

Mass Murder

By Sovereign State Sanctioned Syringe Needle!
Part 62

COVID-19 is Man-made: From Fauci, to Gates, to Daszak; a timeline of bio-terror

Monday, April 25, 2022

([Natural News](#)) The U.S. government funded Peter Daszak's ECO Health Alliance to the tune of \$61,491,183 to make new coronaviruses that are infectious to humans. It also directly or indirectly funding the Wuhan Institute of Virology to the tune of \$7.4 million dollars to make new coronaviruses that are infectious to humans. Meanwhile the National Institute of Allergy and Infectious Diseases funded Ralph Baric to the tune of \$46,958,414 to make new coronaviruses that are infectious to humans.

(Article republished from [DailyExpose.uk](#))

This totals more than \$114 million in the period from 2000 to 2020 to make new coronaviruses which are infectious to humans.

There is no question that SARS CoV 2 (causing Covid-19) is man-made. Here's the evidence...

By a concerned reader

A Brief History of man-made pathogens designed by Baric, Daszak, Zhengli and Moderna and funded by Fauci, the NIH, the NIAID and the US Government to carry out the research necessary for the creation of SARS, MERS and Covid-19 –

1984: Dr. Anthony Fauci appointed director of the NIAID (National institute of Allergies and Infectious diseases) – There is an Orwellian Appointment for you.

1986 July1: <https://grantome.com/grant/NIH/R01-AI023946-01> 1986 – 1999 funding amounts not specified and then funded by \$1,987,840 over 7 years from 2000 to 2007 excluding 2002.

NIAID (National Institute of Allergies and Infectious Diseases) funding Ralph Baric at University of North Carolina, Chapel Hill.

Subject: Mechanism of MHV Replication (Mouse Hepatitis Virus). This was the start of the partnership between Fauci and Baric.

1999: U.S. Dept. of Health & Human Services (HHS) funds research amplifying the infectious character of Coronaviruses.

1999: The Bill and Mellisa Gates Foundation set up GAVI (Global Alliance for Vaccines and Immunization) with a promise of \$750 million in funding. So it was never going to be a bit part actor in the vaccine movie. – <https://www.gavi.org/operating-model/gavis-partnership-model/bill-melinda-gates-foundation>

2000: In May Ralph Baric successfully constructs a 28k base pair Coronavirus from smaller fragments by reverse transcription (making DNA from RNA) He makes an infectious TGE (Transmissible Gastroenteritis Virus – which is a type of Coronavirus) clone from isolated components of the genome. He files for [US Patent 6,593,111 B2](#): *The invention is exemplified by, although not limited to, the assembly of full-length, functional coronavirus genomes.*

The present inventors have successfully assembled a full length infectious clone of transmissible gastroenteritis virus (TGE). Using a novel approach, six adjoining cDNA subclones that span the entire TGE genome were isolated. Each clone was engineered with unique flanking interconnecting junctions which dictate a precise, systematic assembly with only the correct adjacent cDNA subclones, resulting in an intact TGE cDNA construct of about approximately 28.5 Kb in length – <https://patents.justia.com/patent/6593111> .

Among other advantages, full-length infectious clones of TGE permit the precise genetic modification of the coronavirus genome – <https://patents.justia.com/patent/6593111>

2001: April 20: NIH Grant GM63228 funds Ralph Baric et al at the University of North Carolina at Chapel Hill to do Chimera research to transform the original SARS Coronavirus which was pathogenic only to animals, existing in nature as a pathogen for dogs and rabbits, to make it pathogenic to mankind targeting lung epithelial cells. The justification for this research was that it was supposedly designed as a vector virus to distribute HIV vaccines. This resulted in US patent application US28531801P

2001 May21: Ralph Baric and Boyd Yount (Assigned to University of North Carolina at Chapel Hill) file [US Patent 6,593,111 B2](#) Directional Assembly of Large Viral Genomes and Chromosomes The Patent Office search report found: Lai, Michael M.C “The making of infectious viral RNA: No size limit in sight” PNAS vol 97 No 10, May 9, 2000 pp 5025-5027 And it found: Thiel et al “Infectious RNA transcribed in vitro from a cDNA copy of human coronavirus genome cloned in vaccinia virus 92: 1273-1261 (2001)

2002: April 19: The University of North Carolina files [US patent 7279327](#) for an infectious replication defective coronavirus (to be used as a virus vector for an HIV vaccine), claiming priority from US28531801P. Inventors were: Kristopher M. Curtis, Boyd Yount, Ralph S. Baric
<https://www.webmd.com/lung/news/20030411/sars-timeline-of-outbreak>

2002 November 16: The first case of an atypical pneumonia is reported in the Guangdong province in southern China.

2003 February 25: First cases of unusual pneumonia reported in Hanoi, Vietnam.

2003 February 28: WHO officer Carlo Urbani, MD, examines an American businessman with an unknown form of pneumonia in a French hospital in Hanoi, Vietnam.

2003 March10: Urbani reports an unusual outbreak of the illness, which he calls sudden acute respiratory syndrome or SARS, to the main office of the WHO. He notes that the disease has infected an unusually high number of healthcare workers (22) at the hospital (in Hanoi, Vietnam).

2003 March11: A similar outbreak of a mysterious respiratory disease is reported among healthcare workers in Hong Kong.

2003 March15: WHO issues a heightened global health alert about the mysterious pneumonia with a case definition of SARS as after cases in Singapore and Canada are also identified. The alert includes a rare emergency travel advisory to international travellers, healthcare professionals and health authorities.

2003 March17: An international network of 11 leading laboratories is established to determine the cause of SARS and develop potential treatments.

2003 March24: CDC officials present the first evidence that a new strain of a virus most frequently associated with upper respiratory infections and the common cold in humans called the coronavirus might be likely cause of SARS.

2003 March29: Carlo Urbani, who identified the first cases of SARS, dies as a result of the disease. Researchers later suggest naming the agent that causes the disease after the infectious disease expert.

2003 April4: President George W. Bush adds SARS to the list of quarantinable diseases, which gives the CDC the authority to isolate persons who might have been exposed to the disease.

2003 April12: Canadian researchers announce they have completed the first successful sequencing of the genome of the coronavirus believed to cause SARS.

2003 April14: CDC officials announce their laboratories have sequenced a nearly identical strain of the SARS-related coronavirus. The CDC version includes an additional 15 nucleotides, which provides the important beginning of the sequence.

2003 April16: A new form of a coronavirus never before seen in humans is confirmed as the cause of SARS according to Koch's postulates, which are four specific conditions that must be met for a pathogen to be confirmed as a causal agent of disease.

2003 April 25: CDC Patent filed and ultimately becomes US 7,220,852 (the patent on the RNA sequence) and 7,776,521 (the patent on the testing methodology). These

patents give the U.S. Department of Health and Human Services the ability to control the commercial exploitation of SARS coronavirus.

2003 July2: WHO removes Toronto, Canada from its list of areas with recent local SARS transmission after 20 days passed since the last SARS case was reported and isolated.

2003 January26: Dr. Anthony [Fauci appointed](#) to the Bill and Melinda Gates Foundation's Global Grand Challenges Scientific Advisory Board (served through 2010 – when he joined their Global Vaccine Action Plan).

2006 Chinese researchers combine HCV, HIV-1, SARS-CoV-1 & SARS-CoV-2: Huang Q, Cheng Y, Guo Q, Li Q. Preparation of a Chimeric Armored RNA as a Versatile Calibrator for Multiple Virus Assays. Clinchem 2006; 52(7):1446-1448 and Supplement A.Inform1999200020022003.

2007: NSF Grant IIS-0513650 (Italy, France and Indiana University) study addresses FIRST CRITICAL STEP to control a pandemic – shutdown International Travel. Given this knowledge why did Fauci tell Trump a Travel Ban was unnecessary?

2009 April15: ModernaTX INC is incorporated in Delaware USA

2010 August 6: Moderna (prior to its establishment) files U.S. Patent 9,447,164 which attracted the investment of (and “inventorship” for) venture capitalists at Flagship Ventures. This patent grew out of the work of Dr. Jason P. Schrum of Harvard Medical School supported by National Science Foundation Grant #0434507. While the application claims priority to August 2010, the application didn't get finalized until October, 2015.

2010 September21: Wildlife Trust is [rebranded to become ECO Health Alliance](#) under the directorship of Peter Daszak.

2010: The World Health Organization (WHO), UNICEF, the National Institute of Allergy and Infectious Diseases (NIAID) and the Bill & Melinda Gates Foundation have announced a collaboration to increase coordination across the international vaccine community and create a Global Vaccine Action

Plan. <https://www.gatesfoundation.org/ideas/media-center/press-releases/2010/12/global-health-leaders-launch-decade-of-vaccines-collaboration>.

The Leadership Council is comprised of:

Dr. Margaret Chan, Director General of WHO;

Dr. Anthony S. Fauci, Director of NIAID, part of the National Institutes of Health;

Mr. Anthony Lake, Executive Director for UNICEF;

Ms. Joy Phumaphi, Chair of the International Advisory Committee and Executive Secretary, African Leaders Malaria Alliance

Dr. Tachi Yamada, President of Global Health at the Bill & Melinda Gates Foundation

2011 March9: ModernaTX (MODEfied RNA) was [registered in Massachussetts](#)

2012 September22: UK Identifies first case of MERS

2012-April2: Moderna claims priority to US201261618957P in its 5 patents cited below all of which refer to a double CGG codon Furin Cleavage site.

2013 December 16: Moderna files 4 patents referring to a double CGG codon Furin Cleavage site.

US9149506B2: Modified polynucleotides encoding septin-4 –

<https://patents.google.com/patent/US9149506B2/en>

US9216205B2: Modified polynucleotides encoding granulysin –

<https://patents.google.com/patent/US9216205B2/en>

US9255129B2: Modified polynucleotides encoding SIAH E3 ubiquitin protein ligase 1 –

<https://patents.google.com/patent/US9255129B2/en>

US9301993B2: Modified polynucleotides encoding apoptosis inducing factor 1 –

<https://patents.google.com/patent/US9301993B2/en>

2013: Baric and Chinese scientists isolate 3 coronaviruses from bats with HKU4 spike protein – unable to infect human cells. Yang Y...Baric RS, et al. Receptor usage and cell entry of bat coronavirus HKU4 provide insight into bat-to-human transmission of MERS coronavirus. PNAS 2014;111(34):12516-12521. Funded with NIH grants RO1AI089728 & R21AI109094.

2014 October 17: Obama Administration halts Gain-of-Function Research

2015 Dr. Zhengli et al “reengineered HKU4 spike aiming to build its capacity to infect human cells.” “To this end, we introduced two single mutations...mutations in these motifs in coronavirus spikes have demonstrated dramatic effects on viral entry into human cells.”

2015: Baric and Zhengli announce they can make a more dangerous, virulent and infectious virus. Two Mutations Were Critical for Bat-to-Human Transmission of Middle East Respiratory Syndrome Coronavirus (MERS). J Virol.2015;89(17):9199-9123. Funded by NIH grants RO1AI089728, RO1AI110700.

2015 July: South Korea had its last case of MERS. There were 2,494 confirmed laboratory cases and a total of 858 deaths in 27 countries; 80% of these cases came from Saudi Arabia. So the mortality rate for MERS was 34.4%. But it was not very transmissible. Infections were limited to family members, other hospital patients and health care workers who encountered MERS patients.

2016 June2: Moderna files **US9587003B2** referring to a double CGG codon Furin Cleavage site: Modified polynucleotides for the production of oncology-related proteins and peptides – <https://patents.google.com/patent/US9587003B2/en>

2017: Gain-of-Function Research Ban Lifted

2018: US Patent 7279327 for the chimeric adaption of the naturally occurring animal SARS Coronavirus to become infectious to humans targeting lung epithelial cells is transferred from University of North Carolina to the US National Institute for Health (NIH) – who funded it in the first place.

2018 March 27: Peter Daszac and the Eco Health Alliance in 2018 submitted a proposal to DARPA to do gain of function research on SARS coronaviruses to insert is furin cleavage site (such as is found in HIV1) in an optimal position into the coronavirus gene. COVID-19 has a furin cleavage site optimally positioned to infect humans. <https://theintercept.com/2021/09/23/coronavirus-research-grant-darpa/>

Let's look at the big picture: A novel SARS coronavirus emerges in Wuhan with a novel cleavage site in it. We now have evidence that, in early 2018, they had pitched inserting novel cleavage sites into novel SARS-related viruses in their lab," said Chan. "This definitely tips the scales for me. And I think it should do that for many other scientists too."

<https://www.documentcloud.org/documents/21066966-defuse-proposal> – this is the Eco health alliance DARPA funding proposal.

Oh dear. That really nails it. DARPA confirms that Peter Daszac of the Eco Health Alliance submitted a proposal on 2018March27 to add an HIV1 type furin cleavage site to SARS1. SARS CoV 2 has that furin cleavage site. In fact the double CGG codon Furin cleavage site is the main difference between Covid-19 and the Bat Coronavirus RaGT13. Fauci funded Wuhan through the Eco Health Alliance. Here is Peter Daszak admitting that he and Ralph Baric made new forms of SARS in the lab –

The [Daily Mail said](#) of this proposal – *The most alarming aspect of the research plan revealed in the documents is a plan to search viral genetic databases for new types of 'furin cleavage sites' which help a virus attack a host. According to the proposal, 'high-risk' versions of these sites, once identified, would then be grafted onto SARS-like bat coronaviruses via genetic engineering. This revelation is alarming because SARS-CoV-2, the virus which causes COVID-19, has just such a furin cleavage site, which increases its power and deadliness, but a similar feature has never been observed in other SARS-like coronaviruses in nature.*

Actually the double CGG codon Furin Cleavage site does not exist in ANY virus in nature. And this proposal nails Peter Daszak/ECO Health Alliance at the creator of SARS CoV 2 and Covid-19. Which differs from the Bat Coronavirus RaTG13 only by the insertion of double CGG Codon Furin cleavage site and by other smaller deviations all of which are 3 or less base pairs (1 codon) long –

<https://dailyexpose.uk/2022/03/17/exhaustive-proof-moderna-made-covid-19/>

2018: Zhengli presents research at Shanghai Jiao Tong University on 14 Nov. 2018 entitled “Studies on Bat Coronavirus and its cross-species infection.” This presentation has since been deleted from the University website.

2019 March 28: Moderna files their final patent application for their gene therapy mRNA-1273 (amino acid chain) Covid-19 vaccine, 6 months before the outbreak of the disease.- <https://www.modernatx.com/patents>

US 10,703,789 filed January 12 2019

US 10,702,600 filed February 28 2020

US 10,577,403 filed June 12 2019

US 10,442,756 filed December 18 2017

US 10,266,485 filed June 11 2018

US 10,064,959 filed April 21 2017

US 9,868,692 filed July 27, 2017

The 2nd patent, filed on February 28 2020 was a continuation of an earlier patent application number 16/368,270 which was filed on March 28, 2019

2019 August 7: Fort Detrick in Maryland is the center of all US bio weapons production.

On August 7th, 2019, its deadly germ research operations were abruptly shut down following serious safety violations, in particular relating to the disposal of dangerous materials – https://en.wikipedia.org/wiki/Fort_Detrick

The CDC issued a Cease and Desist to Fort Detrick on 2019 July 15. The lab put all research on hold on August 2 and

was shut down on 2019 August 7 according to Fredericknewspost.com reported by Heather Mongilio – <https://madisonarealymesupportgroup.com/2019/08/07/fort-detrick-lab-shut-down-after-failed-safety-inspection-all-research-halted-indefinitely/>

<https://www.military.com/daily-news/2019/11/24/cdc-inspection-findings-reveal-more-about-fort-detrick-research-suspension.html>

The lab reopened partially in late November 2019 and fully reopened in April 2020. The Link has now been changed, the article has been suppressed.

https://www.fredericknewspost.com/news/health/fort-detrick-lab-shut-down-after-failed-safety-inspection-all-research-halted-indefinitely/article_767f3459-59c2-510f-9067-bb215db4396d.html

Link does not work for EU people any more. It worked when it was first posted!

2019: Summer deletion of Wuhan Institute of Virology Corona Virus data bank.

2019 October: Glen Beck discovers evidence that 10 hospitals in Wuhan had Covid-19 cases – <https://100percentfedup.com/bombshell-glenn-beck-reveals-nih-and-moderna-worked-on-mrna-vaxx-together-before-pandemic/>

2019: November: University of North Carolina, Moderna and NIH began the sequencing of the 1273 amino acid spike protein vaccine a month before the outbreak officially occurred.

2019 November 12: Black and Vetch sends \$369,511 to Labyrinth Global Health in Ukraine for “ Covid-19 Research” before Covid-19 was known or named publicly..

2019: December 31 Wuhan Municipal Health Commission report discussing COVID-19 pneumonia – deleted.

2019: December 31: WHO is informed of a pneumonia type outbreak in Wuhan.

<https://odysee.com/@Corona-Ausschuss:3/Sitzung-60-Die-Zeit-ist-kein-flacher-Kreis-5-Martin>

https://www.davidmartin.world/wp-content/uploads/2021/01/The_Fauci_COVID-19_Dossier.pdf

https://www.algora.com/Algora_blog/2021/06/27/dr-peter-mccullough-whistleblowers-inside-cdc-claim-injections-have-already-killed-50000-americans

This timeline proves that before every new type of Coronavirus appeared and became a threat to the health of mankind, the nightmare team of Baric, Daszak and Zhengli funded by Fauci's NIAID and the NIH of Collins and the US government with more than 114 million dollars (see below for the breakdown), had developed the capability to make that new type of Coronavirus themselves. This is true of SARS Cov 1, of MERS and of SARS CoV 2 (Covid-19).

So it seems to the writer that Fauci's NIAID and the US Government, funded Baric and Daszak to make these bioweapons – possibly for legitimate national security reasons. But when the capability had been developed, then greed set in and a very profitable business model became visible. Furthermore a global reset political population control model also appeared. These two models were too appealing to too many powerful people. So the decisions were made to release these weapons not long after they were made. There is no question that SARS CoV 2 (causing Covid-19) is man-made, because the virus has a double CGG codon Furin Cleavage site which does not appear in any natural virus. – <https://dailyexpose.uk/2022/03/17/exhaustive-proof-moderna-made-covid-19/>

There is no candidate for its creation that is not funded by the NIAID or the NIH or the US government. So this is a US government program. Hence Biden's instruction to his intelligence services to investigate the origins of Covid-19 resulted in the obvious lie that: WE DON'T KNOW. That one conclusion, is in itself a proof that the US intelligence services are behind the pandemic. Because they do know that it was man made. Indeed every reader of the Expose knows that.

The chances of the US intelligence services being unaware of the existence of the Expose in circumstances where every Covid-19 stats department in the 5 eyes countries has responded to their articles by either stopping producing figures, or castigating department heads or changing the way figures are calculated or straight up rigging their figures, are Zero. So they are covering up. So they are guilty. Also the closure of Fort Detrick (the premier US bioweapons facility) due to a leak, in August, 2 months before the October 2019 infections in 10 hospitals in Wuhan, is far too close for comfort.

When you add to this the fact the Eugenicist Bill Gates and his foundation have been vaccine mad since 1999. You begin to see that this may not have been a legitimate national security endeavor from the start.

When you consider that Fauci's NIAID has been funding Baric since 1986, you see that these players are part of a long standing team.

When you consider how much money they have received from the US government, you see who really is managing this team.

When you consider the number of biolabs discovered in Ukraine, you see how seriously the US government takes bioweapons research.

When you consider that Moderna had all 7 of its vaccine patents filed 6 months before the outbreak of the disease, and has the double CGG codon cited in 5 of its patent applications dating from 2013, you realize that they are on the inside of this game and a part of the team (through Fauci presumably).

So we know it was man made. We know who funded its creation. We know who created it. We know who profited from it. We know who used it for political control. All that remains is to determine whether those who profited from it and funded it and sought control from it deliberately arranged for its release in order to realize those profits and that control. That is for the reader to decide.

What I will say is that the U.S. funded Biolabs were not located in Ukraine in order to target Genetic Russians in my opinion. Because first of all I do not think mankind has that capability yet (thank God). And secondly the Russians developed their own vaccines denying their market to the nightmare team above. And thirdly even if a virus could be designed which preferentially targeted some aspects of a typical Russian genome, that would constitute a war crime against every nation. Because genetic Russians do not only live in Russia and are not only Russian citizens.

They live all over the globe in large numbers in every country. Such a weapon would be a universal world war, the minute it was released. I think those labs were in Ukraine in order to further the globalist agenda. Perhaps when they released the next pathogen, they were going to blame it upon Russia, rather than upon China? Or maybe just admit the U.S. did it. Whatever the globalists think will case the most damage to the system they are trying to destroy or should I say reset, in order to build back better.

Funding for the creation of Covid-19
US Government Funding for Peter Daszak and ECO Health Alliance

Government Department	Grant Value	Period
DoD Department of Defense	\$38,949,941.00	2013-2020
HHS Health & Human Services (includes NIH and CDC)	\$13,023,168.00	2007-2020
National Science Foundation	\$2,590,418.00	2006-2020
USAID US Agency for International Development	\$2,499,147.00	2013-2016
DHS Department of Homeland Security	\$2,272,813	2016-2019
DoC Department of Commerce	\$1,241,933.00	2006-2010
USDA US Department of Agriculture	\$646,701.00	2007-2009
Dol Department of the Interior	\$267,062.00	2004-2014
Total	\$61,491,183	2004-2020

US government Funding of the Wuhan Institute of Virology

The Wuhan lab got a \$3.7 million grant from the US government approved by Obama running over 4 years from 2015 to 2019. – <https://www.snopes.com/fact-check/obama-admin-wuhan-lab-grant/>

Fauci also gave them \$3.7 million from the NIAID (National Institute of Allergy and Infectious Diseases) – In 2019, with the backing of NIAID, the National Institutes of Health committed \$3.7 million over six years for research that included some gain-of-function work. The program followed another \$3.7 million, 5-year project for collecting and studying bat coronaviruses, which ended in 2019, bringing the total to \$7.4 million. – <https://www.newsweek.com/dr-fauci-backed-controversial-wuhan-lab-millions-us-dollars-risky-coronavirus-research-1500741>

“The controversy was such that it led to a Congressional moratorium on chimeric research in the USA. At which point, Dr. Antonio Fauci diverted 3.7 Million U.S. Dollars of U.S. Taxpayer monies to the Wuhan Institute of Virology to continue the research. **Rudy Giuliani**, legal counsel to U. S. President Donald Trump, and former Mayor of New York city, recently demanded an explanation from Dr. Fauci for this transfer, which violated U.S. Laws against funding the research.

In addition to the research done at Chapel Hill, North Carolina, the specific kind of research into Coronaviruses as possible biological warfare agents, was being done at Fort Detrick, Maryland, USA, by the U. S. Army, which has a Level 3 and 4 Biowarfare Lab at the military base. This lab was cited by the U.S. Center for Disease Control and Prevention (CDC) in July, 2019 for failure to maintain proper containment standards” – <https://www.fromrome.info/tag/fort-detrick/>

NIAID and NIGMS Funding of Ralph S. Baric at the University of North Carolina Chapel Hill

2001 May1: <https://grantome.com/grant/NIH/R01-GM063228-03> \$1,007,735 over 4 years from 2001 to 2004

NIGMS (National Institute of General Medical Sciences)

Reverse Genetics with A Coronavirus Infectious Construct
Baric, Ralph S.
University of North Carolina Chapel Hill

2004 February15: <https://grantome.com/grant/NIH/R01-AI059136-01> \$1.402,316 million
over 5 years from 2004 to 2008.

Reverse Genetics
Baric, Ralph S.
University of North Carolina Chapel Hill

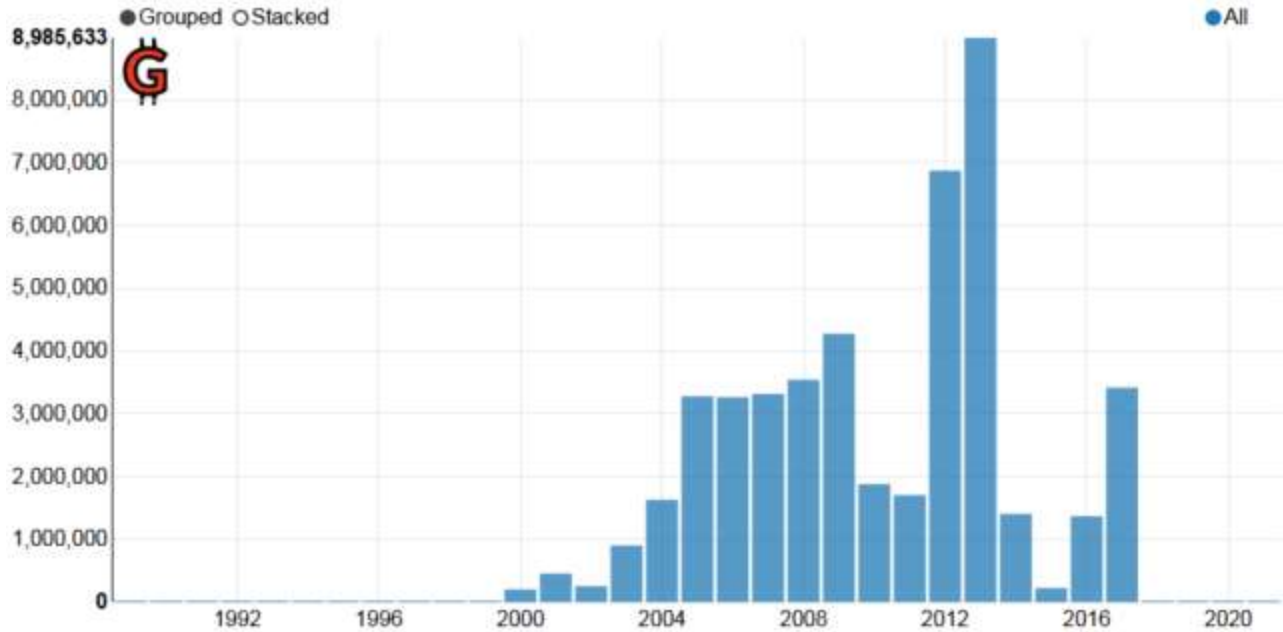
Aim 1, we will develop a full length SARS cDNA clone and compare the phenotype of rescued molecular cloned viruses with wildtype using biochemical assays and macaque challenge experiments.

Aim 2, we will develop high titer SARS single hit replicons for use as expression vectors and vaccines.

Aim 3, we will select for SARS host range mutants that replicate in murine (mouse and rat) cells, identify the mechanism of SARS cross species transmission using reverse genetic approaches and evaluate the pathogenicity of these viruses in rodents and non human primates. The goal of this application is to establish genetic control over the SARS genome and provide uniform reagents that will be used by other groups throughout the country.

2004 May15: <https://grantome.com/grant/NIH/R01-AI061819-01> \$367,042 for 2004
Remodeling SARS Coronavirus Genome Regulatory Networks
Baric, Ralph S.
University of North Carolina Chapel Hill

2005 May1: <https://grantome.com/grant/NIH/P01-AI059443-01A1> \$1,676,513 for 2005
Developing Vaccine Candidates for the SARS Coronavirus
Baric, Ralph S.
University of North Carolina Chapel Hill



Total NIAID funding for Ralph Baric at University of North Carolina was \$46,958,414. (<https://grantome.com> all grants to Baric, Ralph)

Year Grant

2000	201,232
2001	455,041
2002	253,321
2003	902,719
2004	1,628,345
2005	3,277,688
2006	3,262,315
2007	3,315,802
2008	3,539,843
2009	4,273,858
2010	1,877,793
2011	1,703,273
2012	6,871,244
2013	8,985,633
2014	1,404,641
2015	222,637
2016	1,368,161
2017	3,414,868
Total	46,958,414

Dr. David Martin – https://www.davidmartin.world/wp-content/uploads/2021/01/The_Fauci_COVID-19_Dossier.pdf (not entirely accurate)
https://21a86421-c3e0-461b-83c2-cfe4628dfadc.filesusr.com/ugd/659775_6f632cc8d75d4d8c8b90cc749262f4b4.pdf Richard Flemming (comprehensive).
www.lordswitnesses.net/downloads/Flemming.pdf Richard Flemming (comprehensive).
<https://www.webmd.com/lung/news/20030411/sars-timeline-of-outbreak> (detailed)

So the US government funded Peter Daszak's ECO Health Alliance to the tune of 61,491,183 dollars. It directly or indirectly funded the Wuhan Institute of Virology to the tune of 7.4 million dollars and the NIAID (with a million or so from the NIGMS) funded Ralph Baric to the tune of 46,958,414 dollars. This totals more than 114 million dollars in the period from 2000 to 2020 to make new Coronaviruses which are infectious to humans.

Q: What kind of a species succeeds in making the common cold more dangerous, but fails to find a cure for it?

Q: What kind of a species makes and enforces a vaccine for a disease which is more lethal than the disease itself?

A: A species whose leadership is genocidal and needs to be removed if we are to survive much longer.

Conclusion

Peter Daszak's DARPA proposal to...

Search viral genetic databases for new types of 'furin cleavage sites' which help a virus attack a host. According to the proposal, 'high-risk' versions of these sites, once identified, would then be grafted onto SARS-like bat coronaviruses via genetic engineering.

Is precisely how SARS-CoV-2 was made (essentially the double CGG codon PRRAR Furin Cleavage site was inserted into the RaTG13 Bat Coronavirus). It was man made, because nature does not have a double CGG codon furin cleavage site in any virus.

The way man-made it was to add that cleavage site as Daszak proposed. DARPA rejected his proposal quite rightly (under Trump), because it is a really dangerous thing to do as we have now all discovered. But Daszak had other sources of funding and the proposal became a reality

This is a lot more evidence and detail for Daszak's role in the creation of Covid-19 in the website <https://eco-healthalliance.org/> I do recommend looking at it. It is written by a victim of Covid-19 who has done a massive amount of research. He discloses the Daszak introduced Ralph Baric to Shi Zheng Li and postulates that Daszak orchestrated the whole show.

He reveals that Daszak was a fact checker at Facebook for a while! He represents that his father was a Nazi death camp executioner in Ukraine during WW2. The author of the site is embittered against Daszak and the site is a Daszak take down. But the passion he feels has driven him to do a lot of interesting research – which should be seen.

Ironically, the way I proved that Covid-19 was man made was to do precisely what Peter Daszak wanted DARPA to pay him to do, not for any human targeting Furin Cleavage site but for the particular embodiment of it found in SARS2 (the one that Daszak and the nightmare team eventually settled on I suspect).

When I found that no natural virus had that embodiment at all, I knew that Covid-19 was man made. Having read the DARPA proposal I believe that man was Peter Daszak, the guy who organized the [letter to the Lancet](#) from 27 scientists organized by Peter Daszak who said:

“We stand together to strongly condemn conspiracy theories suggesting that COVID-19 does not have a natural origin.”

Well, in my book they are none of them scientists. Because science is about making hypotheses from evidence and formulating theories to be tested by experimentation. It is not about strongly condemning those who follow the scientific method and slandering their efforts using derogatory language.

These 27 are now shown up for what they truly are. I challenge all 27 of them to show me a virus which occurred in nature before 2019 which has a double CGG codon Furin Cleavage site (PRRAR). If they cannot find one then retract their name from that self-condemning letter, and return to being what they were trained to be..

Allow me to explain something to the 27 of Daszak. When two scientists get together and formulate a new scientific theory by discussion, that is a conspiracy theory, a theory arising out of their ‘breathing- together’. If you ban conspiracy theories from science, then any theory which results from any meeting between scientists must be thrown out.

That would abolish most of science. Because even when a scientist by himself formulates a theory as a result of a moment of inspiration, that theory will have had seeds planted through many preceding moments of conspiracy. In short, if you condemn conspiracy theories, then you are a 21st century politician, not a scientist. You may very well be offered a nice lucrative job as a fact checker at facebook, youtube or twitter, however.

PFIZER DOCUMENTS: MODERNA’S COVID-19 VAXX CAN DAMAGE THE IMMUNE SYSTEM

Mac Slavo April 25th, 2022

Pfizer indicated in their documents that have been released that 100 micrograms of Moderna's mRNA vaccine is enough to damage a person's immune system. This is in line with the statistics and data coming out showing those who have taken these shots are suffering from immune system degradation, or VAIDS (vaccine-induced acquired immunodeficiency syndrome.)

The recent batch of Pfizer documents released by the Food and Drug Administration (FDA), found that the company actually knew the COVID "vaccine" of its fellow Big Pharma company, Moderna, can damage the immune system. In a clip from "The War Room" with Steve Bannon, Dr. Naomi Wolf explained that Pfizer knew Moderna's vaccine destroys lymphocytes or suppresses them. Lymphocytes are white blood cells or helper cells that help with immune response. But, Pfizer also knew that their shots also caused immunosuppression.

Pfizer Knew Their mRNA Injection Caused Immunosuppression or AIDS

This suppression could explain why vaccinated individuals are the ones that are getting sick and the ones who are getting infected with COVID. The internal documents showed that the trials were abandoned due to its reaction, and those who got the vaccine have had their immune systems compromised. -Natural News

Early in the vaccination phase of the scamdemic, Wolf said they have seen the data of people's immune systems clearly being damaged due to the suppression of the immune system.

Unfortunately, there is not a lot of information so far about the Moderna vaccine. After all, the documents studied were from Pfizer. So when will Moderna begin to release its documents? It's tough to say. And the answer may be never. The sad fact is that these documents prove we were lied to, that these shots aren't vaccines, and they are not doing anything positive for the human body. In fact, you'll be lucky to come away with a "net neutral" effect on the body.

Pfizer and the FDA knew that the "vaccines" were neither safe nor effective. They knew that their efficacy is waning as the immense systems of the injected started to degrade rapidly. However, they are still pushing these vaccines despite all the data. Scientific evidence proved that the vaccines have done more harm than good as people are still getting sick with COVID, and will continue to do so if the rollout of these vaccines continues.

43,898 Dead 4,190,493 Injured Following COVID-19 Vaccines in European Database of Adverse Reactions

by Brian Shilhavy Editor, Health Impact News

The European (EEA and non-EEA countries) database of suspected drug reaction reports is EudraVigilance, verified by the European Medicines Agency (EMA), and they are now reporting 43,898 fatalities, and 4,190,493 injuries following injections of five experimental COVID-19 shots.



EudraVigilance - European database of suspected adverse drug reaction reports

The European Medicines Agency publishes these data so that its stakeholders, including the general public, can access information that European regulatory authorities use to review the safety of a medicine or active substance. **Transparency** is a key guiding principle of the Agency.

**COVID-19 Vaccine Adverse Drug Reactions
43,898 DEAD**

4,190,493 Injuries Through Apr 23, 2022

COVID-19 MRNA VACCINE MODERNA (CX-024414)
COVID-19 MRNA VACCINE PFIZER-BIONTECH
COVID-19 VACCINE ASTRAZENECA (CHADOX1 NCOV-19)
COVID-19 VACCINE JANSSEN (AD26.COVS)
COVID-19 VACCINE NOVAVAX (NVX-COV2373)



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EudraVigilance

New Series on Pastor Bob's Web Page as of April 29, 2022

By admin on Thursday, 04/28/2022 - 23:23

[Covid Vaxxes Installed Marburg Payloads in Victims – Triggered by 5G](#)

What Did He Say?

I have posted the first of a series of articles dealing with the lies behind the Covid-19 Scamdemic. This is outside of the knowledge of most people, all but scientists involved in the study of human DNA. Since 2000, the world has been faced with a new virus about every 2 years. There is a reason for this and almost none of you would know why.

The most recent of advances in genetics was the Human Genome Project, an international effort spearheaded by the National of Health and the U.S. Department of Energy, its goals were to determine the full DNA base pair sequences across the twenty-three chromosome pairs and to precisely identify and map the locations of all the

genes. Launched in 1990, it was declared complete in 2003 at a cost of about \$3-billion, having identified about 20,000 protein-coding genes in the human genome.

Why is this so important to the general public? **How about the fact that Covid-19 was patented years before it was known in 2020! That is absolutely true and proven by patents issued nearly a decade ago. What did I say? Yes, Covid-19 patents were issued on this so-called “novel rogue virus” (words used by Dr. Anthony Fauci over the past three years). It was all “bovine excrement” and was hiding a global agenda to depopulate the world.**

The U.S. Patent Office does not issue patents for anything until the applicants for patents first prove their work performs as stated in its application. It can take years before a patent is issued to the applicants. What this means is simply Covid-19 was known years ago. Dr. David Martin CEO of M:CAM was tracking the Covid-19 virus as far back as 2000, and has compiled a complete history of four-thousand patents issued on Covid. The proof is in the patents and there is nothing novel or rogue about it!

My article noted above follows an interview conducted with Mike Adams, the Health Ranger’s interview with Jeffrey Prather and Todd Callender, JD, and you can listen to that interview at the link below:

[CLAIM: Covid vaccines installed Marburg “payloads” in human victims; 5G broadcast signal will activate the bioweapon, unleashing the next raging pandemic](#)

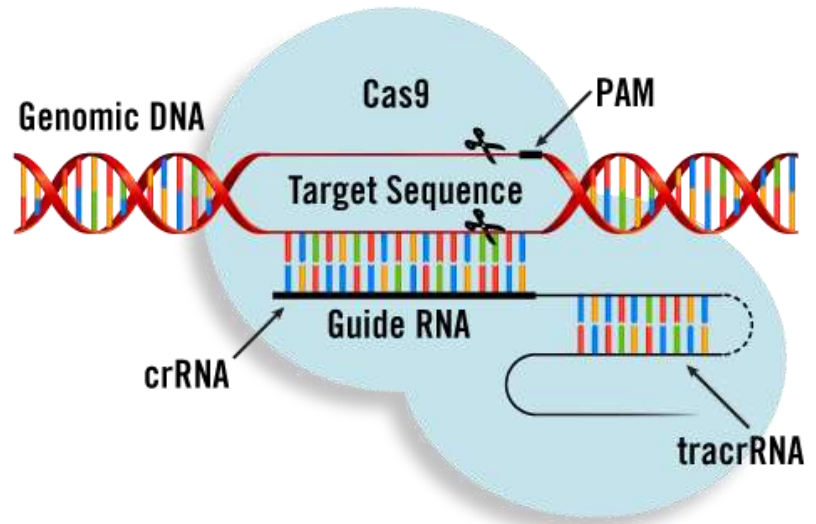
By admin on Tue, 04/26/2022 - 01:11

**There is no virus Covid-19
But there is a “bioweapon” Covid-19**

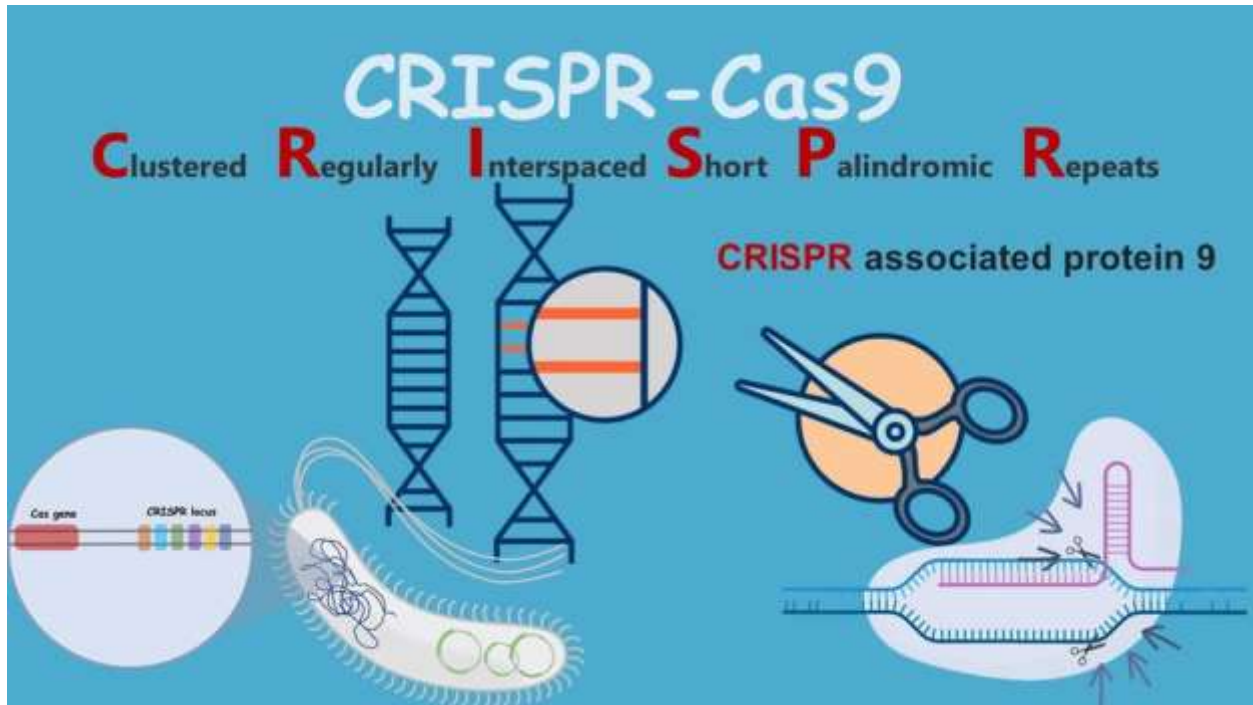
This is all about murder by State sanctioned Syringe Needle poison!

On page 14 of the above article [click on the title just above beginning with the word “CLAIM”] you will see a picture of the biochemist who discovered the technology known as CRISPR-Cas9 being presented a plaque by Jacob Rothschild at an awards presentation at the Academy of Achievement. Not to forget, one of the patent holders on Covid-19 is one Richard Rothschild. CRISPR-Cas9 is a method of gene editing DNA. It uses a process of “cut-and-paste” to snip out

and replace or insert to the DNA of life. It can be achieved with precision, speed and is inexpensive in the process. It is being used in experimental research with Lupus, Sickle Cell Anemia, Huntingdon's Disease, as example. The "gene" editing uses wireless energy to open up the DNA target sequence where defective DNA is cut out and new DNA is inserted. **What the public does not understand is that It can be used for good and for evil purposes as well.**



Above photo of CRISPR-Cas9 instrument to edit DNA genetic material



CRISPR-Cas9 “can” be used to insert a bioweapon for the purpose of doing harm as well. The word “can” is inappropriate since it has been used to create quite a few bioweapons since first discovered. We can only surmise how widely it has been used for this purpose throughout the world. It was first used in 2014. A few weeks ago the CCP of China “locked down” the city of Shanghai with 11.1-million residents and has been in a lock down for the past four weeks due to an outbreak of Covid-19.

China has been targeted to take the blame for the Wuhan Coronavirus that was renamed Covid-19. The CCP are known for their secrecy and that is being played up in blaming China for the bioweapon release. CRISPR-Cas9 technology has been used to attack ethnic and race-based DNA groups.

China’s crackdown on Covid infections has reached levels so bizarre I have to ask the question: Are their lockdowns really about Covid, or are they hiding something else?

The death rate of Covid in China is impossible to calculate accurately because they have never released proper data that can be confirmed. However, almost everywhere else in the world we see a median

infection fatality rate of 0.27% for Covid; meaning, over 99.7% of people in the world on average have nothing to fear in terms of dying from the virus. But in China, the CCP is acting as if they are dealing with the Black Plague. Why? Perhaps the CCP has realized that they have been as the sucker in this game of CRISPR-Cas9!

There will be much more information in my new series but the point to take away for now is that Covid-19 was a bioweapon to frighten people into taking a so-called vaccine which is really “gene” therapy and the ingredients include or contain a delayed detonation of a more lethal pathogen which will be Marburg virus or Ebola, a cousin to Marburg! The lethality of these two viruses can be as high as 90% of those infected. Aerosol spraying via Chem-Trails and 5G wireless energy round out the plan to murder millions without public awareness of what will happen to them.

1.2 Million Reports of Injuries After COVID Vaccines, VAERS Data Show

VAERS data released Friday by the Centers for Disease Control and Prevention included a total of **1,247,131 reports of adverse events** from all age groups following COVID-19 vaccines, including **27,532 deaths** and **224,766 serious injuries** between Dec. 14, 2020, and April 22, 2022.

By [Megan Redshaw](#)

The Centers for Disease Control and Prevention (CDC) today released new data showing a total of [1,247,131 reports of adverse events](#) following COVID-19 vaccines were submitted between Dec. 14, 2020, and April 22, 2022, to the Vaccine Adverse Event Reporting System (VAERS). VAERS is the primary government-funded system for reporting adverse vaccine reactions in the U.S.

The data included a total of [27,532 reports of deaths](#) — an increase of 183 over the previous week — and [224,766 serious injuries](#), including deaths, during the same time period — up 1,930 compared with the previous week.

Excluding “[foreign reports](#)” to VAERS, [810,171 adverse events](#), including [12,672 deaths](#) and [80,743 serious injuries](#), were reported in the U.S. between Dec. 14, 2020, and April 22, 2022.

[Foreign reports](#) are reports foreign subsidiaries send to U.S. vaccine manufacturers. Under U.S. Food and Drug Administration (FDA) regulations, if a manufacturer is notified of a foreign case report that describes an event that is both serious and does

not appear on the product’s labeling, the manufacturer is required to submit the report to VAERS.

Of the 12,672 U.S. [deaths reported](#) as of April 22, 16% occurred within 24 hours of vaccination, 20% occurred within 48 hours of vaccination and 59% occurred in people who experienced an [onset of symptoms](#) within 48 hours of being vaccinated.

In the U.S., 572 million COVID-19 vaccine doses had been administered as of April 23, [including](#) 338 million doses of Pfizer, 215 million doses of Moderna and 19 million doses of Johnson & Johnson (J&J).

National Vaccine Information Center
Your Health. Your Family. Your Choice.

Search Results

From the 4/22/2022 release of VAERS data:

Found 1,247,131 cases where Vaccine is COVID19

[Government Disclaimer on use of this data](#)

Event Outcome	Count	Percent
Death	27,532	2.21%
Permanent Disability	51,183	4.1%
Office Visit	189,906	15.23%
Emergency Room	119	0.01%
Emergency Doctor/Room	128,016	10.26%
Hospitalized	152,574	12.23%
Hospitalized, Prolonged	372	0.03%
Recovered	337,807	27.09%
Birth Defect	1,055	0.08%
Life Threatening	30,747	2.47%
Not Serious	561,932	45.06%
TOTAL	† 1,481,223	† 118.77%

† 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 1247131 (the number of cases found), and the Total Percentage is greater than 100.

Every Friday, [VAERS](#) publishes vaccine injury reports received as of a specified 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](#).

U.S. VAERS data from Dec. 14, 2020, to April 22, 2022, for 5- to 11-year-olds show:

- [10,348 adverse events](#), including [256 rated as serious](#) and [5 reported deaths](#).
- [19 reports](#) of myocarditis and pericarditis (heart inflammation). The CDC uses a [narrowed case definition](#) of “myocarditis,” which [excludes cases](#) of cardiac arrest, [ischemic strokes](#) and deaths due to heart problems

that occur before one has the chance to go to the emergency department. The Defender has noticed over previous weeks that several reports of myocarditis and pericarditis have been removed by the CDC from the VAERS system in this age group. No explanation was provided.

- [42 reports](#) of blood clotting disorders.

U.S. VAERS data from Dec. 14, 2020, to April 22, 2022, for 12- to 17-year-olds show:

- [31,455 adverse events](#), including [1,803 rated as serious](#) and **deaths**. The most recent reported death involves a 14-year-old girl from Tennessee (VAERS I.D. [2238618](#)) who died after receiving her second dose of Pfizer's COVID-19 vaccine. According to the VAERS report, the girl had a previous history of cancer but was hospitalized 29 days after receiving her second dose of Pfizer with severe COVID-19 and COVID pneumonia. She became "critically ill," developed respiratory failure and bradycardia and later died.
- [65 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](#).
- [649 reports](#) of myocarditis and pericarditis — two fewer than last week — with [637 cases](#) attributed to Pfizer's vaccine.
- [165 reports](#) of blood clotting disorders — 1 fewer than last week — with all cases attributed to Pfizer.

U.S. VAERS data from Dec. 14, 2020, to April 22, 2022, for all age groups combined, show:

- **20% 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 the gender of the deceased.
- The [average age](#) of death was **73**.
- As of April 22, [5,460 pregnant women](#) reported adverse events related to COVID-19 vaccines, including 1,709 reports of [miscarriage or premature birth](#).
- Of the [3,630 cases of Bell's Palsy](#) reported — three fewer than last week — 51% were attributed to [Pfizer](#) vaccinations, 40% to [Moderna](#) and 8% to [J&J](#).
- 870 reports of [Guillain-Barré syndrome](#), with 42% of cases [attributed to Pfizer](#), 30% to [Moderna](#) and 28% to [J&J](#).
- [2,343 reports](#) of anaphylaxis — 12 fewer reports than last week — where the reaction was life-threatening, required treatment or resulted in death.
- [1,678 reports](#) of **myocardial infarction**.
- [13,826 reports](#) of blood-clotting disorders in the U.S. Of those, [6,199 reports](#) were attributed to Pfizer, [4,925 reports](#) to Moderna and [2,661 reports](#) to J&J.
- [4,152 cases](#) of myocarditis and pericarditis with [2,544 cases](#) attributed to Pfizer's, [1,415 cases](#) to Moderna's and [181 cases](#) to J&J's COVID-19 vaccine.

FDA to meet in June on COVID-19 vaccines for babies, toddlers

The FDA [will meet](#) in June — either June 8, 21 or 22 — to discuss COVID-19 vaccines for children under age 6. The agency’s vaccine advisory committee during its June meeting will also discuss [Novavax’s](#) request for Emergency Use Authorization (EUA) of its COVID-19 vaccine for adults.

Moderna on Thursday asked the FDA to [authorize its COVID-19 vaccine](#) for emergency use for children ages 6 months to 6 years.

The company conducted separate trials for two versions of the vaccine, one for infants and toddlers 6 months to 2 years, and one for children 2 to 6 years old.

The company claimed data showed “a robust neutralizing antibody response” and “a favorable safety profile.” But experts say Moderna is not providing the data needed to calculate the risk-benefit of its COVID vaccine.

Moderna’s [KidCOVE study](#) cited in Thursday’s press release shows the Moderna shot failed to meet the FDA’s minimum efficacy requirements for EUA in the 2- to under-6 age group, and barely surpassed the agency’s [50% efficacy requirement](#) in the 6-month to 2-year age group after the vaccine maker changed its analysis of the study to meet the threshold.

[It's Time to Follow the Science. Join our Campaign!](#)

In the younger age group, Moderna said the effectiveness of its vaccine was 51%. In the older age group, vaccine efficacy was only 37% — substantially lower than the FDA’s requirement. These are different efficacy numbers than those the company reported last month.

Pfizer is expected to file its application in May for a [three-shot vaccination](#) using smaller individual doses for children under 5.

Lawmakers push FDA on COVID-19 shots for youngest age groups

Moderna’s announcement followed just days after the House Select Subcommittee on Coronavirus Crisis [asked the FDA](#) for a status update on COVID-19 vaccines for children under 5 over concerns “millions of young children still remain unprotected because no vaccine has yet been authorized” for this age group.

A top FDA official on Tuesday [told The New York Times](#) the agency has not cleared a COVID-19 vaccine for the youngest age group because Pfizer and Moderna have not finished their applications for authorization.

The agency [said](#) last week it is considering holding off on reviewing Moderna’s request to authorize its COVID-19 vaccine for children under 5 until it has data from Pfizer and BioNTech on their vaccine for children, pushing the earliest possible authorization of a vaccine from May to June.

The FDA said it would be simpler and less confusing to [simultaneously authorize](#) and promote two vaccines to the public, rather than green-lighting one on a faster timetable and the other down the road.

Agency officials were worried about authorizing Moderna's vaccine only to find out just a few weeks later that Pfizer's offered better protection.

Pfizer requests EUA for booster dose for 5- to 11-year-olds

Pfizer and BioNTech on Tuesday [announced](#) they applied for EUA of a COVID-19 booster dose for children ages 5 to 11. In a [press release](#), Pfizer cited data from its Phase 2/3 trial that claimed a third dose produced a "strong immune response" in the younger age group when administered six months after the second dose.

The data was based on a small study involving only 140 children 5 through 11 years old who received a booster dose six months after the second dose of Pfizer-BioNTech's COVID vaccine as part of the primary series.

Pfizer said 30 children who participated in the study revealed a 36-fold increase in virus-fighting antibodies — levels high enough to fight the [Omicron](#) variant, which is currently not the dominant variant in the U.S.

Experts [told The Defender](#) the *"clinical trial used to support the notion of a COVID-19 booster for 5- to 11-year-olds is entirely inadequate to make any such recommendation."*

Denmark suspends COVID-19 vaccine campaign

Denmark on Tuesday [became](#) the first country to suspend its national COVID-19 vaccine campaign after health officials said the pandemic is under control there.

Bolette Soborg, director of the Danish Health Authority's department of infectious diseases, said Denmark is "winding down" the mass vaccination program, and invitations for vaccinations would no longer be issued after May 15.

Public health authorities cited several factors contributing to the decision to end the national vaccination campaign. These include a decline in the number of newly reported infections, stabilized hospitalization rates and an overall high level of vaccination.

Denmark plans to reopen the vaccination program in the fall, which will be preceded by a thorough professional assessment of who and when to vaccinate, and with which vaccines.

The decision comes just a few months after Denmark eliminated all COVID-19-related restrictions, becoming the first European Union member state to do so.

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

U.S. Department of Defense awarded a contract for 'COVID-19 Research' in Ukraine 3 months before Covid was known to even exist

BY THE EXPOSÉ ON APRIL 13, 2022

The world first started to hear about a novel coronavirus in early January 2020, with reports of an alleged new pneumonia like illness spreading across Wuhan, China. However, the world did not actually know of Covid-19 until February 2020, because it was not until the 11th of that month that the World Health Organization officially named the novel coronavirus disease as Covid-19.

So with this being the official truth, why does United States Government data show that the U.S. Department of Defense (DOD) awarded a contract on the 12th November 2019 to Labyrinth Global Health INC. for 'COVID-19 Research', at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19?

The shocking findings however, do not end there. The contract awarded in November 2019 for 'COVID-19 Research' was not only instructed to take place in Ukraine, it was in fact part of a much larger contract for a 'Biological threat reduction program in Ukraine'. Perhaps explaining why Labyrinth Global Health has been collaborating with Peter Daszak's EcoHealth Alliance, and Ernest Wolfe's Metabiota since its formation in 2017. The Government of the United States has a website called '[USA Spending](#)', an official open data source of federal spending information. According to the site as of 12th April 2021 the US Government has spent a mind-blowing \$3.63 trillion "in response to COVID-19". But that's not the only information on Covid that can be found within the site.

Hidden within the 'Award Search' are details on a contract awarded by the Department of Defense to a company named '[Black & Veatch Special Projects Corp](#)', which is allegedly "a global engineering, procurement, consulting and construction company specializing in infrastructure development".

The contract was awarded on September 20th, 2012 and is described as "Professional, Scientific, and Technical Services". Obviously this is very vague and most likely of little interest to anyone who happens to stumble across it. But there is something contained deep within the details that should be of interest to anyone and everyone.

The 'Award History' for the contract contains a tab for 'Sub-Awards' detailing the recipients, action date, amount, and very brief description for 115 Sub-Award transactions. Most of the Sub-Awards are extremely mundane for things such as "laboratory equipment for Kyiv", or "office furniture for Kyiv".

But there is one Sub-Award that stands out among the rest, and it is awarded to Labyrinth Global Health INC for "SME Manuscript Documentation and COVID-19 Research".

An award for Covid-19 research isn't exactly shocking when the world is allegedly in the grip of a Covid-19 pandemic, but considering the fact the sub-contract was awarded 12th November 2019, at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19, the award for Covid-19 research should come as a shock to everyone.

But the shock doesn't end there, because the place the contract for Covid-19 research was instructed to take place was Ukraine, as was the entire contract awarded by the DOD to [Black & Veatch Special Projects Corp.](#)

The contract details found on the 'USA Spending' site actually reveal that the specific DOD department that awarded the contract was the Defense Threat Reduction Agency (DTRA). The contract was awarded 20th September 2012, and concluded on 13th October 2020.

Whilst the details are vague, the US Government site also reveals that \$21.7 million of the \$116.6 million contract was spent on a 'Biological threat reduction program in Ukraine'.

Why did the Department of Defense pay a company that is allegedly "a global engineering, procurement, consulting and construction company specializing in infrastructure development", to help implement a "Biological threat reduction program in Ukraine"?

And why did both the DOD and said company then pay Labyrinth Global Health INC to carry out COVID-19 research in Ukraine at least one month before the alleged emergence of the novel coronavirus, and three months before it was officially dubbed Covid-19?

Founded in 2017, [Labyrinth Global Health](#) is allegedly a "women-owned small business with deep expertise and a proven track record supporting initiatives for scientific and medical advancement."

They describe themselves as "a multicultural and international organization with offices in four countries and a team of experts with diverse backgrounds and competencies, including microbiology, virology, global health, emerging infectious disease nursing, medical anthropology, field epidemiology, clinical research, and health information systems."

One of those offices just happens to be located in Kyiv, Ukraine, which the company dubs "a gateway to Eastern Europe".

Putting the bio labs in Ukraine to one side for now, let's return to the subject of Covid-19. If the US Government was funding Covid-19 research before Covid-19 was publicly known to exist then this suggests they either knew Covid-19 existed naturally, or they were involved in constructing this virus in a lab.

But if the contract evidence isn't enough for you to come to this conclusion (it should be), then perhaps coupling it with evidence that the U.S. National Institute of Allergy & Infectious Diseases' (NIAID), and Moderna had a coronavirus candidate in December 2019 will be.

A confidentially agreement which can be viewed here, states that providers 'Moderna' alongside the 'National Institute of Allergy and Infectious Diseases' (NIAID) agreed to transfer 'mRNA coronavirus vaccine candidates' developed and jointly-owned by NIAID and Moderna to recipients 'The University of North Carolina at Chapel Hill' on the 12th December 2019.



World governments have launched a silent war upon their own people, using quiet weapons, lies and propaganda. The mainstream media is enabling this deception and genocide. Our mission in this war it to bring you the truth.

VAX ETHNIC CLEANSING: HHS Secretary Xavier Becerra confirms vaccines are KILLING BLACKS and LATINOS at “two times the rate of white Americans”

Tuesday, April 19, 2022 by: Mike Adams

[\(Natural News\)](#) We now have an on-the-record statement from HHS Secretary Xavier Becerra saying, *“We know that vaccines are killing people of color... blacks, Latinos, indigenous people, at about two times the rate of white Americans.”*

He did not stutter.

He confirmed what we’ve been warning about since day one of the vaccine depopulation drive: People of Color are being killed by covid “vaccines” at a much higher rate than Whites.



You can hear him say this in the first few seconds of this TimTruth.com compilation video that also features Jen Psaki admitting it’s all a “plandemic.”

Put another way, the experimental gene therapy injections called “vaccines” are depopulation weapons targeting all of humanity, but they disproportionately kill far more Blacks and Latinos on a per-capita basis.

Vitamin D deficiency is the single greatest factor

The reason for this is obvious: Chronic vitamin D deficiency. People of Color are rarely told that their skin pigmentation blocks sunlight-activated vitamin D synthesis in their own skin, so they live out their lives unaware of their desperate need for vitamin D supplementation.

Without adequate vitamin D, they are at far higher risk of cancer, diabetes, bone disorders (such as rickets) and even heart and cardiovascular problems. Importantly, vitamin D deficiency is strongly linked with covid mortality, and since covid “vaccines” turn the body into a spike protein bioweapons factory, the lack of vitamin D only exacerbates the death risk.

That’s why more People of Color are dying after taking the clot shot.

No one in government bothers to tell Blacks and Latinos about all this because the longstanding goal of the U.S. government has been to achieve global ethnic cleansing to eliminate People of Color while pretending to celebrate them.

Back in the 1970s, for example, Richard Nixon’s science advisor [proposed tainting America’s food exports](#) to Africa with infertility chemicals. In the decades since, depopulation efforts have focused on abortion (targeting Black neighborhoods), deadly cancer treatments targeting Blacks, infertility chemicals in vaccines for African nations (such as Kenya), the water supply poisoning of Blacks with heavy metals, and the deliberate malnutrition of Blacks in America through numerous government programs such as the SNAP (food stamp) system that pays for processed junk food. (The program enriches junk food retailers and junk food corporations while giving black Americans cancer, diabetes, heart disease, obesity and more.)

In truth, the clot shot is just the latest round in the genocidal effort to exterminate Blacks in America and around the world. Sadly, far too many black people in America continue to support the very government that’s trying to exterminate them, although more and more Blacks are getting red pillled and coming to realize the truth about all this.

The Science Agenda to Exterminate Blacks

In 2017 — more than two years before COVID — I released a shocking documentary, *“The Science Agenda to Exterminate Blacks.”* The documentary was widely shared until YouTube banished it, once again proving that Big Tech will keep Blacks in the dark about any form of genocide targeting Blacks.

Google wants to see black people exterminated, in other words, and they aren’t afraid to censor truthful, fact-based documentaries that try to save lives. Thanks to many users, there are now multiple copies of this documentary uploaded to Brighteon.com and other

alternative video platforms. Feel free to re-post on Rumble, Bitchute, Gab or other platforms:

[Brighteon.com/00000000-0000-0000-0005-827974413001](https://www.brighteon.com/00000000-0000-0000-0005-827974413001)

Learn the full truth and spread the word

The human race has been targeted for termination, and the depopulation globalists are prioritizing certain races and ethnic groups for rapid extermination. In other words, we're all in the cross hairs, but they desperately want black and brown people to be eliminated as quickly as possible.

Could it be because Latinos, for example, are hard workers who are now turning against Biden and the Democrats because they see the devastating consequences of inflation and money printing? Joe Biden's approval among Latinos in America is now at 29% and dropping.

Or could some of the reason be because of the \$168.8 trillion in unfunded liabilities that the US government owes the American people over time? ([USdebtclock.org](https://www.usdebtclock.org)) The only way for the US government to remain solvent is to eliminate those liabilities, which means eliminating the people who are scheduled to collect those benefits (social security, Medicare, pensions, etc.).

Now, we are living under governments around the world which are actively plotting to mass murder their own citizens using a variety of vectors:

- Depopulation biological weapons disguised as "vaccines"
- Engineered mass famine and starvation
- Widespread contamination of the food supply with heavy metals, plastics and pesticides
- The destruction of families by pushing LGBT agendas in public schools and pop culture
- Defunding the police, allowing violence to take over many inner cities, turning them into deadly war zones (Chicago, anyone?)
- Promoting late-term and even post-birth abortions in order to literally murder black babies after they're born
- Withholding lifesaving information from Blacks (about vitamin D and similar topics) through coordinated Big Tech censorship and the de-platforming of individuals who are trying to sound the alarm

In today's Situation Update podcast, I discuss all these topics and more, revealing the heavily censored truth about the real government agenda to exterminate Blacks in America and around the world:

[Brighteon.com/a249c478-cc80-46ed-804b-448aec6fd3c6](https://www.brighteon.com/a249c478-cc80-46ed-804b-448aec6fd3c6)

Pfizer documents reek of FRAUD; Big Pharma liability shield starts to unravel

NaturalNews.com / Mary Villareal

(Natural News) Recently released Pfizer documents show that its Wuhan coronavirus (COVID-19) vaccine can cause systemic damage to the body. This is likely the reason why the pharma giant, through the *Food and Drug Administration* (FDA), previously asked a judge to keep the data from the public for as long as possible – around 55 years, to be more precise.

In the April 1 episode of “The Ben Armstrong Show,” the host talked about the Pfizer document dump. With over 55,000 pages of data to be dumped in April, a team has been assembled to go through parts of the massive document.

Pfizer obviously doesn’t want the public to know just how dangerous the COVID-19 vaccine is, and that the company has committed fraud by saying it is safe and effective. Unfortunately, also involved in the scheme are the government, the FDA, the *Centers for Disease Control and Prevention* and several media companies. (Related: FDA should need only ‘12 weeks’ to release Pfizer data, not 75 years, plaintiff calculates.)

Pfizer and Moderna know from their studies how dangerous the vaccines are, and if independent researchers will ever prove fraud, they will lose their liability protection and people will be allowed to sue them.

When the FDA granted Pfizer the full approval for their vaccine in 2021, there are already known side effects. But there is no way to sue the drug manufacturer for vaccine injury.

“If it could be proven that Pfizer’s data shows increased all-cause mortality and that the company hid this to encourage people to take the vaccine, then there is an existence of fraud,” said former Blackrock executive and investment adviser Edward Dowd. All the protections Big Pharma is enjoying at the moment will be gone.

This is why Pfizer wants to keep its documents away from the public’s eye for as long as possible. “If you didn’t do anything wrong, you wouldn’t care if people looked at your stuff, that you know is supposed to be public record in the first place,” Armstrong said.

Armstrong also showed an interview with Dr. Naomi Wolf, whose team found how dangerous the COVID vaccines are. Wolf indicated that authorities are using these vaccines to experiment on people and use them as lab rats. She said these are not vaccines at all. According to Wolf, the mRNA injections made by Pfizer and Moderna manipulate genes – making them a form of gene therapy rather than a vaccine.

Pfizer’s efforts to conceal data indicate fraud in itself. Meanwhile, Dowd considers Pfizer’s attempt to conceal data that shows the actual risks of its COVID-19 vaccine as

an obvious evidence of fraud. He pointed out the Herculean efforts of Pfizer in withholding its data despite legal challenges to release it.

“Many reports have also shown that there had been more deaths in the vaccinated compared to the unvaccinated. FDA’s backing of Pfizer in its initial refusal to release the data is an attempt to conceal vaccine deaths”, Dowd said.

“Pfizer got blanket immunity with EUA [emergency use authorization]. If there is fraud and it comes out, fraud eviscerates all contracts – that’s case law,” Dowd noted. (Related: [Whistleblower: Pfizer FORGED signatures of trial participants, falsified and fabricated trial data.](#))

Another whistleblower, Dr. Jessica Rose, also obtained information from the Pfizer document dump, which shows that toxic fats have been used in the vaccine and are causing problems in people. These toxic fats apparently go to the organs.

Follow [Vaccines.news](#) for more news about Pfizer’s COVID-19 vaccine documents. Watch the April 1st episode of “The Ben Armstrong Show” to know more about [Pfizer documents showing that the company’s COVID-19 vaccine can cause system damage to the body.](#)

This video is from [The New American channel on Brighteon.com.](#)

More related stories:

[Court REJECTS FDA request to hide Pfizer data for 75 years.](#)

[Children’s Health Defense to sue FDA over fraudulent Pfizer covid vaccine “approval”.](#)

[Former Pfizer employee flags FDA study, warns that Pfizer vaccine increases COVID by over 300%.](#)

[COVID vaccine injury reports jump by 27,000 in one week, FDA pulls ‘bait and switch’ with Pfizer vaccine approval.](#)

[Whistleblower: Pfizer vaccine trial data was falsified, participants who experienced adverse effects were ignored.](#)

The Many Ways The Spike Protein Annihilates Human Life

The Spike Protein Is What The 'Vaccine' Is Supposed To Make In Your Body...The Spike Protein Is One Of The Most Contrived Toxins Or Poisons That Man Has Ever Made...And The Aim Of This Toxin Is To KILL Billions Without Anyone Noticing It.' - Dr. Shankara Chetty

The diabolical pathways the spike protein uses to destroy the human body are many. As Dr. Chetty makes clear, there has never been anything more deadly in human

history than the spike protein. Below are just some of the methods its creators built into it to make 100% certain billions will die. The techniques the spike protein uses are often referred to as 'cascades'. Whatever term you use, from avalanche to tsunami, once the spike protein has entered your body it is just a matter of time for it to do its demonic work...

AIDS - Total Immunological Collapse And Failure
...This includes widespread auto-immune diseases

Explosion Of Cancer In The Body
...Cancers of all types, including reactivated and brand new cancers...even cancers never seen before

Sterilization
...Destruction of male and female reproductive organs and system

Clotting And Hemorrhaging
...Clotting from the spike protein is abnormal and resistant to degradation

Systemic Fibrosis
...Extensive scarring throughout the entire body

Neuro Degenerative Diseases
...Prions (CJD), Amyloid Deposits (Alzheimers, Parkinsons, ALS, etc.)

Cytokine Storm And ADE (Antibody Dependent Enhancement)
...Hypersensitivity to the Spike Protein

The creators of this "Gene Therapy" are likely to have known the harm the "Spike Protein" would do over time. With more than two years to document the results of the Vaxx since administering the first shots in December of 2020, the VAERS reporting system has documented 1.2+ million adverse reactions among the population.

In the late summer of 2020, Dr. Sherri Tenpenny and Dr. Carrie Madej were calling out those pushing the new "*Gene Therapy*". It was known that from early animal test studies the animals all died from this experimental treatment and the animal studies were abruptly canceled. The accumulating evidence to date leaves one to conclude that his experiment was criminal and that responsible need to be indicted and prosecuted for criminal negligence, manslaughter, and pre-meditated murder.

Blackrock's Edward Dowd Tells Steve Bannon: "Millennials experienced a Vietnam War in the second half of 2021"

The millennial generation experienced 61,000 excess deaths in the second half of 2021.

CDC data shows the Millennial generation suffered a [“Vietnam War event,”](#) with more than 61,000 excess deaths in that age group in the second half of 2021, according to an analysis by a former Wall Street executive who made a career of crunching numbers at BlackRock.

Millennials, about ages 25 to 40, experienced an 84% increase in excess mortality in the fall, he said, describing it as the [“worst-ever excess mortality, I think, in history.”](#) It was the highest increase in excess deaths of any age group last year, seven times higher than the Silent Generation, those who are older than 85.

The increase coincided with the vaccine mandates and the approval of the booster shots.

He said the insurance expert with whom he worked is presenting the data to a financial group and will reveal his identity. [“If you’re on Wall Street and you still think Pfizer and Moderna are good buys, I’ve got news for you: There’s some catalysts coming that are probably not going to be good for holding those stocks.”](#) he said.

Dowd said he also had examined the Pfizer clinical trial data provided by whistleblower Brook Jackson, concluding it, and the fact that Pfizer has tried to hide it, point to “clinical fraud.”

He also posted tables showing excess mortality for Gen X — about age 41 to 56 — since August 2021 was 101,000. The Baby Boomers saw 306,000 excess deaths during the same period.

Watch:

- [Edward Dowd Explains How Thousands Of People Have Died From COVID Vaccines \(rumble.com\)](#)
- [Edward Dowd on Future Recession, Shocking Findings in the CDC Covid Data, and Democide \(rumble.com\)](#)

Insane news item #1: US government to cede control to WHO for future pandemics. This is not a joke.

OK, now the insane news. The U.S. government is about to hand over the keys to the pandemic response to the goofballs at the WHO. The WHO, as we all remember, did not spend a dime on the fastest, safest, and cheapest way to end the pandemic: using repurposed drugs. Even today, they can’t seem to figure out that there are dozens of proven early treatment protocols that save lives. They are corrupt. So why would world governments want to give them the power to exclusively coordinate the pandemic response for the next pandemic?

The bad news: this will soon be a done deal.
Thanks to Mike Yeadon for alerting me to this.

Here's Mike's message to me (excerpt):

Steve,

I've heard about this from half a dozen sources & I'm sorry to say that the concerns expressed are wholly justified.

It's a mad idea, but since certain individuals & nations have pretty much taken over the WHO, *I think it's a certainty that, if this new treaty gets signed, within a few years at most, a "public health emergency of International concern" will be declared, and all currently sovereign nations will become controlled subsidiaries of WHO.*

No government should even have the power to throw their country over to a third party. If that happened, they'd never give it back.

U.K. parliament signed up to emergency powers on the occasion of the first lockdown over two years ago. That temporary bill has never been repealed. We have no rights whatsoever if they decide we don't. This is the main reason we emigrated.

Here's the best practical reason *not* to sign such a treaty, aside from its anti-democratic central problem:

Imagine there's a new pathogen spreading across the world. Nobody, anywhere, knows what the best response should be. By definition it's not known.

History teaches us that we alight most rapidly upon probable best courses of action, not from modeling, but from empirical evidence. Running a large number of experiments, based on the smartest public health, medical & scientific brains, will quickly tell us what kinds of responses are helpful & which are not. Maintaining very good communication makes sure lessons learned are shared quickly.

The worst conceivable response would be to place the decision making power in the hands of a single body. They'll likely run one experiment. We'll never learn the counterfactual.

On this basis, I don't even understand why anyone would fall for the idiotic notion that letting WHO have the controls would be a great idea. Even if they were honest & competent.

Please let me know if I can help in any way.

Best wishes

Mike

Here's the amazing substack article that describes what is going on. You won't find this anywhere in the mainstream media. It's a long article, but really well done.

James Roguski

[WAKE UP and Smell the Burning of Our Constitution](#)

This is the fourth article in this series. Pandemic Treaty The People's Treaty Speaking Truth To Power WAKE UP and Smell the Burning of Our Constitution Abolish the WHO Pandemic Mitigation Project...

[Read more](#) (Click on to the left)!

This is very alarming. Our government has sold the American public out to the World Health Organization.

The very enzyme that is associated with increased Covid-19 mortality is blocked by an ANTI-VENOM compound

04/13/2022 / By Lance D Johnson



The *American Society for Clinical Investigation* published research investigating the biochemical properties of plasma taken from deceased covid-19 patients. The team of researchers wanted to “identify the cellular and molecular mechanisms responsible for severe COVID-19 that led to death.” Patients with severe covid-19 showed mitochondrial dysfunction and elevated metabolites [associated with secreted phospholipase A2 \(sPLA2\) activity](#). This is the same enzyme that is elevated after a venomous snake bite. Could this increase in sPLA2 be the body's natural reaction to

infection, or could it be an indicator that the body is infected/poisoned by something more nefarious — perhaps venomous particles?

“Deceased COVID-19 patients had higher levels of circulating, catalytically active sPLA2 group IIA (sPLA2-IIA), with a median value that was 9.6-fold higher than that for patients with mild disease and 5.0-fold higher than the median value for survivors of severe COVID-19,” the study authors wrote.

Anti-venom compound being studied to help patients with severe covid-19 disease

According to years of biochemical research, a broad-spectrum ANTI-VENOM compound inhibits the very enzyme that is associated with severe covid-19 disease and covid-19 mortality. It turns out that this enzyme (sPLA2) is [inhibited by an anti-venom compound called varespladib](#). Clinical trials show that varespladib is a potent inhibitor of secretory phospholipase A2 (sPLA2). Varespladib has demonstrated improvements in cardiovascular risks, including a reduction in inflammatory C-reactive proteins and a near complete suppression of the target enzyme, sPLA2.

[A Medscape article from November 2020](#) concurred that the lung inflammation caused by covid-19 produces the sPLA2 enzyme. The article also said a more deadly version of the same enzyme is produced by SNAKE VENOM. Researchers are using varespladib as a broad-spectrum, anti-venom drug because it targets this same sPLA2 enzyme. Researchers also want to deploy the [anti-venom compound against severe covid-19 cases](#).

This brings up the question: Could the clinical manifestation of “covid-19” actually be the ill effects of a bioweapon that contains properties from snake venom? This may explain why severe covid patients and those vaccinated with the spike protein mRNA may suffer from dizziness, paralysis, coagulated blood and inflamed lungs. These are all [similar symptoms from a venomous snake bite](#) [Figure 6]. If severe covid-19 involves an enzyme that can be suppressed by anti-venom, does the actual SARS-CoV-2 contain genetic code from snake venom? Furthermore, are the serious cardiovascular effects from the mRNA vaccines related to this same venomous component?

Medical systems profited from covid-19 diagnoses, but understood very little about the pathology behind the actual disease

For two years, hospital systems used a long list of non-specific symptoms to code for “covid-19.” A term called “covid-19” was slapped on patients if “it” was merely “suspected or cannot be ruled out.” Moreover, hospitals relied on [fraudulent PCR tests](#) that were never intended to diagnose a specific infectious disease.

The word “covid-19” has been advertised at a mind-numbing level, without any understanding of the pathology behind the disease label or how hospital protocols exacerbated suffering and death. While the [PCR tests were being used to falsely diagnose](#) common respiratory viruses as “covid-19,” the real bioweapon could have

easily evaded detection and caused unexplained inflammation of the lungs and cardiovascular system of older patients and people with comorbidities.

What we've come to know as "covid-19" could actually be a binary weapon based off of snake venom (and other components), which can drive severe inflammation in the lungs and the cardiovascular system. Since the covid-19 vaccines are intended to replicate similar genetic sequences of the spike protein, all these cardiovascular problems and sudden vaccine deaths could be the effects of the same snake venom properties.

Over the past two years, scientists were focused on augmenting an immune response with spike protein mRNA and the public was coerced to go along with the idea that these were life-saving *vaccines*; but the entire scientific and medical infrastructure could have missed the point entirely. We're facing a long war of bio-warfare, masquerading as science. The vaccinated could have been poisoned by venomous genetic instructions that poison the lungs, the cardiovascular system and the nervous system.

Maybe this is the reason why the vaccine didn't work after the first dose; this never-ending assault is replicating venomous, poisonous components (that have nothing to do with immunity), and they are sickening the population in a more direct and deliberate manner than the original bioweapon ever could. Maybe this is the reason [why the vaccinated](#) are manifesting severe covid now, [at rates greater than the unvaccinated](#). They are literally being forcefully poisoned to death, dose after dose.



Pfizer, Moderna mRNA vaccines trigger AIDS-like syndrome

04/13/2022 / By Ethan Huff



Autoimmune disease is [spiking in the fully vaccinated](#), and many are now calling the collection of ailments associated with it AIDS-like syndrome.

An eight-year-old boy from Bongará, Peru, as one example, was recently diagnosed with Stevens-Johnson Syndrome (SJS) just days after receiving his second “dose” of Pfizer’s Wuhan coronavirus (COVID-19) “vaccine.” SJS is said to be extremely rare, but the boy, named Richard Jefferson Bustamante Bautista, developed it after getting his second injection of Pfizer’s experimental mRNA drug.

“Stevens-Johnson syndrome (SJS) is a rare, serious disorder of the skin and mucous membranes,” the Mayo Clinic reported. *“It’s usually a reaction to medication that starts with flu-like symptoms, followed by a painful rash that spreads and blisters.”*

Excess deaths overall are also up big time among young people ever since the jobs were introduced. Edward Dowd, formerly of BlackRock, [warned that](#) what is currently transpiring can be compared to the Vietnam War for today’s Millennial generation.

Young people between the ages of 25 and 40 saw an 84 percent increase in excess mortality last fall, which Dowd said is the *“worst-ever excess mortality, I think, in history.”*

Excess deaths among Millennials were higher than any other age group last year, and a whopping seven times higher than the Silent Generation, which includes people over the age of 85.

Not surprising is the fact that this increase directly coincided with the jab mandates and subsequent approval of “booster” shots for the Fauci Flu.

“Basically, Millennials experienced a Vietnam War in the second half of 2021,” Dowd said during a recent interview, noting that 58,000 people died in the conflict.

Are the fully vaccinated all quietly developing AIDS? Apparently Yes!

While the world has been distracted with the conflict between Russia and Ukraine, the government of the United Kingdom quietly published data showing that people who are triple vaccinated are now just weeks away from developing acquired immune deficiency syndrome (AIDS), if they have not developed it already.

The reason for this is explained [in the Stanford study](#), which explains that the spike protein in COVID-19 injections is lentivirus, which contains a combination of HIV types 1-3, SRV/1 (AIDS), MERS and SARS.

The best-known lentivirus is the human immune deficiency pathogen, which causes AIDS, which explains why we are now seeing autoimmune disease and neurodegenerative decline occur following COVID injection.

The mRNA from the lentivirus cocktail, which is found in the “vaccine,” is being inserted into the DNA of human cells through an invasive procedure (injection), *permanently* changing the genome of cells. This devastating condition is also known as prion disease.

Then there is aphasia, a post-injection condition that recently caused 67-year-old Hollywood actor Bruce Willis to retire, ending his career. Aphasia is a common side effect caused by COVID injections, and is associated with brain fog and failure to concentrate.

“Aphasia leaves a person unable to communicate effectively with others,” [explained Johns Hopkins Medicine about the language disorder, which affects specific areas of the brain associated with language expression and comprehension.](#)

“Many people have aphasia as a result of stroke,” the resource added.

Stroke, by the way, along with myocarditis and other forms of cardiovascular illness, is another common adverse effect associated with COVID injections. It is occurring in many otherwise healthy young people following the injections.

“It’s five minutes past midnight,” wrote someone at Infowars. *“Wake up: they are murdering us via untested, warp speed COVID-19 vaccines.”*

“Instead of coming out with an actual AIDS vaccine, Fauci came up with a vaccine to give you AIDS,” wrote another.

**Your Government wants you DEAD!
This includes the CDC, NIH, NIAID,
and the World Health Organization!!
The “Depopulation” agenda began
Shortly after the 1968 publication of
*“The Population Bomb”***

by Dr. Paul Ehrlich and his wife Anne.

“Depopulation has been the World’s #1 Issue since 1968!” It underlies every global issue since. Whether it is climate change or the Global Reset, “**depopulation**” is at the core, everything!! It’s all about Sustainable Development!

Here’s the SMOKING GUN PROOF that COVID and the plandemic are all about population control

<https://www.naturalnews.com/2022-04-28-smoking-gun-proof-covid-plandemic-population-control.html#>

The NIH now knows that the COVID vaccines can cause death 1 year from the vaccination date

<https://stevekirsch.substack.com/p/the-nih-now-knows-that-the-covid?s=r>

Girls are developing GENITAL ULCERS after getting the Pfizer COVID-19 vaccine

<https://strangesounds.org/2022/04/girls-are-developing-genital-ulcers-after-getting-the-pfizer-covid-19-vaccine.html>

Physicians Threatened with Revocation of License for Disclosing Injuries & Deaths they See from Covid Vaxxes

<https://www.thegms.co/medical-ethics/medethics-rw-22021403.pdf>

Tanzania: 60 Million Follow ‘Murdered’ President’s Independent Spirit and Reject COVID Vax and Policies

<https://needtoknow.news/2022/04/tanzania-60-million-follow-murdered-presidents-independent-spirit-and-reject-covid-vax-and-policies/>

**IT WAS SUPPOSED TO BE
A BATTLE AGAINST THE PANDEMIC
TO PROTECT THE PEOPLE.**



**IT BECAME A BATTLE AGAINST THE
PEOPLE TO PROTECT THE PANDEMIC.**



VISIT PATRIOTPOST.US FOR THE BEST HUMOR AND MEMES

CDC refuses to be straight forward as usual with the public!

CDC Can't Provide Records Supporting that COVID-19 Vaccines Do Not Cause Variants, But Somehow is Certain They Don't



As a number of brave immunologists and vaccinologists have been warning, the Covid-19 vaccines are going to drive new vaccine-resistant variants. (This is because vaccine immunity is only directed at a small portion of the virus. At the same time, the virus is constantly mutating. And a mutation that gets around the narrow “immunity” created by the vaccine will arise and will then have an advantage for spreading.)

ICAN has been raising the alarm at FDA and CDC for over a year about this issue. Having done so, we hoped they would take this seriously. So, we, through our attorneys, [requested](#) that the CDC produce: “*All documents sufficient to support that COVID-19 vaccines do not create or cause variants of the virus that causes COVID-19.*”

The incredible response from the CDC is that it doesn't have a single record showing COVID-19 vaccines do not cause variants but that, don't worry, trust us, they don't. Here is the CDC's official [reply](#): “*A search of our records failed to reveal any documents pertaining to your request because COVID-19 vaccines do not create or cause variants.*”

The CDC promises the public that its decisions are based on studies and data but, yet again, when asked for those studies and data, it has nothing to produce. It instead insists that its dictates just be believed. That is not acceptable. ICAN intends to continue to hold our public “health” agencies to account for their claims.

To share this legal update, please use this link: https://www.icandecide.org/ican_press/the-cdcs-response-to-scientific-inquiry-because-we-said-so/

Is there any EVIDENCE that old people should get the shot?

Some people claim that if you are old with multiple comorbidities, you should get the shot. But where is the evidence? Apparently, it doesn't exist.



[Steve Kirsch](#)

Overview

1. Some people claim that elderly people with multiple comorbidities should take the COVID vaccines and boosters.
2. The all-cause mortality data required to make such claims should be readily available to the public but isn't.
3. Nobody I know has seen any data that would justify these claims.
4. It is unethical to recommend vaccination in any age group without clear and compelling data of an all-cause risk-benefit. Where is the risk-benefit analysis?
5. If there was all-cause mortality data that supported the "safe and effective" narrative, it's highly likely we'd all know about it.
6. This is more evidence of a very corrupt system that no one in the mainstream medical community or media finds objectionable.

Introduction

Nursing home: too deadly

4 dead/7 hospitalized after Pfizer Booster
Potential benefit: Save <1 life from COVID

Death:Life = 4:1

Assumptions:

1. [3% IFR for elderly](#) and 30% get COVID in a year
2. Booster lasts for 6 months



[Sunnycrest nursing home](#)
Whitby, Ontario, Canada
136 beds

54

Slide 54 from "[All you need to know](#)" showing unfavorable risk-benefit ratio for vaccination of the elderly and a 3% death rate per dose

Among people who believe the vaccines are unsafe, there are still a few people who still believe it is recommended for older people.

Arguments that claim the vaccines are safe either mix timeframes or they ignore deaths from the vaccine

One doctor told me a story like the following, *“I know of nursing homes where 30% of the residents died from COVID before the vaccines came out. And since we all know that the vaccines are 90% effective, even if the kill rate from the vaccine is 25% for the elderly, there is still a positive risk-benefit.”*

Nope, that’s not convincing at all. There’s a lot of survivor bias here. If the first wave of COVID wiped out 30% of the elderly, then many of the people who remain are already immune from the virus. So giving them the shot at that point has likely no benefit at all, only downsides. For a fair comparison, we must compare the vaccinated vs. unvaccinated groups from the time the vaccines were first made available.

Other people just look at the death rates from COVID and claim that the per capita death rates are lower in people who have been boosted. Even if that were true, it’s irrelevant because it ignores the possibility the vaccine can kill people.

The VAERS data showed nobody should take the vaccine

[When I looked at the VAERS data](#) in October 2021, I found that the vaccines couldn’t be justified for any age group. Even if the vaccines worked as promised, they killed more people than they might have theoretically saved.

I’m open to being convinced I got it wrong, but nobody wants to show me any real-world data.

Here’s a comment from one of my readers (bold part is my emphasis):

At the very beginning of the injection campaigns which started in German nursing homes at the start of 2021, in some cases **there were 25-35% deceased soon after each 'vaccination' campaign**. Acu2020 (Reiner Fuellmich) interviewed a few whistleblowers from those places, it was really heartbreaking to listen to this. Elderly were dying alone, and families were not allowed to be with them. How long can we all stand for this, but most importantly, allow it to happen?

So we should not be ignoring the deaths caused by the vaccines. We need to be looking at what’s known as “all-cause mortality” which would factor in any deaths caused by the vaccine itself.

This is the data everyone needs to see: just two numbers

I’m not asking for a randomized trial. I’m just asking for the two numbers that are required to support the claims being made:

1. What is the rate of all-cause mortality of the elderly who got the booster?

2. What is the rate of all-cause mortality of the elderly who didn't get vaccinated at all?

To obtain the two numbers, you're basically following 1,000 matched elderly patients in both groups from December 19, 2020 forward, and counting the total all-cause mortality deaths from the day before they got their very first shot to 3 months after their third shot with the total # of deaths in the matched group who got no shots (over a matched timeframe). You'd match patients in each group so you are tracking patients over the same time range in each group (starting at when they got the shot). That's the proper way to do the risk-benefit assessment.

Any person with a working brain would want to see these two numbers to justify recommending the vaccines.

Doctors aren't asking for the data required for a proper risk-benefit analysis; they are recommending the vaccine based on the patently false assumption that the vaccines don't kill anyone.

So it is astonishing to me that:

1. The risk-benefit study using all-cause mortality data has never been done. If it had been done and the result was positive, they'd be publicizing this widely. I suspect they've done the analysis, saw the results, and killed the study so nobody would know.
2. No member of the mainstream medical community is demanding to see this data before making a recommendation to patients. There is no excuse for this. It's completely irresponsible and reprehensible. Even President Obama, who is a [self-proclaimed expert on COVID-19 misinformation](#), has not called for this data. You should always be very suspicious when nobody is calling for the data that is required to justify their beliefs.

Am I the only guy in the world who is publicly calling for these critical all-cause mortality statistics?

I think so.

This just goes to show you how totally screwed up our medical system is today. Doctors are recommending the vaccine, not based on the data and science, but based on the political science. They don't even want to see the data. That's why nobody is publicly calling for it.

It also shows you how corrupt the mainstream media is because, even after my article is published pointing this out, they are still never going to mention this or ask about it.

We are mandating this vaccine for people and nobody wants to see the risk-benefit for the elderly where the benefits are supposed to be the most compelling. Makes you wonder, doesn't it?

Oahu nursing homes


Hale Nai = 288 and Avalon = 108 residents

They lost over 8% of their residents from the vaccine and < 2% from COVID (V:C=4:1).

The whistleblower, Abrien Aguirre, was fired for disclosing this.

Here's his [original interview](#) and [my extended interview](#).

Here is a [discussion of patients are dying from the vaccine and not COVID](#).



Abrien Aguirre

55

Slide 55 from "[All you need to know](#)" showing unfavorable risk benefit for vaccination of the elderly and an 8% death rate from the vaccine.

UK funeral director John O'Looney: Deaths skyrocketed 250% after vaccination started

If you are short on time, start watching at 15:00 for just two minutes. "The death rate was extraordinary. I've never seen anything like it in 15 years as a funeral director and neither has anyone I've spoken to. And it began as soon as they started putting needles in arms." Massive number of deaths of all ages and all locations started when they rolled out the vaccines. They were all covered up as "COVID deaths."

Death rate skyrocketed by 250% in elderly after vaccines rolled out.

3-5 bodies a week in a single nursing home in a week.

Death rates only went up after vaccinations started.

Note: we were able to confirm this in the US, but nobody wanted their name used publicly.



John O'Looney

56

Slide 56 from "[All you need to know](#)" showing unfavorable risk benefit for vaccination of the elderly: deaths SKYROCKETED after the vaccines rolled out when they were supposed to PLUMMET.

What the funeral directors found

UK Funeral Director John O'Looney has said deaths **skyrocketed** after vaccination started. But vaccinations are supposed to save lives, not kill people. The

[The Washington Post said](#) that "*In January and February, unvaccinated people died at ... 20 times the rate of people with boosters.*" So if that's true, why did O'Looney's business go crazy after the vaccines rolled out?

Those who believe that the vaccines saved lives need to explain O'Looney's observations; he risked his career to let people know about what was going on.

The explanation is simple: we don't count anyone who died from the shot itself. The people who survive the shot are of course more immune to the spike protein because we killed off the people who were susceptible. So sure, with each dose of the vaccine, we're going to see more differences in terms of COVID susceptibility. But that's not what we should be paying attention to at all.

We should be looking at all-cause mortality in the two groups. The two numbers I wrote about earlier.

I'm reaching out to Professor Andrew Noymer since he's an expert relied upon by the Washington Post

This Washington Post article entitled [Covid deaths no longer overwhelmingly among unvaccinated as toll on elderly grows](#) says:

"It's still absolutely more dangerous to be unvaccinated than vaccinated," said Andrew Noymer, a public health professor at the University of California at Irvine who studies covid-19 mortality.

Surely the good professor would have evidence to back up his claim. I'll let you know if he responds.

I have also reached out to California State Epidemiologist Erica Pan who said: *"Vaccines are one of the most important and longest-lasting tools we have to protect ourselves,"* said California State Epidemiologist Erica Pan, citing state estimates showing vaccines have shown to be 85 percent effective in preventing death.

Summary

I'm skeptical that the elderly with (or without) multiple comorbidities will benefit from the vaccine because nobody I know has seen the evidence that this is true. If it was true, our good friend O'Looney and other funeral directors would be seeing deaths plummet.

And if it was true, [embalmers wouldn't be seeing massive blood clots in up to 93% of their cases.](#)

If there is evidence that the vaccines are beneficial for the elderly, can we see it? Please? And if not, at least tell us why we can't.



Blessings,

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