get a slower spread in the body of the virus and therefore more time for the immune system to kick in."

#### Studies Verifying Lasting Immune Responses from Having Covid (Natural Immunity)

Israeli study using over 750,000 people - Aug -2021, Natural immunity that develops after SARS-CoV-2 infection offers considerably better protection against the "Delta variant" than does two doses of the Pfizer-BioNTech vaccine, an Israeli study found. According to Science Magazine, the study found that "never-infected people who were vaccinated in January and February were, in June, July, and the first half of August, 6 to 13 times more likely to get infected than unvaccinated people who were previously infected with the coronavirus." Further, "the risk of developing symptomatic COVID-19 was 27 times higher among the vaccinated and the risk of hospitalization eight times higher."

Washington University School of Medicine in St. Louis 5-24-21 Months after recovering from mild cases of COVID-19, people still have immune cells in their body pumping out antibodies against the virus that causes COVID-19, according to a study from researchers at Washington University School of Medicine in St. Louis. Such cells could persist for a lifetime, churning out antibodies all the while. The findings, published May 24 in the journal Nature, suggest that mild cases of COVID-19 leave those infected with lasting antibody protection and that repeated bouts of illness are likely to be uncommon.

LabCorp has a great write up on Covid and immune response, a bit medically technical, but a great read.

Zoe Covid Study Nov 9, 2021 - In this new research we found that people still had anti-N antibodies at least 9 months after infection, suggesting that protection through natural infection might be longer lasting than vaccine-induced immunity.

Cleveland Clinic Study on natural immunity, June, 2021 - The study findings reveal that individuals with previous SARS-CoV-2 infection do not get additional benefits from vaccination, indicating that COVID-19 vaccines should be prioritized to individuals without prior infection.

Bulk Vaccine Safety Info (time period varies) - The Brownstone Institute lists 81 scientific studies and evidence reports/position statements on natural immunity as compared to the COVID-19 vaccine-induced immunity. Many of which show that naturally acquired immunity is equal to or more robust and superior to existing vaccines.

#### **Available Home and Clinic Covid Tests**

There has been a continuing lackadaisical effort by the Biden/Harris administration to spur production of at home testing kits I'm guessing because they believe the vaccine is our salvation and thus no need to tests? Maybe they could ask Mr. Trump to come back and help out, after all Trump promised a vaccine by years and despite all the liberal naysayers, he indeed delivered one. For some reason the FDA under Biden/Harris direction and oversight, is stonewalling efforts to get tests to citizens. Nonetheless, we've personally been able with purposeful effort to obtain kits, but it takes diligence. Businesses who may desire to have employees test weekly can order test kits in case sizes, **KEY - PROMPT ACTION** some with condensed packaging. Such bulk orders and packaging are not made for retail.

#### Over the Counter Rapid Antigen Covid Tests

BinaxNow 15 minute home antigen test – 2 tests p/box, \$14 available at many drug stores, Amazon, CVS, Walmart, other retailers and online. This is the test kit I recommend to my family and friends. The BinaxNOW™ COVID-19 Antigen Self-Test is a lateral flow immunoassay intended for the qualitative detection of nucleocapsid protein antigen from SARS-CoV-2 from individuals with or without symptoms or other epidemiological reasons to suspect COVID-19 infection when tested twice over three days with at least 36 hours between tests.

Ellume Covid-19 home 15 minute test – 1 test p/box, \$30 available at many (back to index) drug stores, Amazon, CVS, Target, Walmart, other retailers and online. NOTE ellume experienced a Nov 2021 recall of 2 million kits due to high prevalence of false positive tests. At this time, no online links to the product were active.

QuickVue At-Home OTC 10-minute COVID-19 Test - 2 tests p/box, \$23.99 retail, nasal swab, available at many drug stores, Amazon, Walmart, CVS, Walgreens, other retailers and online. The test to be used in individuals within 6-days of symptom onset or individuals without symptoms or other epidemiological reasons to suspect COVID-19 infection when tested twice over three days with at least 24 hours (and no more than 48 hours) between tests.

Intrivo On/Go at-Home COVID-19 10 min, Antigen Test – 2 tests p/box, \$34.99 retail, nasal swab, HIGHLY ACCURATE RESULTS IN 10 MINUTES: In just 10 minutes, On/Go delivers results with 95% accuracy and is effective at detecting all known variants of concern. Requires smartphone app.

The following link provides some additional information about tests > Healthline Covid test comparisons

#### Over the Counter PCR tests (mail into lab for results) more accurate than antigen tests

<u>empowerDX at-Home COVID-19 Nasal PCR Test</u> – 1 test p/box, nasal swab, \$89.99 retail, Nasal PCR Test has an FDA Emergency Use Authorization (EUA). Our laboratories are CLIA certified and CAP accredited. This test is not for severe symptoms.

Amazon COVID-19 Nasal PCR Test Collection Kit DTC - 1 test p/box, nasal swab, \$36.99 (priced at cost) Amazon uses what the CDC describes as the current "gold standard" for COVID-19 tests, Real-Time RT-Polymerase Chain Reaction, or PCR. While no method is perfect, the CDC identifies PCR as an accurate way to detect infection. Requires registration and smart phone to get results. Meets FAA travel requirements.

<u>DxTerity COVID-19 PCR test Kit</u> – 1 test p/box, Saliva sample, Prepaid Fed-ex Express Return Shipping, \$99.00, This non-invasive easy to use at-home saliva test for COVID-19 has been FDA authorized for use by both individuals with and without symptoms of COVID-19. The test detects the presence of viral genetic material but will not confirm immunity or detect antibodies.

<u>simplicity by Assurance Scientific Laboratories</u> COVID-19 PCR Test Kit – 1 test, nasal swab, \$87.00, prepaid return shipping, Simplicity by Assurance Scientific Laboratories testing is FDA EUA-authorized. Our at-home COVID test kit checks for SARS-CoV-2, the virus that causes coronavirus disease (COVID-19).

<u>Pixel by LabCorp, Covid-19 PCR test</u> – 1 test p/box, nasal swab, prepaid return, \$124.99, The Pixel by LabCorp COVID-19 Home Collection Kit is from the lab trusted by doctors and millions of people for COVID-19 testing. Collect your sample at home with a short nasal swab and ship it to LabCorp with the pre-paid return pack. The RT-PCR test detects the presence or absence of SARS-CoV-2, the virus that causes COVID-19. On average, results are received in 1-2 days from when your sample is received at the lab.

#### **Blood Draw Tests and other more complex tests**

<u>Serum cystatin C (sCys C)</u> – Cystatin C is a protein that is produced by the cells in your body. A recent small study (Nov/21) examined the levels of Cystatin C found in blood. The study results showed that people with high levels of Cystatin C (>1.245) were more likely to develop a more severe case of Covid. Normal blood level ranges vary slightly between labs and age groups, but generally in the areas of .62 to 1.15 mg/dL. High values correlate to kidney dysfunction.

<u>Bun & Creatinine</u> - Higher than normal Bun and creatinine tests are also associated with more severe Covid illness and the potential for kidney damage.

#### **Antibodies Tests that Labs Can Test For:**

(back to index)

Anti-N tests look for antibodies that recognize a molecule inside the SARS-CoV-2 virus called the nucleocapsid (N). Anti- N antibodies are only produced if you've actually been infected with COVID-19 (natural infection).

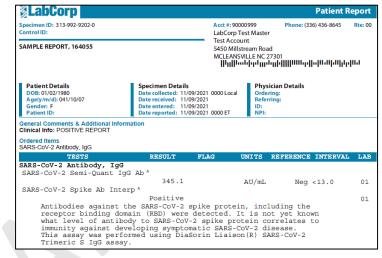
<u>Anti-S tests</u> look for antibodies against the spike protein (S) on the surface of the virus; these antibodies can be present after both a natural infection and a vaccine. This is because COVID vaccines are based on the spike protein.

<u>FDA approved serology tests (90 in the list)</u> can be found here to answer the question, did you have Covid and didn't know it.

LabCorp a nationwide blood lab, offers the following antibody tests which must be ordered by your doctor to determine if you have been infected Covid in the past but didn't know it. A neat flier is here explain the tests LabCorp offers. If it does not open, click here and scroll down to the SARS-CoV-2 Antibodies Flyer, then click it to

down load.

Example of one kind of LabCorp antibody report >



# **KEY - PROMPT ACTION**

Will Covid ever go away? The answer is "no" or perhaps contextually, it's not expected to, yet that hasn't stopped the Biden/Harris team (which includes the entire federal government under their direct control) from purposefully misleading people to believe that it will go away. There are some who are willing to separate themselves from the political propaganda and retain their professional integrity to voice their professional opinions. From United Press International is some much needed truth:

"We all are experiencing COVID-19 fatigue, and we just want it to be gone <u>but, frankly, we're powerless in determining its extinction, and it will likely never go away,"</u> said Panettieri, a professor of medicine at Rutgers University's Robert Wood Johnson Medical School.

"I think we are closer to an end of the pandemic, <u>but that does not mean that this disease will disappear," Dr. Tony Moody</u>, an associate professor of pediatric infectious diseases and immunology at Duke University Medical Center, told UPI by email. "<u>It will shift from being pandemic to endemic, something that sits in the background of our lives, like influenza or the common cold, which means we will probably have periods or years where it is worse or better, but it will stop dominating the news cycles," he said.</u>

As discussed in a <u>prior section</u>, viruses mutate all on their own, they will mutate due to: 1) accidental errors in duplicating themselves, 2) they will mutate to what is described as evolutionary changes (both weaker and stronger) in seeking to avoid extinction by our body's natural immune defenses and 3) they will mutate in response to vaccine and drug treatments in the continued effort to survive. Additionally different virus mutate at different rates, some very slow, others mutate rapidly.

There are going to be lasting Covid vaccine and lasting Covid infection issues that many people will be dealing with for years to come.

The most important aspect of getting Covid and beating it is prompt action at the first hint of things getting worse. Such advice is counter intuitive to guys like me who generally want to ride out stuff. What I never understood until I researched Covid is the virus is replicating, replicating and replicating, once it gets far enough down the road, our body will be overwhelmed and we will be along just for the ride. If you pay attention to nothing else I've written, just act ASAP to hinder the replication activity of the virus. There are things you can do, that really cost you nothing, but can make a huge difference (no promises, everyone is different) in the outcome of your Covid battle. ASAP means that you begin the day you think you might have become infected. Of the 17% of cases that require hospitalization, about 10% will be in the hospital for a few days and then be discharged, 5% of cases will go critical and 2% will end in death.

Pathophysiological <u>Basis and Rationale for Early Outpatient Treatment of SARS-CoV-2 (COVID-19) Infection</u>. This article summarizes some early treatment methods.

#### When Things Go South - Common Covid Complications Webmd.com

**Lungs** (top concerns when hospitalized with Covid)

- Acute Respiratory failure (ARF) Characterized as the inability of an individual to breath or get ventilated on their own. Demonstrated by an inadequate gas exchange in the lungs, blood oxygen levels are dropping. It can be acute or chronic. Occurs when fluid builds up and accumulates in the air sacs in the lungs, making it hard to release oxygen into the blood, which leads to poor perfusion of organs with oxygen-rich blood supply will ultimately develop into acute respiratory failure and damage to the oxygen starved organs.
- Acute Respiratory Distress Syndrome (ARDS) characterized by widespread inflammation in the lungs.
   This condition can affect individuals at any age and typically progresses as a complication of severe preexisting health illnesses such as respiratory distress, pneumonia and sepsis.
- **Viral pneumonia** is an infection in your lungs and it can make you feel very sick. It's usually caused by bacteria, viruses, or fungi.

#### Other Complication Areas (top concerns when hospitalized with Covid)

- Blood clotting Many people with severe COVID-19 develop abnormal blood clots, including in the smallest blood vessels. The clots may also form in multiple places in the body, including in the lungs. This unusual clotting may cause different complications, including organ damage, heart attack and stroke. Researchers think the clotting may be triggered by the high levels of inflammation in the body. Very recently, Israeli Tel Aviv University researchers looked at the 29 proteins in Covid, five of those proteins were identified as damaging to blood vessels. This picture (right) shows the blood clots sucked out of my neighbor using a procedure described as "aspirated thrombectomy catheter" method with x-ray supported observation. That's a lot of big blood clots!
- **Sepsis** is the body's extreme response to an infection often a secondary infection and is often lifethreatening. Sepsis can be aggravated by the use of immune suppressing steroids used to reduce inflammation and/or overactive auto immune response. Secondary infections are <u>quite common in ICU</u> wards after the first week.
- Cardiac & Stroke often related to blood clotting from a Covid infection, along with abnormal heart arrhythmias.
- Neurological Covid exhibits two types of neurological symptoms; life-threatening symptoms such as Guillain-Barre Syndrome (GBS) and encephalitis and less devastating symptoms such as fatigue and myalgia.
- Organ failure After lungs, liver, kidney and heart damage occurs with some frequency in hospitalized Covid patients. However organ failures are also showing up with regard to skin, endocrine and eyes.
   While organ failure can be attributed to Covid, low blood oxygen levels can also cause organ damage.



Autoimmune hemolytic anemia - is a condition characterized by the increased (back to index) destruction of red blood cells (RBCs) mediated by anti-erythrocyte autoantibodies with or without complement activation. Its clinical presentation is heterogeneous, ranging from asymptomatic to severe forms with fatal outcomes, and it can be either idiopathic or secondary to a coexisting disorder.

#### Covid treatment at home

Asymptomatic, mild and most moderate cases of Covid pose little concern in the way of special actions.

- After testing to validate you have Covid, remain at home, rest, eat and drink plenty of fluids.
- If you have any other comorbidity health conditions, consult your doctor and discuss getting the Regen-Cov antibody treatment, to jump start your immune response. GET IT ASAP!
- In the interest of brevity, review the things I outline for being prepared in Part-3 and in Part-9.

#### Covid treatment at the hospital

When you need a hospital you need one, but it's not all roses either. A study updated in Aug of 21, offered the following: about 4% of hospitalized patients suffered from at least one of the HAI (healthcare acquired infection). In absolute numbers, in 2011, an estimated 648,000 hospitalized patients suffered from 721,800 infections. It also stated that being moved into the ICU unit resulted in about 19.5% HAI's. So here is what to expect if you check into a hospital;

Of course all of the following is based upon each individual's circumstances; the degree of Covid infection, other comorbidities, condition at the time of admittance. If you are able to, bring your living will, POA, daily medications, face mask, smartphone and charger,

- An average stay will be 3-4 days for less severe cases, more severe cases will be 4-10 days, some patients have reportedly been in the hospital 90 days or more. Likely you'll be receiving supplemental oxygen via nasal cannula.
- Other comorbidities in the person's health will be weighed against Covid treatment options and they often complicate Covid infection treatment options.
- A full blood lab work up will be done,
- If you are demonstrating difficulties with vitals, you will be connected to continuous monitoring of your heart rate, blood oxygen level and maybe your respiration.
- Frequently patients will receive chest x-ray and/or CAT scans and EKG to learn what is going on in the lungs and
- Frequently patients will be put on an IV for hydrations and a steroid (dexamethasone) to reduce inflation,
- Frequently patients will be given 1-2 antibiotics if a secondary bacterial infection is suspected,
- Some patients may be provided nutrition intravenously or by tube if not able to eat on their own,
- Remdesivir is often prescribed during the stay of more critical cases, (which I'm not found of)
- If you are having extreme difficulties breathing and your cannula is not getting you enough oxygen, you may be put on a mechanical ventilator and be transferred to the ICU,
- Usually within 18-22 days from the onset of initial symptoms, patients either die or recover. Here is how an ICU nurse calls it, and a study of typical infection.

#### **Drugs and Therapies for Covid (not vaccines)**

Other drugs used "on & off label" for Covid, (FDA Approved and not approved for Covid)

Remdesivir - an antiviral drug, it is FDA approved but not approved by WHO. Remdesivir (Veklury) may be prescribed for people who are hospitalized with COVID-19. (I'm not big on this drug)

**Dexamethasone** - A corticosteroid dexamethasone is one type of anti-inflammatory drug that researchers are studying to treat or prevent organ dysfunction and lung injury from inflammation. Studies have found that it reduces the risk for deaths by about 30% for people on ventilators and by about 20% for people who needed supplemental oxygen.

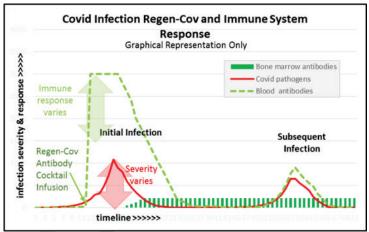
Baricitinib (Olumiant) - a rheumatoid arthritis drug to treat COVID-19 in some cases. Baricitinib is a pill that seems to work against COVID-19 by reducing inflammation and having antiviral activity. FDA approved.

<u>Convalescent plasma</u> - Convalescent plasma is collected from people who have recovered (back to index) from COVID-19. It is then transfused into someone with an active coronavirus infection. It is thought that antibodies found in the convalescent plasma can help fight the coronavirus infection. (This has shown little improvement in several studies, I would not recommend it.)

Bamlanivimab Eli Lilly - designed to block the SARS-CoV-2 virus from entering and infecting human cells.

<u>REGN-COV2</u> (<u>Regeneron</u>) - often called an "antibody cocktail" because it is made from a combination of two monoclonal antibodies, casirivimab and imdevimab. Highly recommended if you get Covid and are unvaccinated and are in a high comorbidity risk group, or vaccinated and in a risk group. Either way, you <del>should try</del> NEED to get it inside the

first 6 days from when symptoms set in. This cocktail comes pre-charged with antibodies, thus kick starting the race to stop the virus from invading your cells and mass replicating new virus pathogens. As I understand it, these antibodies are really more in a race than a war. They attempt to beat the virus to your cells and once they do, they prevent the virus from attaching to your cell. Regen-Cov is not an mRNA vaccine, rather it is like a massive influx of boots-ready-troops who set up camp on your cells. Your body may normally take up to 2 or more weeks to mount a good antibody response. Regeneron's core technologies enable the rapid and efficient generation of these protective



antiviral antibodies outside of the body, derived from genetically humanized mice or convalescent humans. The resulting antibodies correspond to the most potent antiviral antibodies that could be elicited by a vaccine or exposure to a pathogen.

<u>Azithromycin</u> - is an antibiotic commonly used to treat bacterial infections such as bronchitis and pneumonia. It has been shown to have some in vitro activity against viruses like influenza A and Zika, but did not work against the coronavirus that causes MERS.

**Tocilizumab (Actemra) and other IL-6 inhibitors** - is an IL-6 inhibitor approved for rheumatoid arthritis and juvenile idiopathic arthritis. (Both are inflammatory diseases.) It works by blocking interleukin-6 (IL-6), a protein involved in our natural immune responses. IL-6 is a cytokine (signaling protein) that normally alerts other cells to activate the immune system, but too much activation can cause issues. One possible serious issue with an overactive immune system is a cytokine storm, a potentially fatal problem in which the immune system goes haywire and inflammation gets out of control.

Hydroxychloroquine - Hydroxychloroquine (HCQ) has shown efficacy against coronavirus disease 2019 (COVID-19) in some but not all studies. We examined the studies for efficacy, time of administration and safety. HCQ was found to be consistently effective against COVID-19 when provided early in the outpatient setting. It was also found to be overall effective in inpatient studies. June 15, 2020, the FDA revoked its authorization to use hydroxychloroquine to treat COVID-19, based on a large, scientific study that showed no benefit to patients treated with the drug. Currently there are 288 clinical trial studies regarding Covid-19 and Hydroxychloroquine of which about 70 were either terminated or withdrawn.

<u>Quercetin</u> - seems to be a safe, far less expensive and easier-to-obtain alternative to hydroxychloroquine and it works by a similar mechanism, driving zinc into the cells to stop viral replication.

<u>Ivermectin</u> - is an oral medication used to treat infections caused by parasites. It is also available as a lotion or cream to treat lice and rosacea. Ost people know of it for treating horses. An in vitro study found that ivermectin can stop SARS-CoV-2 from replicating. Other small studies have also been done, including a retrospective study that looked at the medical charts of 280 patients with COVID-19 who were hospitalized in Florida between March and May 2020. Patients who got ivermectin had a lower death rate than those who did not (13% vs. 25%). However, this was not a robust study and patients also received other treatments that could have affected the death rates. A lot more research is needed to see if the doses studied would be safe and effective against the virus in humans. <u>Prior to the COVID-19 pandemic, U.S. retail pharmacies</u> issued an average of 3,600 human prescriptions per week for ivermectin, according to the CDC. But in

(back to index) recent months, prescriptions have soared, reaching more than 88,000 prescriptions per week in mid-August, 2021, according to the CDC. Currently there are 81 clinical trial studies involving Covid-19 and ivermectin. This well informed doctor calls it a wonder drug in the fight against Covid.

#### Some Potential Covid Infection Help That is in the Pipeline

Pfizer a COVID Paxlovid - oral antiviral for post Covid exposure, which significantly reduced hospitalization and death. The scheduled interim analysis showed an 89% reduction in risk of COVID-19-related hospitalization or death from any cause compared to placebo in patients treated within three days of symptom onset (primary endpoint) Pfizer's regimen is three pills in the morning and three pills at night for 5 days. Pfizer's drug is part of a class known as protease inhibitors designed to block an enzyme that the coronavirus needs to multiply. Pfizer said that because the drug targets a part of the virus essential to replication, the pathogen cannot become resistant to the treatment. Pfizer's drug is given in combination with Ritonavir, an older antiviral that boosts the activity of protease inhibitors but can cause gastrointestinal side effects and interfere with other medications. Pfizer said about 20 percent of patients who received either the pill or a placebo experienced adverse events, mostly mild. Serious side effects were reported by 1.7 percent of patients receiving the drug and 6.6 percent of placebo patients. (Initially this looks good)

Merck's pill, known as Molnupiravir - reported in September that its drug cut rates of hospitalization and death by 50 percent in patients at risk for severe illness given the treatment within five days of onset. It did not provide figures regarding patients getting the pill within three days of onset. Merck's drug is taken as four pills in the morning and four at night for 5 days. Merck's pill, developed with Ridgeback Biotherapeutics, is a nucleoside analogue with a mechanism of action that aims to introduce errors (mutations) into the genetic code of the virus. Merck said 12 percent of patients KEY - PROMPT ACTION receiving its drug and 11 percent of placebo patients experienced drug-related adverse events.

#### Comorbidities that move you closer to death

Preexisting health conditions create greater risks for hospitalization and death.

I found a study where the CDC reviewed over 255k deaths between 2/1/2020 -12/5/2020 and noted that only 6% of the deaths were due to Covid alone. That's a very interesting statistic that certainly infers that by itself, Covid "by itself" isn't the killer it has been labeled to be. It's kinda like a basketball player who shoots many hoops, versus the player who gives many assists. Obviously both are important, however, Covid's bad reputation is clearly not from Covid alone, 94% of the time, it gets an assist from other comorbidities. The study revealed that there was an average of 2.9 comorbidity health conditions that factored into the deaths. Among the conditions listed were unintentional accidents, poisoning, suicide, SIDS, shock, convulsions, etc. A second CDC study, with 540k Covid patients from MAR 2020 – March 2021, indicated <1% died with no other underlying conditions. It is important to note, that many Covid studies often contradict one another in one way or another. Our other major health conditions are the elephant in the room. Some risks varied by age groups. One study reflected 78% of those in the hospital were overweight. The top 5 are indicated by **DANGER**.

- Being over aged 65 -
- Having heart disease –
- Having a chronic lung disease -
- Sickle cell disease –
- Diabetes w/complications- DANGER #3
- Cancer -
- Obesity >40 BMI DANGER #1
- **HIV** infection
- Liver disease
- Smoker
- Drug or alcohol abuse

- Chronic kidney disease DANGER #4
- Begin pregnant -
- Being a smoker -
- Transplant recipient -
- Having an autoimmune disease -
- Hypertension
- Fear/anxiety disorder DANGER #2
- Sickle Cell Disease
- Neuro diseases Alzheimer's/dementia DANGER #5
- Having the flu



A CDC Study of over 255k Covid patient deaths, revealed only 6% were related to Covid infection alone.

Other comorbidity health conditions coupled with Covid is what can take us down.

Dying by Covid (back to index)

Many kinds of death are not pretty, some are quick and others quite slow. Depending upon the doctor or hospital staff, medications like morphine will be administered to ease the suffering, in fact, many hospital nurses are quite aware that morphine when administered a little higher than normal will hasten death while relieving pain. Such an act of compassion is sometimes mentioned to family members as an option. I'd certainly wish it for my own family.

Some Covid deaths occur peacefully, during sleep, others under some amount of sedation. Some however look like a violent struggle with an invisible enemy. Patients can be hyper-ventilating, trying to claw in fresh air, extending all their might to suck in air. Their chest may feel on fire or like it's been stabbed a 1000 times. My uncle who had interstitial lung disease (which I also had) died from a heart attack when moving from his bed to make his way to the lavatory. A body may marginally survive on little oxygen in the blood stream in a prone or sitting state, but the simple act of getting up and walking is attempted, the heart muscle starves out for oxygen and stops working. The medications, isolation, being connected to a half of dozen machines, up to 2 dozen tubes running to/from your body, lack of intimate connection with the ones you love, all play on the mind, some patients get angry, delusional or deeply depressed. Perhaps all your life you've been able to take care of yourself now you can't eat, can't roll over or even breathe, everything you need is dependent upon others.

If you are in a hospital that will not release you to go home and die, (WHICH IN MY MIND IS TOTALLY ILLEGAL) there are not a lot of options, the hospital room has become your prison cell, were you will die amongst masked strangers, away from family and friends with no touch, hugs or goodbyes. Some hospitals are recognizing the barbarity of this and making accommodations for one or more family members to be there.

#### Body Function Vitals, Things to Keep Track of During Covid or After Getting Vaccinated

OK, you are one of two types, either someone who wants to know how you're doing and to have some advance warning before things go really bad and/or you're someone who doesn't care to go to the hospital if it can be avoided and you are quite willing to give it a go and ride this out at home. But you're wondering, what can I expect staying home?

If your adult body functions normal with regards to the general population, there are a variety of indicators you can monitor that will help you or others who are trained to know if your body is heading into distress or doing ok. Going into a battle with Covid, you won't really know how bad it might get "UNLESS YOU STARTED RIGHT AWAY WITH MEASURES TO REDUCE YOUR VIRAL LOAD AND ARE TAKING THE SUPPLEMENTS" so if you start off recording your vital signs at the beginning of the onset of symptoms, you'll be better able to see when things take a turn for the worse. The info you collect will also be very helpful should you visit a doctor or use a tele-medicine call to a doctor. Having these things written down will be most of that's needed in a decision to give you a prescription if you go to urgent care, or to the ER. Don't delay going to the ER "when needed", the sooner you get help, the better they can help you.

If you think of a car, it has a variety of gauges (older ones, all the new ones have idiot lights) like speed, RPM, coolant temperature, oil pressure and perhaps vacuum that provide the car owner with information that helps you know if everything is running properly, or in distress. The human body doesn't have the gauges built in, so we have to measure them using a variety of easy to acquire instruments. You can look up norms for vital signs, on the web. If you or someone you are caring for has a preexisting health condition such as a heart condition, high blood pressure, diabetes, or any other serious medical condition, it is very likely going to negatively affect the battle you have with Covid and thus your odds of ending up in the hospital or dying are significantly higher. Create a spreadsheet or freehand drawing of this table below using the width of the paper (landscape) so as to make it more readable. A full copy is on the last page.

| A        | Simple but Important Things to Observe and Record When at Home Caring for a Family Member w/Covid or after Vaccination |              |        |          |                       |        |        |           |                    |                   |                   |          |            |  |
|----------|--|--------------|--------|----------|-----------------------|--------|--------|-----------|--------------------|-------------------|-------------------|----------|------------|--|
|          | Ideally take recordings every 3hrs.  |              |        |          |                       |        |        |           |                    |                   |                   |          |            |  |
|          |  | Fore-        | Pulse/ |          | Respiratio<br>n, # of | Blood  |        | Cognitive | Oxygen<br>Concentr | Adequate          |                   | Bowel &  |            | PG-1   |
|          |  | head         | heart  | Blood    | breaths               | Oxygen | Skin   | awarene   | ator flow          | Fluids            | Nutrition /       | Urinatio | Meds being |  |
| Date     | Time   | temp         | rate   | pressure | p/min                 | level  | Color  | SS        | setting            | intake            | Eating well       | n        | taken      | Major Symptoms, Pain, Difficulties                         |
| Adult no | orms >>  | 98.6         | 60-100 | 115/75   | 15-20                 | 95     |        | alert     | varies             |                   |                   |          | varies     |  |
| 11/3/21  | exam<br>9am  | ple<br>100.2 | 78     | 135/75   | 22                    | 85     | normal | good      | 3 Lp/min           | 8oz OJ,<br>coffee | yes,<br>egg/toast | fine     |            | can't smell or taste, cough, night sweats and slight fever |
|          |  |              |        |          |                       |        |        |           |                    |                   |                   |          |            |  |
|          |  |              |        |          |                       |        |        |           |                    |                   |                   |          |            |  |
|          |  |              |        |          |                       |        |        |           |                    |                   |                   |          |            |  |

#### Covid antibodies types, why this may matter to you!

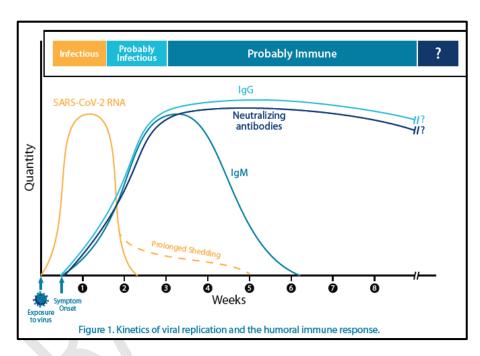
(back to index)

You hear talk of antibodies nearly every day on the news, but if you only get your information from the trained news anchor parrots, your likely being misled. Ask anyone about antibodies that watches the news and they will say we are being told that the antibodies go away pretty quick, in just a few short weeks to maybe a few months, so that's why we have to get more shots.

Well we can give the parrots a high five for being a good parrot, ie, repeating some partial truth statement they were given. I long for the days when reporters were actual reporters, they searched and investigated things to find the truth. Now they are just parrots reading whatever words are on the teleprompter screen. But in all things related to Covid, there is a fuller truth, you just have to dig for it.

Our bodies produce several kinds of antibodies, most reside in our blood stream and do fade over time depending on the type. However, we also have longer term antibody producing mechanisms, that get stored in our bone marrow and they last for years if not an entire lifetime. Some suspect that we will have at least 3-5 yrs, others think a lifetime of immunity with Covid infection acquired immunity. Certain antibodies are designed to fall off, others reside in the background, waiting to start up quickly if you get infected again. The antibodies that fall off are not supposed to be always circulating in your system, indeed they do wain away.

Additionally, you can have too many antibodies which can lead to other



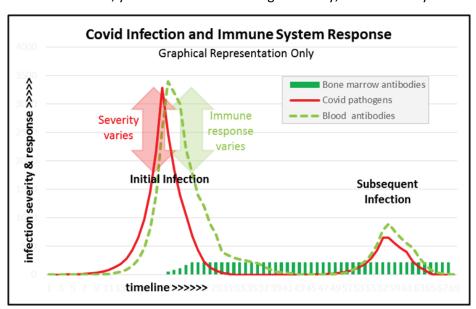
severe complications throughout the body because the body can begin to turn on itself, attacking tissues and organs. Arthritis, IBS, Psoriasis, Sarcoidosis, Fibromyalgia, Lupus, etc. are all associated with overactive immune systems. KEY - PROMPT ACTION

If you are in the medical field, check out this LabCorp report on Covid.

#### OK, you got through Covid, Will you have Lasting Immunity?

Yes, if you were unvaccinated and got Covid and recovered, you will have some lasting immunity, but we don't yet know

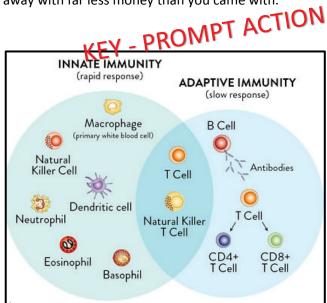
to the full extent. If you had Covid without being vaccinated, it's very likely you will have better immunity against reinfection according to a recent large in depth Israeli study. But there are also other smaller studies reaching the same conclusion, natural immunity is lasting! What about for those of you who have taken vaccinations already? Well the findings of the Israeli study indicate that you'll need more and more booster shots to stay on top of it. It's not clear yet if you can acquire a form of lasting unvaccinated immunity. Many of the news parrots are still ignoring the science and related studies behind the

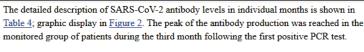


political propaganda. Think of how super politically charged every issue is, there is

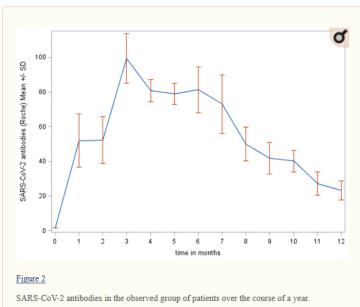
tremendous pressure to push the Biden party line. It's like those TV ads for casinos, "Come and win" yet the truth is if you stay there long enough, you'll walk

away with far less money than you came with.





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#### **Covid clinical trials**

So you shouldn't be surprised that there are a butt load of clinical studies going on. On 11/4/21 I found nearly 1400, with another 140 that have been dropped for one reason or another just in the USA. I tried unsuccessfully to join two studies.

Worldwide there's a total of over 6900 Covid studies going on. While some of these are pretty serious studies, "Cardiovascular Manifestations of COVID-19" others appear to be little more than an effort to get published or university fund raisers. Like this one "COVID-19 Vaccinations with a Sweepstakes" If you are interested in participating, take a look.

There are several nasal vaccines also in clinical trials. I believe that the nasal delivery method of vaccines and immune system boosting hold great promise, especially for viruses that are spread via airborne particles.

#### If this 9th grader to tailor a Covid 19 study, I'd implement two types;

#### The first would look something like this:

- 100,000 participants, broken down into 5 main groups 1) 20% vaccinated, 2) 20% and who got Covid, 3) 20% unvaccinated, 4) 20% who got Covid, 5) 20% who are unvaccinated, but decided to get vaccinated.
- I would follow these individuals for 24 months, reaching back proportionately 12 months backwards in time reconstructing events and going forward for 12 more.
- 50% of the people within each of the 5 study groups would be required to implement the common sense Covid infection and prevention support information contained in this handbook.
- Uniformly tracking Covid infections, Covid hospitalizations other major infections or disease and Covid deaths.
- Uniformly containing the study to: ages 18-65, roughly equal in male/female, by 0-3 comorbidities.

#### The second study would be a review of:

The 20,000+ vaccine deaths and the over 1 million vaccine adverse effects. These people matter!

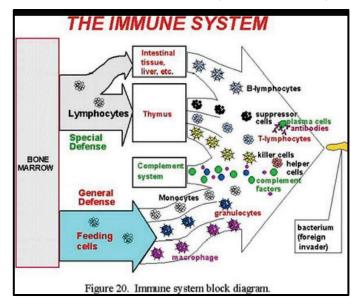
What would I expect to see for results? In the First study that the common sense information that is currently being suppressed by the Biden administration would show significant improvements in protection and outcomes regarding Covid, drastically reducing the demand upon our healthcare system. So much so, it would rival if not trump vaccination protection while reinforcing that natural immunity is better than vaccination. The second study would provide the American people the full truth about vaccine injuries and a review of the vaccines. From there we change our laws giving full immunity to pharma companies.

#### PART-4 **Our Immune Systems and Vaccines**

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At a deeper and cellular level we have an immune system, various cells and antibody agents who work around the clock to destroy pathogens that seek to harm us. After exposure to nasty pathogens, our immune system will usually respond by creating a variety of antibodies to compete against them which can lead to complete or partial immunity in the future. Once a pathogen invades our body, our body begins to produce soldiers in one form or another that specifically target the pathogen. After defeating the pathogen, our immune system try's to be better prepared for any future infection by remembering how to best fight it off. It will not be a surprise attack, our body will be ready.

However, the danger for people is much more severe when a ruthless virus meets any one of the following criteria; 1) is completely "new", 2) also very "powerful" and 3) comes on "overwhelmingly". Our bodies are often very effective at



beating back diseases when gradually exposed to them over time, this allows our immune systems to learn about how to best fight back.

Understanding this, scientists try to develop methods to win when one of the three types of battles mentioned prior. They will seek to create drugs that introduce or prepare our body in advance for when the pathogen shows up, described as a "preventative" action. Many vaccines are preventive. They may also seek to create a "powerful" vaccine, something that in a laboratory setting is far superior to the pathogen. If the pathogen is viewed as armored tank, the scientist seeks to create rockets that will specifically target the tank while not harming anything else. Another approach is to boost our immune system with ready to go antibody reinforcements just before or just after infection. The virus is overwhelmed by a boosted antibody response, giving it no time to gain a foot hold and flood the body with pathogens.

However, over time we have learned that regardless of what medicine offers, there is usually always collateral damage. Drugs, vaccines and treatment methods can and often do come with unintended consequences. The degree of the collateral damage from the vaccine or drug is weighed against the risks related to the disease or infection. This is why you get (or should be getting) a massive fine print chunk of paper that comes with every prescription or vaccination you receive. In regards to vaccines, some or many people get injured to various degrees after receiving them. For most people and most vaccines and drugs the harm is temporary and goes away, yet for others the injuries may last a life time. In some people the adverse reaction from their body to the drug or vaccine results in becoming debilitated and some vaccines or drugs unfortunately result in death. The harm may be; physical, injure organs, loss of cognitive ability, result in lasting fatigue, inflect changes in mood or cognitive degradation, affect fertility, harm one of our five senses, or cause any number of other injuries. Strangely, no person that I know of who has received the Covid vaccine has been informed of the risks nor have they been handed a paper that describes those risks. Perhaps this is why some many think the Covid vaccines are nearly risk free? Nobody is taking about the 20k+ vaccine deaths and 1mil+ injuries.

And we are all different. Your DNA and lifestyle habits may be better than mine. As such, how your body responds to infection may be better than mine. With regard to viral based infections, accumulated data shows that those of us with unhealthy lifestyles may not fair very well while we fight the infection. Weakened immune systems, being significantly overweight, too much alcohol, diabetes or hypertension all make fighting an infection tougher.

We obtain an active protective Covid antibody immunity by; a) getting Covid or b) by vaccination. Here is where the rubber meets the road, so what path are you choosing, the natural path or the vaccination path?

This appeared to be a decent article on Covid immunity. An over view of NCBI Covid information is contained here.

Johns Hopkins Physician on The Power of Natural Covid Immunity - The news about the U.S. Covid pandemic is even better than you've heard. Some 80% to 85% of American adults are immune to the virus: More than 64% have received at least one vaccine dose and, of those who haven't, roughly half have natural immunity from prior infection. There's ample scientific evidence that natural immunity is effective and durable and public-health leaders should pay it heed.

**Vaccines** (back to index)

The following is my opinion, it is not a recommendation but to those dear to me this is what I'd tell you.

My personal opinion about these 3 vaccines after researching everything as carefully as I could, is ...

FACT - These mRNA vaccines are carry much higher rates of adverse effects and death than any other vaccines in use over the last 30+ yrs. It concerns me our government is not being truthful about this ....

FACT - Over the last several decades, the FDA has withdrawn approval and shut down production on ten other vaccines that had less deaths and less adverse effects than these 3 Covid vaccines. It concerns me our government is not being truthful about this ....

FACT – Other Covid useful, readily available and low cost treatment options are not being shared with the American public, worse some are being unjustly maligned through disinformation campaigns. It concerns me our government is not being truthful about this ....

FACT – Some doctors, nurses and scientists are beginning to speak out about their health concerns related to Covid vaccinations. Some are indeed being fired for declining the vaccine. It concerns me our government is not being truthful about this ....

FACT – There have been reports of children under the age of consent, being given the vaccine without their parents' permission. Only a parent should be making medical decisions for their child. In this case, a child walked in without a parent and was vaccinated without the parents' consent." It concerns me our government is not being truthful about this ....

#### Traditionally Developed

raditionally developed vaccines culture the microscopic virus pathogens in a laboratory setting (making billions more of them) and then those tiny pathogens are either used "live" in very small amounts, or otherwise "disabled or modified in one manner or another" or "killed" so they will have no ability to harm our cells. These virus pathogens are then mixed into a sterile liquid soup that that carries them from vial, to the syringe to our tissues. Once injected into our bodies our wonderfully designed immune system begins to make what are called antibodies to either kill or disable the pathogens ability to damage our cells. Our bodies respond to these kinds of vaccines as they would respond to an actual infection, so what a traditionally developed vaccine does is prestart the antibody production process via a simulated small scale and/or weakened infection.

Regardless of the method used listed above, all of these are <u>PROVEN</u> effective methods for vaccines with less deaths and side effects. These methods do come with some adverse reactions and occasional deaths, but many times less than the Covid vaccines we are using now.

The virus pathogens and antibodies compete for our cells, with some pathogens there will be a fight between the pathogen and the antibody, in other circumstances it's more of a race to see who can get to each cell first, the first one to the cell wins.

**Current USA Covid Vaccines** 

KEY-PROMPT ACTION

**Modified mRNA Vaccines** a link to a cool graphic of vaccine history

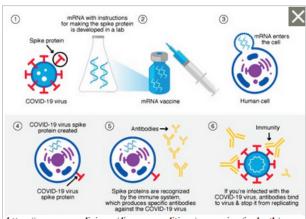
It's NEW! While some like to say the mRNA vaccines are not new and have been in use for over 3 decades, that's a gross exaggeration. It wasn't until 2005 that they finally figured out how to conquer the massive inflammation synthetic mRNA caused in mice. It is true that they had been playing around with mRNA since 1978. That same year they published a paper, but it was largely ignored. In 2006 the two developers of mRNA obtained several patents on their invention and formed a company, but their funding ran out and they shut down. They have been discussed and experimented with for perhaps 30 years, but not used in humans until recently. Fast forward to 2013 and two companies (Moderna and BioNTech who later partnered with Pfizer) took interest in the new synthetic mRNA therapeutic and set up new development programs to treat several infectious diseases. The first clinical trial of an mRNA vaccine was in 2013. All prior research occurred only in mice. I found some reports of human mRNA use, but not in this country. Not until the Covid-19 outbreak, had an mRNA vaccine ever been tried in Americans.

The two creators of mRNA founders were reportedly the first to receive the new

Covid mRNA vaccine. Here is a history of mRNA vaccine development and the messy issues surrounding mRNA.

Vaccines Emergency Approved for Covid in the USA will be discussed below. Several others are in use worldwide. For transparency, I have declined to be injected with any current USA produced Covid vaccine. Again, I'm not anti-vax.

mRNA vaccine in simple English, these types of vaccines trick our immune system using an instructional mRNA strand, (which is a copy of a portion of a DNA strand, with the instructions telling our cells what to make) into making one of the proteins found on the Covid virus. While it's not unusual for our cells to make proteins, what is different is they are actually making a protein (said to be harmless) that is found on the Covid virus. At this point, understand it's not initially the protein that would fight Covid. This imitation Covid virus protein cannot give us Covid and is supposedly is not able to cause any other troubles within our body. (See my thoughts below) Once the harmless Covid virus proteins (actually many) are released out of the cell, our immune system sees them, flags them and perceives it to be hostile and then begins the standard course of ramping up all the immune system responses to fight it. So, the antibodies are now actively floating in our body (and I'm quessing so are those fake Covid virus proteins our body made as well, at least for some period of weeks?) waiting until or when the actual virus shows up. My thoughts about mRNA vaccines - Again, I'm the stupid guy here, but I find it somewhat troubling that my body is making antibodies which don't have anything to attack. I supposed it seems a little bit like calling wolf to many times, so I wonder would our body's



https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/different-types-of-covid-19-vaccines/art-20506465

## mRNA vaccine

A mRNA vaccine is made using mRNA that gives your cells instructions for how to make the spike protein found on the surface of the COVID-19 virus. After vaccination, your immune cells begin making the spike protein and displaying them on cell surfaces. This causes your body to create antibodies that can fight the COVID-19 virus.

immune system eventually get tired of doing something (fake mRNA protein production) it doesn't need? I also think it might be best to begin with a much smaller vaccine dose, say 10% of what is being given now, wait 12 weeks and then use a that some dose again. In my head, I see our immune systems as smart, they may actually learn then know if they are being tricked or not, so under the current vaccination process the antibodies could fall off very fast because there is no real need for them and our smart immune system does not want them always floating around in our body. I think the dose given is too large, it creates too much of a response which may cause the antibodies to fade so fast. I'm also wondering what happens to the mRNA does it pile up or somehow evaporate? Where exactly does it go once done? And I'm also wondering about where all these Covid spike proteins go that our cells made to fake infection? I have read that they merely disappear. Hmmm .... in my mind you set your trash out on the street and it magically disappears, but in truth, it ends up piled somewhere else after a garbage truck comes and picks it up. Some studies suggest that these spike proteins are very harmful, the real villains of the virus, so why wouldn't the same spike proteins in the vaccine be hazardous too?

<u>Pfizer-BioNTech COVID-19 Vaccine</u> - Is a Modified mRNA Vaccine. 2-shots are given 21 days apart. <u>Per the CDC website</u>, nearly all of the ingredients in COVID-19 vaccines are ingredients found in many foods – fats, sugars and salts. The <u>Pfizer-BioNTech COVID-19 vaccine (COMIRNATY)</u> also contains a harmless piece of messenger RNA (mRNA). The COVID-19 mRNA teaches cells in the body how to create an immune response to the virus that causes COVID-19.

My comments – the Pfizer clinical trial protocol was to begin with 4 different concoctions of their vaccine, identified as BNT162a1, BNT162b1, BNT162b2 and BNT162c2. It was not clear to me in the information I could find as to when the transition was made to just the BNT162b2 type. The amendments to the protocol were missing. As I understand it, human trials made by BioNTech over in Europe revealed the other 3 would not be the best course of action, thus the other 3 versions were dropped.

Moderna COVID-19 Vaccine – Is a Modified mRNA Vaccine. 2-shots are given 28 days apart. The following is from the CDC website; All COVID-19 vaccine ingredients are safe. Nearly all of the ingredients in COVID-19 vaccines are ingredients found in many foods – fats, sugars and salts. The Moderna COVID-19 vaccine

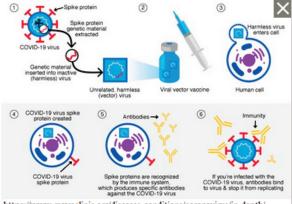
contains a harmless piece of messenger RNA (mRNA). The COVID-19 mRNA teaches (back to index) cells in the body how to create an effective immune response to the virus that causes COVID-19.

**My comments** – if I had to be force injected with a choice between these two, I suppose it would be with the Moderna version, but I still have the concerns listed above.

## **Viral Vector Vaccines**

Also relatively new. Viral vector vaccines began being researched back in the 1970's but didn't really start getting used until the last two decades. There are 6 different types.

Viral vector vaccine in simple English, these types of vaccines trick our immune system using an instructional DNA strand made from another virus deemed harmless but joined with the Covid virus spike protein to create a new DNA sequence. Once injected, the vaccine harmless virus enters our cells where it uses our own cells internal machinery to create the spike proteins found on the Covid virus. From this point, the process is the same as it is for the Pfizer mRNA virus. While it's not unusual for our cells to make proteins, what is different is they are actually making a protein (said to be harmless) that is found on the Covid virus. Again, understand it's not initially the protein that would fight it that is being made, it's the protein of the Covid virus. This imitation Covid virus protein cannot give us Covid and is supposedly is not able to cause any other troubles within our body. (See my thoughts below) Once the harmless Covid virus proteins (actually many) are released out of the cell, our immune system sees them, flags them and perceives it to be hostile and then begins the standard course of ramping up all the immune system responses to fight it. So, the antibodies are now actively floating in our body (and I'm guessing so are those fake Covid virus proteins our body made as well, at least for some period of weeks?) waiting until or when the actual virus shows up.



https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/different-types-of-covid-19-vaccines/art-20506465

### Viral vector vaccine

A viral vector vaccine is made when genetic material from a COVID-19 virus is inserted into a unrelated, harmless virus. When the viral vector gets into your cells, it delivers genetic material from the COVID-19 virus that gives your cells instructions for how to make the spike protein found on the surface of the COVID-19 virus. Once your cells displace the spike proteins on their surfaces, your immune system creates antibodies that can fight the COVID-19 virus.

**The J&J is a recombinant rDNA vaccine**, meaning that the DNA within the vaccine was built from several sources to create a section or sequence of DNA not otherwise found naturally.

Johnson and Johnson Jansen Vaccine - From the CDC website All COVID-19 vaccine ingredients are safe; Nearly all of the ingredients in COVID-19 vaccines are also the ingredients in many foods – fats, sugars and salts. The J&J/Janssen COVID-19 vaccine also contains a piece of a modified virus that is not the virus that causes COVID-19. This modified virus is called the vector virus. The vector virus cannot reproduce itself, so it is harmless. Scientists began creating viral vectors in the 1970s. My thoughts about viral vector vaccines – Once again I'm the stupid guy here, I have the same concerns as I did in my above comments for the mRNA vaccines, but I also have an additional concern about the blended DNA virus strand that is now floating around in my cells. How long will it be in my cells, if it dies off, how and where does the trash of it end up?

## Other substances that "some" say(?) "may be" in these new Covid Vaccines

For those medical professionals who are curious, the following links are to studies or other sources regarding substances that a few concerns were expressed (by some medical professionals labeled as anti-vax'rs) that these substance may be in the vaccines, but not disclosed.

Liquid Crystals: An Approach in Drug Delivery – Nov 2019 Liquid crystal systems are attracting significant attention due to their unique microstructures and physicochemical properties. Liquid crystals are becoming the choicest system for R and D professionals in the formulation development sector. Drug delivery to desired biological targets can effectively be achieved using liquid crystals system. Also Liquid Crystal Systems in Drug Delivery Jul 2016, Liquid crystals have been recently studied as novel drug delivery system. The reason behind this is their similarity to colloidal systems in living organisms. They have proven to be advantageous over Traditional, Dermal, Parentral and Oral Dosage forms. Liquid crystals are thermos-dynamically stable and possess long shelf life.

KEY — PROMPT ACTION

Hydrophobicity drives the systemic distribution of lipid-conjugated siRNAs via lipid (back to index)

**transport pathways – Feb 2019** Lipid-siRNAs are targeted to lipoprotein receptor-enriched tissues, eliciting significant mRNA silencing in liver (65%), adrenal gland (37%), ovary (35%) and kidney (78%). Efficient delivery of therapeutic RNA beyond the liver is the fundamental obstacle preventing its clinical utility. Lipid conjugation increases plasma half-life and enhances tissue accumulation and cellular uptake of small interfering RNAs (siRNAs).

mRNA vaccine delivery using lipid nanoparticles 2016, mRNA vaccines elicit a potent immune response including antibodies and cytotoxic T cells. mRNA vaccines are currently evaluated in clinical trials for cancer immunotherapy applications, but also have great potential as prophylactic vaccines. Efficient delivery of mRNA vaccines will be key for their success and translation to the clinic. Among potential nonviral vectors, lipid nanoparticles are particularly promising. AND mRNA-lipid nanoparticle COVID-19 vaccines: Structure and stability - May 2021, A drawback of the current mRNA-lipid nanoparticle (LNP) COVID-19 vaccines is that they have to be stored at (ultra)low temperatures. Understanding the root cause of the instability of these vaccines may help to rationally improve mRNA-LNP product stability and thereby ease the temperature conditions for storage.

Other related topics about what might be in the vaccines; Magneto proteins - graphene oxide structures -

## New drugs in the pipeline, "not yet approved"

There reportedly over <u>118 new vaccine candidates in</u> the clinical trial pipeline. With such a long list, I'll not dive into them here, but you can check them out on the <u>clinicaltrials.gov</u> website if you desire.

Meissa Vaccines – (I tried to get into this phase 1 clinical trial, they are at this time working thru Phase 1 trials.) has presented early clinical data on its nasal COVID-19 vaccine, revealing the highest dose of the recombinant live attenuated candidate triggered similar nasal antibody levels to natural immunity. Advocates of nasal COVID-19 vaccines see the delivery method as more than just a way to persuade needle-phobic people to get vaccinated. The broader case for nasal vaccines centers on the levels of antibodies in the upper airways where SARS-CoV-2 infections take root. Injected vaccines are good at providing systemic immunity but have less effect on the nose, potentially increasing the chances that vaccinated individuals will contract and pass on the virus, albeit without falling severely ill.

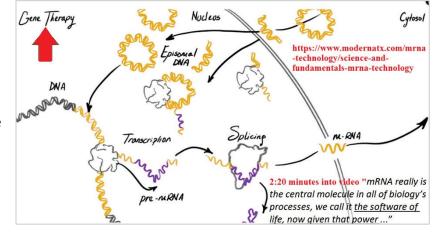
Other <u>Coronavirus vaccines are rolling out quickly</u>. <u>Here's where the pipeline stands</u>. If you're the curious type, this link has a lot of info about other vaccines in use around the world.

## **Known Adverse Vaccine Side Affects**

While I do not direct people to get or not get any vaccine, I do advise them they really need to understand the risks then make their own decision, which requires effort in seeking information about the risks and benefits. We are being told, there is no risks and the vaccines are perfectly safe. Unfortunately that's **not the whole truth**, we are only being allowed to hear the benefits side of this and all info about the risks is being silenced. What I'm hoping to do is provide you with good info about the risks that appear to be true from everything I can determine. The decision is still yours. The point of me mentioning it is, today we live in a time when people can be not only killed by biological weapons, but

biologically and genetically altered. How much and to what degree I don't know.

The screenshot to the right is from a <u>video on</u> <u>Moderna's own website</u>, the slide is labeled "gene therapy" and the person speaking calls mRNA it "the software of life". In that context, the Moderna representative is indeed saying, we can change and write new code for the human body. While the context is regarding the Covid vaccine, the technology may be expandable to much more than that. <u>Some websites</u> suggest <u>mind control</u> is <u>going on</u> today. Literally there are several hundred videos regarding vaccine



(back to index) death, adverse events and experiences by very credible medical and science professionals and personal testimony by those affected that have been censored away from main stream social platforms, to a few remaining independent posting platforms like rumble and bitchute. I cannot begin to post a fraction of them.

WARNING - Yet I need to advise caution and ask you to think critically, do not to be swayed by your emotions when reading, viewing or listening to all this media. Some videos are production videos made to sensationalize the video content, to induce fear, panic or anger and they reach conclusions not supported by verifiable text, audio or video content. Perhaps these people are using the same ploy they have witnessed the Biden administration doing and want to instill fear and panic too! Good content will provide the source for info presented. I tried to select the links I thought used credible first hand evidence, personal testimony or highly credentialed people. Do not be swayed by everything you read of view, but think critically.

Recently America crossed a point in time, where on one side just a few years ago free speech was allowed to today, the other side where social platforms are censoring (eliminating) and choosing what you are allowed to view. I view that as extremely dangerous to freedom and liberty. What is censorship? Censorship is branding anything they do not agree with as "disinformation" or "not matching their idea of truth" which now with these new credible sounding identifiers can be silenced, taken down and eliminated. This troubling censorship means we have to dig deeply, searching on our own and that we have to verify the claims made. Freedom means its ok if there are differing opinions, in fact free speech welcomes differing opinions, critique and collective reasoning. I recall being at my nephew's Army's boot camp graduation where they showed a video of war protesters from the 60's and 70's, afterwards the Army Colonel addressed those of us in the audience and said, "it's because we fight for democracy and freedom, that these protests are allowed, we fight so they can have their voice, even when it's against us." That is so true, but sadly America is no longer allowing the voice of freedom, it's being hijacked by powerful radicals who define freedom to speak only if it agrees with them.

It is not ok to shut-down the real life voices of those harmed by Covid vaccines as; Bing/Google search engines, Facebook, Instagram, reddit, twitter and YouTube have done. Twitter even went so far as to ban the obituary of a woman who died from the vaccine. She didn't want to get the vaccine, but the Washington State Governor Jay Inslee, required it, her death is on his hands. The fact is, she and many other would be alive today, except for these vaccine mandates. Communist countries do this, they hide the truth and persecute the innocent, this is not freedom, this is Satanic driven oppression.

When we take back our country, let's try these corporate and political leaders, fine the heck out of them and lock them up for 10 years or so. Hundreds of thousands of people are grieving either personally or for a loved one and these social platforms are maliciously silencing their voices allowing misguided and injury laden propaganda to flourish. Their experience is the truth and truth is being silenced. So the question is why? Across the world with regards to Covid a lot of stuff just doesn't make sense, so we are wise to question much of what we are being told. Something else is going on, perhaps a bigger and more sinister plan? If not that, then we are being led by complete fools.

No fear ... I am a sinner, a uneducated 9th grader, but I'm one among many who are saved by grace, because I personally trust in the redemptive gift and power of Jesus Christ. I have read the Biblical prophecies about the end times and last days, I know the end game, I know how all this wraps up, I know that evil will overtake and control the whole world, I know this is the time and we are the generation that is going to see the grand finale, but I have no fear, I have a peace that passes all understanding. It's not surprising that the devil is getting his way, the Bible tells us that "Satan is the god of this world" until he will be taken out of it. For now, God is letting Satan have his way with men and women who are willing to join with Satan for a brief period of power, control and celebration. They will come for us, they will attack us, they will imprison us and kill some of us. So do not be surprised at what we see, remain faithful to God, trust God even through suffering and even death, on the other side awaits our reward.

## Topic Related Video Links on Vaccine Injury's

KEY-PROMPT ACTION

MUST WATCH > Vaccine Injury and Deaths Testimony This link is one of many social media band videos, it is a panel convened for a meeting in Washington DC, by Senator Ron Johnson of Wisconsin, of people who have been directly injured by the Covid vaccines. Also doctors and medical professionals each giving their testimony of what they experienced are experiencing and have seen regarding vaccine side effects. Some of these participants where in the clinical trials. Warning, you may be crying within the first 13 minutes.

**VERY GOOD** > Medical Professionals Gather for a Summit about Vaccine Deaths and adverse Side effects

<u>Aaron Siri, Vaccine and Civil Rights attorney</u> – discusses that since the Covid vaccine program (back to index) began, they have received an avalanche of inquires that they cannot keep up with. Many clients are medical professionals who were injured.

Other social media banned "Covid vaccine injury" videos. (over 700 meta search results) Many are those personally effected just trying to get their story out. Some may have unconfirmed claims.

**Censorship Evidence** - A Facebook group formed for "Covid vaccine injury victims" to post comments was closed by Facebook. However, a caring person decided to go down the Facebook page, believing that the cancel culture mindset of Facebook would at some point in the future, shut it down and it was shut down. This was the Facebook link to the Covid Vaccine Victims, you'll see it's been shut down by

Facebook. https://www.facebook.com/groups/299493215066149

Canadian Doctor- 62% of Patients Vaccinated for COVID Have Permanent Heart Damage

<u>Canadian Viral Immunology Professor</u> - Speaks about the very real injuries occurring related to Covid vaccines that are being censored away. Excellent review of what's wrong about these vaccines and why traditional vaccines are better.

<u>A Doctor shares her opinion</u> after taking a deep dive into the Covid vaccines. She describes several ways it harms your body.

A town hall meeting regarding legal class action lawsuit about whistle blowers coming out.

<u>Public comment by several</u> people in a tele-meeting to the <u>FDA vaccine approval panel</u>. All warning them NOT to ignore evidence of harm caused by the vaccines and to not approve vaccines to children.

Dr Peter Doshi, an expert and professor who <u>provides insight</u> into how he instructs his students to critically review "studies" and does so while poking holes in the Covid vaccine mandate.

Dr. Peter McCullough <u>Speaks at the Florida Covid Summit 11/6/21</u> Concerns about vaccinating children. Natural immunity.

**Alyssa Mossman Darrow,** THE VACCINE WAS PASSED ON TO THE BABY through her breast milk then the baby developed a full body rash.

Karen Kingston, a former Pfizer employee and current analyst for the pharmaceutical and medical device industries, came forward with <u>indisputable documentation regarding the ingredients</u> in the Covid vaccines. <u>Graphene oxide</u> and nanoparticles. Graphene is new and being explored in power storage systems.

Dramatic <u>changes to the blood</u> of those who have received the COVID vaccine. Images under the microscope, also the vaccine under the scope. Dr Barbell Decola, Also a <u>2<sup>nd</sup> video</u>, <u>with - Germany and Dr Felip VanWelbergen</u>, UK. Also <u>confirmed by toxicology Dr Armin Koroknay</u> who side by side compares vaccinated blood to regular blood. Another video of side by side blood work, of vaccinated and unvaccinated blood.

<u>Spike protein can enter the cell</u> nucleus enhancing DNA damage? - COVID-19 mRNA vaccines update, Nov 12, 2021 • This video discusses new surprise discovery (yet to be confirmed by other scientists) that SARS-CoV-2 full length spike protein can enter a cell nucleus.

This is a search result on "covid-19 vaccine adverse effects" at the pubmed.gov website.

## **NEW PFIZER DOCS REVEAL UNSEEN HARMS**

There is a very robust anti-vax crowd between the US and Europe. Concerns abound about a lot of vaccines and related health conditions. I decided to look at the data effort already compiled for Covid-19 vaccines. Frankly it was surprising. What's more, I found a deeper analysis that was able to narrow vaccine deaths and adverse events by lot numbers. There is so much data in charts, that I've located most of that in the <u>next section</u>.

Just in the USA ...

**709,084** reported adverse events from the Covid vaccines over **1-year**, vs **753,663** for all other vaccines combined from 1990 to date **(31years)**.

9,623 reported Covid vaccine deaths in
1-year, vs 5,228 for all other vaccines
combined from 1990 to date (31years).

**11,255** permanent disabilities reported from the Covid vaccines over **1-year**, vs **12,769** for <u>all other vaccines combined from 1990 to date **(31years)**.</u>

428 birth defects reported from the Covid vaccines over 1-year, vs 102 for all other vaccines combined from 1990 to date (31years).

| VAERS High Level Summary   |                                     |                             |                                  |           |  |
|--|-------------------------------------|-----------------------------|----------------------------------|-----------|--|
|  | COVID19 All other vaccines          |                             | US Dat                           | Data Only |  |
| VAERS Summary for COVID-19 Vaccines through 12/24/2021 <b>Event Type</b> | vaccines<br>(Dec'2020<br>– present) | totaled<br>1990-<br>present | COVID19<br>vaccines<br>(Dec'2020 | vaccines  |  |
| Time period>   | 12 months                           | 31 years                    | 12 months                        | 31 years  |  |
| Number of Adverse Reactions  | 1,000,229                           | 865,684                     | 709,084                          | 753,663   |  |
| Number of Life-Threatening Events  | 23,891                              | 14,292                      | 10,951                           | 9,891     |  |
| Number of Hospitalizations   | 110,609                             | 82,661                      | 45,960                           | 38,744    |  |
| Number of Deaths   | 21,002                              | 9434                        | 9,623                            | 5,228     |  |
| # of Permanent Disabilities after vaccination                            | 35,650                              | 20,635                      | 11,255                           | 12,769    |  |
| Number of Office Visits  | 156,455                             | 49,068                      | 137,817                          | 46,985    |  |
| # of Emergency Room/Department Visits                                    | 109,164                             | 212,286                     | 88,116                           | 202,817   |  |
| # of Birth Defects after vaccination                                     | 764                                 | 188                         | 428                              | 102       |  |

\*Note that the total number of deaths associated with the COVID-19 vaccines is more than double the number of deaths associated with <u>all other vaccines combined</u> since the year 1990.

# Several interesting articles, which seem to reveal broad corruption in the federal government. KEY — PROMPT ACTION

FDA Wants 55 Year Delay to Provide Pfizer Covid Vaccine Data

FDA only took 108 days to approve Pfizer's vaccine November 19, 2021 Yes, that's not a typo. The Food & Drug Administration, responding to a Freedom of Information Act request from scientists and researchers, has asked for 55 years, more than half a century, to publicize the data it relied on to approve Pfizer's Covid-19 vaccine. Talk about transparency in government, this case is an example of the horrendous nature of bureaucracies that move fast when they want to and literally slow to crawl and hide behind their own incompetence when they want to withhold information from the public. Fifty-five years from now, somewhere around the year 2076, is when the government says it can finally finish producing the requested documents. Funny, since the government used the same documents within a 100 day period to approve the Pfizer vaccine for emergency use authorization:

Sometimes when a crooked administration has to build an entire enforcement system apart from enacted law, which congress alone is tasked with that responsibility, they stumble and fabricated illegal new laws come and go with the wind. The Biden administration and OSHA are naked as jaybirds standing in the street.

In early May, the website of OSHA, which operates within the *Department of Labor* (DOL), updated its website to state the following: "If you require your employees to be vaccinated as a condition of employment (i.e., for work-related reasons), then <u>any adverse reaction to the COVID-19 vaccine is work-related</u>. The adverse reaction is recordable if it is a new case under 29 CFR 1904.6 and meets one or more of the general recording criteria in 29 CFR 1904.7."

More recently, that section has been altered to state this instead: "DOL and OSHA, as well as other federal agencies, are working diligently to encourage COVID-19 vaccinations. <u>OSHA does not wish to have any appearance of discouraging workers from receiving COVID-19 vaccination</u> and also does not wish to disincentivize employers' vaccination efforts. As a result, OSHA <u>will not enforce 29 CFR 1904's recording requirements</u> to require any employers to record worker side effects from COVID-19 vaccination through May 2022. We will reevaluate the agency's position at that time to determine the best course of action moving forward."

From this OSHA directive, <u>vaccine injuries to employees don't have to be recorded</u>. Anyone who has ever worked under OSHA covered industries knows, this is nothing but dirty politics. OSHA has always demanded full injury recording.

And from Chapter <u>6 Developing MCMs for Coronaviruses of a government publication</u> (back to index) released in 2016, (3 yrs before Covid) we read the following comment from the President of the company EcoHealth Alliance, which was the conduit for federal funding to the Wuhan Bio Lab in China, we get a glimpse of the mindset.

Daszak reiterated that, <u>until an infectious disease crisis is very real, present and at an emergency threshold</u>, it is often largely ignored. To sustain the funding base beyond the crisis, he said, we need to increase public understanding of the need for MCMs such as a pan-influenza or <u>pan-coronavirus vaccine</u>. <u>A key driver is the media and the economics follow the hype. We need to use that hype to our advantage</u> to get to the real issues. <u>Investors will respond if they see profit at the end of process</u>, Daszak stated.

When it comes to conspiracies, a number of websites are claiming that the vaccines contain micro particles, synthetic components, metal and crystal particles, which admittedly sound way out there. But, in an effort to see if I could find anything our government has been up to, I found the following:

The Government Is Serious About Creating Mind-Controlled Weapons May 2019, Genetically tweaking human brains To do this, Robinson's team plans to use viruses modified to deliver genetic material into cells — called viral vectors — to insert DNA into specific neurons that will make them produce two kinds of proteins. The first type of protein absorbs light when a neuron is firing, which makes it possible to detect neural activity. An external headset would send out a beam of infrared light that can pass through the skull and into the brain. Detectors attached to the headset would then measure the tiny signal that is reflected from the brain tissue to create an image of the brain. Because of the protein, the targeted areas will appear darker (absorbing light) when neurons are firing, generating a read of brain activity that can be used to work out what the person is seeing, hearing or trying to do. The second protein tethers to magnetic nanoparticles, so the neurons can be magnetically stimulated to fire when the headset generates a magnetic field. This could be used to stimulate neurons so as to induce an image or sound in the patient's mind. As a proof of concept, the group plans to use the system to transmit images from' the visual cortex of one person to that of another. "Being able to decode or encode sensory experiences is something we understand relatively well," Robinson said. "At the bleeding edge of science, I think we are there if we had the technology to do it."

I'm going to rabbit trial for a moment .... An interesting video "FunVax" shows a supposed (and thus not verifiably credible) military briefing being done by someone to a group of apparent military strategists, the content be it real or fake is chilling as it presenter calmly tells those in attendance that "we now have the ability to genetically reprogram people that are identified as religious extremists, by releasing a airborne virus into their air." The chilling part is it confirms what you just read in the prior paragraph. Remember the 1995 movie "The Net"? Just as creepy!

## Are the vaccines truly effective? You be the judge.

Mounting new evidence says NO to avoid catching Covid, but mostly YES to avoiding serious Covid hospital stays.

In Gibraltar, 100% of adults are <u>fully vaccinated against Covid-19 and yet new cases are exploding</u>

Amid a spike in positive Covid-19 cases, Gibraltar canceled official Christmas events and "strongly" discouraged people from hosting private gatherings for four weeks. The entire eligible population of Gibraltar is vaccinated. By <u>The Rio Times</u> November 17, 2021

**Covid-19 outbreak on** <u>cruise ship with 100% fully vaccinated</u> An outbreak of Covid-19 is reported on a cruise ship with more than 3,000 aboard even though the entire crew and all guests are said to be "fully vaccinated." Experts say it's just the latest example showing the fallacy in claiming vaccination halts Covid infection or spread: Covid has proven *not* to be a pandemic of the unvaccinated, as some had claimed.

So far, 5,800 fully vaccinated people have caught Covid anyway in US, CDC says By Ben Tinker and Maggie Fox, CNN Updated Thu April 15, 2021, About 5,800 people who have been vaccinated against coronavirus have become infected anyway, the US Centers for Disease Control and Prevention tells CNN. Some became seriously ill and 74 people died, the CDC said. It said 396 -- 7% -- of those who got infected after they were vaccinated required hospitalization. NOTE-the 74 who died reflects a death rate of 1.3%, the unvaccinated death rate is 1.6% of those infected. Getting vaccinated appears to have only a slightly better death rate (.3% or 17 less in this group of 5800 people) based upon this CDC update.

<u>Hospitalizations rising among fully vaccinated in U.S., Fauci</u> says. Nov. 17, 2021, As cases of Covid-19 rise throughout the U.S., health officials warn that an increasing number of fully vaccinated people are being hospitalized or going to the

emergency room. The concern about waning immunity against severe Covid infection comes (back to index) as the Food and Drug Administration is expected to authorize a Pfizer-BioNTech vaccine booster shot for all adults 18 and older. "What we're starting to see now is an uptick in hospitalizations among people who've been vaccinated but not boosted," Dr. Anthony Fauci, the director of the National Institute for Allergy and Infectious Disease, said Tuesday in an interview. "It's a significant proportion, but not the majority by any means."

Nearly 70 <u>Vaccinated Hospital Workers</u> Test Positive for COVID after Christmas Meal, 12/6/21, All of the professionals had been fully vaccinated—including with booster shots. Most of the workers who tested positive are asymptomatic although in a few cases they have reported mild symptoms. More than 50 hospital workers in Spain have tested positive for COVID-19 after attending a Christmas meal, according to local media reports. More than 170 health workers from the Intensive Care Unit of the Regional University Hospital of Málaga—located in the south of the country—attended the meal, with at least 68 people later testing positive for COVID-19, local media outlet Sur reported Monday, although health authorities had only confirmed 22 of these cases on Sunday.

Why COVID cases are surging in states with high vaccination rates — and what it means for the winter ahead, November 11, 2021, Coronavirus cases are surging in several U.S. states with relatively high vaccination rates, prompting concern among health officials who had hoped inoculations would help curb the COVID-19 pandemic. ... On paper, the latest case numbers seem ominous. In Vermont, which has the highest vaccination rate of any state in the country, new daily cases are up 49 percent in the past two weeks. More than 72 percent of Vermonters have been fully vaccinated, compared with 59 percent nationally. In neighboring New Hampshire, new daily cases are up 84 percent in the past two weeks (compared with a 7 percent jump over the same period nationwide), despite 63 percent of its population being fully inoculated. In New Mexico, new daily cases are up 46 percent in the same period, even though 63 percent of its residents are fully vaccinated.

Why a 'significant' amount of fully vaccinated people are being hospitalized with COVID-19, Nov 18, 2021 Fauci, the White House medical adviser on the coronavirus, said there's been a rise in hospitalizations among fully vaccinated people as of late, as those people have not gotten their booster shots, according to <a href="MBC News">NBC News</a>. "What we're starting to see now is an uptick in hospitalizations among people who've been vaccinated but not boosted," Fauci said, per <a href="MBC News">NBC</a> News. "It's a significant proportion, but not the majority by any means."

<u>Spike-Only Vaccine a Colossal Blunder</u>: Michigan State University Shows SARS-CoV-2 Vaccine Escape is Due to Vaccination, Dec 8 2021 - This article actually claims that vaccinated people are creating something he identifies as "negative efficacy" people who get vaccinated are going to get infected more.

<u>Pathogenic Priming in Belgium</u> - 100% ICU Admissions are Vaccinated, Nov 8 2021 – A Belgian doctor reports, Now, in Belgium, 100% of ICU admissions are among the vaccinated. Only 40% of the Belgium population are vaccinated\*

80% immunity from Pfizer vaccine lost in 6 months: Study - Sagar Malik 6 September 2021, COVID-19 antibodies generated by the Pfizer vaccine dipped by more than 80% six months after the second dose, a study conducted in the United States has found.



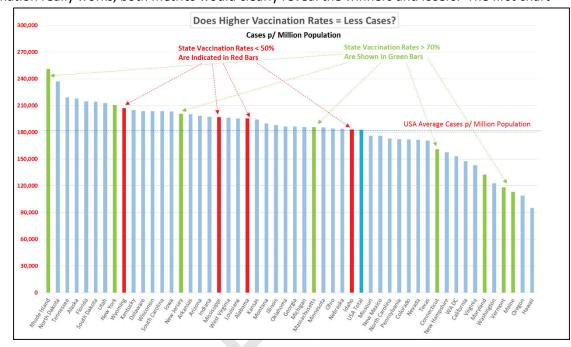
Right > Summary table of some of the adverse <u>vaccine</u> side effects reported on the governments <u>VAERS website</u>:

KEY-PROMPT ACTION

| The following table lists the number of adverse events found in the VAERS data |   |             |   |                   |        |  |
|--|---|-------------|---|-------------------|--------|--|
|  | Total (Non-   |             |   | Total (Non-       |        |  |
|  | Lethal)   | Total       |   | Lethal) Adverse   | Total  |  |
| FDA Listed Symptom   | Adverse Events  | Deaths      | FDA Listed Symptom                      | Events            | Deaths |  |
| Arthritis and Arthralgia/Joint Pain  | 61,748  | 178         | Other Allergic Reactions                | 1,775             | 3      |  |
| Anaphylaxis  | 40,575  | 158         | Encephalitis                            | 1,528             | 152    |  |
| Venous<br>Thromboembolism  | 17,533  | 956         | Autoimmune Disease                      | 1,073             | 22     |  |
| Myocarditis/Pericarditis   | 12,380  | 156         | Systemic Inflammatory Response Syndrome | 568               | 40     |  |
| Convulsions/Seizures   | 12,043  | 340         | Transverse Myelitis                     | 328               | 2      |  |
| Stroke   | 11,333  | 1,023       | Other Acute  Demyelinating Diseases     | 246               | 3      |  |
| Thrombocytopenia   | 4,087   | 303         | Narcolepsy, Cataplexy                   | 234               | 5      |  |
| Acute Myocardial Infarction (Heart   | 3,329   | 1,001       | Disseminated Intravascular Coagulation  | 174               | 53     |  |
| Pregnancy and birth outcomes   | 3,044   | 95          | Acute Disseminated<br>Encephalomyelitis | 136               | 3      |  |
| Guillain-Barre   | 1,856   | 34          | Kawasaki Disease                        | 53                | 1      |  |
| https://vaersanalys  | is.info/2021/12/1   | L1/vaers-su | ımmary-for-covid-19-vaccine             | s-through-12-03-2 | 2021/  |  |
| And remember, the nur  | And remember, the number of Covid vaccine atributed deaths is greater than - 19,700 |             |   |                   |        |  |

**Real data comparison** – Much is being said on the news and by our health care leaders that (back to index) vaccination results in fewer Covid infections and fewer Covid deaths, this is repeated so much so that it seems nobody would question how true it is or isn't. So the 9<sup>th</sup> grader decided to make a very humble comparison. Simply, by looking at states with high vaccine rates against states with low vaccine rates using cases and deaths p/million people as the equalizing metric. If vaccination really works, both metrics would clearly reveal the winners and losers. The first chart

below compares the cases p/million population with the green bars representing states with >70% vaccination rates against the states with red bars representing states with <50% vaccination rates. There are 4 green bars above and 4 below the USA darker blue average bar. This would suggest no apparent benefit to vaccination and cases. However, when we compare the 4 red bars they are all above the USA darker blue bar



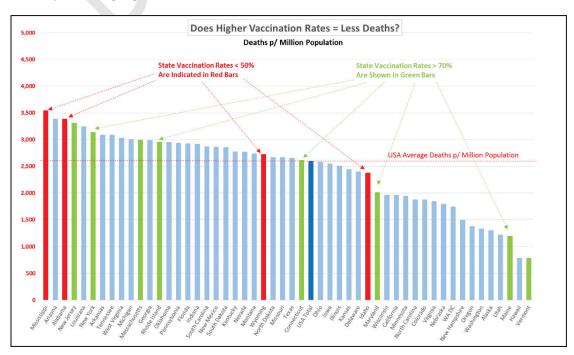
suggesting there is some benefit to vaccination. At best this chart reveals a "slight benefit" for vaccination, but it is nowhere as clear as it should be, because if vaccination was truly effective, all the green bar states would be to the right (lower # of cases p/million people) of the darker USA average blue bar and all of the red bar lower vaccinated states would be to the far left.

Data compiled from <a href="https://www.worldometers.info/coronavirus/country/us/">https://www.worldometers.info/coronavirus/country/us/</a> and <a href="https://usafacts.org/visualizations/covid-vaccine-tracker-states/">https://usafacts.org/visualizations/covid-vaccine-tracker-states/</a> on 1-8-2022 and melded into a common spreadsheet which resulted in these 2 graphics.

When it comes to vaccination verses Covid deaths, there are 5 green bars above and 3 below the darker blue USA average bar, with the green bars representing higher vaccination rates. There are 3 red bars above and 1 below the

darker blue USA average bar. This would suggest some benefit for vaccination, but again, it is nowhere clear as we might expect. If vaccination was truly effective, all of the green bars would be to the far right (lower death p/million people values) of the USA average bar and all of the red bars would be to the far left of the USA average bar.

In summary, the vaccine propaganda is not supported by the actual data. So I ask, am I missing something?



## PART – 5 Snapshot in Time, Covid & Vaccine Statistics

**COVID STATS** (based upon information known up to the first half of Nov. 2021)

(back to index)

I love data, but most of the places posting data are not giving us good and useful data. They are posting raw numbers like total number of cases, total number of deaths, total number of vaccinations and then the parrot news anchors reflect on one stat or the other going up or down, often mentioning that some state is worse than others. But those numbers on their own don't tell the real story let alone the more important aspects of the story. Hospitals likewise have joined in to talk about how they are overwhelmed with new cases providing some numbers but not the numbers that reflect the whole truth. Accurate balanced data, tells a truthful story, with truth we can make good decisions, with partial truth the wrong decisions can easily be made, because poor data is nothing more than propaganda. As you read through this section, I'll provide an example of good data that actually tells a different story and a more important story than we are being given.

Our USA population is apx 330 million, apx 74% (244 million) are 18 or older and about 12.5% (41 million) is 65 or older. Life expectancy is apx 74.5 males, 80.2 females. Reportedly Covid related deaths have already dropped our life expectancy values.

## Where is America in the mix?

The USA ranks the <u>highest in the world</u> for "reported" Covid cases and the highest in the <u>number of "reported" deaths</u>, out of 186 nations. We rank 165<sup>th</sup> in deaths p/100,000 population and we rank just about in the middle for the rate of deaths to Covid cases. This would suggest that if you get Covid in the USA and are hospitalized, the likelihood you'll

survive is right at the global median rate, no better or no worse. The two values in red mean that the USA has the highest total amount of confirmed cases in the world and the highest total amount of Covid deaths in the world. Notice China appears to be doing very well, ranked #2 of all nations. However, as a communist nation, you know dam-well they are not reporting cases or deaths accurately. Nobody should trust a nation that doesn't tell the truth.

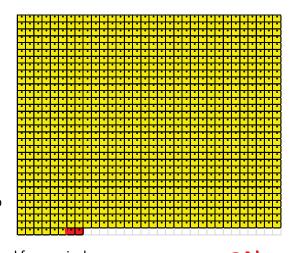
| Cases and mortality by country |               |            | https://coronavirus.jhu.edu/data/mortality |                   |      |                  |      |
|--------------------------------|---------------|------------|--|-------------------|------|------------------|------|
| rank                           | Country       | Confirmed  | Deaths                                     | Case-<br>Fatality | rank | Deaths/100K pop. | rank |
| 36                             | Burundi       | 20,162     | 38   | 0.20%             | 2    | 0.33             | 1    |
| 72                             | China         | 110,330    | 4,849                                      | 4.40%             | 171  | 0.35             | 2    |
| 1                              | Bhutan        | 2,623      | 3  | 0.10%             | 1    | 0.39             | 3    |
| 169                            | Mexico        | 3,826,786  | 289,734                                    | 7.60%             | 180  | 227.11           | 163  |
| 153                            | Belgium       | 1,438,830  | 26,200                                     | 1.80%             | 107  | 228.14           | 164  |
| 183                            | United States | 46,613,141 | 755,636                                    | 1.60%             | 94   | 230.21           | 165  |
| 119                            | Paraguay      | 461,413    | 16,266                                     | 3.50%             | 164  | 230.9            | 166  |
| 106                            | Slovenia      | 357,262    | 4,843                                      | 1.40%             | 78   | 231.95           | 167  |
| 133                            | Bulgaria      | 638,048    | 25,408                                     | 4.00%             | 170  | 364.23           | 182  |
| 162                            | Peru          | 2,207,890  | 200,469                                    | 9.10%             | 182  | 616.63           | 183  |
|                                |               |            | Median >                                   | 1.60%             |      | 58.5             |      |

**Note:** In many of the tables and graphics in this handout, you can click them to be taken to a linked website where the data originates.

## Another way to express two of these USA statistics is:

1.6% of the people in the USA who get Covid will die. But the overall odds are that 98.4% will live. That's encouraging!

people will die from Covid complications, but 99,769 people will live. Looking at the 1,000 people diagram to the right, it graphically shows the 2.3 unvaccinated people (red squares) who will die from Covid, compared to the 997.7 unvaccinated people (yellow) that will live after catching Covid. Depending on any other comorbidities you may have, the odds are actually quite good for survival.



good for survival.

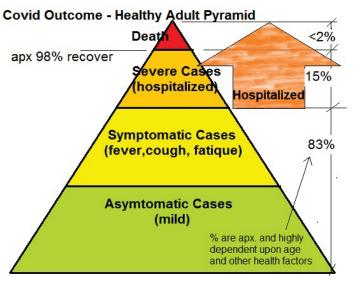
KEY — PROMPT ACTION

So when discussing the average overall odds of being hospitalized we can refer to the following (back to index) Covid outcome pyramid graphic. It's self-explanatory;



- 83% of those infected will have a mild to moderate case
- 15% of those infected will require hospitalization.
- < 2% (1.6%) will die from Covid.
- 98% of those who get Covid will recover.

Since these numbers reflect the entire number of reported cases, each of you has to consider that if you can be included into a comorbidity group, (you have other significant health issues already) then your personal odds get worse. We reviewed comorbidities in Part-3. But, with common sense early prevention measures that our government is not willing to talk about, that 15% hospitalized number could be cut in half or more.



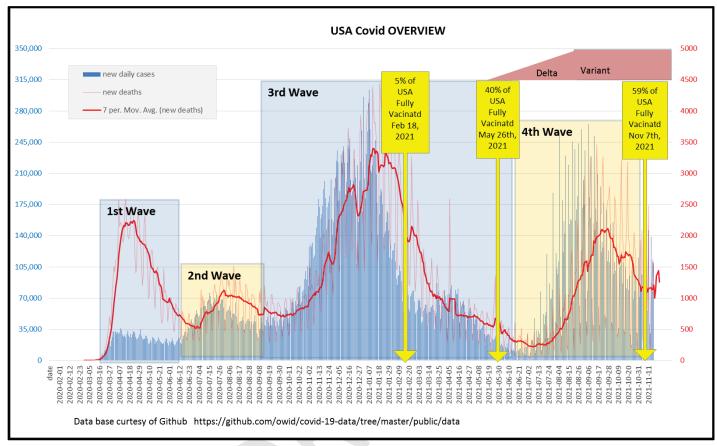
## **Fast Facts**

- Typically if you're going to die, you'll die in 28 days or less after testing positive.
- The risk of dying from Covid doubles with every 7 yrs of age above 35.
- There is a 96% reduction of risk of being hospitalized with Covid after being double vaccinated.
- However, evidence from the Israeli study indicates vaccinated people are likely to have less severe symptoms, but the study found that vaccinated people are more likely to get re-infected with Covid again than unvaccinated people who had Covid and recovered. "It must also be noted that the authors of the Science and Nature articles and most of the experts they cited did encourage inoculation given that the shots produced by Pfizer, Moderna and others are highly effective in preventing serious illness. Just not as effective as naturally-produced antibodies that come from being infected. This is especially true as the virus mutates."
- One study found that severe Covid illness will set in between 7-25 days of first symptoms, with 14 days being the median.
- Based on over 363 million Covid tests, there was a positive test rate of 3.6%.
- The top 3 post hospitalized Covid symptoms were; fatigue, muscle weakness and sleeplessness. About 9% of hospitalized Covid patients reported these symptoms at 3 and 9 months after discharge. 91% of outpatients report having no or mild symptoms.
- Placing isopropyl alcohol in a pad and placing it in front of the nose may relieve nausea.
- Covid has been <u>found in dogs, cats</u> and more recently in high numbers in <u>white tail deer</u>.
- Among 4.9 million studied patients, 94.9% had an underlying medical condition, the 3 most common underlying medical conditions were; 1-hypertention 50.4%, disorders of lipid metabolisms (high cholesterol) 49.4% and obesity (33%). The total exceeds 100% because some patients had more than one medical condition.
- Among the same study, the top risk factors for death with Covid were;
  - Obesity 1.30, Anxiety and fear related disorders 1.28, diabetes w/complication 1.26,
- Note fear and anxiety related disorders are the 2<sup>nd</sup> highest risk factor for death. (And what is your president and vice president doing, spinning more fear into the public!) This means that literally the Biden/Harris team are responsible for the deaths of perhaps hundreds of thousands of Americans.
- Blood clots <u>According to a recent study</u>, 25% to 49% of patients with severe COVID-19 also experience blood
  clots with blood clots in the lungs being the most common condition. These blood clots can be limb- and lifethreatening.

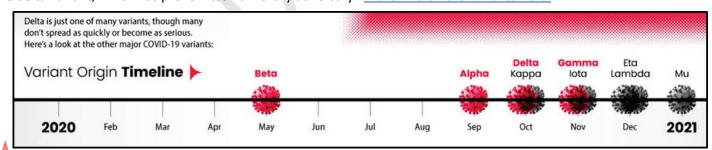
**Note:** In many of the tables and graphics in this handout, you can click them to be taken to a linked website where the data originates. Otherwise, the website location of the raw data and/or graphic is noted on the graphic.



The deaths in the 1st wave were very high compared to cases, the 3<sup>rd</sup> wave was clearly the (back to index) worst with respect to volumes of cases and deaths. In the 4<sup>th</sup> wave we see an erratic patterns of daily new cases and daily deaths which was slightly more subdued than the 3<sup>rd</sup> wave. Perhaps increased vaccinations offset (?) the anxiety that the Delta variant would be more severe. The 3<sup>rd</sup> wave was the deadliest and the longest lasting. The current Omicron variant, is going to exponentially create a bigger infection wave, but result in lower than average deaths.

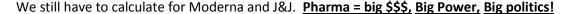


The following graphic indicates the when the various Covid variants showed up. The USA is nearly entirely in the grips the delta variant, which has proven itself a worthy adversary. More info on the variants here.



**Follow the money** as they say, so let's do that. Reportedly Pfizer is going to make \$36 billion from the Covid vaccines just in 2021. Let's break that down.

- \$36,000,000,000 / (365x24x60 = 525,600 minutes) = \$68,500 EVERY MINUTE of the entire year and that's just Pfizer. OR
- To put it another way, over 500,000 thousand American families could have an annual income of over \$70,000 for a year, OR
- 10,000 families would each receive an annual income of \$72,000 for 50 yrs.
- Now imagine if they say wanted to bribe "or encourage" political representatives to vote favorably for their company or industry. Between the congress, the president and the Supreme Court there are only 545 political leaders that need to be "encouraged" (each would get \$66-million) for any industry to get votes to go their way.

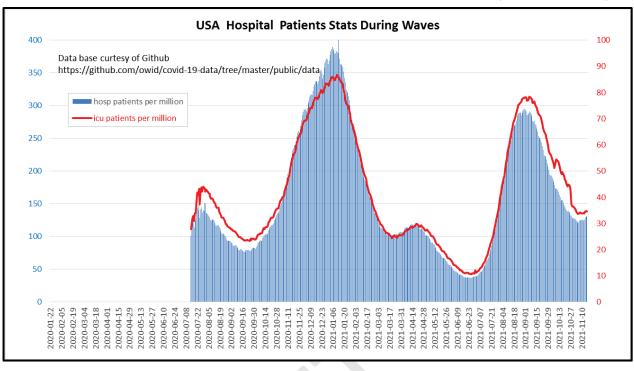


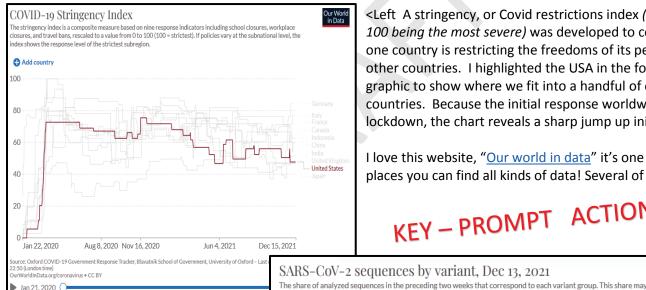


Hospital patient's verses ICU patient's p/million while less for the 4th wave, still indicate a

(back to index)

direct relationship between the two during each of the last 3 waves that that data was collected. It's too early to predict the behavior of any future waves being better or worse than the 4<sup>th</sup> wave we are currently in.



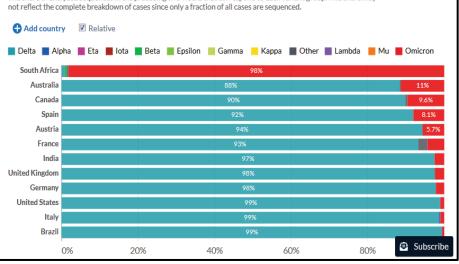


<Left A stringency, or Covid restrictions index (0-100, with 100 being the most severe) was developed to compare how one country is restricting the freedoms of its people with other countries. I highlighted the USA in the following graphic to show where we fit into a handful of other countries. Because the initial response worldwide was a lockdown, the chart reveals a sharp jump up initially.

I love this website, "Our world in data" it's one of the places you can find all kinds of data! Several of the slides

# KEY-PROMPT ACTION

Right> This graphic shows the dominance of the Delta variant in several countries, including the USA. Notice it indicates 11 different variants. Omicron is coming on strong and is expected to replace the delta variant within a couple of months.



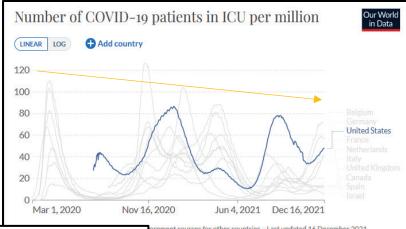
Our Work in Data

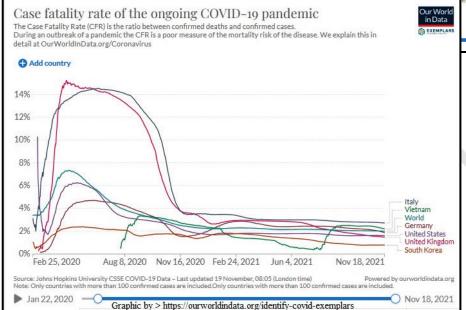
Right> This graphic of a few selected countries, reveals the waves of the serious ICU cases

(back to index)

Dec 16, 2021

involved with Covid infections. Sometimes these waves don't appear to makes sense, like being in rush hour traffic where all the lanes move freely and then back up to a crawl for no apparent reason. It also reveals that the numbers are small averaging <50 ICU patients p/million people. From local experiences, we know that various regions of the USA will be hit with much higher ICU numbers, peaking closer to 100 p/100,000 rather than the broader USA average. Noticed the overall trend line (in orange) is going down.



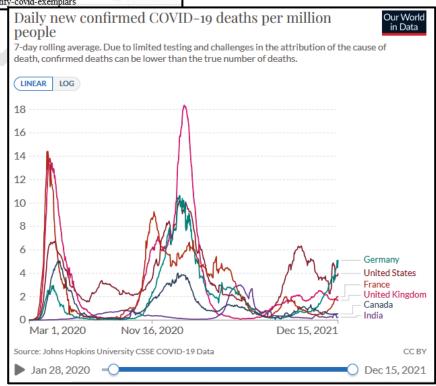


<Left During the first 8 months of Covid, the fatality rate was very high, >14% of all cases for some nations. Since then with a better understanding of how the Covid attacks the body and what treatments to use, the fatality rate has gone way down. Globally deaths hover around 2% of cases.

NOTE: Covid During the initial lockdown the amount of "expected normal deaths and accidents" fell way off the normal. This occurred because people were not working, driving and doing things that got people killed.

Right> This graphic reveals that over time, on a rolling 7-day average deaths p/million people are overall declining, likely due to better treatment methods and vaccinations. However, the cyclic waves remain.

When it comes to Covid hospitalizations, one study suggests that roughly 12% to 50% of all Covid hospitalizations are mild cases, where patients were actually admitted for another cause, but after admission tested positive for Covid and wouldn't be in the hospital for Covid complications thus making this statistic unfairly skewed, ie to make it seem worse than it is.

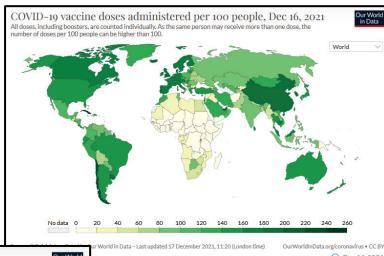


## **General Vaccine Statistics**

The USA has become a vaccination nation. Now, our children may receive as many as 27 shots (back to index) by 2 years of age and up to six shots in a single visit. However, in the same way that the DTaP and MMR vaccines were combined, new combinations are being made to reduce the total number of shots. Adults are pressed annually to get flu, shingles and of course Covid vaccinations. I do believe that we have produced some vaccines that are great and worthy of serious consideration, but I am also concerned that injecting babies, toddlers at such young ages, amplifies the potential for harm as their little bodies would certainly be more susceptible to biological injury.

Right> The world is engaged in fighting this pandemic together, yet the nations within African continent apparently not in the vaccination game. The darker the green, the more vaccinated.

# KEY-PROMPT ACTION

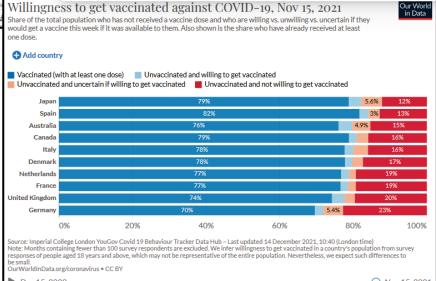


COVID-19 vaccine doses donated to COVAX Shown is the number of vaccine doses donated to the COVAX initiative by each country. Donations are broken down by whether they have been announced, donated, or delivered. Add country Relative Doses delivered Doses donated but not yet delivered United States 800 million 345.55 million European Union France 120 million 60 million 100 million Spain 30 million Italy | 45 million United Kingdom 100 million Canada Sweden 40.8 million Sweden 6 million Belgium 6.1 million Norway Denmark Portugal 4 million New Zealand Switzerland 4 million Ireland 13 million Hong Kong Finland 3.65 milli Netherlands 27 mil 27 million United Arab Emirates 1 million Graphics & charts by > https://ourworldindata.org/covid-vaccinations 300 million 500 million 0 100 million 700 million Source: COVAX, ACT-Accelerator Hub. Data as of October 22, 2021. Note: COVAX is a worldwide initiative aimed at equitable access to ( ble access to COVID-19 vaccines. It is directed by

<Left In an effort to reach poorer countries with the Covid vaccine, modern industrialized countries have paid for vaccines to be delivered to those who want them. The USA is leading the pact in this effort.

Interestingly China, where this all started is absent from helping out poorer nations? More interesting is no communist country is helping poorer nations.

Right> For selected countries, this graphic clearly shows the comparative rates of those vaccinated against those unwilling to be vaccinated. I could not get the USA to remain displayed in this group, but roughly 25% of the U.S. citizens are unwilling to get the jab. You'll see in the next data section we do have good cause for concern.



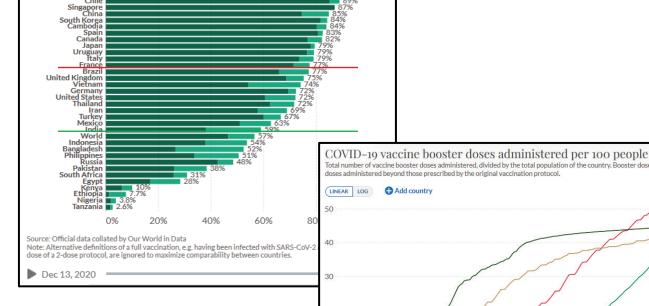


Our Worl in Data

United Kingdom

O Dec 16, 2021

< left Another chart indicating the vaccination rates in selected countries. The red line distinguishes the top 10 most vaccinated.

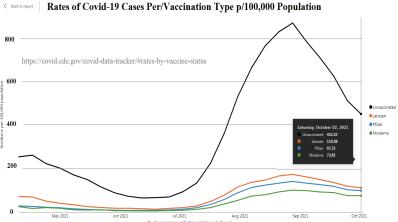


Share of people vaccinated against COVID-19, Dec

Share of people fully vaccinated against COVID-19 Share of people only partly vaccinated against COVID-19

Portuga Chile

Right> This chart is self-explanatory, Chile is apparently getting super aggressive while Israel started booster shots very early.



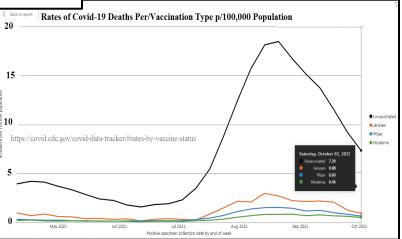
< Left It's clear that those of us seeking natural immunity are taking a hit being 4-5x more likely (down from 8.5x) to get "initial" Covid. The Moderna vaccine appears to offer slightly better immunity than the other two. However, notice the drastic decline in unvaccinated cases even though the unvaccinated have remained unvaccinated. This seems to support the lasting immunity and reduced possibilities of reinfection.

Oct 22, 2021

Dec 16, 2021

Right> This also indicates those of us unvaccinated and seeking natural immunity are taking a hit being 8x more likely (down from 18x) to die from an initial Covid infection. But the trend is sharply heading towards those vaccinated. With common sense good at home early treatment information, I would expect these unvaccinated rate to decline by half.

KEY-PROMPT ACTION



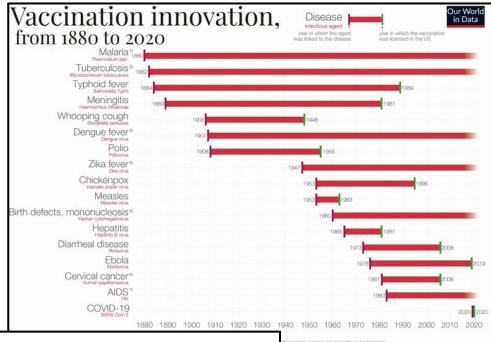
Add country

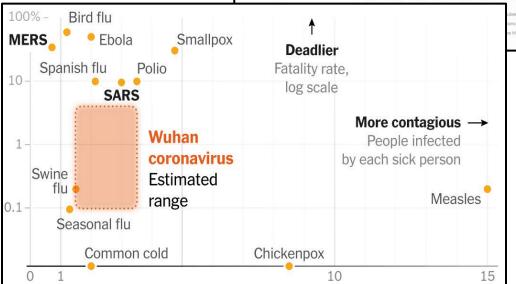
Sep 12, 2021

/orld in Data - Last undated 17 December 2021, 11:20 (London time)

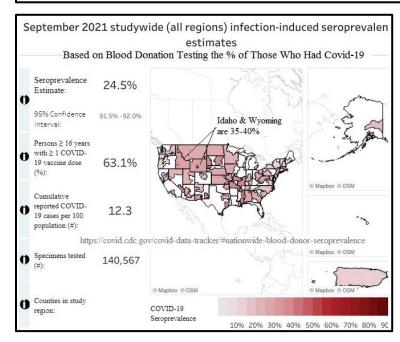
## (back to index)

Right> An overview of vaccines adopted and not adopted by the USA. A green cap on the right side means it's adopted by the USA.





<Left This cool chart puts the Covid virus into perspective with other viruses. The higher up the more deadly, the more to the right, the more contagious.



< Left This is chart shows what % of the population has natural immunity (*Covid infection induced*) based upon tests done on blood donations.

#### (back to index) HOW MANY PEOPLE DIE EACH DAY? This very cool graphic puts Covid deaths in perspective with the other things that kill COVID-19 deaths are in the news daily, but us. Please visit the "Visual how do they compare in a wider context? Capitalist" website to see a Each day, there are almost 150,000 deaths whole host of very neat globally. Below, we visualize these average graphics on a host of other daily deaths by cause, based on the most comprehensive source available, from 2017 topics. Heart and blood > At the end, we also show the scale of daily COVID-19 deaths to date. the leading cause of death worldwide CARDIOVASCULAR DISEASES Covid deaths are about tied NON-COMMUNICABLE DISEASE\* 48,742 with lower respiratory COMMUNICABLE DISEASE\*\*, AND MATERNAL, NEONATAL, AND NUTRITIONAL DISEASES infections. <left The red circle 6.889 represents the typical 7-day 7.010 average range of worldwide 10,724 Covid attributed deaths over DEMENTIA 26,181 LOWER the last 6-months of 2021. RESPIRATORY RESPIRATORY INFECTIONS CANCERS DISEASES 3,624 ( Diarrheal diseases are the second leading cause of death among children 3.406 4,887 4,300 LIVER 3,753 under age 5. 6,514 ROAD NEONATAL DIABETES DIARRHEAL Organization INJURIES DISORDERS DISEASES DIGESTIVE DISEASES 933 1,698 3,243 2.615 3,370 HOMICIDE PARKINSON'S MALARIA SUICIDE HIV/AIDS TUBERCULOSIS KIDNEY 355 DISEASE 635 ALCOHOL USE CONFLICT DISORDERS DRUG USE PROTEIN-ENERGY DISORDERS MALNUTRITION MATERNAL 809 MENINGITIS NUTRITIONAL 146 DROWNING DEFICIENCIES 26 72 c Terrorism often dominates media coverage, but makes up 198 HEAT 346 FIRE NATURAL a small proportion of total worldwide deaths TERRORISM (HOT AND COLD EXPOSURE) DISASTERS HEPATITIS POISONINGS KEY-PROMPT ACTION COVID-19 DAILY DEATH AVERAGES 2,205 Dec 31- May 15 Avg Estimates calculated based on different timeframes. COVID-19 4,517 Mar 11-May 15 Avg. (Declared a pandemic on Mar 11) 7 504 Apr 13-19 Avg (Peak week of deaths) CAPITALIST /visualcapitalist 🏈 🎯 @visualcap 🕟 visualcapitalist.con

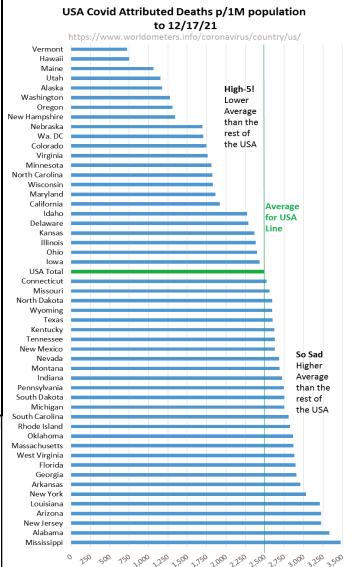
## Vaccines have indeed been effective, we do not have to be afraid of all vaccines. But none of these are mRNA type vaccines!

(back to index)

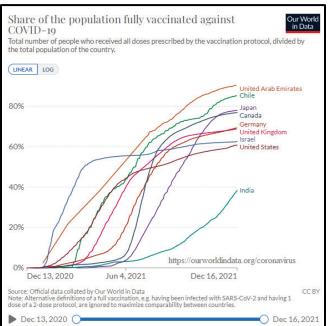


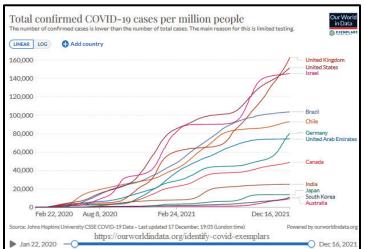
## **Below, How Each State Compares**





For the 2 charts below, some things do not appear to add up. When comparing most vaccinated countries, with confirmed cases, one would expect the confirmed cases would be flat or heading downward, but that's not the case. Could it be the vaccines are not working?





## **Vaccine Adverse Effects and Death Statistics**

## (back to index)

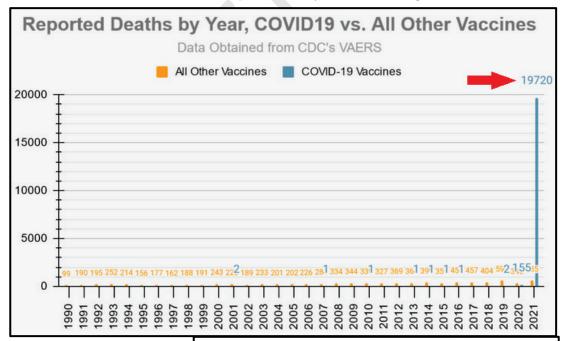
A website after my own heart, "<u>vaersanalysis.info</u>" has done extensive data mining from the <u>VAERS.HHS.GOV</u> website and put that info into predefined charts to reveal some very astonishing facts about the Covid vaccines. It's clear that the <u>Covid vaccines are far more hazardous to your health than any prior vaccines</u>. Why is this not being reported on the news? Why are all the news stations saying these vaccines are very safe? Clearly these vaccines are killing and injuring hundreds of thousands of people. <u>UPDATE -Nearly Over 1,000,000 adverse events and nearly over 21,000 deaths from the vaccines</u>. While it's true it saves many, the whole truth deserves to be told.

What is VAERS? Established in 1990, the Vaccine Adverse Event Reporting System (VAERS) is a national early warning system to detect possible safety problems in U.S.-licensed vaccines. VAERS is co-managed by the Centers for Disease Control and Prevention (CDC) and the U.S. Food and Drug Administration (FDA). VAERS accepts and analyzes reports of adverse events (possible side effects) after a person has received a vaccination. Anyone can report an adverse event to VAERS. Healthcare professionals are required to report certain adverse events and vaccine manufacturers are required to report all adverse events that come to their attention. FYI Some radicalized vaccine proponents are saying that the VAERS data base is pretty much worthless because the CDC does not review it. That claim is proved wrong by the CDC's own recent guidance (8/13/21) where they reviewed the VAERS database to discover the significant number of people injected with the J&J vaccine were experiencing complications and then reinforced that "FDA requires that vaccine providers report to VAERS vaccination administration errors, serious adverse events" The fact is, the VAERS system is even more relevant than when it was created. It's entirely hypocritical to be silent of VAERS for its 31 yrs of existent and not claim it's not valid. Twitter shut down a congresswoman's twitter account because she referenced the government's VAERS database. It's insane censorship of truth. Twitter exec's, you're going to be going to prison for a long time after we take back our government.

You, yourself can go on to the <u>VAERS database</u> and data mine. I've done this myself but I'm using the charts from

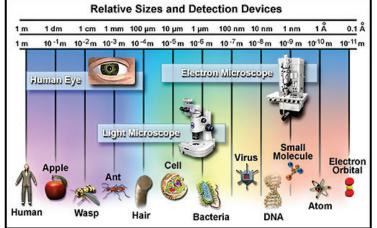
vaersanalysis.info. Let's dig in!

In this (and many charts that follow) chart you are seeing the <u>COMBINED</u> deaths for ALL OTHER vaccines by year since 1990 and then the total deaths since the Covid vaccine by itself in 2021. As you can see from the tall blue bar in the far right, these Covid vaccines are hundreds of times more deadly than any other vaccine to date.



Another way to visualize the size of viruses. >>>>>>>

The <u>National Vaccine Injury Compensation Program</u> is the only remaining option people have regarding injuries caused by the Covid vaccines because the federal government has granted full immunity to the Covid vaccine makers. It don't pay much and it don't pay often and it takes years to get a ruling.



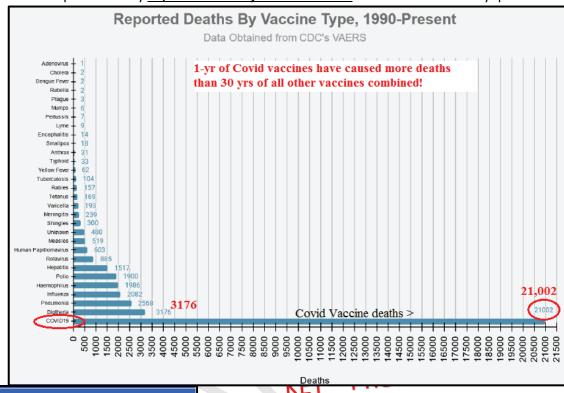
In this next chart we see the sum total of reported deaths by virus the vaccine(s) were (back to index) administered for. Covid vaccine deaths are dramatically higher. Diphtheria vaccine has been administered since the 1950's, between 1990 and Nov of 2021, or <u>31 years</u>, that vaccine has caused a reported <u>3171 deaths</u>, or about 100 p/yr averaged. The Covid vaccine has reported nearly <u>21,000 deaths in just 11 months</u>. While there is certainly questions of

vaccines appear
to be 190x more
deadly than the
next most deadly
vaccine.

scale and public type

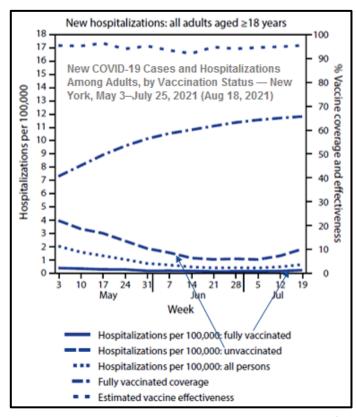
You can't dismiss the VAERS recorded Covid deaths without offering the same critique of the other vaccine types. Thus, the relationship stands, Covid vaccines kill.

VARZOS



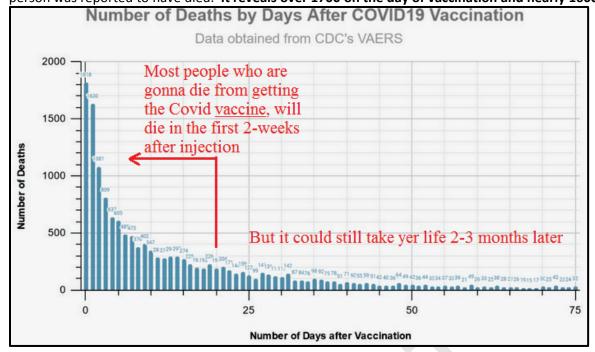
National Vaccine **MedAlerts Home** Information Center Search Results From the 11/12/2021 release of VAERS data: Found 68 cases where Symptom is Dementia Alzheimer's type Government Disclaimer on use of this data COVID19 83.82% DTAP 1.47% FLU3 2.94% FLUA3 1.47% FLUX 4.41% HPV4 1.47% 1 47% PNC13 1.47% 1 47% **VARZOS** 4.41% † 105.88% † Because some cases have multiple vaccinations and symptoms, a single case can account for multiple entries in this table. This is the reason why the Total Count is greater than 68 (the number of cases found), and the Total Percentage is greater than 100. **MedAlerts** Home Search Results From the 11/12/2021 release of VAERS data: Found 28 cases where Symptom is Creutzfeldt-Jakob disease Government Disclaimer on use of this data COVID19 FLU3 3 57% UNK

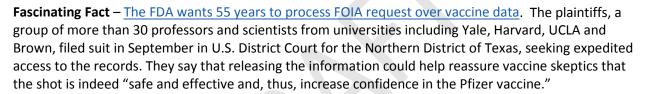
According to this published CDC report (below), 2-4 unvaccinated people p/100,000 people required hospital care as compared to <1 for vaccinated for the period monitored in NY.



10 71%

(back to index) This next chart reveals how soon in days after receiving the Covid vaccine injection the person was reported to have died. It reveals over 1700 on the day of vaccination and nearly 1600 the following day.



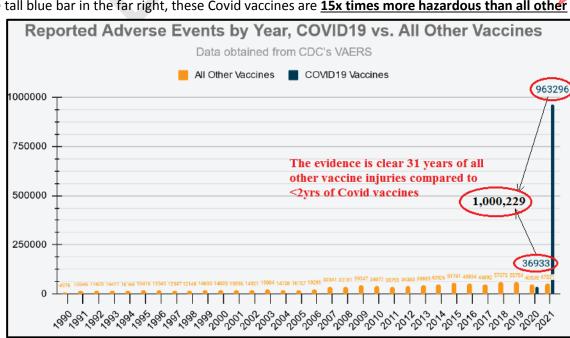


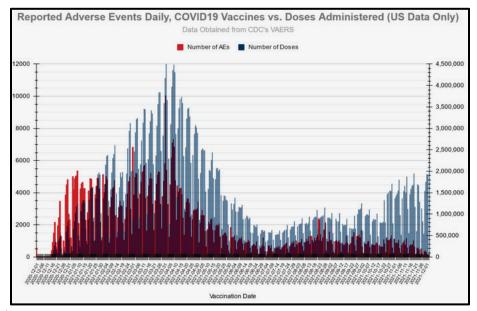
Switching from vaccine induce "deaths" to vaccine induced "adverse events." The government reporting website defines an adverse event as; "We encourage you to report any clinically important medical event or health problem that occurs after vaccination. Report the adverse event even if you are not sure if it was a result of vaccination. Healthcare professionals are required by law to report certain adverse events." However, some are being told not to report injuries.

As you can see from the tall blue bar in the far right, these Covid vaccines are 15x times more hazardous than all other

## vaccines combined. The highest recorded total incidents of harm caused by all vaccination types combined in any year was **57,000** (rounded up) but there has been over **1,000,000** incidents of recorded harm in <2 yrs for the Covid vaccines. Where is the all these

news reporters who have implemented "fact" checking segments to their news broadcasts?





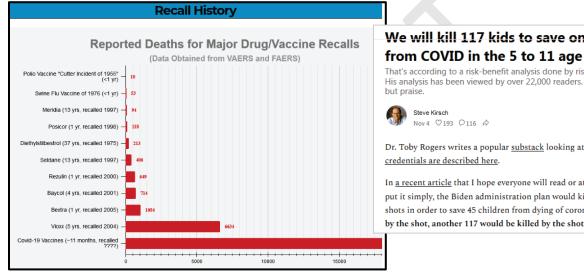
## (back to index)

<Left In this graphic, (note the difference in scales for each side) it would appear that for every 500 doses, there is 1 reported adverse event. Note: a disproportionate number of adverse events appears early on in the vaccinations campaign.

**Fascinating Fact - Attorney Thomas Renz Releases Stunning Data from** 

**Never Before Seen Vaccine** Injury/Death Tracking System The Total number of senior American Citizens that died within 14 days of receiving the COVID-19 vaccine is 48,465 according to hard data revealed in the Medicare Tracking System.

We see below that for far less deaths, other drugs were recalled, but not the Covid vaccines which are far higher. Why?



## We will kill 117 kids to save one child from dying from COVID in the 5 to 11 age range

That's according to a risk-benefit analysis done by risk-benefit expert Dr. Toby Rogers. His analysis has been viewed by over 22,000 readers. No mistakes were found. Nothing

Dr. Toby Rogers writes a popular substack looking at risk benefit issues. His

In a recent article that I hope everyone will read or at least skim, he concluded: "So, to put it simply, the Biden administration plan would kill 5,248 children via Pfizer mRNA shots in order to save 45 children from dying of coronavirus. For every one child saved by the shot, another 117 would be killed by the shot."



This table to the right reveals how much more deadly and hazardous the Covid vaccines are compared to flu shots.

173x more likely to die getting the Covid vaccine verses the flu vaccine.

Nearly 54x more likely to get injured getting the Covid vaccine verses the flu vaccine.

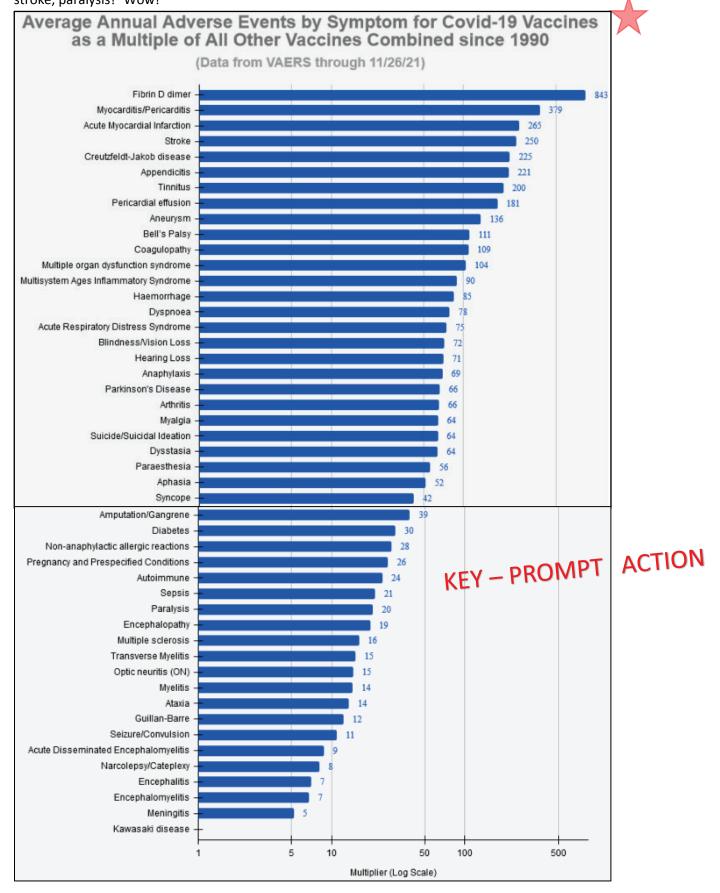
| The Tables below, represent Covid19 vaccinations through 5/31/2021 vs. Flu vaccinations |
|---|
| 7/1/2019 - 5/31/2020 (last complete flu season)   |

| Risk of dying from COVID vaccine is 173 times greater than Flu Vaccine |                                     |                |                   |            |   |
|--|-------------------------------------|----------------|-------------------|------------|---|
| Vaccine Type   | # of<br>Vaccinations <sup>[3]</sup> | # of<br>Deaths | Risk of<br>Death  | Percentage | Deaths/Millio<br>n<br>Vaccinations <sup>[3]</sup> |
| Flu  | 167,447,642 <sup>[1]</sup>          | 32             | 1 in<br>5,232,739 | 0.000019%  | 0.2   |
| COVID19  | 167,733,972 <sup>[2]</sup>          | 5,546          | 1 in 30,244       | 0.003306%  | 33.1  |

| Risk of adverse reaction from COVID vaccine is 53.8 times greater than Flu Vaccine |                             |           |             |            |                             |
|--|-----------------------------|-----------|-------------|------------|-----------------------------|
|  |                             | # of      | Risk of     |            |                             |
|  | # of                        | Adverse   | Adverse     |            | AEs/Million                 |
| Vaccine Type   | Vaccinations <sup>[3]</sup> | Reactions | Reaction    | Percentage | Vaccinations <sup>[3]</sup> |
| Flu  | 167,447,642                 | 9,707     | 1 in 17,250 | 0.01%      | 58                          |
| COVID19  | 167,733,972                 | 525,453   | 1 in 319    | 0.31%      | 3,133                       |
|  |                             |           |             |            |                             |

Many of the vaccine "adverse events" listed in this chart sound very serious, ie, blindness, stroke, paralysis? Wow!

(back to index)



Another website over in the UK, "dailyexpose.uk" decided to dive deeper into vaccines (back to index) and politics. This is just a snippet, but this guy actually dove down into the vaccine lots and where they were delivered. Check it out, he has lots of information we've never heard before. I did not fact check his results, you should.

## the Covid-19 Vaccines were disproportionally sent to red Republican states across the USA

BY THE EXPOSÉ ON NOVEMBER 10, 2021 • (48 COMMENTS)

On October 31st we exclusively revealed how an investigation of the USA's Vaccine Adverse Event Reporting System (VAERS) found extremely high numbers of adverse reactions and deaths have been reported against specific lot numbers of the Covid-19 vaccines numerous times, meaning deadly batches of the experimental injections have now been identified.

That investigation also led to the discovery that 130 different lot numbers of Pfizer Covid-19 vaccine distributed to more than 13 states, harmed on average 639 times more people, hospitalised on average 109 times more people, and killed on average 22 times more people than the 4,289 different It number of Pfizer vaccine distributed to 12 states or less.

However, the most shocking finding of the investigation was that 100% of Covid-19 vaccine deaths reported to VAERS with identified lot numbers had been caused by just 5% of the batches produced. But the deeply troubling findings don't end there, because we decided to conduct further analysis of the VAERS data on the Covid-19 vaccines, and we've discovered that the majority of the deadliest batches were clearly sent to Republican controlled red

states across the USA.

Here is the table he created based upon the deaths recorded to various vaccine lots. As you can see, there are more red states at the top of the list who receive vaccine lots with injury causing or killing results.

KEY-PROMPT ACTION

| State                | Moderna + Jannsen<br>(22/10/21) | (15/10/21) | based on VAERS Data only |
|----------------------|---------------------------------|------------|--------------------------|
| Kentucky             | 402                             | 2,561,769  | 0.02%                    |
| Arkansas             | 82                              | 1,707,765  | 0.01%                    |
| West Virginia        | 48                              | 871,421    | 0.01%                    |
| Montana              | 48                              | 595,997    | 0.01%                    |
| Alaska               | 33                              | 426,234    | 0.01%                    |
| North Dakota         | 31                              | 397,551    | 0.01%                    |
| Wyoming              | 19                              | 287,627    | 0.01%                    |
| Tennessee            | 283                             | 3,665,053  | 0.008%                   |
| Minnesota            | 284                             | 3,626,325  | 0.008%                   |
| South Dakota         | 34                              | 537,636    | 0.006%                   |
| New Hampshire        | 56                              | 985,579    | 0.006%                   |
| Nebraska             | 55                              | 1,163,586  | 0.005%                   |
| Georgia              | 296                             | 5,939,989  | 0.005%                   |
| Missouri             | 148                             | 3,428,445  | 0.0043%                  |
| Wisconsin            | 155                             | 3,600,776  | 0.0043%                  |
| Indiana              | 143                             | 3,567,895  | 0.004%                   |
| lowa                 | 70                              | 1,855,890  | 0.004%                   |
| Kansas               | 64                              | 1,779,514  | 0.004%                   |
| Michigan             | 254                             | 5,744,548  | 0.004%                   |
| Florida              | 378                             | 14,603,834 | 0.003%                   |
| Ohio                 | 202                             | 6,434,770  | 0.003%                   |
| Alabama              | 69                              | 2,622,428  | 0.003%                   |
| Mississippi          | 44                              | 1,521,329  | 0.003%                   |
| Illinois             | 265                             | 8,278,500  | 0.003%                   |
| Washington           | 169                             | 5,201,997  | 0.003%                   |
| Colorado             | 94                              | 3,830,825  | 0.003%                   |
| New Mexico           | 42                              | 1,502,526  | 0.003%                   |
| Hawaii               | 34                              | 1,099,064  | 0.003%                   |
| Maine                | 31                              | 1,010,858  | 0.003%                   |
| Delaware             | 19                              | 659,706    | 0.003%                   |
| District of Columbia | 14                              | 511,153    | 0.0027%                  |
| Rhode Island         | 18                              | 812,166    | 0.0022%                  |
| Vermont              | 11                              | 490,951    | 0.0022%                  |
| Texas                | 383                             | 17,540,166 | 0.002%                   |
| North Carolina       | 123                             | 6,494,826  | 0.002%                   |
| Louisiana            | 57                              | 2,447,856  | 0.002%                   |
| South Carolina       | 55                              | 2,903,920  | 0.002%                   |
| Oklahoma             | 45                              | 2,288,377  | 0.002%                   |
| Idaho                | 19                              | 858,875    | 0.002%                   |

## PART - 6 Covid and the DNA of America

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## America is Uniquely Different and Thus Must Respond Differently than Nations under Totalitarian Rule

While communist countries like Cuba, China, North Korea and Russia can and do whatever they want, when they want, upon whom they want in their own countries, that is not how America is designed to work. Our Founding Fathers broke away from tyrannical rule listing their grievances of an overbearing ruler in the Declaration of Independence, thus seeking to separate themselves from an oppressive ruler and formed a collective union of states in which the people are the sovereign over their government. After the Founding Fathers fought their way to freedom, they came together to decide how you and I could best be served and how we could always be assured of the right to vote in who represents our individual desires. Thus, America was founded and built upon some very important principles that required all future American government institutions to abide by. Several key components of our American Republic are:

- i. That the power of the people is sovereign (supreme) over the power of the government. The federal government is here to serve us, not usurp us. We elect leaders to run government as we think best. (admittedly our system, like all systems is open to corruption)
- ii. Each and every one of us as an "<u>individual American citizen</u>" has God given <u>inalienable rights</u> that our government may not violate. Americans have freedoms, we are free to speak, free to worship, free to move about, free to succeed or fail based upon our own initiative and effort, free to marry, have babies and grow a family, to live and to die in a manner that suits our own dreams and aspirations. In many countries, these freedoms are not recognized. The <u>Bible actually does reference</u> individual "rights" in the word search.
- iii. Our Founders believed that centralized power corrupts those who possess or hold the power. That is why we have the 3 separate branches of government. The President, (administrative activity) the Congress (creation of laws and appropriations) and the Courts (independent review) all have a piece of the federal government pie and yet the federal government is not sovereign over any state which may conduct its affairs and business as its citizens desire as long as it does not violate the U.S. Constitution.
- iv. In nearly all aspects of American government, American citizens choose who our "rulers" "representatives" shall be. America is a "republic" form of government, which means; the people hold the power using a method where we elect leaders to handle the day to day functions of running our government. This form of government also provides for several levels of localized to distant citizen representation. As a citizen, we decide how our local roads, cities and libraries are to be operated, but we also decide who our county, our state and national leaders will be. In effect, those in small communities get to decide many aspects of how local government will interface with them. To that end, the integrity of our elections must be perfect in every way and free from tampering. That requires by definition, accuracy and accountability at every point in the process.
- v. That each state in our Union is to be fairly represented in determining what our national laws shall be and that all levels of government must <u>themselves</u> obey these laws. In the senate, the states with small populations like Idaho or Montana still have an equal voice. In the House, the larger populated areas get additional representatives.
- vi. Government is not to be a force that selects winners and losers in relation to; individuals, business, religions, ethnicities, or other entities. Our government is not supposed to be a charity, rather dedicated to carrying out the tasks needed for our country to function properly and within its defined limits, government is to play fair, to be honest in its dealings and to have no favorites. Yet big business, the rich and foreign governments are hard at work seeking to bribe and corrupt our congressmen and women. (admittedly we have not punished our leaders when they violate the trust placed in them)
- vii. The Federal Government's power is limited to what is written in the Constitution. Its power and authority can only be expanded by amending the Constitution. If the Constitution does not express a given authority, the Federal Government does not have it. The example of such is found in the 3rd Amendment. "No Soldier shall, in time of peace be quartered in any house, without the consent of the Owner, nor in time of war, but in a manner to be prescribed by law." In prior authoritarian governments, they would just march in and seize your home for the war effort for any silly reason.

So, while communist governments can respond to Covid with no thought or concern for its citizen's rights, they do so based solely on how a small group of very privileged leaders decide. They can force people to stay in their homes for

(back to index) weeks, shoot them if they violate the rule, all the while being served fine food and having servants take care of them. The people, or citizens, in communist countries have no say in the matter, the people have no individual rights and communist governments have no limits to their power or authority. There is no power struggle in most nations, as many are ruled by the sovereign force of one man or a small group of pampered people. Not so in America, Americans elect our representatives.

However, America is literally designed to be in a constant state of tension where each level of government is held in check and no single aspect of government is supreme to the individual freedoms of its people. As such, even how our government responds to something like Covid, is met with tension and perhaps conflict and that is a good thing. While the weight of our government can be used to launch vaccine development, it cannot force a citizen to be injected with it. To do so, violates everything about American independence and our individual rights. It is indeed these individual freedoms that cause so many millions to seek citizenship within our shores. In America, you can live and work towards the fulfillment of your dream or lie in the gutter if you so choose. In communist countries, you'll suffer doing whatever KEY-PROMPT ACTION the government says you'll do and you better not speak out that you don't like it.

## **Covid Response Information for Business Owners**

December, 4th 2020, President elect Joe Biden, several weeks before being sworn into office. While speaking in Wilmington, Del., on Dec. 4, 2020, Biden was asked whether COVID vaccinations should be mandatory. He said, "No, I don't think it should be mandatory. I wouldn't demand it to be mandatory." He added, "Just like I don't think masks have to be made mandatory nationwide."

Oct 8th, 2021 President Joe Biden - "This is a pandemic of the unvaccinated. Not the vaccinated, the unvaccinated. That's the problem," Biden said. "Everybody talks about freedom about not to have a shot or have a test. Well guess what? How about patriotism? How about you make sure you're vaccinated, so you do not spread the disease to anyone else."

Sadly our President is a liar, perhaps no different than other presidential liars, but none the less, a liar.

## **Biden/Harris Vaccine Mandate Timeline**

Sept 9, 2021 – Biden announces vaccine mandate on all federal employees, all federal contractors and all businesses over 100 employees using OSHA as the enforcement agency. All employees must either be vaccinated or test weekly. Fines of up to \$14,000 p/infraction imposed. This mandate affects apx 84,000,000 workers and their employers

Target DATE > Dec 5, 2012 – Under the Biden mandate, all unvaccinated workers must wear mask and weekly provide evidence of negative Covid test.

TARGET DATE > Jan 4, 2022 – all businesses over 100 employee must ensure their employees are FULLY vaccinated or face fines from OSHA.

NOV 6, 2021 - U.S. District Judge blocks Biden's mandates.

Nov 8, 2021 – OSHA suspends enforcement pending outcome of legal challenges.

**Nov 12, 2021** – U.S. appeals Court upholds ban on forced vaccination.

Dec 13, 2021 – U.S. Supreme Court rejects opportunity to block New York's vaccine requirement for healthcare workers.

As of 12-10-21, 27 states have sued the federal government over Biden's vaccine mandate, along with several unions, a collective of federal employees, private businesses and others.

Biden asked business to voluntarily enforce his mandate while it moves thru the courts. Several large businesses are enforcing various aspects.

First let's begin with the recognition that an apology is due from the Biden/Harris team, they have no business trying to make businesses enforcers of Covid vaccination or any other personal health condition. Realize that they bully social media companies to censor members, all without any law to back it up. It doesn't stop there, you are being also required to regulate and determine the validity of someone's faith if they voice a religious exemption to vaccination. We might expect that the next step will be ordering businesses to fetter out your employees for conservative viewpoints, eating too much, not exercising enough? For real, this presidential bullying is off the chart insane, which tends to validate the concern that Joe Biden is not mentally stable.

Actually it's happening now, in the fall of 2021 many federal employees under the Biden/Harris regime were required to spend hours filling out forms "of all family and friends known to have ultra-conservative or anti<u>government views."</u> They required full names, SS#, addresses, email address and phone <u>numbers of those identified as such.</u> This is true, I have personal knowledge of it. This is the reality of our current American executive branch of government. I digressed into a rabbit trail, sorry, back on track.

You are not supposed to be involved or even aware of employee's health conditions or religious views. Many employees bring to work their colds, flu, Hep-C, HIV infections, religious world views and you are not aware of it. I'm standing with you in objecting to these forced mandates where fines and potential jail time is on you for something an employees does or doesn't do. This is not America, this is tyranny we have a rogue President that has turned his anger and power against roughly 80 million unvaccinated Americans and if that isn't enough, he's coming after businesses. And he says it's based in science, I want to assure you it is not, but regardless, his actions even if they were based in science does not toss out our Constitution. Please read through this entire handbook to get the totality of why forced vaccination stands no muster. We will have to wait for the U.S. Supreme Court to act, but I want to help you help your employees now. I'm not offering legal advice, I'm not qualified in any manner to do such.

**POINT #1** – You have no legal or ethical obligation to persecute innocent employees. Any employee who is unvaccinated and who does not have Covid <u>poses no harm to anyone in your organization</u>, <u>they are guilty of no crime</u>. I realize you are being pressured to believe that they unvaccinated people are harmful, but the TRUTH is they are not. They are only harmful if they have Covid and are infectious and still working around other employees.

**POINT #2** – If you become aware that an employee actually has Covid (*a positive test*) send them home for at least 6-10 days. Allow them back to work only after a negative Covid test. Many pharmacies are doing drive-up Covid testing, but you can also buy tests in bulk and let your safety or HR department hand them out when sickness is suspected. The tests do have an expiration date, so don't order more than you could use in 6-months or less. Once an employer is aware of a health hazard the employer must act to protect all other employees. If an employee only has symptoms of Covid, then release them from work and ask them to go get tested.

**POINT #3** – New data from studies is shedding light on the fact that it is the vaccinated who are more likely to get reinfected with Covid, since their symptoms are for the most part expected to be less in severity, they will be tempted to come back to work, even while infected. Biden has this wrong, it's the vaccinated who are now becoming the infectors of both vaccinated and unvaccinated workers. Vaccinated people are up to 13x more likely to get reinfected than unvaccinated who have natural immunity. This failure in vaccination science is why the big push for boosters, they didn't predict that the vaccine immunity would wear off so quickly. So the dilemma employers have is that you are going to have to spend more time monitoring infected vaccinated employees than unvaccinated. My recommendation, just treat all employees the same to cover all the bases.

**POINT #4** – So here is the deal, because vaccinated employees are deemed up to 13x more likely to get Covid again, you may experience a much larger need and consumption of sick leave by your "vaccinated" employees. Each employee testing positive has to spend somewhere between 6-14 days self-isolated, that's going to burn up and require a lot more sick leave than most employees have in a year. An unvaccinated employee who gets Covid and comes out the other side, is far less likely to catch Covid again, they should use less sick leave.

**POINT #5** – I would encourage you to contact your local chamber of commerce, any business association you belong to and any other association you are a member of and ask them to poll members about joining lawsuits against these mandates. Many business associations, states, unions are suing, the more overwhelming we can all make this fight, the better.

**POINT #6** – If an employee asks you for information, feel free to provide information. However, be cautious about what you tell them to do or not do. I've owned a couple of business, I know what it takes to keep a business afloat, you have my admiration and not a lot of people have the courage you have. **High-5!** 

KEY-PROMPT ACTION

## Sickness, Death and Motives

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Over my 6+ decades on this round ball, I've had some serious illnesses as I bet many of you other older folks have had. I fought a debilitating disease before going into remission after 6 yrs. My wife is currently living with a disease requiring daily medication for the rest of her life. A serious illness will hit nearly everyone one of us, if not illness a serious injury may take a chunk out of our life. While we all hope to avoid it, many of us have succumb to a loss of mobility, physical and/or mental ability as a result. When sickness occurs, we find ways to still function to the best of our ability, ie life still goes on even if with greater difficulty. But the physical aspect of life will indeed one day end for all of us.

Among the things we count as most dear is the freedom to die in a manner that is between us and God. Any government official that seeks to interfere with that, may find out what it's like to have another determine when and how they expire. As birth is very "personal" so is death. Personal means I'm in control, not the government, personal means my choice. Most of civilization believes in some higher power frequently expressed as god. For those in the Christian faith, we know that after we die, we "as sinners one and all", will meet God, every person who ever lived will answer (face judgement) for our sin and transgressions. However those of us who have actually read the Bible, we know that God is a loving God, offering a way to escape the penalty we would otherwise deserve. God offers a Gift, via a redeemer, Jesus Christ. If we confess our sins, repent, believe in and accept the Gift, we will spend eternity in God's loving presence in spite of our selfish sinful life. For the Biblically founded Christian, there is no or should be no fear of death for we are told this life is but a vapor and what should matter most to us, is where we will spend eternity? I have a peace that that comes with knowing, my God is a very loving Father, who has my best interests at heart, so much so that my eternal fate is secured in spite of my iniquities (for they are many) and sin. When the biblically saved Christian dies, heaven awaits, a place far better than anything on earth. That is not true for those who have refused the Gift and perhaps why death is so fearful. Another life, an eternal life is on the other side of our physical death, death is something we all face but it's not a fearful end when we have received the Redeemer.

## **Your Motives and Mine**

After all these years on this round ball, I've learned that understanding a person motives is very important, not just in a courtroom, but in everyday life. Nearly every source of information I'm searching thru has a motive for why it's out there. Getting the full story means we have to read what is written, but to search for what is not written. Even well-meaning people can share something they know, but not understand the implications of all the things they don't know. Covid-19 is new, it's very deep, its highly complex, so all of us on the Covid commentary train, including me, need to consider ... there is a lot we do not yet know and what we think we know, may be just enough to get us into trouble.



I'm in the camp (biblical perspective) that we are all sinners, thus our motives are often lacking sincere integrity. So with that perspective, my views are certainly shaped by my Biblical worldview that mankind will naturally gravitate to less than honorable things rather than things of integrity. Being good takes work, being bad is easy! Consider what I've written in these pages. Why did I take the time to investigate all this stuff and write this? What are my intensions? I'm not on any social media platform, so what gives? Let's go a step further, as you read this, what are you thinking? What are your intentions? People do all kinds of things for various reasons, some people do things to control others, some people are prideful that's all they need to run with, it's just all about themselves, ie "look at me". Did I write this for good or is it evil? Am I misinformed or am I trying to misinform you? Which one of us is more gullible? Is there some gain to be had, perhaps fame or more thumbs-up likes on Facebook? Is humility involved or exterior motives?

I'm naturally just a curious person, I really like drilling into deep things, I love learning and enjoy helping people. I'm one of the few people who read the entire 2000pg (then) Obamacare bill back in 2009.

So I present this as a script of my journey to understand more about Covid, indeed I needed to learn more about it, for it is something that affects me, my family and my friends. Now I'm sharing it with those of you who are also curious.



## PART - 7 My Personal Objections to Getting the Covid Vaccine

many other Christians would have to ignore to receive a Covid vaccine.

Now that I have "set the table" with a base of understanding in Parts 1-6, I shall offer my beliefs and concerns about why I choose not to get vaccinated with any "current Covid mRNA or vector vaccines". The foundational information and links are in the prior 65 pages. Now I'll express my objections through the lens of those prior pages. contact - covid@the9thgrader.com

1. Respectfully, my faith requires me to object based upon several aspects — I'm not saying this because I seek a religious exemption. I have no need for any kind of an exemption. Thus, I can without any personal threat or economic pressure express my true thoughts and deepest beliefs. There are several major biblically based roadblocks that I or

**FAITH ASPECT #1 – FALSE IDOL WORSHIP** Nothing can be held equal to, in place of, or in a higher esteem than God. Our faith must be in God, no one or thing can be held in equal esteem. Ps 20:7, Some trust in chariots (science) and some in horses (mRNA vaccines), but we trust in the name of the LORD our God. Defined – worship, idol, salvation.

Yet, these vaccines are being promoted as "our salvation" sometimes not using those exact words, but often with words of similar meaning. "The most compelling evidence that vaccines really are the miracle we need comes from the United States ..." -AND- "At the top of my list is a smooth and efficient roll-out of the vaccine that will be our salvation. Let the vials be frostily frozen. Let the cheap and easy Oxford version be speedily approved. Let the scales fall from the eyes of those anti-vaxxers who would jeopardize our health. Let us be double-jabbed safely and speedily and let us then live happily ever after." -AND- New Delhi: Prime Minister Narendra Modi today reflected upon India's transformation from a country that till recently imported medical devices and equipment to one that is ready to "save humanity" with two Made-In-India vaccines to fight coronavirus. -AND- Idaho faith: Saving a life means saving humanity. The COVID vaccine can do both -AND- With vaccine salvation on the horizon, many questions will linger -AND-Covid vaccine passport, salvation or division?

To a biblically grounded faith based Christian, this kind of idol (vaccine) devotion/worship is heretical, profane and repugnant. All of which, compels us to decline.

**Let me be very clear:** I'm not rejecting science, I'm rejecting science and/or vaccine worship and I'm compelled and commanded to reject such. Cite; <u>2 Kings 17:12</u>, <u>2 Chr 24:18</u>, <u>Ps 106:36</u>, <u>Isa 44:15</u>, <u>Rev 9:20</u>. God sent only one Savior, the only Savior for all of mankind. Jesus Christ, is my salvation, I am compelled and commanded to reject anything the world try's to offer in His place. Cite: <u>2 Sam 22:3</u>, <u>Ps 106:21</u>, <u>Hos 13:4</u>, <u>John 4:42</u>, <u>2 Peter 2:20</u>.

The Bible further tells us about all the things the world offers seeking to temp us away from God, calling them idols. Cite; Ezek 20:16, Jonah 2:8, 1 Cor 12:2, 1 John 5:21.

It's true, there are indeed numerous Christians who are thanking God for the mRNA or Vector vaccines and getting vaccinated. Some large so called Christian leaders/denominations have said it's ok to get vaccinated. But I see this as something different, for me and many other Christians, the very fact these vaccines are being heralded as "saving us" makes them taboo, for only Jesus Christ can save us. I suspect these leaders out of their own fears and lack of faith in God are willing to bow the knee to a vaccine savior. They themselves are afraid, unwilling to trust God, just as the Jewish tribal leaders who went in to survey the Promised Land, Num 13:26-33 these modern day denominational leaders are focused on their fears rather than trusting in the power of God. Some people of God waver in their faith and focus on the giants in front of them rather than the God who is with them. Simply put, they have greater fear than faith. Num 14:26-33 I consider Covid a serious opponent, something capable of taking my life, but I cannot allow that to suppliant my overwhelming faith in God.

The more "devotion" applied the vaccine, the more some of us have to detest it. The Bible is clear during the end times, people will indeed worship an <u>anti-christ</u> and <u>the beast</u> rather than God. I purpose not to be among that crowd. The more force you put upon me to kneel before the vaccine, the more I must resist. President Biden is <u>using his power</u> (*illegally, abusively and unjustly*) to crush our faith in God, clearly his faith is in vaccines,

(back to index) ie a false god, an idol among many modern day idols to be worshipped. Mr. Biden doesn't understand that many of us see Joe Biden as the serpent in the Garden, he is now the greater enemy, a tool of Satan himself, seeking to supplant our faith in God with an idol. I pray that Mr. Biden would turn back to the living God and to place his faith back in God. It's ok to recommend vaccination, it's quite another to demand devotion to it.

FAITH ASPECT #2 - VOLUNTARY CHOICE The Biden/Harris team started moving forward with forced vaccine devotion in November 2021. For some, who like Biden do not understand the biblically based Christian faith, it would be wrong to place yourself as a judge over those of us who do. In the Christian faith, forced compliance or forced conversion is no conversion at all. Contrast that to the muslim religion, a forced conversion, ie the threat of having your head chopped off, is apparently deemed acceptable by the muslim god. There are literally dozens of videos showing where people of other faiths (typically Christians) who are given one last opportunity to make the proper muslim confession or they will be beheaded, shot or burned to death. Forced vaccine compliance means participants are not willing, rather involuntary forced into submission. That's not Christianity, that's not freedom, that's bondage. It's clear in the scriptures, we have a freedom in Christ. Forced devotion is nowhere near acceptable in the Christian faith or to the One True God. Only by a voluntary, sincere, personal acknowledgement, confession of our sin, repentance and acceptance of the only Savior, Jesus Christ, in full faith are we deemed saved and acceptable to God. We cannot be forced to Christ, we can't be good enough, we can't earn our salvation, it is by God's grace and our faith and trust in Him alone. "For without faith it is impossible to please God" Heb 11:6 and "whatever is not of faith is sin". Rom 14:23 The scriptures are clear, whatever we do we should do voluntarily not under forced compulsion. Thus we each live out our lives using freewill, that's freewill to do evil or free will to do good. God allows us freedom, to do right or wrong, that's God's way of doing things. Forced submission is Satan's' gig. It appears America once the land of "in God we trust," is becoming the land of "the devils way". America's leadership (Biden/Harris) are showing themselves to be tools of Satan, using force and economic violence against innocent people to get what they want. It's one thing to use force against the guilty, it's quite another to use it against the innocent.

FAITH ASPECT #3 – TRUST IN GOD We are commanded to trust God, to put our faith in God, not the world, not in ourselves, but in God. We are not to put our faith (trust) in money, government, medicine nor anything else. We are not prohibited from interaction with any of these things, just not to elevate them near that of our Lord.

My hope, my faith, my trust "is in God" and my personal experiences (successes and failures) have helped me to get to know God as a very loving and caring Father, who persists in still loving me, an often rebellious sinner. I know that I will be on this earth until God decides to take me home. I do not worry about death, it is merely the gateway to joining with my Heavenly Father. When God is done with me, He will bring me home. This gives me an inner peace, ie my Father is in control, live or die. Psalm 33:12-21 expresses where my heart and my trust are and where America's trust should return to,

Blessed is the nation whose God is the LORD, the people He chose for His inheritance. From heaven the LORD looks down and sees all mankind; from His dwelling place He watches all who live on earth— He who forms the hearts of all, who considers everything they do. No king is saved by the size of his army; no warrior escapes by his great strength. A horse (or vaccine) is a vain hope for deliverance; despite all its great strength it cannot save. But the eyes of the LORD are on those who fear Him, on those whose hope is in His unfailing love, to deliver them from death and keep them alive in famine. We wait in hope for the LORD; He is our help and our shield. In Him our hearts rejoice, for we trust in His holy name. May your unfailing love rest upon us, O LORD, even as we put our hope in you.

I have seen people put their trust in objects, animals, idols, the earth and even the stars. God gave us each a brain and He expects us to use it, there is only One God. I've seen brothers in Christ reject vaccination based in pride, or based on being stubborn, only to watch them get hit hard with Covid. That's not trusting God, that's pride and stubbornness talking, it's misplaced. Joe Biden's trust does not appear to be in God, or perhaps his faith in God is only to be practiced for 2-hours on Sunday mornings, or his faith in God is far less than his faith in the vaccine, (which then becomes an idol) which he continues to herald as our only salvation with respect to Covid. Joe has not called for national prayer or repentance, just vaccination. We all have to examine our true motives and it appears Joe's faith is misplaced. That kind of reasoning is a false hope, it's not God centered faith, its worldly faith. Mr. Biden's actions by unjustly taking the jobs and income from innocent Americans is no different than the Jihadist's who seek a forced conversion to Islam or you lose your head. Go ahead Mr.

President, cut my head off. I must resist even as Moses parents did and like them "I am not afraid of the kings Edict" Heb 11:23

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It is true, there have been several high profile anti-vax'rs who have got Covid and died, while I do not know their motives, I might think it was misplaced faith. Conversely, I am required to examine my own motives; I'm not merely "just taking my chances with Covid infection", but that would still be a sound and reasonable choice, I'm not rejecting the Covid vaccine because the Biden/Harris team has turned it into a weapon to harm a large segment of innocent Americans, but they indeed are using it that way, none of that has anything to do with putting my devotion, trust and faith in God rather than a vaccine. I know one thing, nothing can remove a man/woman from this earth if they are still useful to God, we can only be taken when it is part of Gods will.

FAITH ASPECT #4 – PLAGUES LEAD PEOPLE TO REPENTANCE There are over 100 mentions of various plagues in the (NIV) Bible. Covid is a pandemic, a plague upon modern mankind. Yet, plagues have been used by God to lead people to repentance, to reconsider our actions, our rebellion, our apathy and sin. Indeed, many of us are doing just that, reflecting upon our sins repenting and calling out to God. With my whole heart I believe God is using the Covid pandemic as a call to repent and turn back to Him. I don't mean this from the aspect that God Himself is killing people, or even that God caused this plague, yet God is likely allowing our own worldly activities to kill ourselves. But God knows that many of us will find time to reflect upon the frailty of life, our own rebellion and sin and that during this trial, we will return our trust and devotion back to Him. If our leaders called for prayer and repentance, I might view this differently, but they have not thought to bring it up. As Americans, we must acknowledge our nation's collective sins are great. If we do not acknowledge our errors, there will be no way out of this. Other plagues, earthquakes, wars, famines, droughts economic crashes, etc will not cease, there will be no end to the avengers of unrighteousness. Mr. Biden is heralding the vaccines like a parade float to be cheered and celebrated chanting of "we can beat this", but such devotion is contrary to what I believe God was hoping we would do. If Mr. Biden would lead a call to repent, to begin changing the evil things America has instituted, <u>God Himself will take care of the Covid virus</u>.

FAITH ASPECT #5 - PRECURSOR TO THE MARK OF THE BEAST While I do not think the mandating of the Covid vaccine is "yet" the actual "mark of the Beast" spoken of in Revelation chapter 13 of the Bible, it along with a global plan to track every single person's carbon footprint (the rich will still get a pass) and to get rid of paper currency swapping over to a digital carbon currency (which magically will credit or debit those in favor or out of favor) and the so called "great reset" are certainly precursors to everyone being required to accept the mark of the beast, which according to Bible prophecy, without such a mark, no one will be able to buy or sell anything. The Bible is clear, these are the end times and this is the season when the entire world will come under the power of this anti-Christ and the 2 beasts. Everyone will be required to worship the beast and have the mark of the beast or we will not be able to buy or sell anything. Yet all those who worship the beast and receive the mark of the beast will be eternally condemned. Only in this generation and at this time in history has the technology been available to literally prohibit buying or selling by every human soul. These things are all tied together, they are written in the Bible thousands of years ago, so we would know what is coming. Thus for me, rejecting forced vaccination is a warmup to rejecting the mark of the Beast, literally my eternal soul rests on insuring I do not violate God's will in this area. Anyone who receives the mark of the beast is dammed to an eternity in Hell. Those who worship only the one true living God are commanded to refuse the mark. There is a lot of prophecy in the Bible concerning the end times, it behooves everyone to dust off and read their Bibles and take a serious look.

Wrapping this objection up ... I can't be swayed in the slightest when humanist reporters write articles why a religious exemption should hold no mustard. I was atheist and now a Christian, I can say with full certainty, no one who is not a born again biblically based Christian, can possibly understand the richness of the Christian faith. I also can say that observing those around me who claimed to be Christian, is why I became an atheist. But I had not seen and had no clue about true biblical Christianity.

The Christian faith is not something to know about, it's something each person individually must experience. Once you become a Christian you open the door to a relationship with our Divine Creator, who himself becomes involved in your life. You don't become sinless or perfect, you become aware of the depth of God's love and His arms around you at various times throughout your life. Once you embrace the love of the Heavenly Father, the trappings of the physical life begin to fade, death holds no sting for it is merely a doorway to being in God's

presence. Many people claim to be "Christian" because they have a Bible maybe even (back to index) read it, or go to church, those are merely bows on the box. When your eyes well up with tears because of what Jesus Christ has done for you, when God is more real than all the fears you have, when His peace fills you, you are Christian and a child of God, He is your Father and your inner most desire is to be with Him. I can't write about Covid without interjecting about God, because God is my Creator, He knows me more than any earthly expert. My faith is not blind faith, blind faith is trusting in something other than God, my trust is in the one true and only God where I desire it to be and where it must be.

And it gets more perplexing to outsiders when you understand that in the biblically based Christian faith, many of the denominations identifying as Christian are actually not. Nobody is going to get into heaven because of the church or denomination they attended, only a personal relationship in Jesus Christ is accepted by God. Unfortunately distorted Christian denominations are as plentiful as used car dealers. Where I spend eternity is based on my faith and trust in Jesus Christ, my actions here on earth will reveal the depth of my trust. Yet, I cannot be good enough, for no one is good enough, but my heart, my love, my faith, my trust, my devotion, is aligned with the One who created me.

Virtually every one of us has a deep personal connection to something that puts our personal experience in perspective with eternity. Nearly every human being seeks a sense of how "me" fits into the world. For the humanist, we are a cog, here today, gone tomorrow. Whatever someone does good or bad is just part of the evolutionary process, like good and bad bacteria. For the Christian, the Bible compels us to a high standard and makes it clear that our hope and trust is to be in God alone. <u>Psalm 9:10 And those who know Your name will put their trust in You, For You, O LORD, have not forsaken those who seek You.</u> I am a sinner and I had to call out to the only one who could save me, Jesus Christ, humanity's Gift from God.

Dear friend, you do not need to be eloquent and write your own religious exemption, if this expressed devotion and reasoning resonates with you and captures how you feel in your heart and expresses your Christian walk, then by all means count this as your own. I encourage you to walk in faith, always trusting God. God loves you, He sent His Son to die in your place, you must invite Jesus into your life and surrender to Him. Pray to God, pour your heart out to Him, let His peace fill you, stand upon His promises, God is trustworthy, God loves you. For He asks, Luke 18:8 when the Son of Man comes, will he find faith on the earth? I believe that Jesus Christ will return very soon, literally within the next 15 years. I do not know the hour or the day, but I can tell this is the season where all things come together for the final act. This is the doorway into end times and the last days, a great tribulation lies in front of us, all hell is going to break loose, our hearts need to cling to Jesus Christ, He is the only one who can save us.

**No aborted baby cells objection?** Before I leave my faith based objections, I want to adress what for many Christains would likely be their main basis for rejecting the vaccine. I suspect this particular request for religious exemption (use of aborted baby cells) grew in popularity because it was shared between Christains millions of times. Later in this I will address the obnoxious notion that a government or a business manager gets to decide if your or my religious faith objection is credible enough. No man, no court can do that, only God.

Nothing I'm about to write will gain me any favor, I will litterally anger nearly everyone who reads it, but this is the truth I find in God's Word, with the understanding and reality of the cuurrent times we live in and it is from my heart. Yet, I am willing to make myself vulnerable to everyones angst. I'm going to get very frank with this topic, because it deserves a candid look. Regardless of your perspective, read no further if you don't want to be offended. While I'm pointing the finger at me as a violator of bible based law, you too may feel like you are in the crosshairs. What follows is a bit of a journey, stay with it until the end.

It is true that <u>all 3 vacccines have a tie to aborted baby cells</u> either in early mRNA vaccine testing (*Pfizer-Moderna*) or culturing new cells for the vector vaccine (*J&J*). It is not true that any of the vaccines contain actual aborted baby tissue. It is also true that Regeneron, the maker of the Covid antibody cocktail <u>has used fetal cells</u> in their research program. This is the same antibody cocktail that President Trump received and that I recommend to people with a Covid infection and who have one or more other comorbidities. Certain cells from certain places in a baby or adult, <u>replicate at rates faster than other cells</u> from other areas. Back in the <u>1970's</u> and 80's cells from aborted babies were taken, preserved and cultured and are apprently still in use today.

I'll begin by saying I find elective abortions are in direct conflict with the Christian faith. (back to index) (click links below) God is our creator and He has blessed us with the ability to likewise create life. God, created man and woman, God created sex, He also created the organs that make sex pleasurable, God intended that sex and the children resulting from this sexual union would occur in marriages between husbands and wives, but in satisfying our carnal lusts we've expanded sexual intimacy far beyond what God intended. As modern Americans we are often led by fleeting impulses of self-gratification than devotion to the God who created us and everything around us. My hand is up, I am guilty perhaps more than most in this area. Sadly, because of our wanton desire to seek sexual gratification, a lot of unplanned and unexpected babies created a thriving abortion industry. Yet abusing the gift of sexual pleasure beyond its design does not alter the truth found in God's word, that children are a gift from God a blessing to be received. Jesus Christ welcomed babies and children to His arms. God also gives us insight into the fact that He knows us from conception within the womb as we are formed and that He even knows the number of hairs on our head.

The <u>murder of those innocent</u> of any wrong doing goes against any civilized system of law and certainly God's law and the Bible desribes a judgement <u>against those destroying babies in the womb</u>. It is while we are in the womb that God puts the <u>spirit (soul)</u> into the baby. Back in my Christian infancy, the 1984 video "<u>The Silent Scream"</u> was created by one of the pioneers of legalized abortion (<u>Dr. Bernard Nathanson</u>). The doctor himself oversaw over 75,000 abortions, he later relaized that abortion was morally and ethically wrong. While you can watch hundreds of videos of many kinds of medical proceedures, <u>modern video verisions</u> of abortions are pretty much nonexistant. Those who perfrom abortions do not want people to see what actually occurs. Watching a baby's body violently respond to being cut or ripped apart while alive, would be hard to stomach for most people.

Some say the moral/ethical dividing line is conception, some say its when the baby gets a heart beat, others say when the baby is viable at roughly 25 weeks. Yet scriptually the Old Testiment dividing line is actually before conception, it begins with wasted sperm, when the man purposely does not deposit his sperm in the vagina. If I was still under the law covenant, rather than the promise covenant, I'd be very worried, I'd be going to hell for sure. Now we men have a delema, women don't naturaly have the elective ability to waste their unfertilized eggs, but men have the ability to electively waste sperm. Amazingly, the average healthy male adult releases between 40 million and 1.2 billion sperm cells in a single ejaculation. Couple that with a study in done in Britian that revealed that the average Brit will have sex about 5800x in an 83 yr long lifetime. That equates to roughly 89x p/yr or 1.7x p/week (adjusted to age 18 an age at which sexual activity might begin) of baby making opportunities. If we calculate that out it would result in several gallons of semen (7.5) and roughly 3.5 trillion sperm of which I suspect for many of us ended up some place other than inside our spouses vagina. And that my fellow brothers is against God's will and acordingly carries the penalty of death.

My point in this is; many Christain men I know will come down on a woman who got an abortion, while ignoring our own violation of God's will. Men need to understand that God set the line to a place that is much closer to my and maybe your behavior than we were aware. Coming back around full circle, when it comes to cells and what is done with cells, over our lifetime I suspect 95% of men would be guilty of the sin related to spilling our sperm cells in some other place than were God designed it to go. Biblically, abortion is wrong and spilling our seed is wrong, yet here we are living in a society that embraces both.

But, for those who trust in Christ, be it a sin burdened man or woman we have hope, for the biblically based Christain who is trusting in Christ, we are no longer under the rabbinical law; for our Messiah, our Savior, our Reddemer, our Gift filled with grace, mercy, forgiveness and love has come. Jesus Christ invites us to accept Him, to receive His sacrifice as our own, He pays our sin debt and when we receive Him we are adopted into the family of God. A loving Father will over look a lot of wrong doing that a detached judge will not. God created us, God knows us, God is not surprised at our rebellion, God loves us and desires that we all would come to the saving grace found in Jesus Christ.

The purpose of the Old Testament law based covvenant was to reveal our sin, that we are all sinners. The problem was; "the only way to heaven under that law was 100% obedience and complaince, which according to scripture no man has ever achieved except Jesus Christ." Jesus came to reveal that God has always desired the better covenant, the original covenant based upon God's promise. And the sciptures reveal that when we have received Christ, we are no longer under the law covenant, therefore no longer transgressors of the law, but

adopted into the family of God and thus children of God. All Christians are sinners, but (back to index) we are sinners saved by God's amazing grace and the redeeming work, death and resurection of Jesus Christ.

Every baby is a gift when it's received as a gift. But it's a gift that comes with at least 2-decades of parental responcibility and there in lies the rub. In our selfishness, we decide that we do not want the responcibility because it will force us to sacrifice much of our self centered freedom in caring for the needs of another. We are created in the image of God, by God's word. The scriptures set the penalty for abortion quite high. Reflecting, I imagine what if Jesus was aborted, we'd have no Savior, Martin Luther, we'd have no reformation, or Abraham Lincoln or Dr Martin King we might still have slavery and segragation. Thus, I felt the need to unwrap the aborted fetal cells concern further back to my own actions, what about all the semen we men have wasted that may have resulted in the conception of an ordinary or extroridinay person? You see, under the rabbinaical law, I (we?) would be just as guilty.

Abortion and vaccine perspectives – Doesn't it seem ridculous that there is a \$5000 fine and 3-yrs jail time for taking or destroying the egg of a certain bird, but babies can be chemically burned to death, vaccum sucked apart, or diced and torn into pieces while squirming inside or mostly outside (late term) of the womb? Making it real, I honestly believe I could kill another human in several kinds of circumstances, but it makes me shudder to think how anyone could kill (abortionist) an innocent little baby. I'm not surprised that women seek the proceedure as I am that any doctor would perfrom the proceedure under the "do no harm" of the Hippocratic Oath. I also find it repugnant that Planned Parenthood profits from selling aborted baby parts. This brings us back to aborted fetal cells.

Depending upon the abortion procedure used to terminate the baby's life, we have a dead baby, so what is to be done with the body, or body parts? Yeah, it gets messy here, in the cosmos of how whole aborted babys and their severed body parts are disposed of. Everything from a sink garbage disposal, to dumpsters and to selling them. Aborted baby cells have been used in the development of many things besides vaccines, including coffee creamers, cosmetic products, antibiotics and more. The commercial sale and use of aborted baby organs and tissues appears to be somewhat common depending upon the clinic.

This topic gets personal for me and my wife as we delivered our little baby boy Mathew, dead at 22+ weeks into the pregnancy. Yes we morned, but we rested assured that Matthew has a new body, a body like that of the angels, one day we will see him again. We like many other couples also had two miscarriages, (medically described as spontanious abortions, 15-20% of all pregnacies end this way) each were also given names (Lynn & Nell). In all things we trust God, the Good <u>Lord givith and He takes</u> away, blessed be the name of the Lord.

Many women (40%) have had one or more abortions, which means that there is an equal quantity of men who caused the pregnancy and may have either agreed, didn't know or insisted on getting an abortion. For those who have had an abortion, I can understand how your thoughts may frequently plagued by what is frequently describerd as a murderous act and the new Covid vaccine mandate resulted in religions objections based upon the use of aborted baby cells may bring back the haunting guilt for having obtained one or more abortions. Yet some of us who call ourselves Christains have also traveled in the worldly sinners pact, but our eyes were opened, our reasoning returned, our hearts repented and sought God's forgiveness. If that describes you, we are willing to stand with you, we shall not cast a stone your way, your sin is no different than my sins, Jesus welcomes all of us repentant sinners. And its true, I know that there are plenty of Christains who might be willing to get these women convicted and jailed for murder for aborting a baby. In a church I used to attend they literally signed petitions to require just that. Yet, I am reminded that one of the greatest biblical

acts of murder was done by someone whom God said was after God's own heart.

Elective abortion is something clearly not supported in sctipture, but my wife and I are among those who desire to reflect the depth and love of Jesus Christ, there is support and forgiveness in the camp of God. The following is a list of common medicines that have used fetal cells in their testing, research, and/or development. This is a commonly used and available, but not all-inclusive list of every day medicines that fall into the same category as the COVID-19 vaccine in their use of fetal cell lines:

| Tylenol      | Ibuprofen          | Benadryl      | Claritin     |
|--------------|--------------------|---------------|--------------|
| Pepto Bismol | Maalox             | Sudafed       | Zoloft       |
| Aspirin      | Simvastatin        | Albuterol     | Suphedrine   |
| Tums         | Ex-Lax             | Preparation H | Prilosec OTC |
| Lipitor      | Zocor              | Enbrel        | Azithromycin |
| Senokot      | Zostavax           | MMR Vaccine   | Varilrix     |
| Motrin       | Tylenol Cold & Flu | Acetaminophen | Havrix       |

Let's take this a step further, lets dive deeper, "Do you as a Christian support abortion (back to index) advocates?" How do you know? Keeping it real, I've never investigated to determine if what I consume has any path to aborted baby cells, neither have I ever asked my mechanics, my doctors, my insurance company, my credit card company, my contractors, my favorite restaurants about their history of oibjecting to, having or supporting abortions. Anyone who works for the federal government or a so called "progressive" company is working for an employer who not only supports but likely fosters a pro-abortion environment. Anyone who pays federal taxes or state taxes in a state that licenses abotion clinics, is also supporting abortion activity. Do you shop at stores or online with companies that support abortion activity? I'm asking us all to be real in our Christian walk.

I can presume that I'm very likely wrong for not purging every single area of my life from all pro-abortion infleunces and yet can see where I might quit using the products or services of someone actively supporting or conducting abortions. I strongly disagree with women and men who obtain abortions without thought or concern that abortion takes a human life. Its ironic to me the pro-abortion advocates say, legalized abortion saves many lives because women died during abortions when they were illegaly perfromed in unsanitary conditions, yet we cannot ignore that in every abortion proceedure a baby is killed.

Covid has killed or more correctly assisted in the death of over 800,000 americans over the last 2-years, <u>abortion in America takes about 800,000 lives in one year</u> and is the #1 highest cause of death in the USA exceeding the often rated <u>#1 cause of death</u>, <u>heart disease</u>, which is only #1 if you ignore aborted babies. Elective abortionists have to remove any concept that abortion is an immoral act, they don't want women thinking about it, just pay the money and get it done. They make it sound quite sterile, of no more consequence than having a bowel movement. I can't imagine that anyone would care to arque that an unborn baby with a heart beat, is not a living human being. This iniquity is something that once tainted me. I once drove a young girl several hundred miles to an abortion clinic (I had no sexual relationship with the girl nor did she reveal who her male companion was) when I was young and at the time an atheist. Conversely, I also held the hand and stood beside a wonderful young woman in a delivery room (not my child) who was raped but elected to keep the child. I have a niece that was also raped and also elected to keep her baby. Both did not think twice about keeping the baby.

We live in a time not <u>unlike the days of Lot who lived in a city</u> called Sodom, that was near to another city, Gomorrah, both of which were overrun with unfettered homosexual activity, vice, corruption and other sinful indulgences and perversions. It was so bad, that when new men came into the city, they were sought out to the point of using gang rape and violence to fullfill their sexual perversions. These cities apparently did not treat homosexual rape as a crime, the government leaders may have actually supported and perhaps participated in such activity. But God our creator decided enough was enough and burnt both cities into the ground except for Lot and his immediate family. So here we are in an ever increasing time of decadence, lawlessness, greed, corruption and perversions. Our resolve will have to be simular to Lot's, whom the <u>Bible describes as righteous</u>, our hearts certainly distressed about it, as we avoid participating in it. I beleive this is the age in which we currently live, that within 15 years, the entire plannet will be under the control of the anti-christ and the people of the world will support him, because the anti-christ will allow unrestrained personal gratitification without consequences. We see this today in the USA with the cries to <u>do away with law, police and many acts of civil disorder</u>.

Abortion has emotionaly impacted many women and some men afterwards, so my focus is more directed at mental, emotional and spiritual healing to those remorseful abortion survivors, I'll let God take care of the rest. I'm sure in every church I've attended over the years, there were many women who hid and live with such a secret. I want them (you?) to know, they are loved and fogiveness from God is complete when you seek God and the forgiveness He offers is complete.

The unequivical truth is that Jesus Christ gave His life for you and I, Christ died that we might be redeemed from an eternal death. To my Christian brothers and sisters, I'll ask you, what I have asked myself, do you think if the woman who was caught in the very act of adultry, was instead caught and brought to Jesus from the very act of an abortion, do you think Christ's reply would have been any different? If you answered yes, you and I might serve a different Christ, you don't know the Christ I know. I'm no manner and I endorsing abortion, neither is Jesus Christ endorsing adultry or abortion, Jesus is however all about reconciliation and remeption led by repentance and confession. Christ died <u>for sinners</u> don't ya know.

There is certainly a morally ethical way to obtain cells such as using those in the unbiblical cord of live births, or if the parents are willing, babies who died due to a complication in the womb, or die during delivery and then donated to medical research purposes. For me the dividing line is based upon motive, coming back full circle to aborted baby cells, so was the baby killed specificly for medical research?

No, it was killed for convienence, which is arguably a more feeble reason, ie the baby was not wanted. But now what to do with the discarded baby body?

While I certainly understand the respect how a dead body is to be treated, I think it's a bit of a mute point to God. Our body is merely a temporary fleshly house enjoined to our souls and God will be replacing every saved persons physical body with a new heavenly one. My Will says there is to be no funeral, nothing special about where my body lays, I believe the placement of my dead body is irrelevant other than for for the people we leave behind who might deeply greive after our death, the location is a place to come and visit if for no other reason than to comfort their own soul. **Straight up** - While my wife and I want the abortion industry practice to end, personaly we do not feel weighted with a moral delema in using regenerated fetal cells from an already aborted dead baby. In related context, we all decide to, or not to, donate organs when we pass. Harvested organs or blood cells seem to be in the same box. Obviously it is quite another matter (clearly objectionable) if babies or people are killed soley for for purpose of harvesting organs, tissue or cells.

I serve a Good God who can turn evil things into good things. I'm not willing to say the Covid vaccines are good or evil and many Christians are indeed putting their trust in them. I'm also not saying there is no merit to those who voice Covid vaccine objections based upon the use of aborted baby cells, indeed if that is your faith stance, I stand with you. What me and my wife try to do in our household is not give Satan a "two-fer", meaning when Satan attcks one of us and we sour into a pissy attitude, we don't allow Satan to get a second victory using one arrow. We want women and men who embraced a decision to abort a baby to know the God we serve can forgive you as He has forgiven us, you do not have to be held in bondage to your sins. The odds are that I'm a greater sinner than most of you reading this, but I know a God that can set us free, God loves you, that's the good news of the Gospel of Christ. God will love you no matter your sin as a loving father loves their child, just come to Him, embrace Him, confess your sins and you will receive forgiveness and be adopted into His family.

2. The government is trying to force (me) to undergo a medical procedure? As an American, this is one of my strongest disagreements with the "vaccine mandate." In America, under our Constitution and law, the people are sovereign. Government didn't come first, it's not supreme, the people are. Our forefathers created government to serve us, not abuse us. When you try to force someone against their will, you should quite naturally expect a fight. The very nature of our American Constitution, further supported by the Declaration of Independence, clearly and soundly forbids any government (federal, state, local) from taking away "individual" freedoms which are described as inalienable.

I truly do not want a government that can force me to receive an injection. Let's be clear, while no one is holding you down, the tyrannical use of power by the Biden/Harris administration of firing anyone who doesn't get the vaccine and ordering all businesses over 100 employees to do the same, is clearly outside of the law. (Biden/Harris promised to unify, yet they are creating larger division. Let's all work to replace these bozos!) I believe no individual who is "not known to be infectiously contagious" can legally, morally, or ethically be strongarmed forced (under threat of loss of your job, your ability to move about, loss of social status, etc) to have a substance injected into their body. What's next? Forced death at age 70 when we are no longer deemed useful?

Among the atrocities the world was repulsed to learn about the Nazi concentration camps was the <u>forced</u> <u>experimental injections</u> upon some of those held in the concentration camps. The Nazi doctor, Josef Mengele conducted horrendous medical and torture experiments on Jewish people by injecting them with a variety of substances to see how they reacted. Granted the Nazi purpose was entirely maligned, but Biden is clearly taking us down this road, unless you call forced vaccination ethical medicine? But who would disagree that <u>today money and the politics tied to nearly every aspect of medicine</u> has tattered away most of the ethics in medicine? While you and I may enjoy the doctor or nurse we interface with, medicine in many forms is risky industry, filled with unethical behavior from those who profit in it. As a result of the Nazi atrocities, the <u>Nuremberg Code</u> was created, it contains this tenant, *"The voluntary consent of the human subject is absolutely essential"*. The

Biden/Harris team are willing to take away your job, your right to move about, even (back to index) your right to sue, to force you to get vaccinated. Soon, no vaccination, then no food, no water ... that's not America, that's not even prison in America, that's communism, ie, barbaric rule. Unless there is another agenda out there .....?

3. <u>Medical code of ethics requires "Informed consent"</u> - Everything about the Biden/Harris effort to force business and their employees to be injected with a substance violates the "Code of

Medical Ethics." This particular clause insures that adults with basic mental function shall not be forced to undergo any medical procedure. And yet, all across America, people are being forced to get injected, forced to decide between keeping their job and not being able to provide for their family, forced out of being able to participate in sports, not being able to go out in public, not being able to travel and other losses



of freedoms. Mind you all this is based upon an assumption that the person actually has Covid. And obviously >95% of us unvaccinated do not have Covid, or there would be no one left who already hasn't had Covid. It doesn't matter the reason for not being willing to be injected, any reason is good enough according to the informed consent requirement. Only a free person gets to make up their own mind, Biden/Harris don't want that.

4. <u>Lack of trust in my government</u> - I am very skeptical of our current government and of course any business entity that can make a profit on "forced use" compliance of whatever widget it sells. Collectively many

Americans do not trust the Biden administration (38% approval rating), we do not trust the congress (28% approval rating) and we are losing our faith in the Supreme Court (37% approval rating). Mind you when I use the word trust, it's already a far weaker version of the trust I have in God.

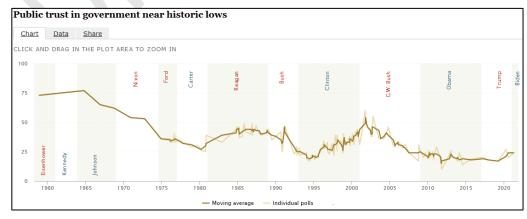


The Biden/Harris administration handling of; the Covid response, the unfettered flood of illegal immigration at our southern border, the tragedy of the rapid

American troop withdrawal from Afghanistan, rapid inflation and rapidly rising costs of all kinds of products, shortages of all kinds of consumer goods, exorbitant federal spending proposals, firing innocent non-Covid infected workers all in just the first year of taking office, reveal a clear mismanagement at best, with criminal negligence or treason deserving of a look. If the Biden/Harris administration wants to promote the vaccine because it's effective and that all other treatments are less effective and they should be set aside, then using the same methodology they both should resign immediately. This is the most incompetent administration I've seen

in my lifetime. At this point, the Nixon administration has 10x more moral credibility than the Biden administration.

Yet America's diseased condition began over 6 decades ago. Our schools and universities have become breading grounds for harmful



and evil propaganda, the Bible once taught in many universities and schools was banned and Marxist ideologies were brought in. At the core of many rebellions including the Covid vaccination program is fundamentally a **deep lack of trust**. It isn't a lack of trust in medicine or science as Biden claims, ("for God's sake") yet both are being heralded as the only places we can find legitimate truth. Real everlasting truth is found in the Bible. Certainly there is some good in science and medicine, but today both are merely laundering factories where huge amounts of money and wealth move around. Frankly, the notion that science is where truth is found is utter nonsense. Science has been wrong many, many times in history and while medicine can save lives it has taken many as well. Science and medicine are every bit as political as congress. Somewhere, doing what is right and true was set aside for political ideology and it's infected everything. So we are left with little we can trust

on this earth. I view most of our current American government leadership as harmful to **(back to index)** Americans and I believe with my whole heart they mean to injure if not destroy our freedoms, our individual rights and our country. I neither trust nor respect my government and this leadership clearly disrespects me, with this President, my freedom is his choice? Back out on the street, that kind of disrespect would bring certain corrective action.

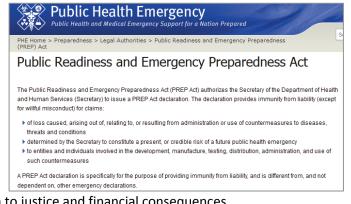
5. Lack of trust in the companies producing the vaccines — In America when a company produces and sells something that later turns out to be defective in such a manner that it injures people who used their product, every American has the right to sue for the harm caused. Many class action law suits are born from such tragedies. Mind you many of these class action lawsuits are related to medical and science based products, but for one "unexpected reason or another", they caused harm. But in the case of the Covid vaccines, our federal government set aside our right to sue these companies when (if) the vaccine causes more harm than good to individuals. The following snippet is from a CNBC article describing the law that sets aside our right to sue when harmed.

You can't sue Pfizer or Moderna if you have severe Covid vaccine side effects. The government likely won't compensate you for damages either 12/17/2020 MacKenzie Sigalos

The federal government has granted companies like Pfizer and Moderna immunity from liability if something unintentionally goes wrong with their vaccines. "It is very rare for a blanket immunity law to be passed," said Rogge Dunn, a Dallas labor and employment attorney. "Pharmaceutical companies typically aren't offered much liability protection under the law." You also can't sue the Food and Drug Administration for authorizing a vaccine for emergency use, nor can you hold your employer accountable if they mandate inoculation as a condition of employment. Congress created a fund specifically to help cover lost wages and out-of-pocket medical expenses for people who have been irreparably harmed by a "covered countermeasure," such as a vaccine. But it is difficult to use and rarely pays. Attorneys say it has compensated less than 6% of the claims filed in the last decade. KEY — PROMPT ACTION

So we have a host of medical professionals and some slime-ball politicians demanding we all get vaccinated "because the vaccine is very safe" ..... but if it's very safe or even just safe, why are we not allowing those who get injected with this stuff the right to sue if something goes wrong? Apparently it's not really all that safe, if it was really safe these companies would obviously be willing to stand behind their products. They are not, so why am I supposed to trust them? These pharmaceutical companies cannot be sued by law under the PREP Act. Not only are the pharmaceutical companies protected, so are all the employers who require you to get vaccinated as

well as all the people giving you the shot in the arm. When wayward government starts handing out full legal immunity to select businesses, you can be sure there will be no end to what a business industry will do for government. Literally everyone who has received the mRNA or vector vaccines could die next year and the 3-vaccine companies would be off scott-free. Literally everyone involved with this mass vaccination campaign is immune from any lawsuit. If this doesn't bother you, great, but it bothers me and yet I've never felt the need to sue anyone. But I sure like knowing when a wrong is done that there is a not



like knowing when a wrong is done, that there is a path to justice and financial consequences.

That I'm guilty w/o a trial or any evidence? — It's true that I am unvaccinated, but that doesn'

6. That I'm guilty w/o a trial or any evidence? — It's true that I am unvaccinated, but that doesn't mean I have Covid or that I have ever infected anyone. I do not have Covid and I have Covid test kits and test myself whenever I get symptoms of sickness, yet I'm in a group that is maligned, vilified, accused, shamed and ridiculed by government leaders and various parrot repeating propaganda reporters as if I'm guilty of having and distributing Covid. If I had Covid, (or any other serious and contagious disease) the law allows that I can be isolated/quarantined (by force if need be) and that makes sense. However, "proof" would still be required that I have a deadly infectious disease. With good laws, solid evidence and good unbiased judges/juries, justice is achieved. Take away any one of the three and we have injustice. I doubt Mr. Biden has ever actually read entirely thru his Bible, there are a few verses that he might recall if he had. Acts 22:25 As they stretched him

out to flog him, Paul said to the centurion standing there, "Is it legal for you to flog a (back to index) Roman citizen who hasn't even been found quilty?" Acts 24:13 And they cannot prove to you the charges they are now making against me. Acts 25:11 If, however, I am guilty of doing anything deserving death, I do not refuse to die. But if the charges brought against me by these Jews are not true, no one has the right to hand me over to them. I'd remind the Biden/Harris team, that Jesus was crucified using the same method, the same thing Biden/Harris are doing, inciting the crowd against the innocent. Truly Biden/Harris are spinning up the crowds to shout "crucify, crucify." Personally, I certainly expect to get Covid repeatedly over the next decade, as occurs with many viruses like colds and the flu that circulate amongst the world's population. Both colds and the flu kill people too by the way. In America under the Biden/Harris administration they are willfully spreading lies and wrongly passing judgement upon millions of innocent Americans. Biden/Harris have opinions, but that does not entitle them to create laws that restrict the rights or people who are truly innocent. Such tactics are more akin to how Hitler vilified the Jews as inferior people. At this point, the Biden/Harris team is literally guilty of creating one of the largest acts of government sponsored hatred and injustice on a group of people since the days of slavery. It's true, they are pulling no stops to vilify and punish roughly 60-80 million innocent unvaccinated Americans.

- 7. Flipping the tables of jurisprudence? Now in America you have to prove your innocence? This is the insanity of the Biden/Harris camp, now you're guilty just because they say you are, not because they have proved your guilt which is how the traditional law and justice system works. Under our old tried and true legal system no one is guilty until they are proven guilty by a prosecutor in a court of law, convicted by a jury and sentenced by a judge. But under Biden/Harris, I am guilty without evidence, without a prosecutor, jury or judge. Based upon nothing more than their opinion and I'm put in the place of having to prove my innocence? That is not law, that's tyranny. Even requiring me to pay for my own tests and take them weekly is contrary to law and justice. No one should have to weekly prove their innocence. Is this some new standard of progressive law? Americans are assumed innocent, they (Biden/Harris) must use the court system and prove my guilt, ie that I am infected and knowingly infecting others. However, I do see how the clamor for something called social justice (no courts involved) rings similar to the removal of our legal system thus paving the way for judgments based upon the whims of those in power. At that point, either these clowns will be evicted from the Whitehouse or the next civil war will be going on.
- 8. <u>I choose acquired natural immunity</u> While I had a few vaccines in my youth, I have declined many as an adult. I have chosen to trust God and trust my body's own immune system. People from all across America get to choose natural or artificial products, or whatever else the natural choice might be. In this case I choose natural immunity, while respecting the choices of others, soooo why is that not ok? And now as you read in the prior pages of this handout, <u>several studies</u> are backing up that natural immunity offers a <u>better longer lasting</u> immunity than vaccines. But even if natural immunity wasn't better, it would still likely be my choice.
- 9. The burden is on you smart people, not on stupid people like me We've already established I'm an uneducated idiot, so the "educate me" burden is on the smart people. For decades I've espoused the following; that when a student fails, our educational system creates a record indicating he or she is basically dumb. But I argue, that's not likely an accurate assessment. I think it makes more sense to label the educated teacher as either inexperienced or incompetent. When an adult and a child are in a room, who should be the person responsible to guide and instruct the other? So if the child doesn't learn from the degreed and financially compensated adult, why is it the child's fault? Really, our education system makes no sense to me. I'm not in the camp where we just pass all children either, I'm in the camp where we consider that the teacher and/or the teaching methods is where most of the blame lies. I'm not excusing that the parents have a role to play, but the superbly expensive American educational system is in place with much power and money behind it, so my expectations are high. As such, I'm saying that parrot repeated propaganda from all these highly educated vaccine evangelists has not swayed me to get the shot, rather just the opposite I'm more leery than ever of their motives ... and frankly their competency. If the Covid vaccines were developed in the conventional way (live or dead pathogen leading to antibody stimulation) rather than mRNA or vector methods, I'd "consider" getting vaccinated. You'll learn that I've tried joining two Covid clinical trials. I'm waiting for true unbiased educators to truly educate me about Covid and my need for this vaccine. I've never taken the flu vaccine either.

- 10. Getting any one of these experimental vaccines does comes with very harmful known (back to index) risks and yet unknown future risks It's not no risk. Why does it matter? Because if it harms or kills you or a member of your family, a tiny risk becomes an "in your face risk," it's very real. There is indeed risk with short and long term side effects and also death (over 21,000) according to the VAERS (Vaccine Adverse Event Reporting System). Flip back to Part-5, Vaccine statistics to get a better understanding of the risks with being Covid vaccinated. When someone says its "safe", they apparently do not know that over 1 million have been adversely harmed by the vaccine? And we now know that "a" vaccination may not truly protect me from Covid. Right now the so called experts have decided booster shots are needed for all 3 vaccines, mind you we are only into the vaccination process 11 months and we are already being instructed to get a 3rd booster shot. Does anyone see a pattern here? Huge massive sums of \$ going to pharma while citizens held in a state of constant fear. Month after month fear is promoted over and over. Why are the vaccine risks not being shared in a manner equal to the benefits? Why are all other commercials where pharmaceutical drugs are advertised required to mention the risks with the drugs, but all these commercials telling us to get the Covid vaccination are not mentioning the serious risks?
- 11. I object that any business and/or the government is now the overseers of my personal faith and religion. As if things could not be any more insane, the validity of a person's religious faith is now only good if it has the approval of the government or business they are employed at? That's exactly what the Biden/Harris team has imposed. A person's faith is not and should not ever be subjected to what the employer deems acceptable let alone the government. Let's back up at this point, the employee does not have Covid, ie, the employee is innocent of any wrong doing. Why does such an employee need to provide any religious statement in opposition to getting vaccinated? This website did a pretty good review of this topic yet in a biased way, but it is still mute from the elephant in the room, ie the aspect of the employee is innocent, not guilty of doing anything wrong and now the President's department heads and managers within the business sector have become religious judges to determine if a person is religious enough?

In America, nothing is allowed to violate our Constitution, namely this as it applies "Congress shall make no law respecting an establishment of religion, or prohibiting the exercise thereof". Insanity, is telling all business owners they have to accommodate someone wanting to <u>pray several times</u> a day at work because that's their faith, yet saying it's not reasonable for me to reject being injected with a vaccine substance that I deem morally or medically hazardous to my faith or body? Mind you, these are vaccines that by the <u>governments own</u> records, has killed (over 21,000) and/or maimed hundreds of thousands (over 1 million) of people. I feel like I'm living in an alternate universe, were everything that is right and true is now not true.

12. **My no, is not a forever no, it is a no for now** – In America we are supposed to be free, able to make our own choices. I may risk losing \$100 on a bet, that's a \$100 out of my wallet not yours, but it's a much larger bet when we inject something into our body. At this time, I'm not willing join the world in the idol worship of Covid vaccines, nor to risk my health on an unproven new method of tricking my body into an immune response, but if another vaccine comes up that is not heralded as our savior and a vaccine developed in the traditional way, I might consider it. You learned above in <a href="Part-5">Part-5</a> that according to the government's own reporting system, this vaccine in just 11 months, is much more hazardous than all other vaccines combined over a 31 year period. Waiting for more evidence is my choice, but I'm ok with you all being human guinea pigs. Former <a href="Pfizer Scientist Dr. Michael Yeadon shares his highly educated">Pfizer Scientist Dr. Michael Yeadon shares his highly educated</a> opinions regarding the overall Covid vaccine campaigns, October 10, 2021.

# Math that Doesn't Add Up

KEY-PROMPT ACTION

A. Vaccinated people still get and spread Covid – So here is the irony, being vaccinated doesn't appear to stop the spread of Covid, admittedly it appears that is does reduce it and it reportedly reduces the risk of serious complications and death once infected, but it does not eliminate that the person can still have a serious case of Covid and/or die from it. So while we've been told the vaccine is 95% successful at preventing the disease, it is apparent that it the 5% is still very significant and even vaccinated you can still spread the disease when you get it. According to the very large and highly credible Israeli study, vaccinated people are up to 13x more likely to get reinfected than those with natural immunity. So the truth is, vaccinated people still get and spread Covid. In

fact I would venture to say those vaccinated are more likely to spread Covid because (back to index) they might believe they can't get Covid and thus ignorantly run around infecting others. Why? Because the propaganda spreading politicians and parrot reporters don't understand what is really going on. Why? Because the Dr Fauci and our health departments aren't talking about it for fear it will cause more people to remain unvaccinated or not to get booster vaccinations.

CNBC - CDC study shows 74% of people infected in Massachusetts Covid outbreak were fully vaccinated About three-fourths of people infected in a Massachusetts Covid-19 outbreak were fully vaccinated against the coronavirus with four of them ending up in the hospital, according to new data published Friday by the Centers for Disease Control and Prevention.

The new data, published in the U.S. CDC agency's Morbidity and Mortality Weekly Report, also found that fully vaccinated people who get infected carry as much of the virus in their nose as unvaccinated people and could spread it to other individuals.

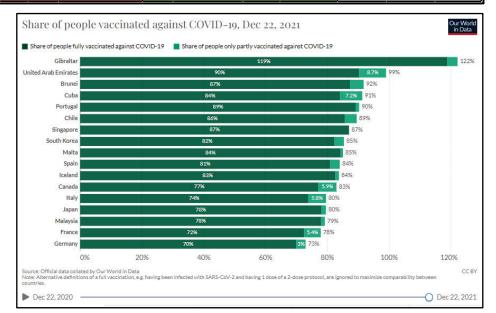
Countries with high vaccination rates still face waves of Covid infections – it's true! Herd immunity is thought to be when either 70% of the population is fully vaccinated or has natural immunity. However, because heard immunity is not working, the "experts" are now moving the initial heard immunity threshold to 80%. Regardless, the evidence is it's not working at either point. Gilbralter, UAE, Brunei, Portugal, Chile, Singapore, South Korea, Malta, Spain, Iceland, Canada, Italy, Japan, Malaysia, France and Germany are among the counties reaching herd immunity through vaccination alone, let alone when combined with natural immunity. Below is a summary of several variables in an attempt to identify if the vaccine's effectiveness or herd immunity is victoriously revealed

as promised by political leaders and the leaders in the provaccination campaign. We have a full year of vaccination activity, we've been teased with; one shot, two shots, three shots and

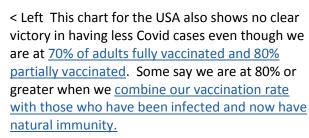
| Math                                 | n That | Does   | n't Add Up           |                       | 12/22/202          | 21                 |                 |                               |             |           |  |  |
|--------------------------------------|--------|--------|----------------------|-----------------------|--------------------|--------------------|-----------------|-------------------------------|-------------|-----------|--|--|
|                                      | Fully  | 1 shot | 7-d avg, Covid cases | p/mill                | 7-d avg, Covid     | deaths             | Vaccines In Use |                               |             |           |  |  |
| Country                              | Vacc   | vacc   | population           | p/mill popula         | ation              | Largest share Next |                 | Others                        |             |           |  |  |
| Gibraltar                            | 119%   | 122%   | Very High & Rising   | ry High & Rising 1378 |                    | 0.00               | Pfizer          |                               |             |           |  |  |
| <b>United Arab Emirates</b>          | 90%    | 99%    | Beginning to Rise    | 34                    | Low Flat           | 0.04               | Sinopharm       | Pfizer                        | AstraZeneca | Sputnik V |  |  |
| Brunei                               | 87%    | 92%    | Very Low             | 17                    | Low Flat           | 0.00               | AstraZeneca     |                               |             |           |  |  |
| Portugal                             | 89%    | 90%    | High & Rising        | 514                   | Rising             | 1.8                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Chile                                | 86%    | 89%    | Low & Flat           | 64                    | Slow Rise          | 1.3                | Sinovac         | Pfizer                        | AstraZeneca | CanSino   |  |  |
| Singapore                            | 87%    | 87%    | Declining            | 55                    | Declining Low      | 0.3                | Pfizer          | Moderna                       |             |           |  |  |
| South Korea                          | 82%    | 85%    | Low & Flat           | 128                   | Rising             | 1.3                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Malta                                | 84%    | 85%    | High & Rising        | 604                   | Spikes - Low       | 1.0                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Spain                                | 81%    | 84%    | High & Rising        | 770                   | Low - Rising       | 1.0                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Iceland                              | 83%    | 84%    | High & Rising        | 718                   | Low Flat           | 0.4                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Canada                               | 77%    | 83%    | Rising               | 273                   | Low Flat           | 1.0                | Pfizer          |                               | AstraZeneca |           |  |  |
| Italy                                | 74%    | 80%    | Rising               | 451                   | Rising             | 2.1                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Japan                                | 78%    | 80%    | Very Low             | 1                     | Low Flat           | 0.01               | Pfizer          | Moderna                       |             |           |  |  |
| Malaysia                             | 78%    | 79%    | Low & Flat           | 109                   | Declining - Low    | 1.0                | Sinovac         | Sinopharm                     | 1%1         |           |  |  |
| France                               | 72%    | 78%    | High & Rising        | 842                   | Rising             | 2.4                | Pfizer          | Moderna                       | AstraZeneca | 181       |  |  |
| Germany                              | 70%    | 73%    | Declining            | 431                   | Rising             | 4.3                | Pfizer          | Moderna                       | AstraZeneca | 1&1       |  |  |
| Various red colors equte to concerns |        |        |                      |                       | rious green colors | are look           | ing good        | White little clear indication |             |           |  |  |

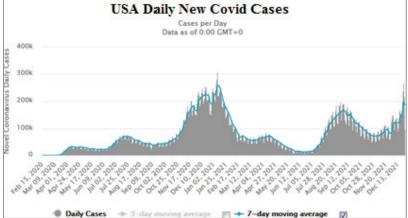
now, a 4th shot is being proposed. The table above shows conflicting results with no clear support for heard immunity in spite of very high vaccination rates in these countries.

Right > This chart shows the full and partial vaccination rates as a % of total population of selected countries. One would expect clear and convincing massive reduction in Covid cases and deaths as a result.

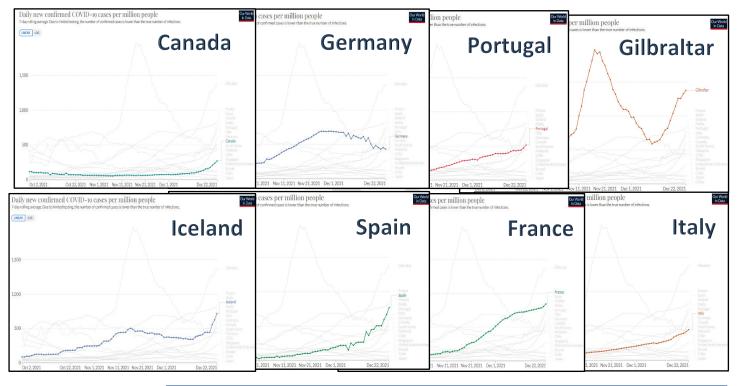


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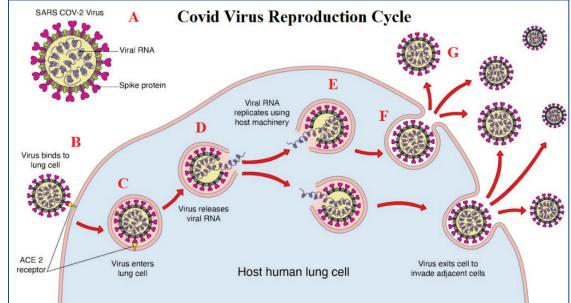




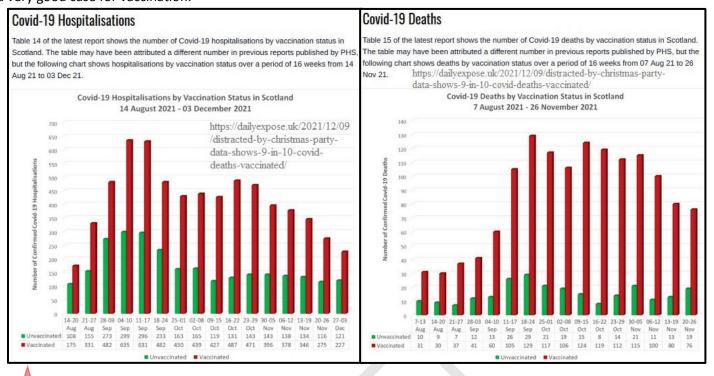




Right > One virus pathogen gets into one of our cells, and begins replicating itself and then shedding more virus pathogens outside the cell to either be shed outside the body by exhalation or to invade other nearby cells and repeating the process.



(back to index) Another website created these graphics regarding Scotland, which if true also doesn't paint a very good case for vaccination.



The vaccines are only marginally helping people avoid hospitalization. According to a CDC posted study, The Pfizer vaccine is said to be 88% effective at preventing hospitalizations, 93% for the Moderna and just 71% for the J&J. Contrast that to the raw statistics in another CDC posted study that indicate 83% of unvaccinated people infected with Covid do not require hospital treatment. The difference between vaccine based protection is proving to be so small as compared to the body's own natural immune activity and coupled with the fact that vaccine inoculated people are up to 13x more likely to become reinfected than those with natural immunity lead some to question why we are using these vaccines at all.

D. Vaccinated or unvaccinated everyone is still playing with the odds – So in Part-5 "Statistics" we learned a lot about what we know today about Covid and vaccinations. In Part-9 you'll learn what I do and what I will do if I get Covid that will improve my odds of winning the battle against Covid. Here is where we all begin; the overall odds are 100% that you and I will die. So the question is not "if", but "when" you die. There are odds regarding everything we do in life, some of us are risk takers, others are not. Consciously or unconsciously we all make choices with the odds and against the odds and that's ok, because in America, we embraced the concept of freedom and choices.



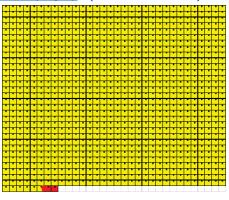
As long as my choice does not injure another and whether my choice is good or bad, I'm afforded the freedom to bet on which ever horse I want regardless of the odds. Personally I feel the odds of getting Covid and obtaining my own natural immunity are far better than risking the odds (long and short term) with these vaccines. Interestingly the CDC does not provide useful morbidity data to compare pre-Covid and during Covid within the same age groups. When you read any article or view any data, always look for what is not depicted and always read the data notes. Someone may say, "You want the best odds of staying alive and I should strive with you in getting both of us the best odds and nothing less than that!" If that's true and you really feel that way, your best odds are found living outside of the USA, you'd have to move to one of the top 5 countries that provide the best odds for not getting Covid, because America is nowhere near the best place to be. Which countries have the lowest p/100k population death rates? In order: Burundi, China, Bhutan, New Zealand and Niger. The USA is 165 down the list.

The odds that any one person will die from Covid are better than the odds of dying by; (back to index)

being in a pedestrian accident, being shot with a gun, being in a motor vehicle accident, falling, drug overdose, suicide, chronic lung disease, cancer, or heart disease.

Out of 1,000 people represented by the yellow squares to the right, 2.3 will die from Covid, the rest will live. Your odds are very good.

I hope you can see that you are not playing the best odds either, not only by staying in the USA, but I'm sure in a dozen other areas of your life. Are you; in any sports, drive a car, ride a horse, over eat, smoke/vape, drink, etc? We are all playing with the odds and I'm ok with that.



- E. Even if we have Covid antibodies from natural immunity we still have to get vaccinated? Ask your doctor what you get with the vaccine, he'll tell you antibodies that fights Covid. Ask a scientist what you get after having had Covid, she'll tell you get antibodies that fight Covid. Getting Covid achieves the same goal as the vaccine. It's a complex topic that I try to cover in Part-3, but our body will produce antibodies in not only our blood which are temporary and decline over time after defeating the infection, but our body will also create more permanent antibodies that reside in our bone marrow which can be stimulated to fight the infections years down the road. The wonderful design of the human body's defense mechanisms provides a natural way to combat many infections. Some old folks will remember the days when moms would hold neighborhood chicken pox parties so kids could get it all at the same time, which is safer than getting it when you're an adult. Yet, our wayward government is saying natural antibodies created in our body does not exempt a person from the requirement to be vaccinated, only FORCED vaccination is acceptable. Think about that ... what this is really about is forced vaccination, it's not immunity. According to the very large and highly respected Israeli study, natural immunity is up to 13x better than vaccinated immunity. So why is it so important that we become trained monkeys to keep getting injected with something? At this point, the people who will be most susceptible to frequent Covid sickness, are the ones who got vaccinated. But, it's a personal choice, I'm good with whatever your decision is.
- F. The irrational dichotomy of thought on this topic I'll use an example to contrast forced Covid vaccinations. At the same time as Covid vaccines began mass production and distribution, a variety of states where passing laws restricting abortion to save the life of babies in the womb of mothers. If no one is supposed to restrict a woman choice in the disposal (killing) of a baby that has a heartbeat (at 6-7 weeks into the pregnancy) and that otherwise may be viable outside of the womb after 25 weeks, (66-76%) how is it then otherwise acceptable to force people to be injected with an experimental (no legal liability) substance known to cause serious adverse effects and even death? Isn't this my body? Choice in one area but no choice in the other? Abortion indeed terminates one life for the convenience of another ie, that's the purpose. The Covid injection "supposes I might infect another" who might become one of the 1.6% who will die. The next dichotomy is related to the response to HIV transmission in the U.S.. When AIDS started taking the lives of homosexual, bisexual men and street drug users, the government response was not to stop the free movement of any of these affected groups, it also wasn't' forced vaccinations, nor did they try to get them fired from their jobs as Biden is doing now. Rather they sought to educate and "asked" the affected groups to voluntarily comply with public health recommendations. Biden/Harris government may be trying to change the rules, but we have to call them out on their ridiculous hypocrisy.
- G. With mandated vaccination Covid will be eradicated! There have been several politicians and various TV commercials supporting mass vaccination as "the only way Covid will be eradicated is if we all get vaccinated." This statement and claim is not true, Covid will likely never be eradicated at least in not any more than the flu or common cold (also viral type infections) will be eradicated. However, in proper context, the "pandemic could be ended" once infections fall low enough. From everything I read, the understanding I've gained, I suspect the pandemic may not even end for at least 2 more years, but possibly upwards of 5 years. What will likely occur, is that the world will come to embrace the deaths caused by Covid as they do the deaths caused by the flu, it's just part of life. The one thing that will be different .... several pharmaceutical companies have pulled in billions in profits!

- H. <u>Dr Fauci, the wolf managing the hen-house?</u> I've watched dozens of video bites on (back to index) news stations in which Dr Fauci is our hailed as the leading expert for ending this pandemic. He is the head of the National Institute of Allergy and Infectious Diseases (NIAD) and along with National Institute of Health (NIH) director Dr. Francis Collins, they admit that they approved and sent funds to the Chinese Wuhon Lab for research related to coronavirus (like Covid) in the years prior to Covid. While Fauci denies "gain of function research" his own staff said they did. This concerns me, I just can't trust the people who would make such a grave mistake without remorse of their actions. In Part-2 I detailed all the money that Fauci's agency spent on research like this. Yet, Dr Fauci has offered no remorse for what his agency and/or the NIH has done. A man not willing to own his own failures, is harder to trust than a man who does. Related links: MSN, WE, NYP, NW
- I. Covid pandemic death toll in proper perspective as a % of the world's population in deaths, the Covid pandemic is far removed from the worst. In the table in Part-1 it's thought to be somewhere between 10-12 on the list. The Black Plague took perhaps 50% of the entire world's population at the time and many put the global smallpox death toll at 300-500 million, perhaps 25% of the world's population. Covid at the time I wrote this is about 3.3% but let's round it up to 4%, ok sounds bad, but also consider that very few died from Covid alone, based on one CDC study only about 6% of the total deaths were due to Covid alone. The rest are apparently died to Covid plus a comorbidity. So which killed? Take away any comorbidities, they would have lived, take away Covid they would have lived.
- J. Conspiracy? While the deaths are certainly very significant and should be taken seriously, there is an interesting twist to the events of today. This is likely an engineered virus, U.S. funding was provided to the Wuhan Lab, (I outline that in Part-2) the virus was purposely or accidently exploited and released. In the 5 years leading up to the corona virus, dozens and dozens of federal grants and related research (?) was being fostered. Remember that among the elites of global society, their desire is that much of the people on the planet are "gone." The elite widely advocates reducing the world's population to < 5million people, <WATCH (some want only 500,000) so the odds are you and I are not on their list of keepers. Very likely this and perhaps another infections disease will be used to usher in some form of global control, clearly separating the chosen from the not chosen. There is little doubt that this Covid pandemic, the great reset and the need to track everyone's carbon foot print will lead to the requirement to be chipped. The "need" to monitor everybody is part of the plan. Chipping people or something like that, provides "2-factor" identification, the chip coupled with finger print or retina scans seems fool proof ... but its also tied to the mark of the beast in the book of Revelations of the Bible.
- K. Hypocrisy with HIPPA Law being ignored So to get into a variety of places I have to reveal my vaccinations status? Ummm, that's my personal medical info! Having to convey medical information to government and businesses violates HIPPA laws, which is supposed to insure my medical conditions, treatments and information remains private. However, the freedom of people to move about is being regulated by having to produce a document showing we have had a medical procedure. So much for HIPPA laws. A tyrannical government is one that imposes all kinds of laws on its people, but then itself violates them. One aspect of Obamacare was the mass collection and access of all of our personal medical information, its continuing under Biden/Harris.
- L. Biden/Harris are focused on blaming me for not getting vaccinated, yet is their lips are sealed on coming down on China on releasing this China virus. Why does that matter? Because it will happen again and again if no one holds China accountable. And not to pick only on China, America's own Dr. Fauci might be mixed up in this too. Worse, drug manufacturers might be enticed to introduce all kinds of viruses to increase their profits. Imagine if you and I had a lab and we let this Covid virus thing loose, we'd literally be in prison right now. Literally, for real locked up awaiting trial for murder! Yet our leaders (Biden/Harris administration) are attacking fellow Americans rather than the nation that created this Covid pandemic. This is insane, the Biden/Harris camp literally appear to be the puppets of China rather than servants of the American people. And this isn't the first time China has unleashed a terrible disease upon the world's citizens. It occurred in the mid-1970's too.

A brief, terrifying history of viruses escaping from labs: 70s Chinese pandemic was a lab mistake April 11, 2014 Human H1N1 virus reappeared in 1977, in the Soviet Union and China. Virologists, using serologic and early genetic tests, soon began to suggest the cause of the reappearance was a laboratory escape of a 1949-50 virus and as genomic techniques advanced, it became clear that this was true. By 2010, researchers published it as fact: "The most famous case of a released laboratory strain is the re-

(back to index) emergent H1N1 influenza-A virus which was first observed in China in May of 1977 and in Russia shortly thereafter." The virus may have escaped from a lab attempting to prepare an attenuated H1N1 vaccine in response to the U.S. swine flu pandemic alert. https://nationalpost.com/news/a-brief-terrifying-history-of-viruses-escaping-from-labs-70s-chinesepandemic-was-a-lab-mistake

- M. Significant portions of those in the medical profession, law enforcement and emergency responders are also refusing the mRNA vaccine – So if you agree with Biden/Harris, you're a smart person, however if you disagree you're a nut-job and a Covid spreading murderer. This comes from the lips of a president who promised to unite our country, what he meant to say, is "only if you agree with me." As of late, under the Biden/Harris forced vaccination mandate some high profile public servants have decided to be fired rather than take the vaccine, there is 10x more division since Biden/Harris took office and they are personally and directly responsible for that. But now with so many professionals refusing the vaccine, it's getting more difficult to call every unvaccinated person a nut-job. Oh they are merely being deceived by the bad information on the web that's written by the other nut-jobs. The facts are, significant portions of professionals don't like what they are hearing, they know their rights and they are not going to be forced into submission. Tell me, does this sound like America to you: you MUST get the vaccine, you MUST get it right away, if you don't you WILL BE FIRED from your job, you WILL NOT get the unemployment benefits that your employer has been paying into for years solely because you won't conform to getting the shots. Honestly I would rejoice if this Gestapo administration was tried and hung for treason.
- N. Covid vaccine manufacturers have troubled past. Let's look at Pfizer In 2009 Federal prosecutors hit Pfizer Inc. with a record-breaking \$2.3 billion in fines and called the world's largest drug maker a repeating corporate cheat for illegal drug promotions that plied doctors with free golf, massages and resort junkets. Authorities called Pfizer a repeat offender, noting it is the company's fourth such settlement of government charges in the last decade. The allegations surround the marketing of 13 different drugs, including big sellers such as Viagra, Zoloft and Lipitor. It's not their first violation and fines either! Johnson & Johnson, hit with \$8 billion in fines. And they had plenty more fines as well. Moderna is a relatively new company, so far no fines.
- This publication; "Rapid Medical Countermeasure Response to Infectious Diseases: Enabling Sustainable Capabilities Through Ongoing Public- and Private-Sector Partnerships": Workshop Summary, 2016 - contained the following quotes (Daszak is the president of EcoHeath Alliance, the company Dr Fauci gave \$\$ to, which made its way to the Wuhan lab) ... "Daszak reiterated that, until an infectious disease crisis is very real, present and at an emergency threshold, it is often largely ignored. To sustain the funding base beyond the crisis, he said, we need to increase public understanding of the need for MCMs such as a pan-influenza or pancoronavirus vaccine. A key driver is the media and the economics follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profit at the end of process, Daszak stated."
- P. Obamacare (PPACA) basically made it illegal to not cover preexisting conditions so under Obamacare, if I have a pre-existing condition, I can get insurance. However, the vast majority of private and group health insurance plans are no longer waiving cost-sharing for those unvaccinated who contract the coronavirus and require COVID-19 treatment, including hospitalization, according to a report by the Kaiser Family Foundation and the Peterson Center on Healthcare. And Biden wants the unvaccinated to pay for all the once p/week Covid tests that Biden himself mandated? So Biden created new loop holes for insurance companies to get around paying the costs of the unvaccinated, even though a mountain of evidence coming in, says the vaccinated are for more likely to catch Covid. I wonder when the table fully turns, if they will do the same on the vaccinated? We can see the wave building now, there is a tidal wave building regarding the waning health of the vaccinated. Will they be required to pay all their new medical costs?
- Q. I do have a regret America is front and center with regards to vaccinations. We are a nation of technology and wealth compared to much of the rest of the world. We are being accused of not doing enough to help the poorer nations of the world. So by me not getting vaccinated I'm freeing up all my doses to "help" others in other nations. Yet, because I do not trust the vaccine, I fear the person(s) getting my doses may later regret it. However, if you truly want it, you can have mine. I wish that people would turn again to the God who created us, to trust in Him and receive the peace God offers. I wish our government would provide its citizens with the

whole truth of all the low cost remedies that can make a Covid infection something (back to index) that does not have to be feared.

- The near total folly of medical and scientific studies and research papers I'd like to depart this with one final observation with regards to my Covid research journey. I spent the last 2-3 months pouring over study after study, research paper after research paper on Covid and about three quarters of the way through, I determined that much of what is published is;
  - A) Contradictory to other published studies,
  - B) Marginally informative,
  - C) Outright gibberish.

KEY-PROMPT ACTION

I have no qualifications nor experience in this activity so I can only guess what the underlying motivation is. Yet, I did read a comment from someone who was involved in that arena who espoused the following (paraphrased) in a blog that followed after a study (I have not been able to again find the comment) regarding getting papers and studies published;

- 1) Papers and studies are created and published to support a theory that the author holds, thus giving the author's theory credibility even if aspects in the methods used are very flawed. In other words, science has become an industry creating its own or a specific worldview or desired outcome,
- Papers and studies are published to earn favor with "the big fish" who may either direct future grant
  monies to the author or authors, or provide the author with a higher paying job within a prospective
  company,
- Getting published leads to resume and biography building. Medical and science professionals are thought to be more hirable and more respected when they are part of many such studies and papers.
- 4) Papers and studies are often completely biased and not worth the paper they are written on.

Even the Pfizer vaccine phase 3-study had data that seemed to me to show little effectiveness at preventing death, (1 vs 2) which was marginal at best compared to the placebo group. As I recall, the blogger mentioned above replied that "this truth is the dirty little secret of this aspect (studies and published papers) of science and medicine". So while I am in no manner qualified to render an opinion, my observations support the informed blogger's comments, at least in the area of Covid research. After this extended Covid review I do believe that most people are better left getting Covid than getting vaccinated, the vast majority will be just fine. For those who have more moderate to severe cases, many will be fine with over the counter or cheap easily obtainable prescription products and yet, some will die just as some who are vaccinated will die after getting Covid.

After writing this final observation point, I did however find that some other very credible people who are actually in this field feel the exact same way. Please click into the articles, their worth the read.

- Skeptical of medical science reports? "It is simply no longer possible to believe much of the clinical research that is published, or to rely on the judgment of trusted physicians or authoritative medical guidelines. I take no pleasure in this conclusion, which I reached slowly and reluctantly over my two decades as editor of The New England Journal of Medicine"

  Richard Horton, editor of The Lancet, wrote that "The case against science is straightforward: much of the scientific literature, perhaps half, may simply be untrue. Afflicted by studies with small sample sizes, tiny effects, invalid exploratory analyses, and flagrant conflicts of interest, together with an obsession for pursuing fashionable trends of dubious importance, science has taken a turn towards darkness"
- ➤ Ghost- and guest-authored pharmaceutical industry-sponsored studies: abuse of academic integrity, the peer review system and public trust. Industry-sponsored ghost- and guest-authored clinical research publications are a continuing problem in medical journals. These communications are written by unacknowledged medical communication companies and submitted to peer-reviewed journals by academicians who may not have participated in the writing process. These publications, which are used for marketing purposes, usually underestimate the adverse effects and medical risks associated with the products evaluated.

- Since peer-reviewed data are used to develop health care paradigms, (back to index) misleading information can have catastrophic effects. A failure to curb ghost and guest authorship will result in an erosion of trust in the peer-review system, academic research and health care paradigms.
- Further reading: <a href="Drug Companies & Doctors: A Story of Corruption">Drug Companies & Doctors: A Story of Corruption</a>, So what is important to the citizens of America, where the entire system which is heralded as the "<a href="the truth" and "its science" is hopelessly corrupted and itself is diseased? In my 9th grade street wise understanding I'd say this; what the American people deserve is straight forward no bullshit accurate, unbiased and sincere data. That's not what we are getting, so perhaps it's time to start locking up these white collar pretenders? Its clear medicine and science communities are not able to self-regulate themselves. As it stands now, the medical science library does not represent truth, rather folly, so who is tasked with cleaning this up?

Well maybe being called out by a 9<sup>th</sup> grader will shame someone enough to act. With all the billions pouring into pharmaceutical companies, we now have to wonder, who will be owned and bribed with all that money for the next "<u>must have</u>" vaccine? The street kid is calling this whole Covid vaccine thing a con-job until all the information about it is made openly available and the censoring stops.

If you want to study research papers by any topic here are the links.

CDC library -

https://www.cdc.gov/library/index.html
The Lancet - https://www.thelancet.com/

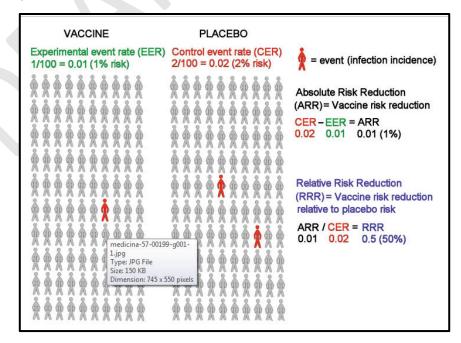
PubMed -

https://pubmed.ncbi.nlm.nih.gov/

JAMA network - <a href="https://jamanetwork.com/">https://jamanetwork.com/</a>
JMSCR - <a href="http://jmscr.igmpublication.org/home/">https://jmscr.igmpublication.org/home/</a>
Medical Science -

https://www.discoveryjournals.org/index.htm

<u>Outcome Reporting Bias in COVID-19 mRNA Vaccine Clinical Trials</u> – Do the vaccine clinical trials really make a difference? The author of this paper says no.



# PART – 8 Covid Precautions I Recommend to my Family and Friends

On a personal level I expect to get Covid, just like I expect to get colds, the flu, a variety of viral (back to index) and bacterial infections and other sicknesses. I also expect to fall prey to accidents of various kinds. I do not get flu shots preferring and accepting the battle the various flu viruses but I will occasionally seek an antibiotic for a very stubborn sinus infection. Several times in my life I have been very sick, I've also been shot at, adrift in a tiny old wooden leaking boat in Lake Superior, had a brick thrown into my face, I've found myself in other dangerous situations and near miss accidents. My point, life comes with risks, all kinds. In all these I've come out of the other side. I believe God has personally intervened to preserve me in some, if not in all of these situations. My Christian faith encourages me to trust God in all aspects of my life. I'm not saying I'm good at it, but it is what I believe and the Good Lord asks of all of us. We are also supposed to use the brains that the Good Lord gave us, below is one aspect of using my brain. My observation says we have 3 pandemics going on, the "Covid virus" pandemic that started in the Wuhan Lab infecting several billion, the "fear" pandemic started by the Biden/Harris team infecting 300 million and the "were gonna fire you" (60 millon) pandemic also started by Biden/Harris.

Tools and stuff that every family unit (ie, between the 3-households of grandparents, parents, kids and grandkids) should think about obtaining between you in case someone in your broader family unit gets hit with a tough case of Covid. In this Covid age, these things are like having a fire extinguisher or Band-Aids in your home, it should be standard practice. An extended hospital stay may erase everything you've worked your whole life for, so for me and my wife, we've purposed not to give our tiny little nest egg to <a href="the greedy hospitals">the greedy hospitals</a>. We'll do our best to avoid a serious Covid encounter and selfcare at home. Much of the following is readily available. I'm not telling you to this, this is what we are planning to do. You do what you believe is best for you.

This <u>link is to a website</u> that has gathered tons of studies on various substances being touted to help in the prevention of Covid, or the healing process while going thru Covid. He/she also put the collective results of each study in one interactive chart. You have to use the drop down menu to locate the drugs he/she has collected the studies on. You can click any study and read it for yourself. As an example, he/she has ivermectin and quercetin among many others. Even if you have an opinion one way of another, this is an impressive collection all in one place.

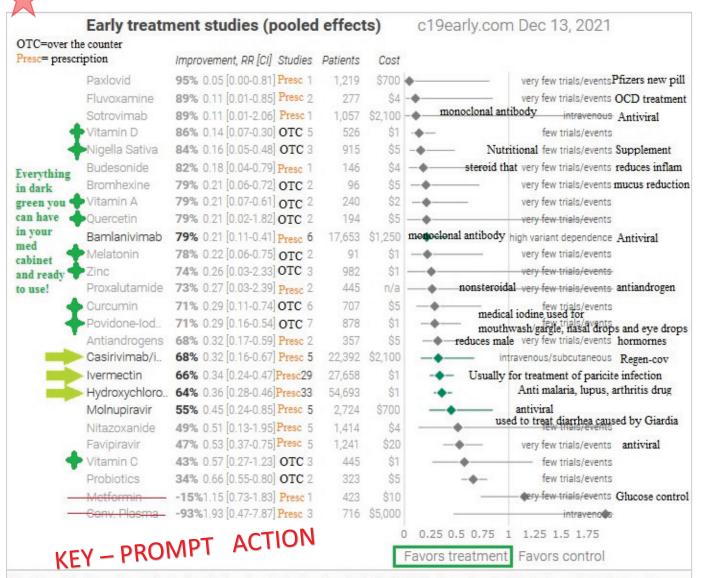
- ✓ Fingertip pulse-oximeter to measure pulse rate and blood oxygen levels.
- ✓ Automatic arm blood pressure cuff to measure blood pressure and heart rate.
- ✓ One or two <u>BinaxNow</u> 15 minute Covid test kits
- ✓ No contact forehead thermometer to measure body temperature
- ✓ Ability to obtain (doctor prescription or used one on craigslist) if you do not already own an oxygen concentrator machine. 10 Lp/m best, 5 Lp/m minimum.
- ✓ You should have already contacted your doctor and prep'd his staff so you can be treated with antibiotics, ivermectin and anti-inflation steroids at home if there are signs of lung infection or pneumonia.
- ✓ Again using your doctor that you talked with ahead of time and knowing where to get the Regen-Cov monoclonal antibody cocktail (consisting of Casirivimab/Imdevimab) in your regional area. It will be either injected using 2 or 4 separate shots, or done by infusion, usually in a special or makeshift clinic. Infusion takes about 30 min, but the all-in process takes about 2 hours.
- ✓ Will and living will are brought up to date, your personal wishes about life support made known to your family members. Mind you depending upon your age and existing health risk groups, the odds are way in your favor of coming through Covid just fine. You can work your whole life, build a nest egg and the only real criminal enterprise you'll have to keep at bay is the "Medical Mafia", they will take everything you own. Personal medical related bankruptcies are reported to be around 57% of all bankruptcies.
- ✓ Get an <u>understanding of your local hospital rules</u>, ie if you check into a hospital, **A)** will they let you have any visitors, or **B)** let you leave when you want? (There hospitals who think they are God and literally will not allow a patient to leave. After all, they making about \$12,000 p/night stay, they need you to stay. You need to know this before you enter one. You have a right to leave, no one should deny you that right!)
- ✓ Large note pad handy to record your vital stats or make <u>print outs of this example</u>. With family members and neighbors currently going down of the Covid infection path, I have learned that you need to not only check symptoms, but record them so you can quickly spot trends in condition. The sooner you act the better the outcome.

✓ By the time you read this, there may be other treatments after getting Covid, perhaps even other more traditional vaccines and treatments once you get Covid, etc. Stay up on the new stuff.

#### How I'd prepare for the battle and walk thru the battle

(back to index)

Below is a summary of various over the counter (OTC) remedies and various prescriptions that have studies either supporting their effectiveness in fighting Covid, or not. You can actively view the <u>original studies by visiting this</u> website. Notice how many OTC show a lot of effectiveness in helping to overcome Covid infections. Please note, your body may be allergic to some of these, or they may not work for you. Some of these have few participants in the study and/or there is not many studies that have been done. The guy/girl running this updates it frequently so things may change.



Random effects meta-analysis of early treatment studies (pooled effects). Treatments with ≤3 studies with distinct authors or with <50 control events are shown in grey. Pooled results across all outcomes are affected by the distribution of outcomes tested, please see detail pages for specific outcome analysis. Protocols typically combine multiple treatments which may be

- Seeking and trusting God is my #1 defense for all things, as such I do not live in fear of Covid. The Scriptures instruct us to fear nothing but God. That said, Biden/Harris are really scary to me.
- I respect that Covid can like many other things (*driving for instance*) injure me or take my life. As such, I certainly embrace a defensive strategy in a variety situations including Covid.

- (back to index) I take several supplements; Vit-D, Vit-C, Zinc, quercetin, chewable multi-vitamin and a reputable colloidal silver all in a balanced fashion. Ranging from daily to 2x weekly. I also have Vit-A, Nigella Sativa, Melatonin ready to go should I get infected and will take them 2x daily once infected.
- I wear a mask when the establishment requires me to, otherwise I do not worry about social distancing, I live my life as I have over the last several years. Again, I am not afraid of Covid, I expect to get it. If I am sick, I refrain from interacting with others out of respect for their health. We are nearly two years into Covid, I've never had it, thus I've never infected anyone with it, no has anyone given it to me.
- I understand that my actions and opinions can influence others. So I research and try to stay up on Covid. I feel I have a solid grasp on the nature of Covid and the politics engulfing Covid. I have actually downloaded and reviewed several hospital Covid protocols to understand how they treat patients. I'm sure, some hospitals have better outcomes than others.
- I have the 15 min Covid tests so my family can self-diagnose and self-quarantine as quickly as possible.
- I am in at least two risk groups and thus qualify for the Covid anti-body stimulating cocktail "Regen-COV". I'll get that (requires doctor prescription) within the first 2-days of being in close proximity with someone known to have Covid, or when I begin presenting symptoms to obtain the best outcome as it dramatically boosts Covid antibodies to win the race with Covid pathogens on who is going to dominate our body. Note- many medical professionals are not aware that the anti-body cocktail is FDA Emergency Approved for 2 situations; a) you've tested positive for Covid and are in a high risk group, OR b) anyone not fully vaccinated and immune compromised who came into contact (<6') of someone confirmed to have Covid. I advise it for anyone in a comorbidity risk group up to the point of being in the hospital or on oxygen.
- I have no problem with unvaccinated EMS, Firefighters, police, or any other worker, government or private business from working in serving me or my family "who is not known to have an infectious communicable disease". Unlike communist Biden/Harris, I am a true American, I do not condemn the innocent. I fully support that I or anyone who truly has communicably contagious disease should be voluntarily and if necessary forcefully isolated, ie quarantined until such time they are no longer contagious.
- In a hospital setting, I personally would refuse "Remdesiver" as a treatment. While it's approved in the USA, it's not in some other countries. It appears to significantly harm vital organs in the body. Another recent study suggests otherwise. In hospital healthcare, it's all about protocols, ie, "do what yer told", which means nobody bucks the protocol until the protocol is changed. Yet a good doctor, should be allowed to do what you both thinks is best. In a private setting you'll hear nurses upset with how patients are treated, abused or ignored.
- I have sought to be part of the Covid solution, I've reviewed the clinical trials website to determine what in my opinion, holds promise. I called into Regeneron seeking to be part of one of their clinical trials but after speaking with them, learned I did not qualify due to age (>65) and my BMI 26 (<25 was limit). I also have two emails into Meissa Vaccines a pharmaceutical company trial developing a nasal Covid vaccine but I did not hear

Because I believe that the nasal passages and mouth appear to be the primary mode of virus entry to most

people, it seems reasonable to mount the first line of defense at my nose and mouth. This would logically validate masking up, yet I am against mandatory masking because I believe we all are going to get Covid and it's never going to go away and if you get Covid, masks functionally inhibit expelling the virus pathogens. My expectation is based upon the odds is that I will get a mild case of Covid and it will pan out as I expect. Interrupting the Covid virus's ability to replicate at the mouth and nose appears to be a very good mode of initial defense. Getting a fractional virus load of Covid, might be roughly compared to a "live virus" vaccine. At this point in time, I'm very open to mouth and/or nose Covid vaccines developed in the traditional way. For years, I've actually swabbed my nose with 70% alcohol dipped Q-tip swabs to cleanse them of viruses and bacteria. Granted, that practice should not be done very frequently as the alcohol can damage human cells and tissue too, but it's actually shown on a nih.gov website and products are sold for such. Besides nasal swabs for the nose, using a strong alcoholic (90 proof vodka) beverage mouthwash, seem like a reasonable tactical action right after any high risk exposure to a person with Covid. And no, you can't drink enough alcohol to kill the Covid virus already ravaging in your body! That said, I have occasionally used 1 to 1.5 oz shot of whiskey to counter act something upsetting my stomach. I do what I do, you figure out what's best for you and do it based upon knowledge and everything in balance with good common sense! I do not and

never had a problem using alcohol, (I've not been drunk since my bachelor party over 40 yrs ago) but if you do,

**SWABS** 

O Presaturated

Single use only.

This product is not made with natural rubber lates

<u>continue to abstain from using alcohol</u>. Everyone I have personally known who was an (back to index) alcoholic, who has tried to use alcohol "just a little", ends up becoming a dunk again. Stay away from it if it would take you down that dark road again.

Any person who thinks he/she or a family member might end up in the hospital needs to obtain and/or implement the following well before and prior to seeking admittance. Any hospital that is public (tax payer funded) has to provide more requested information than those in private hospitals.

- Give power of atty to a person who will "daily" advocate (forcefully) for your health.
- Ask for (demand) the hospitals current "Covid care protocol".

#### Some things liberals, libertarians and conservatives may agree on!

- A. When massive profits are to be made, always suspect that shenanigans of some kind are at work. When you are being forced or threatened into buying someone's product, you know for sure that a crime collective syndicate is in place.
- B. There is a lot money involved with the Covid vaccination campaign. (3.5 <u>trillion in taxpayer \$)</u> That's \$10,600 for every person in the USA! Personally I would rather have the cash!
- C. From the data, <u>more conservatives are rejecting the vaccine</u> mandate than liberals, sooooo if all you liberals will just wait a while, my group should (?) soon die off from getting Covid and you can rule the earth as you wish. That said, there are some libertarians who don't like being forced into taking the "red or blue pill" and even some liberals that just know we are not being told all that matters with these vaccines. High-5 for all of you who think critically!

Disclaimer: I've already informed you "I ain't got no lern'n", I have no formal education. I've already informed you that Biden/Harris say I'm stupid and you should ignore people like me. Officially the President of the Unites States has called me a murderer. (I'm not vaccinated and thus personally responsible for millions of deaths) Additionally, I am not qualified to professionally validate or invalidate any of the information links I have inserted but I request that you at least visit them and make up your own mind. Nor am I a medical professional, I make no claims to cure Covid, nor that any of the advice I give my own friends or family will work for you. Your individual health issues should be discussed with someone you trust who is medically trained. I created this for the personal use of my family and friends who are or will be impacted by Covid and to explain my rationale for not getting a Covid "mRNA or Vector" vaccine shot. You asked for this and I shared it with you. I make no money from this in any manner, it contains my own personal reasoning based on information I found in the links provided. What I'm saying is; use and apply at your own risk considering all the nuances of your own situation, verify everything and be sure to talk everything over with your doctor. Also please check with Mr. Biden or Mrs. Harris to see if they agree. Because anything they do not agree with is; wrong, false, a lie, untrue, or otherwise insurrection related to a plot to over throw the government.

Thanks for your interest! contact - covid@the9thgrader.com

The 9th grader

KEY-PROMPT ACTION

# PART – 9 Questions and Answers

(back to index)

Many of these questions I found on medical establishment websites, blogs or commentaries, questions or points a variety of people on both sides of the divide asked. All of the source and validating links not active in this section, are found in the main document which has the first Parts 1-7. I'm not going to bend the truth to win a side, but there is no need to echo anything the CDC /FDA is saying as that is being well taken care of by the parrot news teams.

- A. Are the mRNA Covid vaccines safe? YES and NO and that is THE REAL TRUTH, anyone answering YES alone is either lying or inept. I was going to list all the websites saying the vaccines are safe as deceivers, buts it's far too many, they are simply not being truthful with the public, they are parrots repeating the propaganda without thought for your or my health and safety. The truth is YES the Covid vaccines do keep many more infected people out of the hospital ICU, but NO as there of over 1 million reported and documented adverse effects and over 21,000 reported deaths attributed to the vaccination activity. According to the VAERS data, deaths and "adverse effects" from the Covid vaccines over just the last 11 months, these Covid vaccines are clearly many times more hazardous than all other vaccines in use and reported to the VAERS system over the last 31 years. (see Part-5) The adverse effects and deaths are so high from Covid vaccination that they exceed 10 other drugs the FDA withdrew prior approval on. Some will argue that the % of those adverse effects and deaths is low compared to the total of all who get the shot, that's a different argument, if your spouse or child dies after getting the vaccine, that's very bad, if your spouse of child gets paralyzed, you have to live with that. Why not put the whole truth out there about vaccine deaths and adverse effects? So we have to assume that everyone involved knows these facts, but they are not telling us this because they believe the benefit outweighs the harm? If it's not that, then something much more sinister is going on.
- B. Does any one of the current USA based Covid vaccines alter our DNA? NO they do not is the simple answer, BUT conversely, we can't be sure that the mRNA in the vaccine has every single bit of information that is needed, ie exactly as our body would respond in fighting Covid on its own. The vaccines use a modified copy of a section of DNA strand (the copy now referred to as mRNA) to fool/trick/instruct our cells to begin to create a harmless protein found on the Covid virus. A variety of agents within our immune system, in turn flag the protein as harmful and cause our body to generate and immune response as if it were the real virus pathogen. But as you'll read in the next question, it's starting to come to light that we really didn't and don't understand enough about the full process of using the mRNA in this manner. Unintended consequences are beginning to manifest themselves, we have yet to fully understand what is going on.
- C. Is it true that the long term effects of these vaccines are not known? TRUE The long term effects of a single, let alone multiple Covid injections is really not known and some troubling health issues are beginning to come into focus. Several concerns have been voiced regarding mRNA vaccines:
  - 1) Some are concerned that the vaccine mRNA <u>protein waste</u> doesn't <u>just go away as stated, it may</u> accumulate like trash and cause future complications in the body.
  - 2) Also some have expressed <u>serious concern about the vaccine migrating</u> from muscle tissue<u>into the blood stream</u>, as recent evidence is suggesting is occurring in some of the people who get vaccinated. This wasn't expected to happen. A <u>Japanese study confirmed</u> some components in <u>the vaccine migrated into other organs in a study using mice</u>. Others say this <u>concern is unfounded</u>.
  - 3) If the movement of the vaccine proteins and/or components is indeed occurring from muscle to blood, that opens a whole gamut of concerns related to safety concerns. Reproductive organs could be negatively impacted, mother's milk could carry this same condition to the baby, brain and other organs might be negatively affected.
  - 4) The requirement for the vaccines to be kept in ultra-low below freezing temperatures and the short window to use each vial once thawed. mRNA is very fragile, it degrades quickly.
  - 5) It's not clear why the mRNA vaccines are not providing the same kind of lasting immunity that natural immunity does, hence the need for more booster shots. This weakness was totally unpredicted by those involved with the vaccine creation which means in spite of the vaccine hype, the creators of mRNA vaccine still don't fully understand all that is involved with this new mRNA vaccine process ...

which should be concerning to everyone, because what we don't know, we don't **(back to index)** know and that could lead to new consequences.

- D. **Don't unvaccinated people feel the need to protect others by getting vaccinated? NO** Speaking for myself, I'd ask, "protect vaccinated people from what?" I do not have Covid, so I am no threat to your health. And, if you believe what you are being told and are vaccinated you are indeed protected from unvaccinated and vaccinated Covid contagious people. Yet, I still remain susceptible to those of you who are vaccinated but still can get and transmit Covid. I'm ok with that. It makes no sense to me that you are not "far more protected", why did you get vaccinated? Please think about this ..... I do not have Covid, so I'm no threat to you. If you believe I am a threat, you're believing in something that is not true.
- E. Unvaccinated people who get Covid are overwhelming the hospitals, don't you unvaccinated guys feel responsible for that? NO, I do not feel responsible in the least. I've haven't stayed in a hospital since an overnight stay when I was 12 yrs old to get my tonsils out. Based upon news reports regarding many hospitals across the USA, the unvaccinated do "at this time" represent the vast majority of hospitalized Covid cases. If the numbers are correct unvaccinated people are the vast majority upwards of 80-90% of those ending in up in the hospitals. Yet, in one manner it's a silly question on several fronts;
  - 1. If the hospital is a public taxing district, then the people who live there and get Covid there, have every right to be there regardless of when or why they check in, they've been paying taxes too. Yes, the patient demand is up do to the Covid virus, yet the Covid patients didn't choose to get Covid, it happened.
  - 2. Your hearing a lot about packed hospitals in 2021, but there was actually a yearlong lull in hospital admissions during most all of 2020. Nationwide hospitals were <u>underutilized at one point down to 69%</u> of expected, hospitals were wondering how to make up for all the lost revenue and thinking about staff reductions.
  - 3. We all make health and lifestyle choices that put us into categories of comorbidities and increased burden on our healthcare systems. Drug users, alcoholics, smokers, obesity and related eating disorders, lack of heart healthy exercise, etc. are all lifestyle choices that place an increased demand upon hospitals. So does just getting older. For the last hundred years we've accepted that we value a person's freedom to choose over the demand upon the healthcare system. And now all of a sudden, some selectively want to blame people who aren't vaccinated for their personal choice?
  - 4. We are still early into what is a new virus. Every few months, Covid treatments advance, mortality rates improve and hospital stays are <u>gradually getting shorter</u>. Several new treatments are in the approval phase for at home treatment.
  - 5. The dynamics of catching Covid will change and become less about a vaccination choice. Why, because the Israeli study on over ½ million people showed that <u>vaccinated people are up to 13x more likely to get Covid again</u> than those who were unvaccinated and recovered from Covid. Just wait awhile, within a couple of years, it may be the vaccinated become the majority of Covid patients in the hospital.
  - 6. In some more highly <u>vaccinated states</u> and even in <u>other countries</u>, the Covid cases <u>still surge to high levels</u>. <u>Belgium too</u>. Also, the <u>numbers of vaccinated</u> people going into the <u>hospital are climbing</u>.
  - 7. Our government in an effort to push the only acceptable line of "get vaccinated" is not telling people the things they can do that dramatically reduce the chances of getting a severe case of Covid. As a result, rising hospital cases is in part, "back on them". That's why I pushed forward in developing this Covid handbook, somebody needs to tell the public the very helpful info that can vastly improve their already very good odds.
- F. Aren't you ashamed about the stress you are putting on these medical heroes who are working tirelessly to save unvaccinated jerks like you? NO, First, I have put NO stress on the hospital system or health care workers, but I understand why you need to blame someone. I'd ask if you have thought about guilt enough to lay any blame on those involved with starting this pandemic? It seems to me that is the most relevant point to focus your anger. Second, they indeed asked for the job and they get paid very well for the job. That said, I certainly recognize that many are putting in lots of hours, a problem the President exasperated with his vaccine only mandate. Third, a tidal wave of medical, EMS, law enforcement, military, nuclear and space scientists and many other professional job sectors are being forced out of a job because they don't want to be injected with a substance they have no trust in either, further putting stress on many areas of our healthcare labor market. Your

President is to blame for that. My **forth** reflection of this question is the misuse and **(back to index)** application of the term hero.

In my opinion, "hero" is a term that should only applied to ordinary individuals who do something supremely extraordinary, a super courageous act using an otherwise unnatural action without regard for their own life, without the tools needed to insure their own personal safety, something far outside their job description, including the many who in the course of saving someone else's life, lost their own. The word hero is never claimed by the person deserving it, it is bestowed by others. Hero's, are rare, a very rare breed. Disappointingly the term hero has been so watered down it has become hollow. As an hourly worker, I worked a thousand hours of overtime in one year to keep a power plant running, as a plant manager I've worked even more hours. I was certainly tired, some jobs require lots of overtime, but not deserving of the title hero.

In Washington state you dial a number with the word hero in it to report a HOV lane violation, I'm told I'm a hero for giving blood, certain highly paid sports professionals are people's hero's, there are TV commercials where air-conditioning repair men are labeled hero's, the term has been applied to the teaching profession and a hospital near me even made their own TV commercial to inform (boost) the publics opinion that they are hero's. I could go on and on with how the term has been disrespectfully watered down. For those of us who have worked in a variety industrial jobs, we've regularly had to do many things that 99% of the population would not be willing to do because of the possibility of injury and death. Things incredibly unsafe and easily able to kill or cause great bodily harm, for people in industrial process, it's just part of the job.

There is for sure a personal level of gratitude that causes the high standard of the word hero to bend downward, in other words I get that when someone helps heal you from sickness, or get you delivered from drugs or out of a life of prostitution, the person benefiting might desire to call their liberator a hero. Some children may view their father or mother as a hero, certainly they are grateful and admire them. But we need to restore the honor to the term so that those who truly deserve it, get it. Work at a hospital- no, without PPE protection pull someone out of a burning car that could explode any minute- yes, step in front of a mountain lion who is attacking a child-yes, rather than run away from a shooter in a crowed mall someone runs towards the shooter to tackle and overcome him – yes, Jesus Christ giving His life to save all mankind-yes Jesus is a real hero. I hope we can work to turn this abuse around, to giving the word hero the respect it once had. And yes, certainly we can admire and thank the many men and women who work or serve in difficult situations. I'm just not into exaggerating what they've done at the expense of those who have truly acted above and beyond.

- G. How can you deny that the science and statistics that vaccines are very safe, very effective and free? Without them the country would be in a far bigger mess! Simply put, that is not true for any of the 3 points, the last statement would be speculation on either of our parts. (I combined several questions into one) The basis for this statement is the line put forth by the CDC and various parrot pundits. The premise behind it is "there remains no more excuses not to get vaccinated." I've already answered that with the 12 reasons why I'm not getting vaccinated. But I will briefly reflect on this question. Very Safe? (reflect back up to question a)) Many, many people have died and hundreds of thousands have been adversely injured by Covid vaccines that is a fact when reviewing the VAERS data. Very effective? I do not deny that there is a certain amount of immunity (not full) with these nontraditionally created vaccines. If we stop here, they might meet the definition of being effective, but it will take much more time to actually establish the overall safety and effectiveness. Tens of millions of us prefer to wait, mostly because we do not trust those pushing the dogma. Free? That's funny, do you really think it's free? Free as in the national debt and related inflation is expanding so radically it will soon crush Americans and the economy kind of free? At some point, the credit card debt has to be paid. What free means, is those of us taxpayers not getting the vaccine, are helping you pay for yours whether you work or not.
- H. Even if you have already had Covid and have natural immunity, do you still need the vaccine? NO, your body has already demonstrated it was able to fire up your immune system from scratch and beat Covid. For all future Covid infections, you'll have lasting antibody support already trained for battle. The argument for getting the vaccine in addition to natural immunity is based upon the premise that you will have additional active blood based antibodies circulating in your blood, which will help you quickly overcome the next infection. This is based upon the concept of speed, the quicker the virus is knocked down the less severe your infection will be. The Israeli study supports getting a booster, however, the up and coming concerns about vaccine crossing over into the blood, is a large enough concern by itself to wait it out.

(back to index) Are wearing N-95 face masks effective, some call them the Gold standard for protection? YES with stipulations and NO, "a properly fitted N-95 mask against no facial hair is affective at stopping particle sizes in the 1-3 micron range, which is in the range of bacteria and PM 2.5 and larger dust particles." However, the Covid virus is significantly smaller in the .1 to .5 micron size and thus potentially able to penetrate the mask. Yet, one might expect that the virus pathogen would be stuck to respiratory droplets, which might be in the size of 5-10 microns thus vastly improving retention ... until the droplets evaporate, then the virus will slip through. From the aspect of "the gold standard" and for a true and deadly pathogen, an N-95 would not be anywhere near adequate, rather merely "supportive" in reducing the intake of Covid pathogens. The Gold standard would be "well fitted full face respirator, with cartridges designed to catch < .1 micron virus particles." However, wearing a mask is likely harmful to those with Covid and still contagious, as it defeats our bodies protective actions of trying to expel the pathogens. Masks worsen this helpful action of expelling the virus pathogens and instead causes a mask wearer to re-inhale the pathogens again when trapped behind a mask. Make no mistake, the less the pathogen load, the less severe the symptoms expected.

#### **WEBSITE LIST**



**Legit Websites & News** (these links do not have to agree with my opinions nor yours, yet are helpful)

10 facts about Americans and coronavirus vaccines - Pew Research Center

Coronavirus today - Coronavirus Today is an international publisher of research-based, fact-checked information regarding the SARS-CoV-2 beta coronavirus pandemic and the disease it causes in humans.

**Listing of all worldwide** available vaccines and their type.

**Listing of antibody** treatments available

**Listing of post infection** treatments for Covid

The country that is 100% vaccinated, but in lock down because of Covid infections, the British territory of Gibraltar

What's coming, no vaccine no life - In Israel, refusing coronavirus vaccination means your life is over

Former Pfizer Scientist Dr. Michael Yeadon shares his knowledge and gives a troubling warning

New York physician assistant says she was told to stop reporting COVID vaccine injuries.

The liberty beacon a place where to look when you don't see something by the regular news networks

VAERSanalysis.info DATA Adverse effects and Deaths Covid vaccine injuries from an independent data wizard.

The government's VAERS website to report vaccine injuries and deaths (all voluntary)

Vaccine scientist: 'We've made a big mistake' and Vaccine safety Research Foundation

### Websites Willing to Question Aspects of Covid Vaccines and Government Overreach

https://dailysceptic.org/about/ This site is a successor to Lockdown Sceptics, which I set up at the beginning of April, 2020. The idea for the original site was that it would serve as a hub for skeptical articles, academic papers and interviews that had appeared elsewhere, as well as a place for experts and non-experts to air views they couldn't get published elsewhere. But after almost 16 months of continuous activity, the site had developed in ways I hadn't anticipated. I don't just mean it was averaging 1.5 million page views a month and had almost 15,000 email subscribers, as well as a staff of seven.

https://pandemic.news/index.html Pandemic News is a fact-based public education website published by Pandemic News Features, LLC

https://www.naturalnews.com/index.html Natural News is a science-based natural health advocacy organization led by activist-turned-scientist Mike Adams, the Health Ranger. The key mission of Natural News is to empower consumers

with factual information about the synthetic chemicals, heavy metals, hormone disruptors and (back to index) other chemicals found in foods, medicines, personal care products, children's toys and other items.

https://covid19reporter.com/ This website provides no description, it appears to provide a collection of vids and articles relating to Covid information not found on mainstream parrot news organizations. Whomever runs it, wishes to remain hidden for unknown reasons.

https://c19early.com/ We aim to cover the most promising early treatments for COVID-19. We use pre-specified effect extraction criteria that prioritizes more serious outcomes, for details see methods. For specific outcomes and different treatment stages see the individual pages. Not all treatments are covered here, effectiveness has been reported for many other treatments in studies. Of the 1,193 studies, 792 present results comparing with a control group, 699 are treatment studies and 93 analyze outcomes based on serum levels. There are 17 animal studies, 40 in silico studies, 58 in vitro studies and 68 meta analyses.

https://covid19criticalcare.com/ Formed by leading critical care specialists in March 2020, at the beginning of the Coronavirus pandemic, the 'Front Line COVID-19 Critical Care Alliance' is now a 501(c)(3) non-profit organization dedicated to developing highly effective treatment protocols to prevent the transmission of COVID-19 and to improve the outcomes for patients ill with the disease.

https://vaersanalysis.info/ I am just a concerned citizen reporting on often overlooked public data regarding adverse events related to the new Covid-19 vaccines. I work with data for a living and have been in the technology field for over two decades. Ironic fact about me: I spent the better part of a decade building websites for big Pharma. There is likely not a single big Pharma company I have not built a website for.

https://stevekirsch.substack.com/ I used to be a high tech serial entrepreneur before retiring at age 64. I used to believe that the FDA, NIH and CDC were honest organizations. I trusted them. I'm doubly-vaxed with Moderna as of March 29, 2021. A month later, I started hearing stories from my friends who reported relatives who died or they themselves became permanently disabled. So I looked into it and the more I looked, the more appalled I became. On May 25, 2021, I wrote a 250-page article for TrialSiteNews entitled "Should you get vaccinated?" A week later all the scientists on the CETF scientific advisory board resigned, most of them saying I was a menace to society and never to contact them again. I asked them if I made a mistake. They declined to answer. So much for open scientific debate to resolve differences. That's gone.

https://www.truthforhealth.org/ To provide truthful, balanced, medically sound, research-based information and cutting edge updates on prevention and treatment of common medical conditions, including COVID-19 and other infectious diseases, that affect health, quality of life and longevity. To present faith-based integrated approaches to medical treatment, health and healing services that encompass all dimensions making us human: physical, psychological/emotional, spiritual, social and environmental.

https://www.realnotrare.com/ Our purpose is to raise awareness of the many vaccine injuries that are happening, to create a community of public support, to give a voice to those who have been silenced, to have our elected officials acknowledge us, to encourage ways to advocate and to change public perception. This is all in an effort to help the injured receive better healthcare and treatment. Vaccine injured individuals did their part by getting this vaccine and now they need your help. This is not red vs. blue. This is not us vs. them. This is humanity vs. disease. #teamhumanity. https://www.react19.org/ We are a grassroots organization dedicated to research and collaboration with institutions and physicians to increase understanding and awareness for patients suffering lasting effects Post-Covid and/or post Covid vaccine.

https://vaccineimpact.com/ Vaccine Impact is a part of the Health Impact News network. It is a sub-topic in their "Medicine Watch" category.

https://www.nvic.org/ The National Vaccine Information Center (NVIC) is dedicated to preventing vaccine injuries and deaths through public education and advocating for informed consent protections in medical policies and public health laws. NVIC defends the human right to freedom of thought and conscience and supports the inclusion of flexible medical, religious and conscientious belief exemptions in vaccine policies and laws. Sister site <a href="https://medalerts.org/">https://medalerts.org/</a>

Broad Spectrum News, Untainted By Liberal/Progressive Spin Websites and Organizations

https://www.theepochtimes.com/ (I subscribe to the weekly paper edition) The Epoch Times is the fastest-growing independent news media in America. We are nonpartisan and dedicated to truthful reporting. We are free from the influence of any government, corporation, or political party—this is what makes us different from other media

organizations. Our goal is to bring our readers accurate information so they can form their own opinions about the most significant topics of our time.

https://thenationalpulse.com/ The National Pulse is a news and investigations website founded originally as a political campaign blog in 2016, transitioning into a news site and podcast in early 2020. The National Pulse is delighted to be able to state that we have never had to issue a correction, apology, nor retraction unlike large corporate media entities who rush to publish false stories, then hide behind armies of lawyers. Our reporting is factually accurate and we always show our working. Because of all this, we are routinely maligned by corporate media outlets and far-left bloggers who feel threatened by our ability to present the signal and cut through the noise of news media.

https://thenewamerican.com/
The New American magazine, published twice a month in print and daily online, is the essential news source for freedom-loving Americans. Our editorial point of view is guided by our support of the U.S. Constitution and the principles upon which our Constitution is based. Specifically, we want to restore and retain the values and vision that made America great — limited government under the Constitution, the freedoms our Constitution guarantees and the personal responsibility a free people must exercise to stay free.

<u>https://www.oann.com/</u> One America News Network is owned by Herring Networks, Inc. Herring Networks, Inc. is a family owned and operated, independent media company focused on providing high quality national television programming to consumers via its national cable networks.

https://www.newsmax.com/ Newsmax (or Newsmax.com, previously styled NewsMax) is a conservative American news and opinion website founded by Christopher Ruddyon September 16, 1998 and operated by Newsmax Media. The website is divided into four main sections: Newsmax, Newsmax Health, Newsmax Finance and Newsmax World, <a href="https://dailycaller.com/">https://dailycaller.com/</a> Founded in 2010 by Tucker Carlson, a 20-year veteran journalist and Neil Patel, former chief policy advisor to Vice President Cheney, the Daily Caller is one of America's largest and fastest-growing news publications. Our team of experienced, full-time reporters and editors works around the clock to deliver award-winning original reporting, in-depth investigations, entertainment, thought-provoking commentary and up-to-the-second breaking news.

https://www.libertynation.com/ Who are you? At Liberty Nation, we get asked that question a lot. So, here is the unvarnished truth. We are free market, conservative, libertarian and populist, but we all cling to the nation's founding principles and US Constitution. We are bold and edgy, seeking to encourage intelligent, compelling dialogue alongside wise and thoughtful readers. We seek a civil discourse that lets freedom ring, but we do not suffer loonies and haters. <a href="https://www.breitbart.com/">https://www.breitbart.com/</a> Breitbart routinely features exclusive interviews and original content with and from American and world leaders. It was conceived in 2007, when two Jewish-American best friends — Andrew Breitbart and Larry Solov — took a trip to Israel together. There, they decided to partner and create Breitbart News with the idea that truthful reporting and the free and open exchange of ideas is essential to maintain a robust democracy. With that foundation and the unwavering belief in the greatness of America, Breitbart News has grown into an international news company with bureaus in Washington DC, Los Angeles, London, Jerusalem and Rome.

https://thefederalist.com/ The Federalist is an English-language online magazine that covers politics, policy, culture and religion. The Federalist has been described as influential in conservative and libertarian circles.

<u>https://redstate.com/</u> Conservative Blog & Conservative News Source for Right of Center Activists

https://www.theepochtimes.com/ The Epoch Times is America's fastest-growing independent news media. Founded in 2000, our mission is to bring you a truthful view of the world free from the influence of any government, corporation, or political party. We aim to tell you what we see, not how to think; we strive to deliver you a factual picture of reality that lets you form your own opinions.

https://conservativeplaylist.com/ In October, 2020, Conservative Playlist was officially launched. It's a conservative aggregator that will bring the best news stories, videos and podcasts to the masses. We're very excited to be launching this new, important component of American media.

https://dailyexpose.uk/ The No.1 reason you should trust 'The Exposé' is that all our investigations are based on official data such as the Office for National Statistics, the NHS and the UK Government and we link back to all our sources within every article.

https://www.whatfinger.com/
We do it in a unique way, showing you opposing views for specific issues (such as MSNBC vs FOX). This is how you get to the truth, by digesting all points of view and then coming to your own opinion and conclusion. In other words...FREEDOM to think and feel and learn without censorship. This we believe is unique to Whatfinger, compared to other news sites. We're obsessed by the news and devour it each day.

https://townhall.com/ Townhall.com is the #1 conservative website. Townhall.com pulls (back to index) together top notch breaking news reporting, political commentary and analysis from well over 100 leading columnists and opinion leaders, conservative talk-radio and a community of millions of grassroots conservatives. <a href="https://pjmedia.com/">https://pjmedia.com/</a> Since its inception in 2005, PJ Media has been focused on the news from a center-right perspective—from the insightful commentary provided by our all-star lineup of columnists to our writers' quick takes on breaking news and trending stories.

https://nypost.com/ Every day, the most powerful and influential people in the most powerful and influential city on earth read the New York Post.

https://www.mrc.org/ The MRC's commitment to neutralizing leftist bias in the news media and popular culture has had a critical impact on the way Americans view the liberal media. The MRC is able to effectively educate the public about left-wing media bias by integrating cutting-edge news monitoring capabilities with a sophisticated marketing operation.

https://justthenews.com/ JusttheNews.com is committed to just reporting facts from journalists with a long record of public trust and excellence. In an era where opinion and supposition are too often substituted for fact and where journalists rush to get things first and hope their stories are correct, JusttheNews.com tries to stand out by returning to the bedrock promise of getting news first, but first getting it right.

https://www.dailywire.com/
The Daily Wire is one of America's fastest-growing conservative media companies and counter-cultural outlets for news, opinion and entertainment. Conceived by Ben Shapiro and Jeremy Boreing after they got fired from their last company — actually, Shapiro quit after Boreing got fired — The Daily Wire was meant to be something unique in the right-of-center media landscape — a truly self-funding business with an emphasis on distribution and marketing.

This is the un-reviewed initial DRAFT version, I'm waiting to get comments back from those who are willing to review this regarding its;

- a) medical related content,
- 2) the linguistic short comings,
- 3) as well as the critique of my reasoning.

After all, I am just a 9th grader ....



KEY-PROMPT ACTION

| Simple but Important Things to Observe and Record When at Home Caring for a Family Member w/Covid or after Vaccination Ideally take recordings every 3hrs. |            | PG-1 Major Symptoms, Pain, Difficulties    |                | can't smell or taste, cough, night sweats<br>and slight fever |  |  |  |  |  |  |  |  |  |  |
|--|------------|--|----------------|---|--|--|--|--|--|--|--|--|--|--|
|  |            | Meds being<br>taken                        | varies         |   |  |  |  |  |  |  |  |  |  |  |
|  |            | Bowel &<br>Urinatio                        |                | fine  |  |  |  |  |  |  |  |  |  |  |
|  | rs.        | Nutrition /<br>Eating well                 |                | yes,<br>egg/toast   |  |  |  |  |  |  |  |  |  |  |
|  | s every 3h | Adequate<br>Fluids<br>intake               |                | 8oz OJ,<br>coffee   |  |  |  |  |  |  |  |  |  |  |
|  | ecording   | Oxygen<br>Concentr<br>ator flow<br>setting | varies         | 3 Lp/min  |  |  |  |  |  |  |  |  |  |  |
|  | lly take r | Cognitive<br>awarene<br>ss                 | alert          | boog  |  |  |  |  |  |  |  |  |  |  |
|  | Idea       | Skin<br>Color                              |                | normal  |  |  |  |  |  |  |  |  |  |  |
|  |            | Blood<br>Oxygen<br>level                   | 92             | 85  |  |  |  |  |  |  |  |  |  |  |
|  |            | Respiratio<br>n, # of<br>breaths<br>p/min  | 15-20          | 22  |  |  |  |  |  |  |  |  |  |  |
|  |            | Blood                                      | 115/75         | 135/75  |  |  |  |  |  |  |  |  |  |  |
|  |            | Pulse/<br>heart<br>rate                    | 60-100         | 78  |  |  |  |  |  |  |  |  |  |  |
| ole but  |            | Fore-<br>head<br>temp                      | 98.6           | Q   |  |  |  |  |  |  |  |  |  |  |
| Simp   |            | Time                                       | Adult norms >> | exam<br>9am   |  |  |  |  |  |  |  |  |  |  |
|  |            | Date                                       | Adultn         | 11/3/21   |  |  |  |  |  |  |  |  |  |  |