Please watch the testimony

For the past two years, white-collar criminals masquerading as respectable CEOs and officials have co-opted individuals and societies around the world causing deep and extensive harms, especially to children. With long-standing goals in mind, including normalizing serial injections and digital passports, they have exaggerated the dangers posed by a virus and suppressed knowledge of preventives, early treatments, and natural immunity.

These criminal actions have led to countless harms including hundreds of thousands of unnecessary deaths and injuries—from societal disruptions, from improperly treated illnesses, and from the genetic injections themselves. Most could have been saved had authorities focused on affordable early treatments instead of experimental shots. Sadly, not a single injection recipient has given true informed consent to the risks because the manufacturers, in collusion with the FDA, failed to provide full disclosure. In 2021, excess deaths not attributed to C19 increased by as much 40%.

Children have near zero risk of serious injury or death from a natural infection, yet officials have encouraged parents to have them injected with an experimental product to "protect them." How many healthy children have been or will be injured or killed by the irreversible genetic jabs? How many will suffer with lifelong disabilities? How many families will bear the senseless loss of a precious child?

The US Department of Health and Human Services has directly extorted corporate and citizen compliance with this corrupt agenda by requiring all recipients of C19 relief funds to follow 'COVID-19 Terms and Conditions': "A recipient of a grant or cooperative agreement. . . [agrees to] comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19. . . [and to] assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation." Similarly, the federal government has extorted hospital administrators with perverse financial incentives to diagnose C19 and to treat it with expensive and dangerous interventions. When you follow the money, you understand why corporations, school boards, and institutions continue to endorse and to impose counterproductive, destructive, and inhumane measures proven to harm more than help.

Caring attorneys, doctors, and scientists around the world have been working to expose the truth and to hold the corrupt accountable. They have put their lives and livelihoods on the line. UK attorney Hannah Rose has filed a complaint with the International Criminal Court at the Hague. Unfortunately, the network of criminals running the world has many billions of dollars to spare, and they use it to legitimize human rights abuses while marginalizing those attempting to stop them.

To verify the veracity of my statements, please watch the testimony of doctors, scientists, injection victims, and attorneys offered during the January 24, 2022 panel discussion sponsored by Wisconsin Senator Ron Johnson: <u>https://rumble.com/vt62y6-covid-19-a-second-opinion.html</u>. Let us hope the courage of these individuals inspires many others to stand up. If we are to build a better world together, we cannot allow the corrupt to prevail.

495 words, including the title

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'In the end, the truth will always be revealed, and the truth about the coronavirus policy is beginning to be revealed. When the destructive concepts collapse one by one, there is nothing left but to tell the experts who led the management of the pandemic – we told you so.

Two years late, you finally realize that a respiratory virus cannot be defeated and that any such attempt is doomed to fail. You do not admit it, because you have admitted almost no mistake in the last two years, but in retrospect it is clear that you have failed miserably in almost all of your actions, and even the media is already having a hard time covering your shame.

You refused to admit that the infection comes in waves that fade by themselves, despite years of observations and scientific knowledge. You insisted on attributing every decline of a wave solely to your actions, and so through false propaganda "you overcame the plague." And again you defeated it, and again and again.

You refused to admit that mass testing is ineffective, despite your own contingency plans explicitly stating so ("Pandemic Influenza Health System Preparedness Plan, 2007", p. 26)."

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Vaccines have been developed at "warp speed" to combat the COVID-19 pandemic caused by the SARS-CoV-2 coronavirus. Although they are considered the best approach for preventing mortality, when assessing the safety of these vaccines, pregnant women have not been included in clinical trials. Thus, vaccine safety for this demographic, as well as for the developing fetus and neonate, remains to be determined. A global effort has been underway to encourage pregnant women to get vaccinated despite the uncertain risk posed to them and their offspring. Given this, post-hoc data collection, potentially for years, will be required to determine the outcomes of COVID-19 and vaccination on the next generation. Most COVID-19 vaccine reactions include injection site erythema, pain, swelling, fatigue, headache, fever and lymphadenopathy, which may be sufficient to affect fetal/neonatal development. In this review, we have explored components of the first-generation viral vector and mRNA COVID-19 vaccines that are believed to contribute to adverse reactions and which may negatively impact fetal and neonatal development. We have followed this with a discussion of the potential for using an ovine model to explore the long-term outcomes of COVID-19 vaccination during the prenatal and neonatal periods.'

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[Author's Note: Enhancing Detection Expansion: CoAg is a CDC Public Health Crisis Cooperative Agreement. It identifies 64 Immunization Regions and requires certain activities to receive a share of \$19.11 billion, plus \$30 billion to public health departments and \$10 billion for schools.]

"COVID-19 TERMS AND CONDITIONS Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 [P.L. 117-2] agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation. In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC (emphasis added).

Reopening Schools: Support for Screening testing to Reopen & Keep Schools Operating Safely 5 | Page reporting guidance is posted at: https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reportingguidance.pdf. Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the

recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement. This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward. To achieve the public health objectives of ensuring the health, safety, and welfare of all Americans, Recipient must distribute or administer testing without discriminating on non-public-health grounds within a prioritized group."

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"Discussion begins around 40 minute mark. Sen. Ron Johnson moderates a panel discussion, COVID-19: A Second Opinion. A group of world renowned doctors and medical experts provide a different perspective on the global pandemic response, the current state of knowledge of early and hospital treatment, vaccine efficacy and safety, what went right, what went wrong, what should be done now, and what needs to be addressed long term. More at <u>www.ronjohnson.senate.gov</u>"

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