

# Mass Murder

Part 35

## CHD to Sue FDA for 'Recklessly Endangering' Children if Agency Authorizes Pfizer Vaccine for Children 5 to 11 Years Old

An advisory committee to the U.S. Food and Drug Administration met Tuesday to consider emergency authorization of Pfizer's COVID vaccine for young children. In a letter to the FDA, Children's Health Defense outlines why such a move would be reckless.

By

[Children's Health Defense Team](#)

[Children's Health Defense](#) (CHD) today said it will take legal action against the U.S. Food and Drug Administration (FDA) if the agency grants [Emergency Use Authorization](#) (EUA) for the [Pfizer-BioNTech](#) SARS-CoV-2 vaccine for [children aged 5-11](#).

In a letter signed by Robert F. Kennedy, Jr., CHD chairman and chief legal counsel, and Dr. Meryl Nass, CHD board member, Kennedy and Nass wrote:

*"CHD will seek to hold you accountable for recklessly endangering this population with a product that has [little efficacy](#) but which may put them, without warning, at risk of many [adverse health consequences](#), including heart damage, stroke, and other thrombotic events and reproductive harms."*

The letter was addressed to Dr. Arnold Monto, chairman of the FDA's Vaccines and Related Biological Products Advisory Committee (VRBPAC), committee members and all FDA staff.

VRBPAC members are set to meet Tuesday to consider and likely vote on whether to grant EUA for the Pfizer vaccine for 5- to 11-year olds.

In May, the FDA authorized Pfizer's vaccine for [12- to 15-year-olds](#). [Moderna](#) and [Johnson & Johnson](#) vaccines have not yet been authorized for children under 18. The letter outlines 12 reasons the FDA should not authorize the pediatric vaccine and provides supporting evidence to back up each argument.

Dear Chairman Monto, VRBPAC Members and FDA Staff:

We write to you on behalf of [Children's Health Defense](#) (CHD), a non-profit organization devoted to the health of people and the planet. We have actively

followed your work to evaluate, authorize and approve vaccines for the American public and particularly children.

We are aware that you are likely to [authorize Pfizer's BioNTech](#) SARS-CoV-2 vaccine for [children aged 5-11](#) at your meeting on Oct. 26. Your authorization thus will expose over 20 million children in the U.S., and millions more around the world, to potential [COVID-19 vaccination](#) of an [Emergency Use Authorization \(EUA\)](#) product.

We are writing to put you on notice that should you grant EUA status to this pediatric EUA vaccine, CHD is poised to take legal action against you and other Vaccines and Related Biological Products Advisory Committee (VRBPAC) voting members as well as the FDA.

CHD will seek to hold you accountable for recklessly endangering this population with a product that has [little efficacy](#) but which may put them, without warning, at risk of many [adverse health consequences](#), including heart damage, stroke and other thrombotic events and reproductive harms.

We briefly outline why such authorization would be reckless:

1. The risks demonstrably outweigh the benefits of COVID vaccination for young children. Deaths and hospitalizations are rare and have been inflated inaccurately.
2. Nearly half of all children have natural immunity to COVID, according to the Centers for Disease Control and Prevention (CDC). There is no ethical justification for superfluous vaccination that will put children at elevated risk of vaccine harm.
3. Some children likely will die or be permanently injured from these vaccines based on the authorization for children 12-16.
4. The clinical trials for the pediatric vaccine were too small to detect safety signals for a population in the millions.
5. There are no long-term safety data for COVID vaccination of young children, making this an experiment rather than appropriate medical prevention.
6. Unethical coercive pressure will be applied to children and their parents, as has occurred with older children and adults. To grant authorization is to abet this unethical coercion that violates the Nuremberg Code's first principle.
7. There is no available care for children injured by COVID shots. The science and medicine have not yet developed, and most families will be unable to cover the costs of potential catastrophic injuries.

8. VRBPAC members should not participate in an exercise disguising a foregone conclusion. The president's purchase of [65 million pediatric doses](#), the CDC guidance for COVID vaccine delivery, the American Academy of Pediatrics' promotion of COVID vaccination for children all call into question whether this committee's deliberations mean anything.

If the administration is unprepared to wait for your advice, let alone heed it, you should signify your disapproval on behalf of the country the FDA is meant to protect.

9. First, do no harm. You are physicians who owe a duty to patients and medical ethics. If you authorize these shots, given all you know, will you be upholding your oath? If not, is it possible that your acts could later be seen as reason to remove your medical licenses?

10. The liability-free nature of your deliberations may not stand the test of time. In the fullness of time, your decisions may not have the liability protection that they currently enjoy. Under the PREP Act of 2005, all actors advancing a EUA agenda for medical countermeasures enjoy liability protection, absent willful misconduct. Nonetheless, if at a later point these shots are deemed non-therapeutic gene products that you knowingly and recklessly authorized, and which were then distributed to children as a direct result of your decision, it is possible that liability could later attach.

11. There is no COVID emergency for children of this age.

12. There are safer drugs that could be used prophylactically and therapeutically for COVID in children. There is extensive and compelling medical evidence for this assertion — and the choice to eschew use of these drugs in favor of a demonstrably dangerous vaccine is arbitrary and capricious.

We ask that you carefully consider all the information above before making any recommendation to authorize Pfizer's vaccine in the 5 through 11 year age group at your meeting on Tuesday, Oct. 26.

Sincerely yours,



Robert F. Kennedy, Jr.



Meryl Nass, M.D.

Let's investigate the basis for claims that children aged 5 through 11 needs to be vaccinated for COVID.

1. The truth is that children aged 5-11 are at extremely low risk of hospitalization, death, MIS-C or Long COVID.

a. What is the actual risk of hospitalization, death and MIS-C in aged 5 through 11-year-old children? This age group has the lowest rate of severe disease and death than all other age cohorts.

CDC [reports](#) 94 COVID-19 deaths with COVID since Jan. 1, 2020, in the 5 through 11 age group. However, CDC designates these as deaths “*involving COVID*” or “*with COVID*” rather than due to COVID, according to CDC’s chart below.

b. In the October 2021 Pediatrics, a report by David McCormick et al. showed that of 112 pediatric deaths associated with SARS-CoV-2, 86% had comorbidities, especially obesity, neurologic and developmental conditions. The mean age of decedents was 17.

c. It is impossible to separate deaths with COVID from those due to COVID in the U.S. because the CDC does not distinguish them. But what we do know is that child deaths due to COVID in Germany, according to the BILD newspaper, were 20 in May 2021, in a country with 85 million people.

Pediatric deaths were “under 30” through March 2021, [according to](#) the UK government, with 60 million people.

As an example of the Internet tyranny, AOL blocked me from downloading this document for sharing!

## **Medical doctor reveals CENSORED COVID statistics mainstream media is hiding from you**

By: Edit Lang, staff writer | October 24, 2021

(NaturalHealth365) *“We have a pandemic of fear, not a pandemic of the virus.”* Dr. Elizabeth Lee Vliet is by far not the only person who feels this way. Every day more people wake up to the realization that something is going terribly wrong, especially in our hospitals. By now, it is well-established that COVID patients ending up on a ventilator face extremely low chances of survival. Yet, despite the horrendous outcome, hospitals actively use policies and protocols to push people to ventilation.

Many are also aware that patients showing up in emergency rooms with COVID are systematically denied safe and effective early treatment options. Instead of receiving the care they need, patients are sent home and told to return when they get worse. Sadly, most doctors and healthcare workers go along with the injustices inside the institutions, widening the gap between healthcare and public trust.

But thankfully, not all doctors stay silent. Dr. Vliet is one such provider whose courage to speak up may help save lives.

**CENSORED: Brave doctor exposes the “COVID death rate” deception mainstream media uses to create fear and drive the pandemic**

Watch this video to learn the details of Dr. Vliet’s shocking explanation.

CENSORED COVID Story | [Find Out What They're Hiding from You](#)

Do NOT ignore the health dangers linked to toxic indoor air. These chemicals - the 'off-gassing' of paints, mattresses, carpets and other home/office building materials - increase your risk of nasal congestion, fatigue, poor sleep, skin issues plus many other health issues.

Jonathan Landsman of NaturalHealth365 brings you another eye-opening video interview, exposing critical, censored COVID statistics with Elizabeth Lee Vliet, MD, the President, and CEO of the Truth for Health Foundation.

During the interview, she shares many eye-opening facts about the so-called pandemic, pointing out some of the apparent inconsistencies and atrocities that take place every day. For instance, starting in March 2020, the U.S. Centers for Disease Control and Prevention (CDC) reclassified COVID deaths and coached healthcare providers on how to report them. The CDC pushed hard to make sure people dying from gunshot, heart attack, cancer, or other tragic causes be counted as COVID deaths. So naturally, this “*coaching*” raises questions about the validity of the reported COVID death numbers.

**But why are doctors going along with this fraud?**

**Hospital madness: Doctors have no freedom of speech, patients’ rights are violated**

According to Dr. Vliet, 85-90 percent of physicians are employed by large groups and health systems. When doctors become part of these organizations, they are heavily controlled by the leadership. They have no freedom of speech and are directed by administrators with no medical background. Doctors are told what medications they can and cannot use and even what information they can share with their patients about the COVID injections.

This high degree of control is one of the reasons why so many people die from COVID. Doctors are kept in line and denied the opportunity to make their own treatment decisions. There have been countless incidences of physicians being blocked from using medications that could effectively treat patients at home, in the outpatient setting.

**Reality too difficult to face: Hospitals use the PCR test to inflate case numbers and cash in on “fake” COVID admissions.**

Dr. Vliet explains how the medical establishment used – and continues to use – the PCR test to falsely diagnose people with COVID and keep the case numbers inflated. Let's remember, according to Kary Mullis, inventor of the PCR test, his test should NEVER be used to diagnose disease. But sadly, this notion was ignored from the very beginning, as the mainstream media and the pharmaceutical-medical establishment used testing as the vehicle to keep the pandemic in motion, in support of the narrative to justify unconstitutional lockdowns and mandates.

How did they do it?

First, the PCR test should have never been used to diagnose COVID. Second, by changing the amplification rate of the test, the rate of false positives was manipulated. For instance, if you run the PCR test at 25 cycles, false-positive rates are around 30-40 percent. If, however, the test is run at 45 cycles, the false-positive rates jump to 80-90 percent. Even today, many hospital ERs still use 45 cycles to run these tests, pushing up the false positives, landing patients in “COVID care units.”

Why would hospitals do this? While we can only speculate all the reasons, one thing is for sure: they get generously compensated for:

- every single person they admit with a COVID diagnosis
- for putting patients on Remdesivir
- for placing patients on a ventilator

Undoubtedly, we live in extraordinary times. Staying healthy by supporting a strong immune system is more important than ever before. Thankfully, we can take charge of our health, by focusing on boosting the immune systems and staying out of the hospital.

Watch this video (above) from the beginning till the end for some important information and share it far and wide with family and friends. Click on the link below to view professional medical doctor of 40 years expose the truth.

CENSORED COVID Story | [Find Out What They're Hiding from You](#)

**American government conspired with foreign entities to coordinate pandemic “preparedness activities” prior to covid**

10/25/2021 / [By Ethan Huff](#)

[New evidence](#) has emerged to suggest that the federal government coordinated with foreign governments to conduct a pandemic “preparedness exercise” not long before the Wuhan coronavirus (Covid-19) was announced.

Department of Health and Human Services (HHS) documents outline a strategic plan for imposing fascism in response to an alleged threat. Its goal was to

***“enhance international preparedness activities at the national, regional, and global levels,” including through pandemic “exercises.”***

Just months before the mainstream media started talking about the Chinese Virus, the Department of Homeland Security (DHS), which was created by George W. Bush in response to 9/11, conducted an exercise that some [now believe](#) is what went “live” to become the Fauci Flu.



These latest revelations about HHS and other American federal agencies conspiring with foreign governments only further supports that theory, suggesting that the Chinese Flu really was a *plandemic* that was schemed in advance of becoming “real.”

This “*falsified*” pandemic, as many are now calling it, has an extensive paper trail that serves as evidence of malfeasance. The Fauci Flu did not just appear by accident, in other words: It is a product of government ill will.

***“There is a significant amount of information which suggests that the U.S. federal government, in coordination with international governments, may have planned to conduct (or is currently conducting) an international, multi-year falsified pandemic ‘preparedness exercise.’”*** reported LifeSiteNews.

***“It was previously described that one method to determine whether COVID-19 is a falsified pandemic is following the ‘paper trail’ so to speak.”***

**Bush, Obama and Trump all helped bring us the *plandemic*.**

During his presidency, Donald Trump signed into law the *“Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2019,”* which basically *“legalized”* creating a false pandemic exercise that would last several years.

This law was passed by Congress and signed by Trump on June 24, 2019, just a few months before the first “cases” of the Chinese Flu appeared in Wuhan. Several months later, the first domestic cases would be announced in Seattle.

*“One of the main points to keep in mind, though, is that the law attempts to enhance the legal authority of the U.S. Department of Health and Human Services (HHS) and the Assistant Secretary for Preparedness and Response (ASPR) to carry out potentially national, ongoing ‘drills and operational exercises,’”* LifeSiteNews further explains.

*“Such drills and exercises may include pandemic drills and exercises which may be performed ‘without notice.’”*

Another document called the “U.S. Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response Strategic Plan for 2020-2023,” shortened as “ASPR Strategic Plan for 2020-2023,” adds to the Pandemic Act of 2019.

In it, this document provides for multiple examples of how a *“multi-year”* fake *plandemic* exercise could be legally imposed on the masses to help the government with its *“health preparedness, response, and recovery needs.”*

This, too, was enacted under Trump, and built upon preceding laws that were brought bear under Barack Hussein Obama to turn America into a medically fascist police state.

Both a Democrat and a Republican, in other words, worked together in their respective administrations to advance us to the point we have currently reached as a society. Both Obama and Trump, and of course Bush by creating DHS in the first place, contributed to bringing about this *“new normal”* under which we are now suffering.

*“One ‘higher-order policy’ that the ASPR Strategic Plan 2020-2023 cites is President Obama’s ‘Presidential Policy Directive / PPD – 8’ on ‘National Preparedness,’ issued in 2011,”* LifeSiteNews explains.

*“It is another document worth studying closely to determine whether the U.S. federal government may have planned a falsified pandemic exercise.”*

The latest news about Chinese Virus deception can be found at [Fascism.news](https://www.fascism.news).

Sources for this article include:

[LifeSiteNews.com](https://www.lifesitenews.com)



**Dr. Richard Fleming, PhD, MD, JD has tested five vials of the Covid-19 Pfizer-BioNTech vaccine on fresh human blood samples in-vitro and made a string of nightmare discoveries confirming the findings of the medical community.**

He begins this video [Link at the close of the article] by listing the enormous amount of confusing misinformation that we've been subjected to over the past 22 months:

- From people saying the virus isn't real and hasn't been isolated;
- to confusing the virus (SARS-CoV2) with the disease (COVID);
- to misinformation about PCR testing;
- to misinformation about masking;
- to people confusing Cytokine Storm with Inflammo Thrombotic Response (ITR, which is what's really going on);
- to people telling you to take drugs they have no measured tissue to support you taking;
- to people preventing the use of medications that do work;
- to doctors not treating symptomatic patients until it's too late;
- to doctors using ventilators incorrectly for people with ITR in their lungs (viz ARDS);
- to doctors being threatened with a loss of license or legal action for treating you;
- to promoting vaccines that the Emergency Use Authorization documents show do not statistically reduce absolute numbers of COVID cases or deaths;
- to failure to provide and obtain informed consent;
- to people overstepping their constitutional authority and violating the US Constitution;
- to people blaming the unvaccinated on the promulgation of the variants;
- to people claiming there are things in the vaccines that aren't there.

He says that in his tests, they did the following:

1. Looked at what the subject's blood under a microscope.
2. Looked at what happened to that blood when sterile, normal saline was added.
3. Looked at what happened to that blood when Pfizer-BioNTech was added.
4. Looked at what the saline looked like under a microscope.
5. Then repeated this process several times.

He says the disease, COVID-19 is the result of the Inflammo Thrombotic Response (ITR) in the lungs caused by the SARS-C0V2 virus, which is why people have respiratory problems and shortness of breath and it's how they've ended up on ventilators.

## FINDINGS

He shows us video of red blood cells that he took at 40X and 100X magnification, along with Dr. Kevin McCairn and Dr. Luc Montagnier using [light microscopy](#), then they look at that same blood with added saline, which simply allows the cells to move more freely. When he adds the Pfizer vaxx to the blood, we see the blood lose its red color dramatically, signaling that either the hemoglobin is no longer carrying oxygen or that the hemoglobin was damaged or stripped off of the cell and even more troublingly, we see the blood cells starting to clump together.

They repeated this test several times and saw the same results. These effects occurred within a matter of minutes after exposure to the vaxx. By contrast, the saline did not damage the red blood cells and it had no garbage floating in it, either.

Dr. Fleming's tests did not reveal any graphene oxide or parasites but he was able to identify the nanolipids and an enormous amount of detritus or what he called "*crystalline garbage crap*" and fibers floating around. He doesn't understand how this could pass quality control and how the FDA can say in a letter to him that they are "*happy*" with the end product and that it "*meets manufacturing specifications*".

He says, "*This is not what you would approve to inject inside of a human being. It's never been acceptable to inject this type of garbage inside of a human being.*"

Based on these tests, Dr. Fleming says the Pfizer-BioNTech vaxx violates acceptable standards for product liability and is certainly not in keeping with the safety of an FDA-approved product for injection into people, independent of whether that product is fully approved or approved under the Emergency Use Authorization. The vast quantity of "garbage" that he found, to him, demonstrates a failure on the part of the FDA.

Vaccine manufacturers have been given immunity from liability for adverse reactions, he says, "*But that presumes that it's just the drug vaccine. There's a different product liability issue, now that's before us and that's strict liability, which is the selling of a defective product that unreasonably threatens the consumer. That promotes a new legal liability and so, for all the attorneys listening to this and anybody involved who's had a problem, this opens the legal lawsuit opportunities for addressing these vaccines, because this is now a strict liability, product liability lawsuit issue, not an issue of the vaccines, themselves.*"

To recap, his tests with the Pfizer vaccine, showed that it caused:

1. Oxygen de-saturation of the red blood cells.
2. Inflammo thrombotic clustering/clotting of red blood cells.
3. Significant contamination with "garbage".

He calls on the FDA and anyone else to repeat the tests for themselves. He says, *"The FDA has an obligation. Its mission statement is to protect the public. It has not protected the public, it has failed. It provided EUA documents approval, when the benefits from the vaccines statistically, in the number of COVID cases or death and now we see, for the first time, evidence of what these vaccines do when they touch red blood cells and the garbage that's in these Pfizer vaccines – and until proven otherwise, all of these vaccines – since the FDA was responsible for evaluating all of these vaccines and so miserably failed on the Pfizer one, not only for these experiments to be replicated but for the FDA, the CDC and the Federal Government to investigate all three of these concerns – the oxygen de-saturation, the inflammo thrombotic blood clotting effect and the contamination – and until resolved, the FDA has an obligation, a commitment to the American public – and I would argue, every country's equivalent agencies – to pull these vaccines off the market until these three issues can be addressed, because one of these issues would be enough to pull these off the market but three of them is game, set, match."*

*"It's unacceptable on the part of the FDA, unacceptable on the part of Big Pharma, unacceptable for a mandate. For the CDC to state that Federal employees are going to be 'educated' about these vaccines, if police officers, fire and military do not take the vaccines, well, that 'education' needs to go right back to the CDC and FDA, because here's documentation of real harm being caused by these vaccines and real damage and garbage in these vaccines."*

*"I gave the Pfizer and Moderna companies an opportunity to respond to concerns beginning in January. We gave the FDA the opportunity to concerns. I got one...form letter that says, 'Thanks Dr. Fleming for being concerned but rest assured, we've got you covered, we're doing our job'."*

*"Well, this information shows you're not doing your job. You've got vaccines that are garbage, allowing garbage and debris to be injected into people. We very clearly show that the red blood cells were normal, we showed that the red blood cells responded normally to normal saline, that nothing unusual will happen but add the Pfizer vaccine and the red blood cells lose their oxygen carrying capacity and the red blood cells start to clot."*

*"This is exactly what I laid out in the 1994 theory of the inflammo thrombotic response. This is exactly what we're seeing with the VAERS reporting, this is exactly what we're seeing with neurologic harm, with cardiac harm, with blood clots occurring in the body. This is proof positive that these vaccines caused this type of damage under the microscope, just simply by being added to the blood of a human being...I think it's time for the FDA and CDC to actually do their job, instead of giving it lip service."*

**DR FLEMING CRITICIZES OTHERS' FINDINGS**

Dr. Fleming chastises those making claims about graphene oxide, SPIONs and parasites in the vaxx. Dr. Fleming only looked at 5 vials of Pfizer at a magnification of no higher than 100X and he made no mention of batches.

I don't think his criticism of the findings of others is very scientific and I could rebut every one of his complaints in this video with images and findings from dozens of people all over the world, many of which have been aggregated on the website of [Dr. Robert Young](#).

The things Dr. Fleming refers to as "*crystalline garbage*", he did not examine at a magnification higher than 100X. The [graphene oxide](#) has been photographed using electron microscopy by Dr. Young and by [Spanish scientists](#) and according to them, it has been found in all of the major COVID vaccines; AstraZeneca, Moderna, Sinovac, Janssen, Johnson & Johnson and Pfizer-BioNTech with their findings [confirmed by researchers around the world](#).

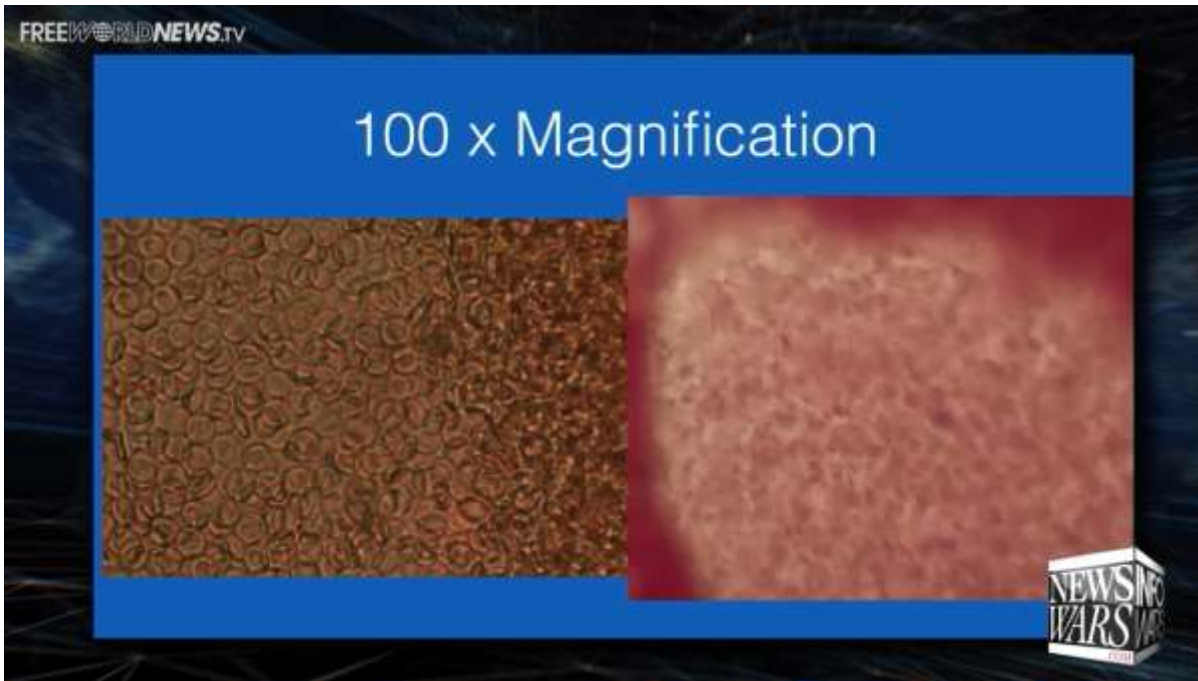
The *Trypanosoma cruzi* parasites were photographed by Dr. Young at 1000X magnification from the Pfizer vials and he described them as having a "50-micron elongated body." The [tentacled hydroid](#) was photographed by Dr. Madej at 400X magnification and it was found in 2 different batches of the Johnson & Johnson vaxx.

As Ramola D reported, VAERS lists how a regular blood donor was found to have antibodies to *T. cruzi* following her vaccination and that it's now apparently becoming routine to screen all vaxxed patients with heart issues for *T. cruzi*. What explains patients listed in VAERS having their symptoms labeled as "*Trypanosoma brucei*", an exotic parasite species, which affects only those bitten by the tsetse fly in the [wet, tropical regions of Africa](#)?

Dr. Fleming claims that [this](#) is just an artifact of liquid drying under a microscope. Really? He seems to want to limit discovery, by feigning here that this is about the FDA "not doing its job", rather than a genocidal campaign being run by them. This is odd, given that he, together with Dr. Luc Montagnier and others [have filed](#) a joint submission to The Hague, alleging that Governments worldwide are complicit in genocide, crimes against humanity and breaches of the Nuremberg Code.

Video link below:

Running Time: 33 mins



**In another sign that the medical system in the United States is self-destructing due to COVID-19 vaccines and vaccine mandates, the world famous Mayo Clinic with headquarters in Rochester, Minnesota, has sent warning letters to 8,000 employees who have not yet taken a COVID-19 shot.**

**by Brian Shilhavy Editor, Health Impact News**

This prompted hundreds of employees to take to the streets in Rochester. Anthony Gockowski of [AlphaNews reports](#):

A large crowd of protesters marched through downtown Rochester Monday in protest of Mayo Clinic's vaccine mandate, which could put as many as 8,000 people out of work.

The demonstration lasted for more than four hours, according to [video](#) of the event, as protesters carried signs calling for an end to "medical tyranny" and chanting "shame on Mayo."

To comply with the Biden administration's federal [vaccine mandates](#), Mayo Clinic informed its employees that they must receive a COVID-19 vaccine or a medical or religious exemption by Nov. 8, [according to Med City Beat](#). Unvaccinated employees without exemptions will be placed on unpaid leave on Dec. 3. If they're still not vaccinated by Jan. 3, 2022, they will be terminated.

Med City Beat reports that about 8,000 Mayo Clinic employees are unvaccinated.

One Mayo Clinic employee, Kalley Newkirk, went public with her resignation last week.

*"I am one, of many, who is resigning from Mayo Clinic, due to the recent email sent to Mayo Clinic Staff and contractors, indicating mandatory COVID-19 vaccination,"* Newkirk said in her resignation letter, which she published on [Facebook](#).

## **FDA Grants Emergency Use of Pfizer Vaccine for Kids 5 to 11, as Reports of Injuries After COVID Vaccines Near 840,000**

VAERS data released Friday by the CDC included a total of **837,595 reports of adverse events** from all age groups following COVID vaccines, including **17,619 deaths** and **127,457 serious injuries** between Dec. 14, 2020, and Oct. 22, 2021. Data released Friday by the Centers for Disease Control and Prevention (CDC) showed that between Dec. 14, 2020, and Oct. 22, 2021, a total of [837,595 adverse events](#) following COVID vaccines were reported to the Vaccine Adverse Event Reporting System (VAERS).

The data included a total of **17,619 reports of deaths** — an increase of **491** over the previous week. There were [127,457 reports of serious injuries](#), including deaths, during the same time period — up 4,624 compared with the previous week.

Excluding "[foreign reports](#)" to VAERS, [622,743 adverse events](#), including **8,068 deaths** and [51,532 serious injuries](#), were reported in the U.S. between Dec. 14, 2020, and Oct. 22, 2021.

Of the 8,068 U.S. deaths reported as of Oct. 22, [11% occurred](#) within 24 hours of vaccination, [15% occurred](#) within 48 hours of vaccination and [27% occurred](#) in people who experienced an onset of symptoms within 48 hours of being vaccinated.

In the U.S., 411.6 million COVID vaccine doses had been administered as of Oct. 15. This [includes](#): 242 million doses of [Pfizer](#), 154 million doses of [Moderna](#) and 15 million doses of [Johnson & Johnson](#) (J&J).

The data come directly from reports submitted to VAERS, the primary government-funded system for reporting adverse vaccine reactions in the U.S.

Every Friday, [VAERS](#) makes public all vaccine injury reports received as of a specified date, usually about a week prior to the release date. Reports submitted to VAERS require further investigation before a causal relationship can be confirmed. Historically, VAERS has been shown to report only [1% of actual vaccine adverse events](#).



## Search Results

From the 10/22/2021 release of VAERS data:

**Found 837,595 cases where Vaccine is COVID19**

### Total

Event Outcome	Count	Percent
Death	17,609	2.1%
Permanent Disability	27,277	3.3%
Office Visit	133,794	16.0%
Emergency Room	87	0.0%
Emergency Doctor/Room	44,127	5.3%
Hospitalized	85,263	10.2%
Hospitalized, Prolonged	545	0.0%
Recovered	294,257	35.1%
Birth Defect	589	0.0%
Life Threatening	19,682	2.3%
Not Serious	387,256	46.2%
<b>TOTAL</b>	<b>1,046,183</b>	<b>125.0%</b>

\* 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 837,595 (the number of cases found), and the Total Percentage is greater than 100.

## [ORDER TODAY: Robert F. Kennedy, Jr.'s New Book — 'The Real Anthony Fauci'](#)

**This week's U.S. data for 12- to 17-year-olds show:**

- [22,212](#) total adverse events, including [1,348](#) rated as serious and [25](#) reported deaths. Two of the 25 deaths were suicides.

The most recent death involves a 12-year-old girl ([VAERS I.D. 1784945](#)) who died from a [respiratory tract hemorrhage](#) 22 days after receiving her first dose of Pfizer's vaccine.

Another recent death includes a 15-year-old male who died six days after receiving his first dose of Pfizer's COVID vaccine. According to his VAERS report ([VAERS I.D. 1764974](#)), the previously healthy teen complained of brief unilateral shoulder pain five days after receiving his COVID vaccine. The next day he played with two friends at a community pond, swung on a rope swing, flipped into the air, and landed in the water feet first. He surfaced, laughed and told his friends "Wow, that hurt!" He then swam toward shore underwater, as was his usual routine, but did not re-emerge.

An autopsy showed no external indication of a head injury, but there was a small subgaleal hemorrhage — a rare, but lethal [bleeding disorder](#) — over the left occiput. In addition, the boy had a mildly elevated cardiac mass, increased left ventricular wall thickness and small foci of myocardial inflammation of the lateral wall of the left ventricle with myocyte necrosis consistent with [myocardial infarction](#).

- [58 reports](#) of anaphylaxis among 12- to 17-year-olds where the reaction was life-threatening, required treatment or resulted in death — with 96% of cases attributed to [Pfizer's vaccine](#).
- [539 reports](#) of myocarditis and pericarditis (heart inflammation) with [531 cases](#) attributed to Pfizer's vaccine.
- [125 reports](#) of blood clotting disorders, with all cases attributed to Pfizer.

**This week's U.S. VAERS data, from Dec. 14, 2020, to Oct. 22, 2021, for all age groups combined, show:**

- 19% of deaths were related to cardiac disorders.
- 54% of those who died were male, 41% were female and the remaining death reports did not include gender of the deceased.
- The [average age](#) of death was **72.7**.
- As of Oct. 22, [4,151 pregnant women](#) reported adverse events related to COVID vaccines, including 1,296 reports of [miscarriage or premature birth](#).
- Of the [3,065 cases of Bell's Palsy](#) reported, 51% were attributed to [Pfizer](#) vaccinations, 41% to [Moderna](#) and 8% to [J&J](#).
- 685 reports of [Guillain-Barré syndrome](#), with 41% of cases [attributed to Pfizer](#), 31% to [Moderna](#) and 28% to [J&J](#).
- [2,043 reports](#) of anaphylaxis where the reaction was life-threatening, required treatment or resulted in death.
- [10,493 reports](#) of blood clotting disorders. Of those, [4,590 reports](#) were attributed to Pfizer, [3,766 reports](#) to Moderna and [2,083 reports](#) to J&J.
- [2,971 cases](#) of myocarditis and pericarditis with [1,865 cases](#) attributed to Pfizer, [978 cases](#) to Moderna and [118 cases](#) to J&J's COVID vaccine.

**[Double your impact! When you make a donation to Children's Health Defense, your donation will be matched — up to \\$2 million! Donate Now!](#)**

## **FDA grants Emergency Use Authorization for Pfizer Vaccine for 5- to 11-year-olds**

The U.S. Food and Drug Administration (FDA) today granted [Emergency Use Authorization](#) (EUA) for the Pfizer-BioNTech COVID vaccine for children 5 to 11 years old, [The Associated Press reported](#).

The announcement followed [Tuesday's recommendation](#) by the FDA's vaccine advisory committee that the agency grant Pfizer's request. The advisory committee vote passed with 17 in support, and [one abstention](#).

Reporting on today's news, [STAT noted](#):

*"The vaccine was not granted FDA approval, but instead an emergency use authorization. Emergency authorizations are used when the secretary of health and human services has declared a public health emergency to more quickly clear the use of vaccines, treatments, and diagnostic tests. These authorizations lapse when the state*



of emergency ends. Pfizer's vaccine was fully approved for those age 16 and older in August, and was previously granted an emergency use authorization for use in adolescents ages 12 to 15."



The dose for younger children will be one-third the strength given to people 12 and older, with two shots given three weeks apart. Before the shots can be rolled out, the CDC must weigh in with its own recommendations.

During Tuesday's meeting, the [Vaccines and Related Biological Products Committee](#) heard evidence from Pfizer and regulators, and listened to concerns raised by multiple scientists and physicians.

Based on [CDC data](#) presented during the meeting, among children 5 to <12 years of age, there have been approximately 1.8 million confirmed and reported COVID cases since the beginning of the pandemic, and only 143 COVID-related deaths in the U.S. through Oct. 14.

Pfizer provided safety data on two study cohorts of children ages 5 to 11, both of roughly equal size. The first group was followed for only about two months, the second for only two-and-a-half weeks.

Pfizer said "*post-vaccination myocarditis/pericarditis*" in participants 5 to <12 years of age will not be studied until after the vaccine is authorized for children.

Pfizer vaccine *'failed any reasonable risk-benefit calculus in connection with children,'* scientist says Brian Dressen, Ph.D., is [one of the scientists](#) who testified Tuesday during the FDA advisory committee's 8-hour hearing. Dressen is also the husband of Brianne Dressen, who in 2020 developed a [severe neurological injury](#) during the Utah-based portion of the U.S. [AstraZeneca COVID vaccine](#).

During his 3-minute testimony, Dressen, a chemist with an extensive background in researching and assessing the degree of efficacy in new technologies, [told the FDA advisory panel](#) Pfizer's vaccine "failed any reasonable risk-benefit calculus in connection with children."

Dressen said the decision to authorize for 5- to 11-year-olds is being rushed and is based on "incomplete data from underpowered trials, insufficient to predict rates of severe and long-lasting adverse reactions."

Dressen urged the committee to reject the EUA modification and direct Pfizer to perform trials that decisively demonstrate the benefits outweigh the risks for children.

Dressen's wife was severely injured last November after receiving her first and only dose of a COVID vaccine administered during a clinical trial.

*"Because study protocol requires two doses, she was dropped from the trial, and her access to the study app deleted," Dressen said. "Her reaction is not described in the recently released clinical trial report — 266 participants are described as having an adverse event leading to discontinuation, with 56 neurological reactions tallied."*

### **CDC updates guidance allowing immunocompromised to get a fourth COVID shot**

Immunocompromised adults who received a third dose of either the Pfizer-BioNTech or Moderna COVID vaccine [will become eligible](#) for a fourth booster shot six months after receiving their third dose, according to [CDC guidance](#) issued Monday.

*"In such situations, people who are moderately and severely immunocompromised may receive a total of four vaccine doses,"* with the fourth coming at least six months after the third, the CDC's new guidelines said.

In August, the CDC [authorized a third dose](#) of either [Pfizer-BioNTech](#) or the [Moderna](#) mRNA vaccine — but not [Johnson and Johnson's](#) (J&J) adenovirus vaccine — for certain immunocompromised people 18 and older.

However, a third dose is now considered part of the [primary series](#), rather than a booster. The earliest that [immunocompromised people](#) who received a third mRNA vaccine shot can get a fourth shot as a booster would be February.

The agency said people could select that booster from any of the three COVID vaccines available in the U.S, including J&J, but specified a fourth dose of Moderna's vaccine should be half the size of a normal dose.

### **Double-vaccinated can still spread the virus at home**

Fully vaccinated people are catching COVID and passing it on to those they live with, [warn experts in the UK](#). A British study [published in the Lancet](#) Oct. 29, showed individuals who have had two vaccine doses can be just as infectious as those who have not been jabbed.

Even if they are [asymptomatic or have few symptoms](#), the chance of transmitting the virus to other unvaccinated housemates is about two in five, or 38%. This drops to one in four, or 25%, if housemates are also fully vaccinated.

“By carrying out [repeated and frequent sampling](#) from contacts of COVID-19 cases, we found that vaccinated people can contract and pass on an infection within households, including to vaccinated household members,” said Dr. Anika Singanayagam, co-lead author of the study.

*“Our findings provide important insights into ... why the [Delta variant](#) is continuing to cause high COVID-19 case numbers around the world, even in countries with high vaccination rates.”* Vaccinated contacts who tested positive for COVID on average received their shots longer ago than those who tested negative, which the authors said was evidence of waning immunity and supported the need for booster shots.

Neil Ferguson, an Imperial epidemiologist, said the transmissibility of Delta meant that it was unlikely Britain would reach [herd immunity](#) for long.

*“That may happen in the next few weeks: If the epidemic’s current transmission peaks and then starts declining, we have by definition in some sense reached herd immunity, but it is not going to be a permanent thing,”* [Ferguson told reporters](#).

16-year-old girl develops severe vulvar ulcers after second Pfizer shot.

A [case report](#) published Oct. 25 in the [Journal of Pediatric and Adolescent Gynecology](#) revealed a new potential novel side effect of Pfizer’s COVID vaccine that doctors say warrant further investigation.

According to the report, a 16-year-old non-sexually active female presented to the pediatric gynecology clinic with vaginal pain six days after receiving her second dose of [Pfizer’s COVID vaccine](#).

Within 24 hours of receiving the vaccine, the girl developed fever, fatigue, myalgias and “sores” in her vaginal area. Over the next two days, right-sided lesions in her vaginal area coalesced and became more painful. The teen went to the urgent care with a fever of 105 degrees. She was diagnosed with a [Bartholin gland abscess](#).

Despite [antibiotic therapy](#), her symptoms worsened and her lesions were covered in exudate with a necrotic, ring-like border. In the gynecology clinic, the patient’s lesions were exquisitely painful, resulting in difficulty with urination, defecation and walking. She had no respiratory symptoms and no history of COVID exposure.

The report said the findings *“were consistent with vulvar aphthous ulcers in association with influenza-like symptoms following Pfizer BioNTech (BNT162b2) COVID-19 vaccination.”*

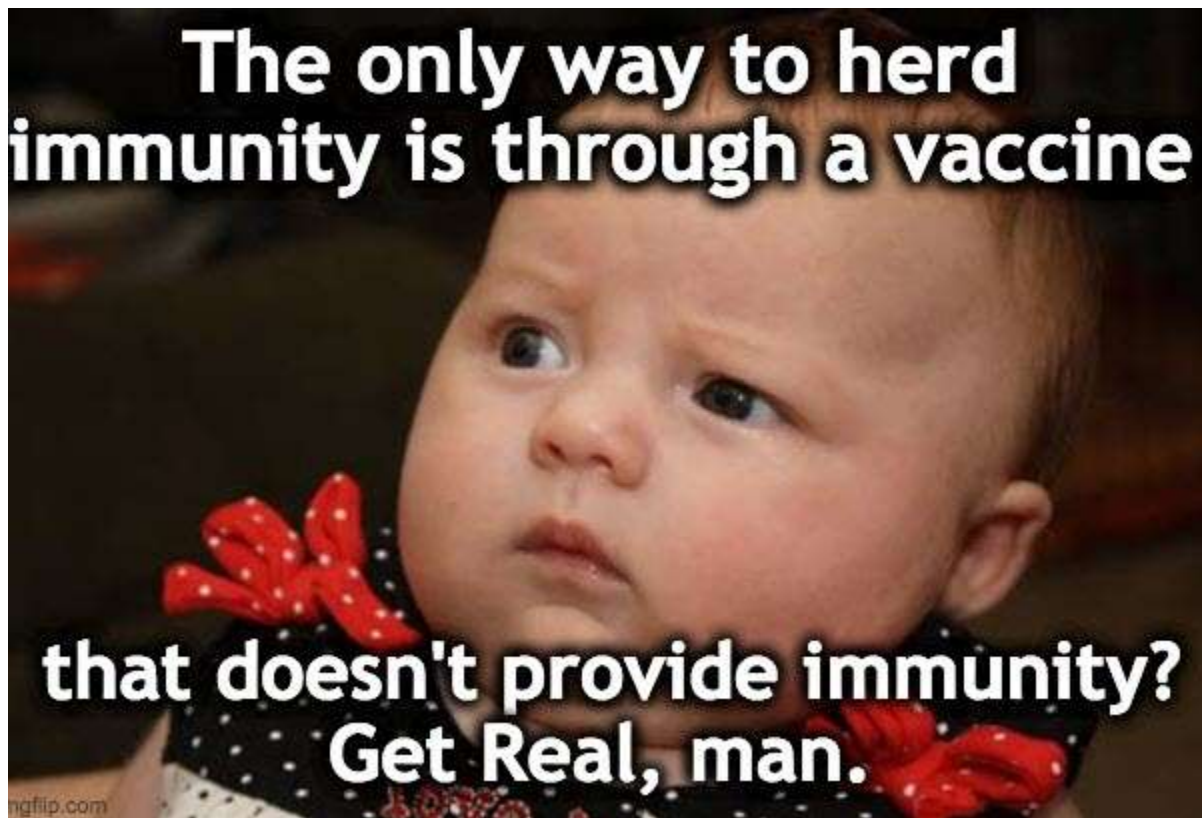
*“Our patient had typical clinical features of aphthous ulcer, including an influenza-like prodrome and characteristic dermatologic manifestations which occurred after receiving the Pfizer COVID vaccine,”* the authors wrote. According to the [report](#), the girl’s case was submitted to VAERS *“due to the temporal relationship with COVID vaccine administration.”*

[Children’s Health Defense](#) asks anyone who has experienced an adverse reaction, to any vaccine, to file a report following [these three steps](#).

### **The “Vaccine” Is a Depopulation Device**

Dr. Paul Craig Roberts has been stating the same claim that I have for the nearly two years so far. The “vaccine” produces the new strains or variants, and the new vaccine will produce new variants requiring new vaccines. All the time your immune system is being destroyed. Humanity will end up with zero natural immunity.

As many censored scientists said at the beginning, it is a depopulation plot. It is as simple as this – when you mess around with your God-given immunity, the end results are diminished health and permanent damage that inevitably shortens your life!



### **What’s Insane in This?**

**BREAKDOWN OF COVID DEATHS IN THE U.S. BY AGE**

According to the U.S. Centers for Disease Control (CDC), very few people under age 19 have died of Covid. Of the total deaths attributed to Covid (700,951),

**181** were age 0-4 and **406** were 5-18, for a total of 587 deaths in the 0-18 age category (or .08% of the total) (“Provisional Covid-19 Deaths,” data.cdc.gov, Oct. 6, 2021).

The CDC does not list comorbidities for children, so it is impossible to know whether they died of Covid alone or of cancer, heart or kidney disease, etc., exacerbated by Covid, **but of the pediatric deaths by influenza in the 2019-2020 season, 43% had a pre-existing medical condition** (“2019-20 Season’s Pediatric Flu Deaths,” CDC, Aug. 21, 2020).

More than half of the deaths attributed to Covid by the CDC were of the elderly 75 and over (378,496 or 54%). The U.S. life expectancy is about 78 years old.

**FROM NBC NEWS on Thursday, October 14th: The Biden administration has purchased 65 million pediatric doses of the Pfizer/BioNTech vaccine, enough to vaccinate (poison) the estimated 28 million children who would be eligible should the Food and Drug Administration approve Pfizer's request to vaccinate children ages 5 to 11, said an official of the Department of Health and Human Services.**

Pfizer and BioNTech said this month that they had submitted an emergency request for authorization for children ages 5 to 11, and an FDA advisory committee plans to meet to discuss the request on October 26. The vaccine doses for the youngest age group wouldn't be interchangeable with those for adults, who have different dosage and dilution requirements.

What **demonic psychopath** would call for the vaxx of children which has a survival rate of:

Age	Covid Survival Rate
<b>0-19</b>	<b>99.9973%</b>
20-29	99.986%
30-39	99.969%
40-49	99.918%
50-59	99.73%
60-69	99.41%
70+	97.6% (non-institutionalized.)



### 'Food for Thought' Let This Sink In...

'Pfizer' is a German word.

I don't think they want you to figure this out...because you can use an English to German translator on Google...

...or you can try the German to English translator and you get the same thing. 'Pfizer'

**My research shows Pfizer is the German word for "Lucifer".**

Now you get it. Think about that the rest of your day.

Carrying out their orders, the White House is moving "quickly" to shove multiple rounds of [spike protein bioweapons into U.S. children](#). The White House outlined a plan to inoculate 28 million children between the ages of 5 and 11, in a coordinated attempt to injure, disable and commit mass genocide against children, with no recourse in place. The spike protein is the "kill" shot and has been admitted to have been a huge mistake. It destroys your natural God-given immune system, degrading a person's immunity by

as much as 10% a month. Do you understand what that means? **Most will die within a year of being vaxxed! The best estimate by Dr. Sherri Tenpenny, Carrie Madej, and Dr. Lee Merritt and fellow doctors is two years, and a few exceptions as long as five years!**

Many school districts across the nation have held parental rights hostage for over a year, abusing children with mask mandates, while harming them physically, psychologically and behaviorally with no remorse or recourse. Held hostage, children are routinely subjugated by government forces – forces that have been enabled and empowered by district and school officials. Cowardice has masqueraded as “safety” for too long now, and school children are about to be forced into an experiment that is now a proven depopulation scheme. As the heavy hand of force suffocates children and breaks down their psychology, a global genocidal experiment inches closer to each school district, taking advantage of local cowards, and their restrained, submissive state.

For over a year, it has been proven that [children are NOT at risk for severe illness or death](#) from a natural covid respiratory infection. The vaccine experiment, on the other hand, deliberately harms children and can cause needless suffering and death.

A few pediatricians and primary care physicians across the country have already signed up to distribute the first 25,000 doses. Not waiting around for regulatory oversight, the White House has already secured enough Pfizer jabs to harm 28 million kids. The FDA only exists to give the illusion that the jabs are safe, as the White House works with Pfizer to mass distribute toxic injections with no accountability whatsoever.

Government threatens to keep lockdowns and restrictions in place until children are mass injected.

The genocidal spike protein rollout will be accompanied by a well-funded propaganda campaign. According to the AP report, *“the administration believes trusted messengers — educators, doctors and community leaders — will be vital to encouraging vaccinations.”* The White House not only sees children as experimental property, but they also view doctors, teachers and local government authorities as mindless propaganda pushers who will dutifully regurgitate pharmaceutical propaganda and parrot a vaccine narrative *like puppets*. This federal “advertising” campaign will promote vaccine safety and effectiveness, even though the clinical studies are based on fraud, with no justification to inoculate children in the first place.

U.S. Surgeon General Dr. Vivek Murthy told *NBC* that vaccination will not only protect children but also give them back activities that *“are so important to our children.”* In other words, Murthy wants children to believe that government lockdowns and abuses are the fault of those who don’t vaccinate, even though these restrictions were deployed by government officials with the intent to control, psychologically manipulate and intimidate the population into compliance with false authority, global suffering and depopulation schemes.

*“COVID has also disrupted our kids’ lives. It’s made school harder; it’s disrupted their ability to see friends and family, it’s made youth sports more challenging,”* said surgeon general Dr. Vivek Murthy. All these issues of abuse and control have been brought into existence by out-of-control governments. All these abuses can be ended, without vaccinations and further coercion. However, Murthy expects school, local and state officials to mandate the shots for their schools, just as they dutifully forced quarantines masks, and other needless abuses. He, along with CDC Chief Rochelle Walensky, also expects children to wear masks until vaccination rates are high in pediatric populations.



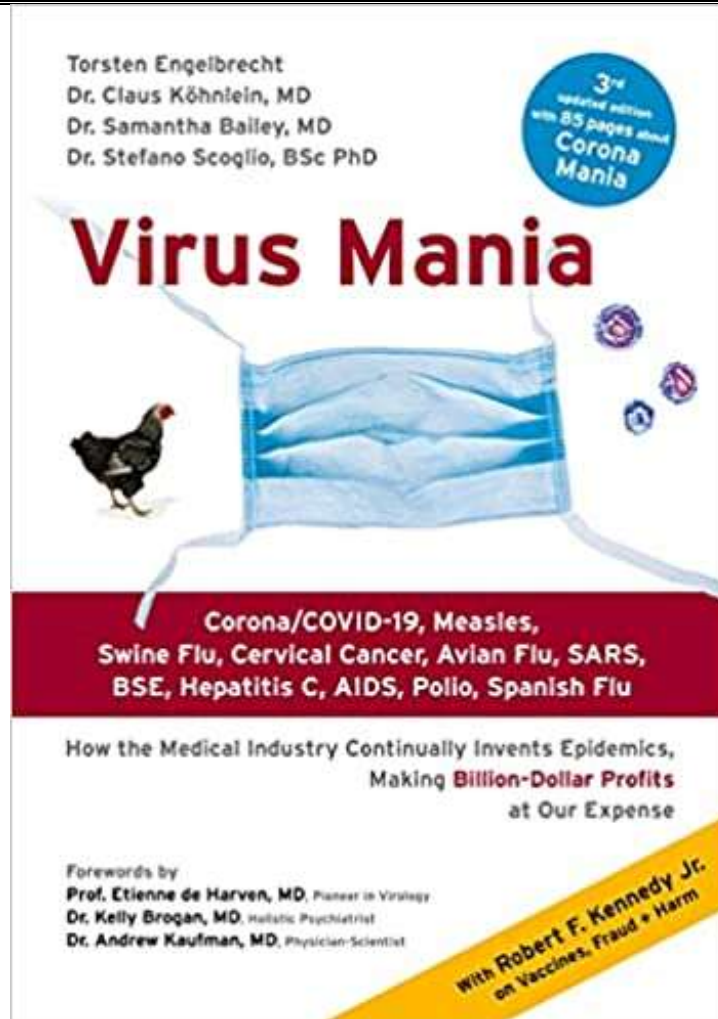
This is Dr. Anthony Fauci, a Jesuit-trained coadjutor and it is a historical fact that Jesuits are the founders of the vaccine racket. Dr. Edward Jenner and Louis Pasteur were peddling their snake oil vaccine racket over a century ago, and it was later incorporated into the Rockefeller school of medicine at the University of Chicago’s philosophy of allopathic medicine.

Louis Pasteur was exposed less than a decade ago as a complete fraud. But you were never told he was a quack. At his death, his family sealed away his research, journals, and by his own admission, he acknowledged that he never proved the “Germ” theory of pathogens. This is the basis of the present group of public health servants like Dr. Fauci and others of his crowd making billions in profits from their money-making scam.

You can read all about this in the book ‘*Vaccine Mania*’. It is an important book, probably my most informative read in early 2020!



*Virus Mania: Corona/COVID-19, Measles, Swine Flu, Cervical Cancer, Avian Flu, SARS, BSE, Hepatitis C, AIDS, Polio, Spanish Flu. How the Medical ... Making Billion-Dollar Profits At Our Expense 3rd Edition*  
by [Torsten Engelbrecht](#) (Author), [Claus Köhnlein](#) (Author), [Samantha Bailey](#) (Author),  
[Stefano Scoglio](#) (Author)



# The Ultimate Cheatsheet for Critical Thinking

Want to exercise critical thinking skills? Ask these questions whenever you discover or discuss new information. These are broad and versatile questions that have limitless applications!



<b>Who</b>	<ul style="list-style-type: none"> <li>... benefits from this?</li> <li>... is this harmful to?</li> <li>... makes decisions about this?</li> <li>... is most directly affected?</li> </ul>	<ul style="list-style-type: none"> <li>... have you also heard discuss this?</li> <li>... would be the best person to consult?</li> <li>... will be the key people in this?</li> <li>... deserves recognition for this?</li> </ul>
<b>What</b>	<ul style="list-style-type: none"> <li>... are the strengths/weaknesses?</li> <li>... is another perspective?</li> <li>... is another alternative?</li> <li>... would be a counter-argument?</li> </ul>	<ul style="list-style-type: none"> <li>... is the best/worst case scenario?</li> <li>... is most/least important?</li> <li>... can we do to make a positive change?</li> <li>... is getting in the way of our action?</li> </ul>
<b>Where</b>	<ul style="list-style-type: none"> <li>... would we see this in the real world?</li> <li>... are there similar concepts/situations?</li> <li>... is there the most need for this?</li> <li>... in the world would this be a problem?</li> </ul>	<ul style="list-style-type: none"> <li>... can we get more information?</li> <li>... do we go for help with this?</li> <li>... will this idea take us?</li> <li>... are the areas for improvement?</li> </ul>
<b>When</b>	<ul style="list-style-type: none"> <li>... is this acceptable/unacceptable?</li> <li>... would this benefit our society?</li> <li>... would this cause a problem?</li> <li>... is the best time to take action?</li> </ul>	<ul style="list-style-type: none"> <li>... will we know we've succeeded?</li> <li>... has this played a part in our history?</li> <li>... can we expect this to change?</li> <li>... should we ask for help with this?</li> </ul>
<b>Why</b>	<ul style="list-style-type: none"> <li>... is this a problem/challenge?</li> <li>... is it relevant to me/others?</li> <li>... is this the best/worst scenario?</li> <li>... are people influenced by this?</li> </ul>	<ul style="list-style-type: none"> <li>... should people know about this?</li> <li>... has it been this way for so long?</li> <li>... have we allowed this to happen?</li> <li>... is there a need for this today?</li> </ul>
<b>How</b>	<ul style="list-style-type: none"> <li>... is this similar to _____?</li> <li>... does this disrupt things?</li> <li>... do we know the truth about this?</li> <li>... will we approach this safely?</li> </ul>	<ul style="list-style-type: none"> <li>... does this benefit us/others?</li> <li>... does this harm us/others?</li> <li>... do we see this in the future?</li> <li>... can we change this for our good?</li> </ul>

## **Yale Epidemiologist Cautions About Child Vaccination**

By Tom Woods | Principia Scientific International | October 29, 2021

The next wave of vaccination mandates will involve children. Since anyone raising concerns about this is considered an enemy of society, it's been impossible to have a rational discussion about it.

Here's what Harvey Risch, professor of epidemiology at the Yale School of Public Health and the Yale School of Medicine had to say about it this week.

*"As far as I can tell, it's a top-down structure, and most doctors do not get their information by going back and reading the original studies and making up their own minds. They get fed the information from pharma reps or from what they're told from societies. The conflicts are legion. So it's no surprise that most doctors don't pay attention and think what they're told..."*

*"If the child has chronic conditions that make their risk appreciable, then there is a reason that they should be considered for vaccination. Other than that, if it were my child, I would homeschool them. Honestly, I would organize with other parents to take them out of the school and create a homeschooling environment."*

There is no choice. Your child's life is on the line.

*"It's not a high risk. Vaccination is not a high risk that's going to kill every child by doing so. However, it's enough of a risk that on the average the benefit is higher for homeschooling than it is for vaccination and being in school."*

Martin Kulldorff of Harvard is saying something similar:

*"They can be infected, just like they can get the common cold, but they're not a big threat. They don't die from this, except in very rare circumstances. So if you want to talk about protecting children or keeping children safe, I think we can talk about traffic accidents, for example, which they are really at some risk.... And there are other things that we should make sure [of] to keep children safe. But COVID is not a big risk factor for children."*

Kulldorff points to the experience of his native Sweden. Beginning with the first wave in the spring of 2020, Sweden "decided to keep daycare and schools open for all children ages 1 to 15.

And there are 1.8 million such children who got through the first wave without vaccines, of course, without masks, without any sort of distancing in schools.

If a child was sick, they were told to stay home. But that was basically it. And you know how many of those 1.8 million children died from COVID? Zero. Only a few hospitalizations. So this is not a risky disease for children."

He concludes: *“If you’re a child, even if you haven’t had COVID, the risk of serious disease or death is minuscule ... So it’s not at all clear that the benefits outweigh the risks for children.”*

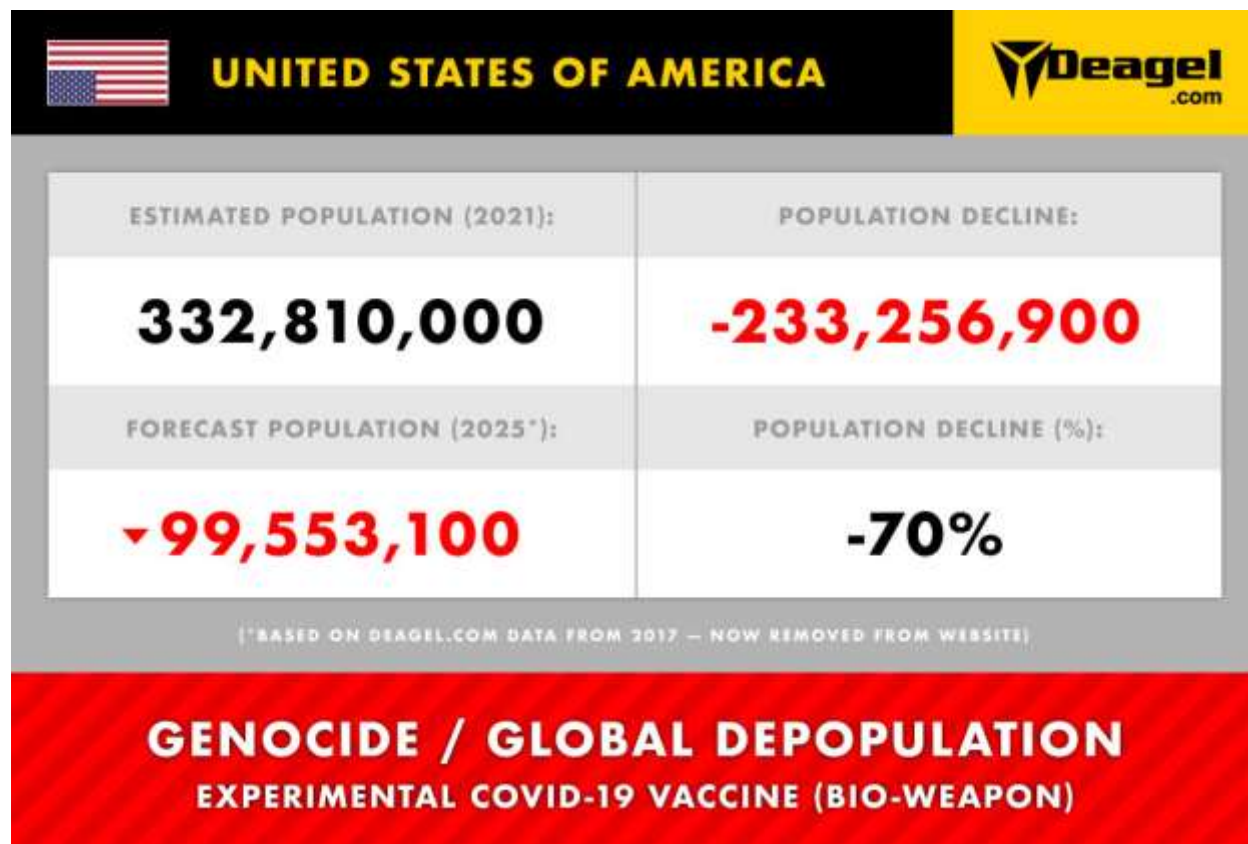
Try discussing this with friends and relatives on social media, and you run the risk of being silenced.

We are not even allowed to discuss these things. And when in our lifetimes has free discussion been more urgently needed?

There’s no censorship in my group, the Tom Woods Show Elite.

Here we discuss important matters like adults.

If you’re in a position where you don’t need such a thing, you are among the lucky few.







This is not about a virus, it never was, but it is really about “Depopulation” and the ultimate control of the world’s population that survives the die-off over the next year or two.

Blessings,

Pastor Bob, [EvanTeachr@aol.com](mailto:EvanTeachr@aol.com)  
[www.pastorbobreid.com](http://www.pastorbobreid.com)  
<http://jesusisthewaythetruththelife.com/node/22>