

Restoring Original Christianity—for Today!

CHRISTIAN BIBLICAL CHURCH OF GOD

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Fred R. Coulter

Minister

Immunization Exemption Request

To Whom It May Concern:

Re:

The members and employees of **Christian Biblical Church of God**, as well as many individuals and groups—religious and non-religious—do not believe in being immunized. It is a scientific fact that the introduction into the body of so-called “benign” bacteria or viruses, etc., which have been modified, are in reality an introduction of a sickness into the human body, as well as mercury poisoning. For the above reasons, as well as the following reports, the **CBCG** does not endorse vaccines because the ingredients come from animals which the Bible commands us not to eat or have any of their modified cells injected in to our system. This means that it is the doctrine of the **CBCG** that we do not take vaccines. Furthermore the current Covid-19 vaccinations have proved to be dangerous to many people—with over 25,000 people dying from the vaccine (see report below). Finally, it is unconstitutional to force medical procedures on individuals without their consent.

It may seem like a “good” thing and a recommended practice by the medical community. But at other times it may not be wise, because immunization can be very dangerous. Many children and adults have had severe reactions to immunizations. In some cases, it has caused death or permanent disability for the rest of their lives. We do not want to risk such a dangerous exposure to the children and adults of the **Christian Biblical Church of God** and its employees and their children.

The Holy Scriptures reveal that all sickness is uncleanness. As such, the introduction of these “modified” bacteria or viruses, and even aborted fetal derivatives through immunization techniques, into the body constitutes introducing sickness and uncleanness into the body. God does not want His people to be unclean physically or spiritually. We are admonished in the Word of God, “touch not the unclean thing.” (II Cor. 6:17).

Because of these scientific factors, and because of our belief in healing by God’s intervention in our lives, we believe that is absolutely wrong and against our faith in God to receive immunizations.

Therefore, we are asking for conscience sake that you excuse _____ from any requirement to be immunized.

Respectfully requested,

Fred R. Coulter
Minister

MERCURIAL VEINS

The Darker Side of Common Vaccine Additive

Many of us in San Benito County know of the hideous mercury pollution oozing from the ghost town of New Idria. Abandoned mercury mines there leach the deadly substance into nearby San Carlos Creek, which then spreads the poison to the other California water bodies, including the San Francisco Bay. But many of us may not know of the mercury flowing closer to home: in our bloodstreams.

Babies are not greeted with spank on the bottom these days, but they are greeted with needles. Before the age two, children can be poked with more than 20 vaccines. By the age of 18, the number can hit 40.

Some argue that a single hypodermic injection into a healthy body is an unnecessarily intrusive act, a violation of a doctor's oath to "first do no harm". But others are worried that the real harm comes from what goes into the needles.

Vaccines have some nasty ingredients. They are laced with such things as formaldehyde, latex, and aluminum, to name just a few. The most controversial additive, though, is mercury.

There has long been an outcry over thimerosal, the trade name for the mercury-based additive used to prevent contamination in some vaccines. Mercury is a violent poison and is especially dangerous for young brains and nervous systems, which have yet to develop an adequate myelinated sheath to protect them.

That is one reason why the EPA warns that young children and pregnant women should not eat certain fish, in which dangerous levels of mercury can accumulate. State officials just this month warned against eating fish caught in 10 Bay Area reservoirs, mercury being among the chief concerns.

Such warnings are for ingested mercury. But what about stuff pumped directly into muscles and blood streams?

Three vaccines- Diphtheria-Tetanus-Pertussis (DTP), Haemophilus-influenza, and hepatitis B- can contain between 12.5 and 25 micrograms of mercury. These vaccines account for about half of all vaccines currently available in the United States. In addition, the flu vaccine that is now recommended for young children also contain 25 micrograms of mercury.

But the EPA's "safe level" for mercury exposure is 1 microgram (part per million) for every 2.2 pounds of body weight per day. That means that for a single shot with the highest level of mercury, a person should be at least 55 pounds. Yet obviously many children receiving shots are much, much smaller. Worse, children can receive multiple vaccines at a single visit, sometimes to "catch up," meaning the mercury they get doubles or even triples.

Many caring and competent health-care professionals insist that current vaccines are safe. Yet doctors, researchers, and parents alike are increasingly outraged that mercury exposure from vaccines far exceeds federal safety guidelines. One of those is Dr. Mark Geier, who last year published a vaccine study in the Journal of American Medical Physicians and Surgeons.

Yet he has gone a step further. Greier writes that a "casual relationship between childhood vaccines containing thimerosal and neurodevelopment disorders and heart disease appears to be confirmed."

In this study, Greir said he hoped that removing mercury from vaccines would stem the “tragic, apparently iatrogenic (caused by medical treatment) epidemic of autism and speech disorders that the United States is now facing.”

However, the debate about the dangers of thimerosal is far from settled. The Centers for Disease Control and Prevention, for example, claim there is no significant evidence linking thimerosal with autism, a disorder first detected shortly after thimerosal was first used during the 1930s. Studies about any other dangers of thimerosal, according to the CDC, are “still ongoing.”

But one thing no one disputes is that the autism rate is skyrocketing, especially in California. Ten years ago, California’s Department of Developmental Services gave assistance to about 5,200 people with autism. That number has exploded to about 25,000 people today, according to Santi Rogers, executive director of the San Andreas Regional Center, which serves San Benito and three other counties. Regional centers provide support services for Californians with developmental disabilities such as autism.

Disturbingly, children between the ages of three and 12 account for almost half of these new cases of autism. Many researchers now estimate there is one case of autism for every 150 births.

“I don’t like to use sensational words, but this is an epidemic,” Rogers said last week.

The cause of this epidemic, Rogers said, is still unknown. But in an attempt to address this grave problem, levels of vaccine mercury are going to be reduced, although not eliminated. Governor Arnold Schwarzenegger recently signed Assembly Bill 2943, which will make it illegal for children under the age of three, or woman who are knowingly pregnant, to be injected with vaccines containing more than .05 micrograms of mercury.

The bill, sponsored by Assembly person Fran Pavely (D-41), cited the research of Dr. Greier and recent study of thimerosal conducted by Columbia University, which found that thimerosal can increase the risk of autism-like symptoms in mice. The bill becomes law in July of 2006 and has one key provision: children and pregnant women may receive the higher levels of mercury during a “bioterrorist threat,” an “epidemic” or a “vaccine shortage.”

While waiting for AB 2943 to take effect, and even after it does, people seeking vaccines for themselves or their children should demand shots containing no mercury.

And people should realize that Californians have the right to choose. If a parent or guardian is leery of some or all recommended vaccines, he or she can sign an exemption form with their doctor, freeing the doctor from liability.

Californians also have a choice when it comes to school. Unvaccinated children may attend if a parent or guardian signs an exemption form that can be obtained from a school. The exemption is based on religious, medical or philosophical grounds.

Knowing that mercury is in vaccines and that it also percolates from New Idria and turns San Carlos Creek a ghastly orange has kept me up nights. How are these sources affecting our children? Our community? Our planet?

Thankfully, the governor has taken a brave and prudent step with his signing of AB 2943. And if we keep on him about pollution in San Carlos Creek, maybe the “Terminator” won’t stop there. (The Pinnacle November 4, 2004, Hollister)

Pediatric Group Against Smallpox Vaccinations for All

CHICAGO- The American Academy of Pediatrics says the nation's smallpox plan should involve limited vaccinations if a case occurs, not universal inoculations before there's even an attack.

Potential side effects are too severe, and available vaccines have not been tested on children, who may be at higher risk for bad reactions, the academy said in a policy statement released Monday.

"We're talking about a disease that hasn't existed in the world since the 1970s and a vaccine that we know can cause death," said Dr. Julia McMilan, a Johns Hopkins School of Medicine pediatrics professor and co-author of the policy.

Based on studies from the 1960s, 15 out of every million people vaccinated will face life threatening reactions, and one to two will die.

The academy's policy is considerably more conservative than one being prepared by the Bush administration, which plans to offer the vaccine to all 280 million Americans.

No final decisions have been made, with debate inside the administration centering on how quickly to make the vaccine available.

The academy says unless there's a high risk of a smallpox attack, it makes more sense to vaccinate only if someone becomes infected. It recommends first vaccinating people closest to the infected patient, then others with whom those people and the patient may have come in contact.

If all Americans are vaccinated, the number of severe reactions likely would be higher than in the past because there may be more people with ailments such as HIV infections that make them more vulnerable, the policy says.

Federal officials note, however, that screening for such ailments may be better today than in the 1960s.

IF YOU'RE INTERESTED

Vist the American Academy of Pediatrics (www.aap.org) and the Centers for Disease Control and Prevention (www.btcdc.gov/agent/smallpox/index.asp) on the Web.

Emissary Publications

Phone 503-824-2050

Book: Death by Injection

[Dear PROVE Members,
PEDIARIX, the new 5-in-1 vaccine will be showing up in syringes in front of unsuspecting parents in pediatrician offices around the country now that it is FDA approved. Dr. Sheri Tenpenny did this great write up of information on PEDIARIX that all parents should have to consider before going taking their child in to the pediatrician. This was published in Dr. Mercola's recent issue of his awesome Wellness newsletter and appears on his website at <http://www.mercola.com/2003/jan/25/pediarix.htm>.

If you know a mom whose baby may be due for shots soon, please pass this on. Thanks. Dawn]

From www.mercola.com January 25, 2003
Commentary on PEDIARIX by Dr. Sherri Tenpenny, D.O and nationally renowned and respected vaccine expert. The pharmaceutical industry has shown its true colors

on this one. The goal of creating Pediarix, a new 5-in-one combination vaccine for diphtheria, tetanus, pertussis, hepatitis B and polio, is clearly stated in the GlaxoSmithKline (GSK) press release: “combination vaccines will allow more vaccines to be added to the ‘crowded’ pediatric vaccination schedule.” With more than 200 vaccines currently under development, it is certain that many more will be added to the childhood and adolescent vaccination schedules. To accommodate the new additions, many combination vaccines are in the pipeline, including:

MMR and Varivax
DTaP and IPV
DTaP and Hepatitis B (HepB)
DTaP, IPV and HiB (Pentavac)
DTaP, HepB and HiB
DTaP, IPV, HepB and HiB (Hexavac)
DTaP, IPV, HepB, HiB and Hepatitis A[1]

Scientifically, the D-T-aP is composed of three separate vaccines, and the polio vaccine contains three viruses, so it is actually three vaccines. After adding the projected number of antigens in the “combination vaccines,” the fictional vaccine Omnivax portrayed in Michael Palmer’s book "Fatal," which combined 30 vaccines into one shot, does not seem so “fictional.”

It is certainly disturbing for parents to see their babies receive five to seven separate vaccinations at the 2-, 4- and 6-month “well-baby visits.” However, reducing the total number of shots by combining them, rather than eliminating unnecessary shots from the schedule, is nothing more than a deceptive “placebo” for concerned parents.

Even when familiar vaccines are combined, the mixture is considered to be a new product. The vaccine must be subjected to “safety and efficacy” clinical trials as though it were brand-new.[2] After reviewing several of the studies that allowed this vaccine to come to market, similar investigational flaws were discovered for this vaccine trial as in all others: safety is not “proven” through the studies, and “effectiveness” is defined only as the presence of antibodies.

The design of all vaccine safety studies is seriously flawed. A scientifically sound safety study would compare the new vaccine to an inert substance, such as sterile water or saline. In addition, current vaccine safety studies compare a new vaccine to a vaccine with a “known side effect profile.” These flaws are bad enough, but the design of the Pediarix study coordinated by the UCLA Center for Vaccine Research, Research and Education Institute, was even more bizarre.

Various combinations of vaccines were given to 400 children who had been divided into four groups:

Group A received 3 doses of Pediarix + the HiB (H.flu) vaccine

Group B received 2 doses of Pediarix + HiB;

The third vaccine was [DTaP + HepB] + oral polio

Group C received 3 doses each of [DTaP + HepB], IPV (injectable polio), and HiB

Group D received 3 doses each of DTaP, HepB, HiB and oral polio

The conclusion? The researchers found that the antibody levels of each of the vaccines were nearly the same in all groups, therefore, “the use of the pentavalent combination vaccine will greatly reduce the number of required injections during the first 2 years of life, thereby simplifying the immunization schedule, enhancing compliance and facilitating acceptance of additional injections engendered by introduction of newer vaccines.”[3]

That sounds like proving convenience, but not proving safety.

If the [DTaP + HepB] vaccine looks unfamiliar to you, it is because it is. In this study, five licensed vaccines and two investigational combination vaccines (also manufactured by GSK) were evaluated simultaneously.[4] The FDA appears to be granting permission to compare one experimental vaccine to another. I wonder if the parents knew that their children were being used as truly “experimental subjects”? This type of “research” goes far beyond what can possibly be defended on scientific grounds and borders on being criminal.

The same study further concluded that “there were no vaccine-related serious adverse events in any group after any vaccine dose.” But if the study is read carefully, evidence to the contrary exists:

“Two subjects withdrew from the study because of serious adverse events that were determined by the safety monitor to be unrelated to vaccination. One subject in Group A was diagnosed with a seizure disorder 14 days after the first immunization. Another subject in Group B had a neuroblastoma detected 6 weeks after the first immunization. Six other reported serious adverse events involved hospitalizations for bronchiolitis/pneumonia (4), meningitis (1) and apnea (1) and were also determined to be unrelated to vaccination.”[5]

Why is it that whenever an adverse event occurs during the course of a vaccine clinical trial, that “event” is never related to vaccination?

Every consumer should ask to read the package insert on every vaccine, but be sure to read this one carefully.[6] Here is a partial list of the additives, adjuvants and contaminants:

VERO (monkey) cells -- potentially containing the SV40 virus incriminated in several different cancers, including leukemia.

Bovine extract, bovine casein and calf (bovine) sera -- It is common knowledge that bovine blood products can be contaminated with viruses, and bovine viral diarrhea virus (BVDV) is the one most often contaminating fetal bovine serum.[7]

Formaldehyde -- a chemical that has caused cancer in laboratory animals and may cause cancer in humans. There is no known threshold level below which cancer risk does not exist. The World Health Organization recommends that exposure should not exceed 0.05 ppm (parts per million).[8]

Glutaraldehyde -- a toxic chemical that is used for cold sterilization of medical and dental equipment. There is no Occupational Safety and Health Administration (OSHA) permissible exposure limit. The National Institute for Occupational Safety and Health (NIOSH) recommends that exposure to glutaraldehyde be under 0.2 ppm.[9] (TOM: reference)

2-Phenoxyethanol -- the chemical name for antifreeze, the vaccine contains 2.5 mg of this compound.

Thimerosal -- this mercury compound is used in the production of Energix, the hepatitis B fraction of the vaccine. It is used during the initial manufacturing process and then removed by a process using cysteine. However, up to 12.5ng (nanograms) remain.

The vaccine also contains these substances: neomycin, polymyxin B, polysorbate 80 and less than five percent yeast protein. The instructions on the package insert caution to "shake well before administering" and describe the vaccine as a "turbid white suspension" consisting of the many particles in the solution.

Is this something that you would want to have injected into your arm? Into your baby's arm? Don't bet on it. The long-term studies on combination vaccines will most likely prove that the biological warfare coming through a needle is just that: war -- on the immune system.

References:

[1] <http://www.keepkidshealthy.com/newsletters.html>

[2] New vaccine supply and financing: a case study of combined vaccines in developing countries. http://www.who.int/vaccines-access/vaccines/Vaccine_Supply/Vaccine_supply_index_documents/combo_vaccines.pdf

[3] Sylvia H. Yeh, MD. et.al. Safety and immunogenicity of a pentavalent diphtheria, tetanus, pertussis, hepatitis B and polio combination vaccine in infants. *Ped Inf. Dis. J.* 2001;20:973-980.

[4] Ibid.

[5] Ibid.

[6] Pediarix package insert: http://us.gsk.com/products/assets/us_pediarix.pdf

[7] European Commission on Health and Consumer Protection Directorate-General. Scientific Committee on Animal Health and Animal Welfare. Adopted 25 October, 2000. http://europa.eu.int/comm/food/fs/sc/scah/out50_en.pdf

[8] IAQ fact sheet: formaldehyde. <http://www.nsc.org/ehc/indoor/formald.htm>

[9] FMSCME Fact sheet: glutaraldehyde. <http://www.afscme.org/health/faq-glut.htm>

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PROVE provides information on vaccines, and immunization policies and practices that affect the children and adults of Texas. Our mission is to prevent vaccine injury and death and to promote and protect the right of every person to make informed independent vaccination decisions for themselves and their family.

This information is not to be construed as medical OR legal advice.

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What's in Vaccines?

http://befreetech.com/vaccine_poisons.htm

Human diploid cells (originating from human aborted fetal tissue)
What's in Vaccines?

Their altered report secreted a horrifying conclusion that America's youth was, in fact, being crippled en masse by drug makers' use of mercury in vaccines.

Read More: Vaccine Article

From Both Sides Of The Vaccination Question

The following is a description of the various chemical compounds added to vaccines for stability and other marketing purposes that have nothing to do with children's health. The information compiled by Dawn Winkler of Concerned Parents for Vaccine Safety, was obtained from the 1997 Physician's Desk Reference. It is a representative, not a comprehensive, list of the various types of vaccines. For several entries, there is direct contact numbers. At the end of the chart is the contact information for Concerned Parents for Vaccine Safety.

Who Are The Manufactures of These Vaccines ?

BIAVAX

Rubella and mumps virus vaccine live. Merck & Company, Inc., 1-800-672-6372.
Produced using neomycin, sorbitol, hydrolyzed gelatin.

Medium: human diploid cells (originating from human aborted fetal tissue)

DPT

Diphtheria and tetanus toxoids acellular pertussis vaccine adsorbed.
SmithKline Beecham Pharmaceuticals, 1-800-366-8900, extension 5231. Produced using aluminum phosphate, formaldehyde, ammonium sulfate, washed sheep red blood cells, glycerol, sodium chloride, thimerosal)*. Medium: porcine (pig) pancreatic hydrolysate of casein.

FLUSHIELD

Influenza Virus Vaccine, Trivalent, Types A & B. Wyeth-Ayerst, 1-800-934-5556. Produced using gentamicin sulfate, formaldehyde, polysorbate 80, tri(n)butylphosphate, (thimerosal)*. Medium: chick embryos.

FLU VIRIN

Influenza Virus Vaccine. Medeva Pharmaceuticals, 1-888-MEDEVA (716-274-5300). Produced using embryonic fluid (chicken egg), neomycin, polymyxin, (thimerosal)*, betapropiolactone. Medium: embryonic fluid (chicken egg).

HAVRIX

Hepatitis A. SmithKline Beecham Pharmaceuticals, 1-800-366-8900, extension 5231. Produced using formalin, aluminum hydroxide, phenoxyethanol (antifreeze), polysorbate 20, residual MRC5 proteins (from medium). Medium: human diploid cells (originating from human aborted fetal tissue).

IM0 VAX

Rabies Vaccine Adsorbed. Connaught Laboratories, 1-800-822-2463. Produced using human albumin, neomycin sulfate, phenol red indicator. Medium: human diploid cells (originating from human aborted fetal tissue).

IPOL

Inactivated Polio Vaccine. Connaught Laboratories, 1-800-822-2463. Produced using three types of polio virus, formaldehyde, phenoxyethanol (anti-freeze), neomycin, streptomycin, polymyxin B. Medium: VERO cells, a continuous line of monkey kidney cells.

MERUVAX II

Rubella Virus Vaccine Live. Merck & Company, 1-800-672-6372. Produced using neomycin, sorbitol, hydrolyzed gelatin. Medium: human diploid cells (originating from human aborted fetal tissue).

M-R VAX

Measles and Rubella Virus Vaccine Live. Merck & Company, 1-800-672-6372. Produced using neomycin, sorbitol, hydrolyzed gelatin. Mediums: M & M - chick embryo. Rubella-human diploid cells (originating from human aborted fetal tissue).

MMR

Measles Mumps Rubella Live Virus Vaccination. Merck & Company, 1-800-672-6372. Produced using sorbitol, neomycin, hydrolyzed gelatin.

Mediums: M & M - chick embryo. Rubella-human diploid cells (originating from human aborted fetal tissue).

MUMPSVAX

Mumps Virus Vaccine Live. Merck & Company, 1-800-672-6372. Produced using neomycin, sorbitol, hydrolyzed gelatin. Medium: human diploid cells (originating from human aborted fetal tissue).

ORIMUNE

Poliovirus Vaccine Live Oral Trivalent. Lederle Laboratories, 1-800-934-5556. Produced using three types of attenuated polioviruses, streptomycin, neomycin, calf serum, sorbitol. Medium: monkey kidney cell culture.

Rabies Vaccine Adsorbed

SmithKline Beecham Pharmaceuticals, 1-800-366-8900, extension 5231. Produced using betapropiolactone, aluminum phosphate, sodium ethylmercurithiosalicylate (thimerosal)*, phenol red. Medium: fetal rhesus monkey lung cells.

RECOMBIVAX

Hepatitis B Vaccine Recombinant. Merck & Company, 1-800-672-6372. Produced using (thimerosal)*, aluminum hydroxide. Medium: yeast (residual < 1 percent yeast protein)

VARIVAX

Varicella Virus Vaccine Live. Merck & Company, 1-800-672-6372. Produced using sucrose, phosphate, glutamate, processed gelatin. Medium: human diploid cells (originating from human aborted fetal tissue).

*Note: This chemical compound, thimerosal contains 49.6 percent mercury as a preservative, which is one of the most dangerous toxins known to scientists.

Warning: This is 100 times the exposure that the Environmental Protection Agency's Poison Control Center's guidelines consider safe for the average-sized infant, as mercury is known to cause neurotoxicity and brain damage that mirrors the symptoms of autism.

You Decide!!

IMMUNIZATION WAIVERS:

Many active duty, Guard and Reservists (officers and enlisted) have made it known they plan to refuse the Anthrax and possibly other vaccinations. This must be a personal choice, we encourage you to investigate whatever decision you make. There are those who have already declined the shots. They went to the Judge Advocate's office and utilized the "religious and moral

objection" route. This will automatically make you ineligible for world-wide status. Perhaps there is no more stronger statement that we could make than to have a half a million of our military which can serve only in CONUS.

I am not encouraging you to disobey a direct order. however, the Pentagon has lied to us for the last six and a half years, why are we to believe they are telling the truth now. Read the information that exists on Anthrax with regard to safety and efficacy and then make an informed decision yourself.

For verification or more information on Gulf War Syndrome:
<http://www.GulfWarVets.Com/anthrax.htm>

ALL the Vaccines Are Contaminated - Every Last One of Them
S. Edmonson for Salem-News.com

"The chief, if not the sole, cause of the monstrous increase in cancer has been vaccination" - Dr. Robert Bell, once Vice President International Society for Cancer Research at the British Cancer Hospital

(WASHINGTON, D.C.) - Have you been rushing out to get a yearly flu vaccine or diligently taking your children for the 40 or so mandated childhood vaccines?

That's really a shame because you have unwittingly been trading a run-of-the-mill flu or just the measles, for loading up your or your children's bodies with cancer and other deadly viruses, a destructive bacteria, a chemical selected to damage fertility, and with synthetic DNA that threatens to damage your own DNA - the biologic code for your existence.

Who is saying the vaccines are contaminated?

None other than the (now deceased) head of vaccines at Merck, Dr. Maurice Hillerman, who on camera admitted that Merck's Hepatitis B vaccines, contaminated with a virus, caused the AIDS epidemic in the US. He went on to say that all of Merck's vaccines are contaminated with cancer and other viruses. (The US government has conceded the HEB B vaccine causes Lupus. That vaccine is mandated for every infant in the US on the day of birth, and is associated with MS as well.)

That vaccine is mandated for every infant in the US on the day of birth, and is associated with MS as well.)

For Jews who have almost religiously believed in medical authorities about vaccines and poo-pooed those worried about the safety of vaccines, they might want to notice that Hillerman was Jewish.

Or they might recognize that so is Dr. Larry Palevsky, a board certified NY pediatrician, who for ten years routinely gave vaccines to his patients until he noticed them losing eye contact and then began looking into the vaccines he had blindly trusted. He found that they are ALL contaminated with viruses that are so small they can never be removed. He no longer gives any vaccines. He now treats his young patients for autism and other neurologic injuries from vaccines.

Donald W. Scott, the editor of The Journal of Degenerative Diseases and the co-founder of the Common Cause Medical Research Foundation, links vaccines to AIDS (as did Hillerman) and to US bio-weapons research, and says they are contaminated with mycoplasma, a primitive bacteria that takes apart cell walls.

Perhaps the highest scientific authority saying vaccines are contaminated is Garth Nicolson. He is a cell biologist and editor of the Journal of Clinical and Experimental Metastasis, and the Journal of Cellular Biochemistry. He is one of the most cited scientists in the world, having published over 600 medical and scientific peer-reviewed papers, edited over 14 books, and served on the editorial boards of 28 medical and scientific journals. He is not just saying that vaccines are contaminated with mycoplasma but is warning the US that they are. Nicolson goes further and says that we are all being damaged by them and contracting chronic degenerative diseases that.

That damage translates into lifelong patients (and thus life-long profit) for the pharmaceutical industry making the vaccines and he says doesn't appear to be accidental.

According To CIA Statistics: As Shots Increase, U.S. Lifespan Is DECREASING

1980: 9 vaccines, autism is rare

2009: 36 vaccine\$ before age 5

2010: 55 vaccine\$ before age 6

Vaccines vs. Autism, 2009 Vaccinations before age 5 Deaths per 1000 under 5 yrs old

Autism Rate

Lifespan Ranking

United States (c)	36	7.8	1 in 91	34
Norway	13	4.4	1 in 2,000	ab 5
Denmark	12	5.8	1 in 2,200	ab 18 d
Japan 11	4.2	1 in 475	a	4
Sweden	11	4.0	1 in 862	a 2
Iceland 11	3.9	1 in 1,1000	ab	1

All the vaccines mandated to children and many other vaccines as well, including the seasonal flu vaccines being mandated to health care workers, are contaminated with polysorbate 80, the central ingredient in a pharmaceutical industry patent to damage fertility. The pharmaceutical industry has a long history of seeking a vaccine that would covertly sterilize whole populations. So, in addition to being contaminated with cancer and other viruses, and with the bacteria mycoplasma, vaccines are intentionally "contaminated" with a chemical as well, which is, given the patent, a "patently" sought-after sterilizing agent.

Beyond containing polysorbate 80 and cancer and other viruses, and likely mycoplasma, the Gardasil vaccines are contaminated in an additional way. It and all the new vaccines are contaminated with genetically engineered DNA. It can contaminate people's DNA, just as genetically engineered crops can contaminate normal crops. Gardasil itself is contaminated with a man-made version of the HPV DNA, the very virus it was supposed to protect against, which now it threatens not only altering kids' healthy DNA with synthetic DNA (!) but with a diseased version.

Gardasil was suspended in India after 4 girls died but the killing has gone on in the US despite the confirmed deaths of 100 girls. and now the CDC, with special ties to Merck, its maker, wants all boys to take it, too.

Informed consent is the core of the Nuremberg Code that was created by the Nuremberg Tribunal to keep the pharmaceutical industry from ever again committing the hideous "medical" abuses it did during the Holocaust. In California, Jerry Brown is dismantling informed consent in order to get these deadly vaccines associated with infertility, into all school children. And it was during the Holocaust that the pharmaceutical experimented on Jewish women prisoners at Auschwitz to develop a vaccine that sterilized covertly. Henry Kissinger recommended the development of covertly sterilizing vaccines in a major report to the US government and as late as 2009 a Finnish Health Minister said he was behind the H1N1 vaccine that was meant to lower population.

Jerry Brown has just signed into law a bill that will allow children as young as 12 to decide whether to take a vaccine for sexually transmitted disease. Parental consent is not needed and parents will not even be allowed knowledge as to whether the child has taken the vaccine. Merck's Hepatitis B vaccine is one that is included, as is another Merck vaccine, Gardasil, allegedly for ovarian cancer. A Gardasil researcher says there is no evidence it works. "This raises questions about the CDC's recommendation that the series of shots be given to girls as young as 11-years old. 'If we vaccinate 11 year olds and the protection doesn't last... we've put them at harm from side effects, small but real, for no benefit,' says Dr. Harper. 'The benefit to public health is nothing, there is no reduction in cervical cancers ...'"

Current Data for Gardasil up to AUG 12, 2011

Disabled 763

Deaths 103

Did Not Recover 4777

Abnorm. Pap Smear 430

Cervical Dysplasia 157

Cervical Cancer 41

Life Threatening 444

Emergency Rm. Visit 9115

Hospitalized 2307

Extended Hosp. Stay 201

Serious 3111

Adverse Events 23388

But these figures are based on statistics from medical professionals who do not wish to be sued. In reality, "less than 10% of deaths, seizures, paralysis, etc., are being reported as caused by the vaccinations that doctors gave in their office.

The following real-world estimates are based on reports from a law firm:

"840 young girls and 2 boys have died after receiving the Gardasil HPV Vaccine 201,010 young girls have suffered debilitating events such as fatigue, seizures, paralysis, etc. after receiving the Gardasil HPV Vaccine."

The California law even approves in advance, ALL yet-to-be made (and completely untested) vaccines for sexually transmitted diseases, though of the two current Merck vaccines they are pushing on children, one Merck vaccine caused AIDS and causes Lupus and the other Merck vaccine is contaminated in multiple ways and proving highly lethal. Children will be the ones decide whether to take the vaccines, and they will make that decision after being forced to see videos of people dying terrible deaths from cancer. Not only would the vaccine be given without parental consent, but parents are denied knowledge that the vaccine is going to be given or that it was given. If the child has a seizure or dies afterward, parents may not see their own children's medical records.

This is what is left of the "informed consent" meant to provide human rights to protect the world from pharmaceutical industry abuses against mankind.

After World War II, it was Merck which received the flight capital of the pharmaceutical industry indicted for crimes against humanity, human enslavement and mass murder.

In the case of children, rather than their facing childhood diseases of insignificant threat, they are, by legal mandate, being bombarded repeatedly throughout their childhood with viruses that cause diseases (including cancer), a cell-destroying bacteria, a threat to the very integrity of their DNA, and a chemical specifically chosen to impair fertility. And laws are being written to add to the already long list of vaccines they must take, including two mandated Merck vaccines. One is an old Merck vaccine that caused AIDS and is causing Lupus. The other is a Merck vaccine claiming to prevent cervical cancer though girls have little chance of contracting it in the first place (and boys, none!) and it can easily be detected by pap smear and treated successfully and there is NO evidence the vaccine prevents it. Meanwhile, it is killing children.

Contamination of the polio vaccine and the continuing effects

FACT: Before the Polio Vaccine, there had never been a virus from another species deliberately injected into humans.

FACT: 61% of all human tumors (at autopsy) now contain the SV40 monkey virus, traceable to the Polio vaccine of the 1950s and 60s

FACT: CUTTER vaccine division and WYETH produced a deadly Polio vaccine with a live virus that actually gave the recipient POLIO

FACT: All above information was withheld from the public for years to avoid a public panic and to prevent a loss of faith in vaccines. polio was a very rare infectious disease that presented little risk to the public, but the risk was greatly exaggerated by the Polio Foundation before the introduction of the polio vaccine, the miracle vaccine - contaminated with a monkey virus which has been the cause of soft tissue cancers for decades since.

Though facing no serious health risk, people are paying to have their bodies contaminated by contaminated vaccines. In taking vaccines, they are trading the minimal risk of even contracting common diseases and which themselves are rarely dangerous and can be treated if contracted - for the absolute certainty of loading their bodies with

1. cancer and other infectious viruses,
2. a destructive bacteria, and
3. a fertility impairing chemical.

They are doing this because they are being terrorized by their own government with false information on the risks of various diseases and denied critical information on the scientific risk of the vaccines. Those vaccines without a doubt threaten their own and their children's fertility, and their very lives.

Swine Flu Expose
by Eleanora I. McBean, Ph.D., N.D.

1977

CHAPTER 2

**THE SPANISH INFLUENZA EPIDEMIC OF 1918 WAS CAUSED BY
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As has been stated before, all medical and non-medical authorities on vaccination agree that vaccines are designed to cause a mild case of the diseases they are supposed to prevent. But they also know and admit that there is no way whatsoever to predict whether the case will be mild or severe - even deadly. With this much uncertainty in dealing with the very lives of people, it is very unscientific and extremely dangerous to use such a questionable procedure as vaccination.

Many vaccines also cause other diseases besides the one for which they are given. For instance, smallpox vaccine often causes syphilis, paralysis, leprosy, and cancer. (See the chapters on smallpox and plagues.) Polio shots, diphtheria toxin-antitoxin, typhoid vaccine, as well as measles, tetanus and all other shots often cause various other stages of disease such as post-vaccinal encephalitis (inflammation of the brain,) paralysis, spinal meningitis, blindness, cancer (sometimes within two years,) tuberculosis, (two to twenty years after the shot,) arthritis, kidney disease, heart disease (heart failure sometimes within minutes after the shot and sometimes several hours later.) Nerve damage and many other serious conditions also follow the injections.

When several shots are given (different vaccines) within a few days or a few weeks apart, they often trigger intensified cases of all the diseases at once, because the body cannot handle such a large amount of deadly poison being injected directly into the bloodstream. The doctors call it a new disease and proceed to suppress the symptoms.

When poison is taken by the mouth, the internal defense system has a chance to quickly eject some of it by vomiting, but when the poisons are shot directly into the body, bypassing all the natural safeguards, these dangerous poisons circulate immediately throughout the entire body in a matter of seconds and keep on circulating until all the cells are poisoned.

I heard that *seven men dropped dead in a doctor's office after being vaccinated*. This was in an army camp, so I wrote to the Government for verification. They sent me the report of U.S. Secretary of War, Henry L. Stimson. The report not only verified the report of the seven who dropped dead from the vaccines, but it stated that there had been 63 deaths and 28,585 cases of hepatitis as a direct result of the yellow fever vaccine during only 6 months of the war. That was only one of the 14 to 25 shots given the soldiers. We can imagine the damage that all these shots did to the men. (See the chapter on What Vaccinations Did to Our Soldiers.)

The first World War was of a short duration, so the vaccine makers were unable to use up all their vaccines. As they were (and still are) in business for profit, they decided to sell it to the rest of the population. So they drummed up the largest vaccination campaign in U.S. history. There were no epidemics to justify it so they used other tricks. Their propaganda claimed the soldiers were coming home from foreign countries with all kinds of diseases and that everyone must have all the shots on the market.

The people believed them because, first of all, they wanted to believe their doctors, and second, the returning soldiers certainly had been sick. They didn't know it was from doctor-made vaccine diseases, as the army doctors don't tell them things like that. Many of the returned soldiers were disabled for life by these drug-induced diseases. Many were insane from postvaccinal encephalitis, but the doctors called it *shell shock*, even though many had never left American soil.

The *conglomerate* disease brought on by the many poison vaccines baffled the doctors, as they never had a vaccination spree before which used so many different vaccines. The new disease they had created had symptoms of all the diseases they had injected into the man. There was the high fever, extreme weakness, abdominal rash and intestinal disturbance characteristic of typhoid. The diphtheria vaccine caused lung congestion, chills and fever, swollen, sore throat clogged with the false membrane, and the choking suffocation because of difficulty in breathing followed by gasping and death, after which the body turned black from stagnant blood that had been deprived of oxygen in the suffocation stages. In early days they called it *Black Death*. The other vaccines cause their own reactions — paralysis, brain damage, lockjaw, etc.

When doctors had tried to suppress the symptoms of the typhoid with a stronger vaccine, it caused a worse form of typhoid which they named *paratyphoid*. But when they concocted a stronger and more dangerous vaccine to suppress that one, they created an even worse disease which they didn't have a name for. What should they call it? They didn't want to tell the people what it really was — their own Frankenstein monster which they had created with their vaccines and suppressive medicines. They wanted to direct the blame away from themselves, so they called it *Spanish Influenza*. It was certainly not of Spanish origin, and the Spanish people resented the implication that the world-wide scourge of that day should be blamed on them. But the name stuck and American medical doctors and vaccine makers were not suspected of the crime of this widespread devastation — the *1918 Flu Epidemic*. It is only in recent years that researchers have been digging up the facts and laying the blame where it belongs.

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Now (1976) we are being worked on again by the vaccine -epidemic makers in their effort to force another multi million dollar vaccine sale caper. Their con men have already talked President Ford into handing over \$135 million dollars to start their vaccine racket. Even the insurance companies refused to become involved with such an obviously dangerous and crooked scheme. So, again the medical and drug con men induced the appropriate government officials to guarantee insurance against the, possible billions of dollars in law suits which could be brought against the vaccine promoters if the vaccine campaign is carried out as planned. It's a good thing Ford was voted out of office. It's too bad he wasn't "dumped" before he paid the *poison squad* the MONEY' to poison the whole population. However, we don't yet know if President Carter will be any better. Will he be held in the grip of the medical and drug dictatorship? Or will he investigate — learn the truth — *reverse the decisions* and make the vaccine makers return the money taken from the taxpayers under false pretenses?

The statement of the swine flu vaccine promoters to the effect that the vaccine is harmless, is false, and the statement that it will protect against flu is false. Fifty-six people died after the shots, some within 48 hours. There is confusion and disagreement among the doctors about all aspects of the vaccine, from the safety and effectiveness to the necessity for it, who should have it and who should be warned against it.

Their scare-head campaign cry is that the swine flu is like the 1918 flu which killed 20,000,000 people. They don't have any usable and provable blood samples from the 1918 flu epidemic to prove it. That was 58 years ago, and the doctors were just as confused and inefficient then as now. However, one thing is certain — the 1918 Spanish Influenza was a vaccine-induced disease caused by extreme body poisoning from the conglomeration of many different vaccines. The soldiers at Fort Dix who were said to have had Swine Flu had been injected with a large variety of vaccines like the vaccines which caused the 1918 flu epidemic.

The flu epidemic at Fort Dix was in no way related to swine. There were no swine at camp (unless we want to sarcastically call the vaccine promoters who caused the diseases -"swine.")

To add to the confusion, the doctors tell the people that there are a lot of various kinds of flu; the one which the soldiers at Fort Dix had was AVictoria flu, there are other strains of flu virus, and also, that the swine flu vaccine which so many people have taken already will not protect them against the many other types of flu. This will be used as an "out" in case of law suits later on when more casualties begin to show up. The doctors will say that the vaccine failed because it was the wrong kind of flu for the vaccine. Of course, no one can prove it one way or the other because viruses are illusive, invisible organisms which are unstable and unpredictable. One dictionary definition of virus is "a morbid poison." The vaccines injected into the body are poison and cause the typical poison reactions. Virus (poison) does not fly around and attack people.

Therefore, *there will be no swine flu epidemic unless the vaccine promoters make one like they did in the 1918 flu epidemic.* It will not kill 20,000,000 people unless the people submit to the disease-producing shots. There are also, other causes of disease besides vaccines, such as bad food, which has been devitalized and contaminated with poison preservatives and artificial drug concoctions. There are many more causes of disease but no diseases are contagious(See the chapter on the germ theory).

Vaccine drives come and go as often as the vaccine promoters can cook up the slightest pretense of a reason. Back in 1957 they were trying to stir up a vaccination campaign for what they decided to call *Asiatic flu*. An editorial in the *Herald and Express* for August 29, 1957 was captioned, "Fear of Flu Propaganda." Part of the piece is as follows:

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That pandemic dragged on for two years, kept alive with the addition of more poison drugs administered by the doctors who tried to suppress the symptoms. As far as I could find out, the flu hit only the vaccinated. Those who had refused the shots escaped the flu. My family had refused all the vaccinations so we remained well all the time. We knew from the health teachings of Graham, Trail, Tilden and others, that people cannot contaminate the body with poisons without causing disease.

When the flu was at its peak, all the stores were closed as well as the schools, businesses — even the hospital, as the doctors and nurses had been vaccinated too and were down with the flu. No one was on the streets. It was like a ghost town. We seemed to be the only family which didn't get the flu; so my parents went from house to house doing what they could to look after the sick, as it was impossible to get a doctor then. If it were possible for germs,

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When I see people cringe when someone near them sneezes or coughs, I wonder how long it will take them to find out that they can't catch it — whatever it is. The only way they can get a disease is to develop it themselves by wrong eating, drinking, smoking or doing some other things which cause internal poisoning and lowered vitality. All diseases are preventable and most of them are cureable with the right methods, not known to medical doctors, and not all drugless doctors know them either.

It has been said that the 1918 flu epidemic killed 20,000,000 people throughout the world. But, actually, the doctors killed them with their crude and deadly treatments and drugs. This is a harsh accusation but it is nevertheless true, judging by the success of the drugless doctors in comparison with that of the medical doctors.

While the medical men and medical hospitals were losing 33% of their flu cases, the non-medical hospitals such as BATTLE CREEK, KELLOGG and MACFADDEN'S HEALTH-RESTORIUM were getting almost 100% healings with their *water* cure, baths, enemas, etc., fasting and certain other simple healing methods, followed by carefully worked out diets of natural foods. One health doctor didn't lose a patient in eight years. The very successful health treatment of one of those drugless doctors who didn't lose any patients will be given in the other part of this book, titled VACCINATION CONDEMNED, to be published a little later.

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7001 - How To Legally Avoid Vaccinations of all Kinds

Vaccination Exemption Forms Online by State and Country

<http://www.vaclib.org/pdf/exemption.htm>

<http://www.unhinderedliving.com/statevaccexemp.html>

Sample Anti-Vaccine Information Letters

<http://www.vaccines.bizland.com/letters.htm>

Books and Tapes on the Danger of Vaccinations

<http://www.korenpublications.com/products/bkvacc.htm>

http://www.mercola.com/forms/vaccine_teleconference.htm

What you should know about vaccines

<http://educate-yourself.org/vcd/knowaboutvaccines24oct02.shtml>

Vaccination Resources

<http://www.vaclib.org/legal/stateresource.htm>

<http://www.mercola.com>

Vaccine Ingredients

<http://www.mercola.com/article/vaccines/ingredients.htm>

Vaccine Lawyers

<http://thinktwice.com/lawyers.htm>

How to Legally Avoid Unwanted Immunizations of all Kinds

(we have reprinted the copyrighted article from this website on the next page for your convenience)

http://www.mercola.com/article/vaccines/legally_avoid_shots.htm

Information to give to people who oppose your decision to not vaccinate

<http://www.natural-acne-treatment-solutions.com/vaccinations-the-hour-of-the-time.html>

How to Legally Avoid Unwanted Immunizations of All Kinds

by Dr. Joseph Mercola ©Copyright 2004

As you read this work and put its principles into practice, there are two basic axioms you never want to forget. They are the rock upon which all your actions are based.

1. *Nobody, anywhere or any time and under any circumstances has the right or power in this country to immunize you or your children against your will and conviction. If they attempt to do so, you can legally charge them with "assault with a deadly weapon" and have the full resources of our laws behind you.*

2. *At all times in attempting to avoid unwanted immunization, you have the Law of the Land behind you. Those who would try to vaccinate you against your will are on very shaky ground. Into every compulsory immunization law in America are written legal exceptions and waivers which are there specifically to protect you from the attempted tyranny of officialdom. It is not only your right, but your obligation to use them, if this is what your conscience tells you.*

Article 1

In all your contacts with any member of the school, public health, or legal establishment, always remain calm, courteous, and humbly reverent toward their position. You are only asking of them that which the law duty binds them to give you. There is no reason, or advantage, to be gained by antagonizing them.

Most of these officials believe they are discharging their trust as outlined by law. If they are overstepping the law, then you must very diplomatically bring the true facts to their attention, but without attempting to belittle them.

The more you can preserve their ego, the more easily and quickly you are likely to get what you desire - a waiver of immunization.

Rule No. 1: Do not harass, belittle, or antagonize officials unnecessarily.

Article 2

All compulsory laws concerning vaccination (including the military) contain exceptions and waivers. It is these protections placed in the laws that you may legally use to exclude yourself and your children. Surprisingly, these exceptions were placed there, not for your sake (although you may take advantage of them), but for the protection of the establishment.

How is this? Let us assume that these exceptions were not there and everyone was actually forced to be immunized. Should a child die or become mentally or physically disabled, the parent would have the perfect case to sue the doctor, the school, the health department, and even the state legislature for enormous damages.

Since they allowed no exceptions, they must accept full responsibility for all the adverse consequences of the law.

However, if exception waivers are placed in the law, the responsibility is then transferred back to the parent. If a child should be injured by immunization, the officials can say, "Well, the parent should have exempted him if they thought there was any danger."

Therefore, there is in truth no such thing as a compulsory vaccination law in this country. They are **ALL**, in essence, **voluntary**. The problem is that practically no one in authority will let you know this fact.

Rule No. 2: There are no compulsory vaccination laws. All are voluntary, and you are held responsible for the adverse results upon you or your children.

Article 3

While all immunization laws have exceptions you can use, the wording in each state differs, and you must know the exact wording for your state to make the proper request of waiver. This information can be obtained in one of two ways.

1. Go to the reference section of your local library- look in the State Statute Revised Law Book under Public Health Law or Communicable Disease sections. The list of immunization requirements will appear first and then the exemptions will be given. Usually one or two provisions will be listed: either on religious or medical grounds or both.
2. You may call or write your state representative and ask for a copy of the immunization laws in your state. Making this available is part of his job, and it will be sent promptly.

Rule No. 3: Know your own state law so that you can conform to its exact requirements for exemption.

Article 4

There are two basic reasons for exception - medical or religious. Which one you choose will often depend upon the wording of the law in your state and your personal convictions.

We shall discuss medical exemption first. While laws do vary, nearly all states require that a note or certificate of waiver be submitted by a physician licensed in the state of residence. In some areas where states are small and people continually travel from one to another for business, a statement from a physician in a contiguous state will be accepted.

In this letter it is usually necessary to state the reason for the requested waiver and the length of time it should extend. Many laws limit all such letters to a school year and they must be renewed each fall.

The two most valid reasons for medical waiver are "the fear of allergic reaction in a sensitive child" and "to prevent possible damage to a weakened immune system." Both of these can occur in a child who has been immunized, and since no one but the physician and the parent will be held responsible for their consequences, it is up to them to protect the child.

It is possible that some states may require the letter from an M.D. or D.O., but many will

allow an exemption letter from a chiropractor if it is courteously and properly written, as outlined above.

Rule No. 4: Medical waivers are always valid but must be written to fit each state law and often need to be renewed annually.

Article 5

The foregoing may work for school exemptions, but are there any such waivers in the Armed Forces? Yes. All branches of the Service provide "immunization waivers."

Again, if they did not you could sue them for millions of dollars if a reaction occurred from their immunizations. Because of these waiver provisions, you become responsible if you react.

When you first sign up or enlist, you must state your objection to the vaccinations and tell whether it is "religious conscience" or medical reasons, such as allergies or a low tolerance to medication of any kind. If you do not show objection at this time, you have given the military the right to do what they will with you.

If there is any difficulty, the same rules apply here as in the school program. Never forget, even though you may be in the Service, no one has the right to immunize you against your will. You do not give up your constitutional rights when you join the Armed Forces.

Rule No. 5: The rules that govern school vaccination exemption also apply to the military. Never let anyone tell you otherwise. They do not know, or are hiding, the facts of the law.

Article 6

What about international travel? May I go around the world without vaccination?

The World Health Organization (WHO) in Geneva grants American visitors the right to REFUSE shots when traveling internationally. However, if an area you wish to enter is infected, you may be detained until the public health servant gives you the "go" (at his discretion).

Thousands travel world-wide each year without shots - so you may if that is your choice. Many of our co-workers have traveled over much of the world and have never taken any immunizations, nor were they ever detained.

It would be wise to request a copy of Foreign Rules and Regulations, Part 71, Title 42, on immunization when you receive your passport. Never forget the basic rule, "No one will vaccinate you against your will because by doing so they assume full responsibility for the consequences both legal and medical."

Rule No. 7: You may travel wherever you wish in the world without vaccination. The worst that can happen is that in very rare circumstances you may be detained temporarily.

Some Important Details

The above seven articles constitute all the basic rules. However, there are many important little "tricks of the trade" to having your legal requests honored. These will now be discussed.

While waivers and exemptions are written into all laws on immunization, most public health officials, doctors, and especially school officials are loathe to discuss their existence when questioned, and rarely, to our knowledge, volunteer such information.

A top Philadelphia school official was on the radio with the unequivocal statement, "NO SHOTS, NO SCHOOL."

This statement is of course completely counter to state law, with which presumably he is familiar. Such unwarranted dogmatism is common in the people you will encounter. Once the end of their legitimate authority has been reached, they will use their next most powerful weapon - INTIMIDATION.

They will threaten to keep your child out of school, take him from you, or send you to jail. These are all idle threats because they can do none of these things, if you follow our simple instructions.

The basic rules have been given to you, but there are a few important details to be considered if the officials start on this course of unlawful intimidation.

1. **You must send a letter** to the school to inform the education officials of your stand. A phone call is not legal. It can be a note from your doctor, minister, or a notarized letter from you stating your sincere objections to the immunization. If you do not do this and fail to have your child immunized, it could be construed as negligence on your part and in some states there is a possibility of legal action against you.

2. If the school should refuse to honor your letter, request that they give you a statement in writing outlining their reasons for refusal. If they won't, **their refusal is legally invalid**, and your letter stands; they must enroll your child. If they do (they rarely will) they take the risk of incriminating themselves, especially if they are acting contrary (as is common) to what is specified in the law concerning your rights for exemption. Remember they are on tenuous ground, not you. They are your servants, you are not their servant. If worst comes to worst and you have a very knowledgeable official who writes you a refusal and states accurately the lawful reasons for refusal, he will also in a negative way tell you what the accepted exemptions are, and then you can go about meeting them, by one of the routes suggested in this handout.

3. Child neglect is the one legal point you want to avoid at all costs. No legal parent or guardian can be charged with neglect unless he shows complete lack of concern or action to be more informed. Stripped of legal jargon, this simply means that if you can show that you have investigated the situation, have come to a specific decision concerning immunizations, and have informed the authorities of the same, no neglect charge can be brought. Neglect can be brought only when it can be shown that you have failed to have your

children immunized, not out of respect for their medical or spiritual integrity, but only because you were too concerned with other matters.

4. At times there may be a question of whether you have given or withdrawn legal consent. Legal consent is dependent upon being properly informed on both the advantages and the risks in any choice or decision you make. In other words, if a physician were to tell you that vaccination is perfectly safe and effective to obtain your consent, such consent would not be legal because he lied and you have not been properly informed. Conversely, it could be argued that non-consent is not legal if you are not fully informed about the risks and advantages of immunizations.

5. What do I do if everyone refuses to give me a waiver? This would be an extremely rare circumstance. But should it happen, you are not left without resources. Here is where we pull out one of our big guns. Send notarized letters by certified mail to the vaccine laboratory which makes the shot (ask your doctor for the address), to the doctor who is to administer the shot, to your school principal, to the school board, and to your local health department.

In these letters make it clear that since they have refused to give you a duly requested waiver, you can no longer be held responsible for what may happen to your child if they force these shots upon him. You then state that you will allow immunization if each will present you with a written signed guarantee of safety and effectiveness of the vaccine and that they will consent to assume full responsibility for any and all adverse reactions that your child may develop from the required shots. Of course none will give you such a guarantee. They cannot do so because all vaccines are considered potentially highly toxic. We have yet to hear of an instance of further harassment of parents after such letters have been sent.

That's about all that is needed to obtain the necessary exemptions for your children. All that has been said in this last section (1 to 5) is also applicable to the military and international travel, if required.

Potpourri of Ammunition

"As long as each individual who opposes vaccines has sincere objections, states them in writing, and signs his name - it is considered legal and proper action and must therefore be honored."

"Since many medical controversies exist surrounding immunization, drugs, and various other medications, it mandates that each individual have the right to control his own decisions and freedom of choice; anything less would be contrary to the constitutional laws that protect the citizens' rights. "

"When you deal with school officials and lawyers, you are playing with legal terminology - move the wrong words around and you get hung." The terminology used in this booklet has worked before and should work again.

"It is important to state your objections in such a way that it complies with your state's exemption provisions. They must then accept your request; if they do not, they are breaking

their own law." That is why it is absolutely essential that you know your own state law word for word before submitting your objection.

"According to CDC (the federal Communicable Disease Center in Atlanta, Georgia), physicians are required to first inform their patients of the risks involved before they consent to vaccines." If they do not do so, it is prima facie evidence of deceit or negligence on the part of the physician.

This regulation by the federal government would also seem to assume that the patient has the right to refuse if he feels that the risks are too great. If this is so, is not the federal government on record as supporting voluntary immunization and, by obvious implication, against state-enforced compulsory immunization?

Should you ever have to go to court, or what is more likely, to appear before a "kangaroo" court of school and health department officials, here is some class A evidence you might find useful to mention.

- No vaccine carries any guarantee of protection from the laboratory that produced it or the doctor who administered it.
- The U.S. military allows no-nonsense "immunizations waivers."
- There is **NO FEDERAL LAW** on immunizations. They don't dare. Their lawyers know the consequences.
- Your rights have been infringed upon by officials attempting to use force against your will.

Most state officials like a nice, stress-free job. When you send in your objections and refuse to fit their ordered world by not having your children immunized, you make waves.

This rocks their quiet existence, and there are only two ways their life can become orderly again: either by forcing you to their will or acquiescing to yours. What you must do to obtain an early waiver is to make the latter the easiest path for them.

At first, however, an attempt will usually be made to bend you to their will by some form of intimidation. Many uninformed parents give in to this tack, and so it is tried again and again.

If you are adequately informed, as a reader of this publication should be, you will let the officials know in no uncertain terms that you understand your rights under the law and will not stand for any such shilly-shallying. Invariably, once they discover you are adamant and acquainted with the state law, your waiver will be rapidly forthcoming.

An Acknowledgment

The greatest part of the material on the first four pages is taken from the work of Mrs. Grace Girdwain, of Burbank, Illinois. Our staff has rearranged and edited the information, but we wish the full credit for its existence to go to this courageous woman who has for twelve years

worked arduously, without compensation, to help her fellow Americans obtain their legal rights.

The following is an example of the state of Illinois law (where I live) relating to immunizations. Illinois, like most states has no philosophical objection, but does have a religious one.

Illinois Administrative Code Title 77: Public Health
Chapter I: Department of Public Health
Subchapter i: Maternal and Child Health
Part 665 Child Health Examination Code
Subpart E: Exceptions

Section 665.510 Objection of Parent or Legal Guardian

Parent or legal guardian of a student may object to health examinations, immunizations, vision, and hearing screening tests, and dental health examinations for their children on religious grounds. If a religious objection is made, a written and signed statement from the parent or legal guardian detailing such objections must be presented to the local school authority.

General philosophical or moral reluctance to allow physical examinations, immunizations, vision and hearing screening, and dental examinations will not provide a sufficient basis for an exception to statutory requirements.

The parent or legal guardian must be informed by the local school authority of measles outbreak control exclusion procedures per IDPH rules. The Control of Communicable Diseases (77 Ill. Adm. Code 690) at the time such objection is presented.

Section 665.520 Medical Objections

a) Any medical objections to an immunization must be:

1) Made by a physician licensed to practice medicine in all its branches indicating what the medical condition is.

2) Endorsed and signed by the physician on the certificate of child health examination and placed on file in the child's permanent record.

b) Should the condition of the child later permit immunization, this requirement will then have to be met. Parents or legal guardians must be informed of measles outbreak control exclusion procedures when such objection is presented per Section 665.510.

Consent for Administration of Vaccination

Dear (Physicians Name):

If you will be administering a vaccination to me, or my child, today, I will need for you to complete the following consent form. Thank you.

Physician Statement

I, (Physician Name) _____ do hereby state that I have advised my patient, (patient or child's name) _____ and/or parent of my patient, (parents name) _____ that in my professional opinion this patient/child should be given the vaccination, drug or other (name of vaccination/drug/other) _____.
Manufacturers name _____ Serial number _____
Batch Number _____.

I have on this (day) _____ (month) _____ (year) _____ administered this vaccination/medication/drug AFTER advising the above named patient/parent of minor patient that there is little or no risk involved with this vaccination/medication/drug therapy or treatment. I hereby do agree that should this patient/child at anytime suffer or develop any permanent condition deleterious or injurious to his/her health as a result of this treatment, I will pay for any and all costs involved related to the care and treatment necessary for this patient/child for the rest of his/her natural life. I further agree that if my earnings are insufficient to meet these costs, I will sell my home, my business and all material possessions and put those proceeds towards meeting the expenses of the patient involved.

Date: _____

Signature of responsible physician: _____

Signature of responsible person administering vaccination/medication/drug: _____

Occupational Title: _____

Witness: Parent or other: _____

AFFIDAVIT

DECLARATION OF VACCINATION EXEMPTION

Pursuant to the Senate Bill #942, Section 1, Chapter 7, under the title "EXEMPTION FROM IMMUNIZATION" I hereby declare that, I, as guardian/parent having responsibility for my self/child named herein, _____ Which is an adult/minor enrolled in school withhold my consent and let it be known that said adult/minor is exempted from any and all vaccinations on the grounds that such is contrary to my beliefs.

SENATE BILL #942 SECTION 1 CHAPTER 7

3380 - IN ENACTING THIS CHAPTER, IT IS THE INTENT OF THE LEGISLATURE TO PROVIDE:
© EXEMPTION FROM IMMUNIZATION FOR MEDICAL REASONS OR FOR PERSONAL BELIEFS.

3385 - IMMUNIZATIONS OF A PERSON SHALL NOT BE REQUIRED FOR ADMISSIONS TO A SCHOOL OR OTHER INSTITUTION ... IF THE GUARDIAN, PARENT, OR ADULT WHO HAS ASSUMED RESPONSIBILITY FOR HIS OR HER CUSTODY AND CARE IN THE CASE OF A MINOR, OR THE PERSON SEEKING ADMISSION, FILES WITH THE GOVERNING AUTHORITY, A LETTER OR AFFIDAVIT STATING THAT SUCH VACCINATIONS ARE CONTRARY TO HIS/HER BELIEFS.

All vaccines are harmful and do not protect anyone from disease. Any school or medical authority which tries to enforce vaccinations on children or anyone else is in violation of the laws of the United States Constitution, and may be subject to prosecution.

Amendment 14 of the United States Constitution: No state shall make or impose any law which shall abridge the privileges or immunities of the citizens of the United States, nor shall any state deprive any person of life, liberty, or property.

Amendment 4 of the United States Constitution: " the rights of the people to be secure in their persons shall not be violated"

SUBSCRIBED AND AFFIRMED TO BEFORE ME ON THIS _____ DAY OF _____ 20____

WITHOUT PREJUDICE UCC 1 - 207

SIGNATURE AND DATE

NOTARY PUBLIC
YOUR CITY,

MY COMMISSION EXPIRES
STATE

One of the Most Inexcusable Vaccine Revelations of All...



July 10, 2011

Former drug company scientist Helen Ratajczak recently created a firestorm of debate from all sides of the vaccine-autism issue when she published her comprehensive review of autism research. This is a massively important study, for more than one reason. One element brought to light that has managed to stay well below the radar is the use of aborted embryonic cells in vaccine production.

Former drug company scientist Helen Ratajczak recently created a firestorm of debate from all sides of the vaccine-autism issue when she published her comprehensive review of autism research. However, her 79-page review contains one detail that could easily go unnoticed—five words that reveal one of the most shocking secrets Big Pharma has ever kept from you.

"...Grown in human fetal tissue."

The line reads (page 70):

"An additional increased spike in incidence of autism occurred in 1995 when the chicken pox vaccine was grown in human fetal tissue."

If you are struggling to recall how you could have missed this important fact when signing your vaccine consent form, it wasn't your error—**because it wasn't disclosed on any consent form.** Most people are unaware that human cell cultures derived from aborted human fetuses have been used extensively in vaccine production for decades. And vaccine makers are happy that most of the public has remained ignorant of this fact, as awareness of it could blow up in their faces.

Setting aside, for the moment, unknown long-term health consequences of DNA contamination and religious beliefs about use of aborted fetal tissues—the ethics of *nondisclosure* are reprehensible. Drug companies and vaccine policy-makers should not be allowed to decide

whether or not to share this information with you. This is information you should have received PRIOR to making a choice about whether or not to vaccinate.

Which Vaccines Might Be Produced Using Aborted Fetal Cell Lines?

Chicken pox vaccine is not the only vaccine manufactured in this way. According to Sound Choice Pharmaceutical Institute (SCPI), the following 24 vaccines are produced using cells from aborted fetuses and/or contain DNA, proteins, or related cellular debris from cell cultures derived from aborted human fetuses:

Polio

PolioVax, Pentacel, DT Polio Absorbed, Quadracel (Sanofi)

Measles, Mumps, Rubella

MMR II, Meruvax II, MRVax, Biovax, ProQuad, MMR-V (Merck)

Priorix, Erolalix (GlaxoSmithKline)

Varicella (Chickenpox and Shingles)

Varivax, ProQuad, MMR-V, Zostavax (Merck)

Varilix (GlaxoSmithKline)

Hepatitis A

Vaqta (Merck)

Havrix, Twinrix (GlaxoSmithKline)

Avaxim, Vivaxim (Sanofi)

Epaxal (Crucell/Berna)

Rabies

Imovax (Sanofi)

SCPI also lists cosmetics that are similarly produced from aborted fetal tissue cell lines, which I'll discuss a bit later.

The Sordid History of Viral Vaccines

There are two primary cell cultures that have been growing in labs for more than 35 years and have been used to prepare hundreds of millions of doses of vaccines:

- 1 WI-38: Originating in the U.S. in 1961, this line came from the lung cells of an intentionally aborted female human fetus of 3 months gestation.
- 2 MRC-5: Originating in the U.K. in 1966, this line was derived from the lung cells of an intentionally aborted 14-week-old male human fetus.

The National Network for Immunization Information (NNII) has an article on their website explaining the rationale for using human fetal cells, and the history of how they've been used in vaccine production. The article states that these fetuses were not aborted for the purpose of

vaccine research or vaccine production, nor did the cell biologists who created the cultures perform the abortions themselves.

The NNII article explains some of the difficulties involved in producing "biological medications," especially when it comes to growing viruses:

"It is far more complex to manufacture biological medications (for example, vaccines, antibodies) than it is to produce chemical medications (for example, penicillin or aspirin). In addition, certain vaccines are more complex to make than others. The bacteria that go into bacterial vaccines can be grown in simple laboratory cultures. In contrast, the growth of viruses requires living cells.

Viruses cannot reproduce on their own. They require a living host in which to grow, such as chicken embryos, and cells from animals that are grown in culture. Vaccine manufacturers currently have few options for viral culture, because of valid pharmaceutical reasons and because of human safety concerns. For example, varicella (chickenpox) virus does not grow well in most cells derived from species other than humans. Also, human cells are preferred because cells derived from animal organs sometimes may carry animal viruses that could harm people."

It may be more difficult, but it IS possible to prepare viral vaccines without the use of human or animal cells, as today's hepatitis B vaccine proves. The current version of the hepatitis B vaccine, used in the U.S. since 1986, uses yeast cells. Other virus vaccines use chicken embryos or monkey kidney cell lines.

So, why don't manufacturers avoid using human cells altogether and instead opt for less controversial methods? I suspect there is little incentive for vaccine manufacturers to develop and test new vaccines when they are already profiting from existing ones. Of course, when the truth becomes widely known about how these vaccines are derived, they may begin seeing their profits plunge and be forced to find new methodology.

One Particularly Egregious Example: Rubella Vaccine

The rubella virus used in making rubella vaccine was originally derived from tissues from the aborted fetus of a rubella virus-infected mother. Babies born to rubella-infected mothers are at risk for serious birth defects.

According to Barbara Loe Fisher of the National Vaccine Information Center:

"The rubella vaccine currently used in the U.S. and in most countries was developed after an American researcher at the Wistar Institute cultured rubella virus from a fetus aborted because the mother was infected with rubella. This vaccine is called RA 27/3 because the rubella virus was isolated from the 27th aborted fetus sent to the Wistar Institute in the 1964 rubella outbreak. Researchers were unable to culture rubella from the tissues of the first 26 fetuses sent to Wistar, which had been aborted by doctors because the mothers had rubella during pregnancy."

A recent study by the Environmental Protection Agency (EPA) has led to a question of whether there is a correlation between the abrupt rise in American autism rates with the introduction of fetal cells for use in vaccines (1988). This correlation has prompted researchers to ask the question about how aborted fetal DNA could be causing, or contributing to, the development of autism disorders in children. Thus far, there have been no proposed theories of a mechanism. However, it's a significant correlation that should at least be investigated. If you care about what

you put into your body, and into your child's body, and you are outraged by this information, you are not alone.

How can a person be pro-life and NOT object to the use of these vaccines?

The impact of the finding that many vaccines are derived from aborted fetal cell lines is potentially enormous, given the great number of people who define themselves as Pro Life. For someone who is Pro Life to discover that a vaccine contains the DNA from aborted fetuses is like a Muslim finding out that a vaccine is derived from pork.

I would anticipate that many of the people who object to use of aborted fetal tissues for scientific research are going to be shocked and outraged when they learn that their children have been secretly injected with vaccines containing DNA, proteins, or related cellular debris from cell cultures derived from aborted human fetuses.

This is not a small portion of the population!

The two largest religious preferences in the U.S. are Catholic and Evangelical, representing 50 percent of the population. And those are not the only two groups who typically share Pro Life views. Given these numbers, you could extrapolate that more than one of every two people receiving vaccines might have opted out of them based on religious beliefs alone, had they been given truthful and complete information about how the vaccines were produced.

The Catholic Church objects to "formal cooperation" with abortion. However, in terms of its vaccine policy, there are more gray areas than mandates.

The Vatican states it's your "grave responsibility" to use alternative vaccines when available, i.e., vaccines not derived from aborted human fetuses. It also states that those with moral problems should make conscientious objections. However, the Vatican dictates it's within your right to make your own choice about whether or not to use these vaccines. It takes the position that, in the absence of alternatives, the health of the population as a whole must be considered, stating these vaccines may be utilized "to avoid a serious risk not only for one's own children but also, and more specifically, for the health conditions of the population as a whole—especially for pregnant women."

For more details on the Catholic Church's stance on this issue, the National Catholic Bioethics Center has a section of their website devoted to Q & A about vaccines derived from fetal cells. If you are Catholic and confused about this issue, you may want to discuss it with your priest.

If you are Pro Life for religious or other reasons, you owe it to yourself to take a serious look at this information before consenting to be vaccinated. Catholics and others who share a Pro Life point of view may play an important role in the future of vaccine policy by pressuring the vaccine industry and policymakers to adopt alternative strategies for vaccine research and production.

Shocking Examples of Aborted Fetal Cells Used by the Food and Cosmetic Industry

With a little further probing, you'll discover the practice of using aborted fetal cell lines extends far beyond vaccines. Biotech companies are using these cell lines in the research and development of products ranging from soup to anti-aging skin creams. For example, a San Francisco cosmetics company, Neocutis Inc., acknowledges that the key ingredient in its anti-aging skin care line, PSP, was developed from an aborted and donated male fetus. The use of

fetal tissue in anti-wrinkle creams certainly crosses moral and ethical boundaries for most consumers, especially when companies choose to HIDE this information. But it gets worse...

Cells from an aborted fetus may have been used to create flavor enhancers for your soup or soft drink. Yes, you read that right.

PepsiCo, Kraft Foods, and Nestle are reported to have partnered with a biotech firm called Senomyx, which uses human embryonic kidney cells taken from an electively aborted fetus (HEK 293) in their product testing to find flavors that will positively affect human taste receptors.

When this news leaked, Campbell soup responded to an outraged public by severing all ties with Senomyx. However, PepsiCo has maintained their relationship with the company, saying the collaboration is necessary for creating low-calorie, tasty products for their consumers.

REALLY? Must they really use human fetal cells just to make soda pop taste good?

This makes me wonder how many companies out there are engaging in such practices that we haven't yet discovered. If they've been doing this with vaccines, cosmetics and food, I wonder what else they might be doing.

Take Action Now!

NVIC has provided a webpage to educate you about vaccine contamination that could harm your health. There is also a Vaccine Ingredients Calculator on NVIC's website that helps you learn about what kinds of human protein, DNA, chemicals and other ingredients are in vaccines. NVIC publishes a Vaccine E-newsletter regularly with alerts about vaccine policy and law updates that you can subscribe to, free of charge.

NVIC supports and defends your right to make fully informed, voluntary decisions regarding pharmaceutical products, including vaccines. This includes the right to know EXACTLY what is in vaccines and how vaccine ingredients could affect your health.

Included on the page are clear steps for how you can take action, plus many useful resources.

For more information about vaccines, I also invite you to visit my vaccine news page.

CDC document bombshell reveals list of all vaccine excipients, including “African Green Monkey Kidney Cells” and fibroblast cells from aborted human fetuses ... see the complete list

Mike Adams



(Natural News) Almost no one has any real idea what's found in vaccines. When they allow themselves to be injected with vaccines, they're oblivious to the fact that they are being injected with **aborted human fetus cell lines** or African Green Monkey kidney pus cells harvested from infected, disease primates. (See proof from the CDC, below.)

Yet, astonishingly, the CDC openly admits to all this (and more). In a PDF posted on the CDC website entitled “Vaccine Excipient & Media Summary,” the CDC lists all the excipients currently used in vaccines being injected into adults and children across the United States. The CDC's list, current as of January 6, 2017, was “extracted from manufacturers' package inserts,” according to the CDC.

The complete list is found in this CDC document (PDF). In case the CDC removes it — because they've been known to suddenly “memory hole” documents they don't want the public to see — we've also posted a copy at the Natural News servers (PDF).

The WI-38 cell line is widely known to be “derived from lung tissue of an aborted white (caucasian) female fetus,” as even the pro-vaccine Wikipedia website admits. As the Coriell Institute for Medical Research explains about the MRC-5 cell line / WI-38:

The MRC-5 cell line was developed in September 1966 from lung tissue taken from a 14 week fetus aborted for psychiatric reason from a 27 year old physically healthy woman. The cell

morphology is fibroblast-like. The karyotype is 46,XY; normal diploid male. Cumulative population doublings to senescence is 42-48. G6PD isoenzyme is type B.

The human fetal tissue cells have become such an issue of outrage that even the Vatican has issued a statement concerning their use, in which they address, “vaccines containing live viruses which have been prepared from human cell lines of fetal origin, using tissues from aborted human fetuses as a source of such cells.” You can find the Vatican’s response at this link, in which they discuss the moral and ethical issues of “The principle of licit cooperation in evil.”

Below, you’ll find the complete list published by the CDC, de-duplicated and sorted alphabetically. Notice that these ingredients include toxic metals (aluminum salts), bizarre animal cells from humans, monkeys, cows, pigs and chickens, ingredients derived from GMOs, the radioactive element barium, artificial coloring chemicals, excitotoxins such as glutamate, chemical cleansing agents (Triton X-100), dangerous bacterial strains (E.coli), toxic chemicals such as glutaraldehyde, thimerosal (mercury) and much more.

No one can refute any of this because **it’s admitted by the CDC itself.**

More analysis of the toxicity of these ingredients will be published at Vaccines.news and Natural News.

Here’s what happens to some children when they’re injected with these toxins:



The complete list of vaccine excipients published by the CDC, current as of January 6, 2017

betapropiolactone
CTAB (cetyltrimethylammonium bromide)
formalin
L-cystine
2-phenoxyethanol
a continuous line of monkey kidney cells
acetone
African Green Monkey kidney (Vero) cells
alcohol
aluminum hydroxide
aluminum phosphate
aluminum salts
amino acid supplement
amino acids
amino acids solution
aminoglycoside antibiotic
ammonium sulfate
ammonium sulfate aluminum phosphate
amorphous aluminum hydroxyphosphate sulfate
amphotericin B
anhydrous lactose
anti-foaming agent
arginine
ascorbic acid
asparagine
baculovirus and cellular DNA
baculovirus and Spodoptera frugiperda cell proteins
barium
benzethonium chloride
beta- propriolactone
beta-propiolactone
bovine albumin
bovine calf serum
bovine serum
bovine serum albumin
calcium carbonate
calcium chloride
calf bovine serum
Calf serum
calf serum and lactalbumin hydrolysate
carbohydrates
casamino acids
casamino acids and yeast extract-based medium
casein
castor oil
cell culture media

cellulose acetate phthalate
cetyltrimethylammonium bromide
chick embryo cell culture
chicken fibroblasts
chlortetracycline
citric acid
citric acid monohydrate
CMRL 1969 medium supplemented with calf serum
complex fermentation media
concentrated vitamin solution
CRM197 carrier protein
CY medium
cystine
D- fructose
D- glucose
defined fermentation growth media
deoxycholate
dextran
dextrose
dibasic potassium phosphate
dibasic sodium phosphate
dimethyl-beta-cyclodextrin
dimethyl-beta-cyclodextrin, glutaraldehyde
disodium phosphate
disodium phosphate dihydrate
D-mannose
DNA
dried lactose
Dulbecco's Modified Eagle Medium
Dulbecco's Modified Eagle's Medium
E. coli
Eagle MEM modified medium
EDTA (Ethylenediaminetetraacetic acid)
egg protein
egg proteins
ethylenediaminetetraacetic acid (EDTA)
FD&C Yellow #6 aluminum lake dye
Fenton medium containing a bovine extract
ferric (III) nitrate
fetal bovine serum
formaldehyde
Franz complete medium
galactose
gelatin
gentamicin sulfate
glutamate

glutaraldehyde
Glycerin
guinea pig cell cultures
HEPES
hexadecyltrimethylammonium bromide
histidine
histidine buffered saline.
host cell DNA
host cell protein
human albumin
human diploid cell cultures (MRC-5)
human diploid cell cultures (WI-38)
human embryonic lung cell cultures
human serum albumin
human-diploid fibroblast cell cultures (strain WI-38)
hydrocortisone
hydrolyzed casein
hydrolyzed gelatin
hydrolyzed porcine gelatin
inorganic salts
iron ammonium citrate
isotonic sodium chloride
kanamycin
L-250 glutamine
lactalbumin hydrolysate
lactose
L-histidine
lipids
L-tyrosine
M-199 without calf bovine serum
Madin Darby Canine Kidney (MDCK) cell protein
magnesium stearate
magnesium stearate. gelatin
magnesium sulfate
maltose
MDCK cell DNA
Medium 199 without calf serum
microcrystalline cellulose
mineral salts
modified culture medium containing hydrolyzed casein
modified Latham medium derived from bovine casein
modified Mueller and Miller medium
modified Mueller and Miller medium (the culture medium contains milk- derived raw materials
[casein derivatives])
modified Mueller's growth medium
modified Mueller-Miller casamino acid medium without beef heart infusion

modified Mueller's media which contains bovine extracts
modified Stainer-Scholte liquid medium
monobasic potassium phosphate
monobasic sodium phosphate
monosodium glutamate
monosodium L-glutamate
monosodium phosphate
MRC-5 cells
MRC-5 cells (a line of normal human diploid cells)
MRC-5 diploid fibroblasts
MRC-5 human diploid cells
Mueller Hinton casein agar
Mueller's growth medium
neomycin
neomycin sulfate
non-viral protein
nonylphenol ethoxylate
normal human diploid cells
octoxynol-10 (TRITON X-100)
octylphenol ethoxylate (Triton X-100)
ovalbumin
ovalbumin neomycin
phenol
phenol red
phenol red indicator
phosphate buffer
phosphate-buffered saline solution
pladone C
polacrilin potassium
polydimethylsiloxane
polygeline (processed bovine gelatin)
polymyxin
polymyxin B
polymyxin B sulfate
polysorbate 20
polysorbate 20 (Tween 20)
polysorbate 80
polysorbate 80 (Tween 80)
potassium aluminum sulfate
potassium chloride
potassium glutamate
potassium phosphate
potassium phosphate dibasic
potassium phosphate monobasic
potassium phosphate potassium chloride
protamine sulfate

protein other than HA
recombinant human albumin
saline
semi-synthetic media
semi-synthetic medium
sodium bicarbonate
sodium borate
sodium carbonate
sodium chloride
sodium citrate
sodium citrate dehydrate
sodium deoxycholate
sodium dihydrogen phosphate dihydrate
sodium EDTA
sodium hydrogenocarbonate
sodium hydroxide
sodium metabisulphite
sodium phosphate
sodium phosphate dibasic
sodium phosphate monobasic monohydrate
sodium phosphate-buffered isotonic sodium chloride
sodium phosphate-buffered isotonic sodium chloride solution
sodium pyruvate
sodium taurodeoxycholate
sorbitan trioleate
sorbitol
soy peptone
soy peptone broth
squalene
Stainer-Scholte medium
sterile water
succinate buffer
sucrose
sugars
synthetic medium
thimerosal
thimerosal (multi- dose vials)
thimerosal (multi-dose vials)
tris (trometamol)-HCl
Triton X-100
uracil
urea
VERO cells
vero cells (a continuous line of monkey kidney cells)
vero cells [DNA from porcine circoviruses (PCV) 1 and 2 has been detected in RotaTeq. PCV-1
and PCV-2 are not known to cause disease in humans.]

vitamins

Watson Scherp casamino acid media

Watson Scherp media containing casamino acid

WI-38 human diploid lung fibroblasts

WI-38 human diploid lung fibroblasts MRC-5 cells

xanthan [Porcine circovirus type 1 (PCV-1) is present in Rotarix. PCV-1 is not known to cause disease in humans.]

yeast extract

yeast protein

α -tocopheryl hydrogen succinate

β -propiolactone

The Autism Epidemic Is Real,
And Excessive Vaccinations Are The Cause

Statement By Bernard Rimlind, PH.D.

The vaccine manufacturers, the Center for Disease Control, the FDA, and the various medical associations have failed miserably in their duty to protect our children. Rather than acknowledge their role in creating the immense, catastrophic rise in autism, these organizations have resorted to denial and obfuscation. They stand to lose their credibility, and billions of dollars in liability suits will soon reach the courts.

As a full-time professional research scientist for 50 years, and as a researcher in the field of autism for 45 years, I have been shocked and chagrined by the medical establishment's ongoing efforts to trivialize the solid and compelling evidence that faulty vaccination policies are the root cause of the epidemic. There are many consistent lines of evidence implicating vaccines, and no even marginally plausible alternative hypotheses.

- As the number of childhood vaccines has increased 700%, from 3 in the '70s to 22 in 2000, the prevalence of autism has also showed a parallel increase of 700%..
- Late onset autism, (starting in the 2nd year), was almost unheard of in the '50s, '60s, and '70s; today such cases outnumber early onset cases 5 to 1, the increase paralleling the increase in required vaccines.
- Thousands of parents report – and demonstrate with home videos -- that their children were normal and responsive until suffering an adverse vaccine reaction. (The Autism Research Institute has been tracking such autism-related vaccination reactions since 1967.)
- Mercury, one of the most toxic substances known, is used as a preservative in many vaccines. Some infants have had 125 times the maximum allowable limit of mercury injected directly into their bloodstreams, in one day, in vaccines. (People vary enormously in their sensitivity to mercury, because certain genes predispose to mercury sensitivity. The highly-touted New England Journal of Medicine Danish study failed to mention the very convenient fact that none of the Danish children had prior exposure to mercury, since Denmark, unlike the U.S. had, banned mercury from childhood vaccines in 1992, the year before the birth year of the children in the study.)

· There are numerous scientific studies showing large differences in clinical laboratory measures of blood, urine and biopsies which compare autistic children with normal controls. Such findings, pointing directly to vaccines as the cause of the group differences, are conveniently overlooked by those attempting to conceal the strong connection between the autism epidemic and excessive use of unsafe vaccines.

The truth must – and will – emerge. It is long overdue.

Bernard Rimland, Ph.D.

Director, Autism Research Institute

Editor, Autism Research Review International

Founder, Autism Society of America

BRmo

La epidemia del autismo es auténtica,

y la excesiva vacunación es la causa

Escrito por Bernard Rimland PhD.

Los fabricantes de vacunas, el Centro de Control de Enfermedades, la FDA, y varias asociaciones médicas, han fallado miserablemente en su obligación de proteger a nuestros niños. En lugar de reconocer su papel en la creación del catastrófico e inmenso incremento en el Autismo, estas organizaciones han recurrido a la negación y a la ofuscación. Se exponen a perder su credibilidad, y miles de millones en demandas de responsabilidad civil pronto llegarán a los tribunales.

Como científico investigador de tiempo completo por más de 50 años y 45 como investigador en la rama del Autismo, me resulta impactante y desazonador el hecho de ver que la Sociedad Médica se ha esforzado por trivializar la sólida y apremiante evidencia de culpa que tienen las imperfectas políticas de vacunación como raíz de esta epidemia. Existen muchas líneas consistentes de evidencia que implican las vacunaciones, y no existe ninguna otra hipótesis alternativa que sea, ni de una forma marginal, creíble.

· El número de vacunas a niños se ha incrementado un 700%. De 3 en los 70's a 22 en el año 2000. El incremento de autismo en paralelo es también de 700%

- El autismo de aparición tardía (empezando después de los 2 años) era algo que raramente se escuchaba en los 50's, 60's y 70's. Actualmente este tipo de autismo sobrepasa los casos de autismo de aparición temprana por el 5 de cada 1, el aumento va en paralelo con el aumento de vacunas exigidas por ley.
- Miles de padres reportan – y demuestran con videos que ellos mismos han grabado – que sus niños eran normales y respondían bien hasta antes de una reacción adversa a una vacuna. (El Instituto de Investigaciones de Autismo ha monitoreado las reacciones a vacunas relacionadas con el autismo desde 1967).
- El mercurio, uno de los elementos conocidos más tóxicos, se utiliza como preservativo en muchas vacunas, Algunos infantes reciben una dosis 125 veces más alta inyectado a su torrente sanguíneo, que el máximo permitido en un solo día de vacunaciones múltiples. (La sensibilidad al mercurio varía enormemente en cada individuo de acuerdo a predisposición genética). El estudio danés que realizó la renombrada revista médica New England Journal of Medicine, dejó de mencionar el hecho muy conveniente de que ningún niño danés había sido expuesto anteriormente a mercurio, desde que en Dinamarca, a diferencia que en los Estados Unidos, habían prohibido todo mercurio de las vacunas en 1992, un año anterior al nacimiento de los niños en este estudio.
- Existen numerosos estudios científicos que muestran las notables diferencias encontradas en pruebas clínicas de laboratorio en sangre, orina y en biopsias que comparan los niños autistas con niños normales. Dichos hallazgos que señalan directamente a las vacunas como causa de estas diferencias entre los grupos, los pasan por alto convenientemente los que intentan ocultar la fuerte conexión entre la epidemia de autismo y el uso excesivo de vacunaciones peligrosas.

La Verdad debe surgir... y lo hará. Hace tiempo que debió haber sucedido.

Dr. Bernard Rimland, Ph.D.

Director del Instituto de Investigaciones de Autismo

Editor de Autism Research Review International

Fundador de la Asociación Americana de Autismo

Form for Employees Whose Employers Are Requiring Covid-19 Injections

NOTE TO EMPLOYEE: Be sure to document the date and time you submit this form to your employer; also document the date and time and their response if they refuse to sign it.

NOTE TO EMPLOYER: As your employee, I am requesting that you review this document, provide the requisite information, and sign the form, in regards to your requirement that employees get a Covid-19 emergency use authorization (EUA) investigational vaccine.

1) If I agree to receive an EUA Covid-19 injection, does my employee health insurance plan provide complete coverage should I experience an adverse event, or even death?

2) As an employee, does my life insurance policy provide any coverage in the event that I die from receiving an EUA Covid-19 injection?

3) As an employee, will you be providing Workers' Compensation, disability insurance, or other resources if I have an adverse event to an EUA Covid-19 injection and am unable to come to work for days, weeks, or months, or if I am disabled for life?

4) The Food and Drug Administration (FDA) requires that EUA vaccine recipients be provided with certain vaccine-specific information to help them make an informed decision about vaccination.⁸ The EUA fact sheets that must be provided are specific to each authorized Covid-19 injection and are

developed by the manufacturers of the injections (Pfizer/BioNTech, Moderna, Oxford/AstraZeneca, and the Johnson & Johnson subsidiary Janssen). The fact sheets must provide the most current and up-to-date information on the injections, and vaccine recipients must also receive information about adverse events. Have you read, understood, and provided me (and all other employees) with these fact sheets and with current information on adverse events so that I/we can make an educated decision?

5) Have you reviewed the available databases of material adverse events reported to date for people who have received Covid-19 injections?^{9,10,11,12} Potential and reported adverse events include death, anaphylaxis, neurological disorders, autoimmune disorders, other long-term chronic diseases, blindness and deafness, infertility, fetal damage, miscarriage, and stillbirth.

6) The FDA's guidance¹³ on emergency use authorization of medical products requires the FDA to "ensure that recipients are informed to the extent practicable given the applicable circumstances... [t]hat they have the option to accept or refuse the EUA product...." Are you aware of this statement? Have you informed all employees that they have the option to refuse?

7) With respect to the emergency use of an unapproved product, the Federal Food, Drug and Cosmetic Act, Title 21 U.S.C. 360bbb-3(e)(1)(A)(ii)(I-III)¹⁴ reiterates that individuals be informed of "the option to accept or refuse administration of the product, [and] of the consequences, if any, of refusing administration of the product, and of the alternatives to the product that are available and of their benefits and risks." If EUA Covid-19 investigational vaccines are ever approved by the FDA, state legislation would be required to allow companies to mandate the Covid-19 injections. Are you aware of these facts?

8) EUA products are unapproved, unlicensed, and experimental. Under the Nuremberg Code—the foundation of ethical medicine—no one may be coerced to participate in a medical experiment. The individual’s consent is absolutely essential. No court has ever upheld a mandate for an EUA vaccine. In ***Doe #1 v. Rumsfeld, 297 F. Supp. 2d 119 (2003)***¹⁵, a federal court held that the U.S. military could not mandate EUA vaccines for soldiers: “...[T]he United States cannot demand that members of the armed forces also serve as guinea pigs for experimental drugs” (*Id.* at 135). Are you aware of this?

9) The United States Code of Federal Regulations¹⁶ and the FDA require the informed consent of human subjects for medical research. The EUA Covid-19 injections are unapproved, unlicensed, investigational vaccines that are still in their experimental stage. It is unlawful to conduct medical research on a human being, even in the event of an emergency, unless steps are taken to secure the **informed consent** of all participants. Are you aware of this?

10) According to Federal Trade Commission (FTC) Guidelines¹⁷ and the FTC’s “Truth In Advertising,”¹⁸ promotional material—and especially material involving health-related products—cannot mislead consumers, omit important information, or express claims. All of this falls under the rubric of “deceptive advertising” (whereby a company is providing or **endorsing a product**), whether presented in the form of an ad, on a website, through email, on a poster, or in the mail. For example, statements such as “all employees are required to get the Covid-19 vaccine to make the workspace safe” or “it’s safe and effective” leave out critical information. Critical information includes the facts that Covid-19 injections are unapproved EUA vaccines that “may” or “may not” prevent Covid, won’t necessarily make the workspace safer, and could in fact cause harm. Not providing links or attachments of the manufacturers’ fact sheets and current information on adverse events is omitting safety information. Are you aware of this?

11) Since the Covid lockdowns began over one year ago, there have been over 178 reported breaches of unsecured protected health information (PHI), incidents investigated by the Office for Civil Rights (OCR). These breaches exposed millions of people’s personal health information. Although many of these incidents were attributed to hacking, some of the breaches to PHI fell directly under the 1996 Health Insurance Portability and Accountability Act (HIPAA), such as sharing a patient’s or person’s information with an unauthorized individual or incorrectly handling PHI.¹⁹ **Can you please explain your obligations to me, under HIPAA law, and how you are going to protect my personal information - both with respect to your requirement that I receive this injection?**

12) Whereas pharmaceutical companies that manufacture EUA vaccines have been protected from liability related to injuries or deaths caused by experimental agents since the PREP Act¹ was enacted in 2005, **companies and all other institutions or individuals who mandate experimental vaccines on any human being are not protected from liability. Are you aware that you do not enjoy such liability protection?**

13) Are you aware that employees could file a **civil suit against you should they suffer an adverse event, death, or termination from their place of employment?**

As the legally authorized officer of the employer/company, I have read all of the above information, have provided my employees with all of the information that the FDA requires be provided to recipients of the Covid-19 injections, and do hereby agree to assume 100% financial responsibility for covering any and all expenses from adverse events, including death, through insurance coverage or directly. In addition, I affirm that the employee will not be subjected to the loss of their job should they decline to receive a Covid-19 injection.

_____ Authorized officer of company requiring injection	_____ Company	_____ Date
_____ Employee	_____ Company	_____ Date
_____ Witness	_____ Company	_____ Date

Endnotes:

1. Congressional Research Service. The PREP Act and COVID-19: Limiting Liability for Medical Countermeasures. Updated Mar. 19, 2021. <https://crsreports.congress.gov/product/pdf/LSB/LSB10443>.
2. Del Bigtree interviews 3 medical professionals incapacitated by Covid injections. *The Highwire*, Apr. 29, 2021. <https://www.bitchute.com/video/A4d8FB2clBTc/>.
3. America's Frontline Doctors. Vaccines & the law. <https://www.americasfrontlinedoctors.org/legal/vaccines-the-law>.
4. Layton, Catharine. Forced to get the COVID vaccine? ICAN may be able to help. *The Defender*, Jan. 29, 2021. <https://childrenshealthdefense.org/defender/forced-to-get-covid-vaccine-ican-may-be-able-to-help/>.

5. <https://uscfc.uscourts.gov/sites/default/files/Vaccine%20Attorneys.pdf>.
6. The Solari Report. Family Financial Disclosure Form for Covid-19 injections. Mar. 1, 2021. <https://pandemic.solari.com/family-financial-disclosure-form-for-covid-19-injections/>.
7. Corey Lynn, The Solari Report. Form for Students Attending Colleges or Universities Requiring Covid-19 Injections. May 3, 2021.
8. Centers for Disease Control and Prevention. COVID-19 Vaccine Emergency Use Authorization (EUA) Fact Sheets for Recipients and Caregivers. <https://www.cdc.gov/vaccines/covid-19/eua/index.html>.
9. UK Medical Freedom Alliance. COVID-19 Vaccine Info. <https://www.ukmedfreedom.org/resources/covid-19-vaccine-info>.
10. Vaccine Adverse Event Reporting System. <https://vaers.hhs.gov>.
11. CDC WONDER. About the Vaccine Adverse Event Reporting System (VAERS). <https://wonder.cdc.gov/vaers.html>.
12. National Vaccine Information Center. Search the U.S. Government's VAERS Data. <https://www.medalerts.org/>.
13. U.S. Department of Health and Human Services. Emergency Use Authorization of Medical Products and Related Authorities: Guidance for Industry and Other Stakeholders. January 2017. <https://www.fda.gov/media/97321/download>.
14. 21 U.S. Code § 360bbb-3 - Authorization for medical products for use in emergencies. <https://www.law.cornell.edu/uscode/text/21/360bbb-3>.
15. Doe #1 v. Rumsfeld, 297 F. Supp. 2d 119 (2003). <https://www.courtlistener.com/opinion/2326816/doe-v-rumsfeld/>.
16. https://www.govregs.com/regulations/expand/title21_chapterI_part50_subpartB_section50.24#regulation_2.
17. Federal Trade Commission. Advertising FAQ's: A Guide for Small Business. <https://www.ftc.gov/tips-advice/business-center/guidance/advertising-faqs-guide-small-business>.
18. Federal Trade Commission. Truth in Advertising. <https://www.ftc.gov/news-events/media-resources/truth-advertising>.
19. U.S. Department of Health and Human Services. Office for Civil Rights. Breach Portal: Notice to the Secretary of HHS Breach of Unsecured Protected Health Information. https://ocrportal.hhs.gov/ocr/breach/breach_report.jsf;jsessionid=618E88DD94EE65D46D5785CB2A643553.
20. <http://market-ticker.org/akcs-www?post=242282>
21. <https://www.natlawreview.com/article/osha-s-new-guidance-recordability-covid-19-vaccine-reactions>

Story at-a-glance -

In the video above, DarkHorse podcast host Bret Weinstein, Ph.D., an evolutionary biologist, interviews Dr. Robert Malone, the inventor of the mRNA and DNA vaccine core platform technology,¹ and Steve Kirsch, an entrepreneur who has been researching adverse reactions to COVID-19 gene therapies.

I realize that this is an absolutely epic three-hour interview but if you ever valued what I have been teaching, you must at a bare minimum very carefully read this entire article.

Malone is the scientist that actually invented the technology that makes the COVID jab possible and he spills the beans on just how this introduction has been ethically compromised to make informed consent absolutely impossible for the average person. Watch the interview if your schedule allows, but carefully read this article for sure.

Kirsch recently published the article, "Should You Get Vaccinated?" in which he reviews how and why he has changed his mind about the COVID-19 "vaccines." This after he got both doses of the Moderna shot, as have his three daughters.

If you or someone you know is equivocal about the COVID jab, then please, you simply MUST read Kirsh's article as it is clearly one of the best pieces written on the topic and provides the other side of the story that is NEVER given in the mainstream media. Remember, without full disclosure of the vaccine's risk, it is impossible to have informed consent.² If you read Kirsch's article, you will get, in great detail, the other side that the conventional media refuses to share. He writes:

"I recently learned that these vaccines have likely killed over 25,800 Americans (which I confirmed 3 different ways) and disabled at least

1,000,000 more. And we're only halfway to the finish line. We need to PAUSE these vaccines NOW before more people are killed.

Based on what I now know about the miniscule vaccine benefits (approximately a 0.3% reduction in absolute risk), side effects (including death), current COVID rates, and the success rate of early treatment protocols, the answer I would give today to anyone asking me for advice as to whether to take any of the current vaccines would be, 'Just say NO.'

The current vaccines are particularly contraindicated if you have already been infected with COVID or are under age 20. For these people, I would say 'NO! NO! NO!'

In this article, I will explain what I have learned since I was vaccinated that totally changed my mind. You will learn how these vaccines work and the shortcuts that led to the mistakes that were made.

You will understand why there are so many side effects and why these are so varied and why they usually happen within 30 days of vaccination. You will understand why kids are having heart issues (for which there is no treatment), and temporarily losing their sight, and ability to talk. You will understand why as many as 3% may be severely disabled by the vaccine."

The Spike Protein Is a Bioactive Cytotoxin

As explained by Malone, many months ago he warned the U.S. Food and Drug Administration that the spike protein — which the COVID-19 "vaccines" instruct your cells to make — could be dangerous. The FDA dismissed his concerns, saying they did not believe the spike protein was biologically active. Besides, the vaccine makers specifically designed the injections so that the spike protein would stick and not float about freely.

Well, they were wrong on both accounts. It's since been well-established

that, indeed, the SARS-CoV-2 spike protein gets free, and that it is biologically active and causes severe problems. It is responsible for the most severe effects seen in COVID-19, such as bleeding disorders, blood clots throughout the body and heart problems.

These are the same problems we now see in a staggering number of people having received one or two shots of COVID-19 "vaccine." For more in-depth information about how the spike protein causes these problems, please see my interview with Stephanie Seneff, Ph.D., and Judy Mikovits, Ph.D.

Using the word vaccine isn't really appropriate here, and I don't want to contribute to the misuse of that word. These injections are clearly not vaccines. They don't work like any previous conventional vaccines. As the actual inventor of the mRNA vaccines clearly says in the interview, they are gene therapy. So, please understand that when I say vaccine or vaccination, I'm really talking about gene therapy.

Spike Protein Disseminates Throughout Your Body

In a recent interview³ with Alex Pierson, Canadian immunologist and vaccine researcher Byram Bridle, Ph.D., discussed previously unseen research obtained from the Japanese regulatory agency through a freedom of information act request.

The study was a biodistribution study done by Pfizer, which showed that the mRNA in the vaccine does not stay in and around the vaccination site but is widely distributed in the body, as is the spike protein.⁴

This is a serious problem, as the spike protein is a toxin shown to cause cardiovascular and neurological damage. Once in your blood circulation, the spike protein binds to platelet receptors and the cells that line your blood vessels. When that happens, it can cause platelets to clump together, resulting in blood clots, and/or cause abnormal bleeding. I detailed these and other findings in "Researcher: 'We Made a Big Mistake' on COVID-19

Vaccine."

Dangerous Corners Were Cut

The spike protein also has reproductive toxicity, and Pfizer's biodistribution data show it accumulates in women's ovaries. Kirsch cites data suggesting the miscarriage rate among women who get the COVID "vaccine" within the first 20 weeks of pregnancy is 82%.⁵ The normal rate is 10%, so this is no minor uptick. Kirsch writes:⁶

"It is baffling that the CDC says the vaccine is safe for pregnant women when it is so clear that this is not the case. For example, one of our family friends is a victim of this. She miscarried at 25 weeks ... She had her first shot 7 weeks ago, and her second shot 4 weeks ago.

The baby had severe bleeding of the brain and other disfigurements. Her gynecologist had never seen anything like that before in her life. They called in a specialist who said it was probably a genetic defect (because everyone buys into the narrative that the vaccine is safe it is always ruled out as a possible cause).

No VAERS report. No CDC report. Yet the doctors I've talked to say that it is over 99% certain it was the vaccine. The family doesn't want an autopsy for fear that their daughter will find out it was the vaccine. This is a perfect example of how these horrible side effects just never get reported anywhere."

Disturbingly, the Pfizer biodistribution data package reveals that corners were cut in the interest of speed, and one of the research facets that were skipped was reproductive toxicology. Yet, despite the lack of an initial reproductive toxicology investigation and a rapidly growing number of reports of miscarriages (which is likely to be a significant undercount), the Centers for Disease Control and Prevention is still urging pregnant women to get vaccinated. Why is that?

Is There Purposeful Suppression of VAERS Data?

What's more, as discussed in the interview, there's evidence that data in the Vaccine Adverse Event Reporting System (VAERS) is being manipulated as reports that were filed are now missing. Why were they removed? And without the filers' consent?

Israeli data show boys and men between the ages of 16 and 24 who have been vaccinated have 25 times the rate of myocarditis (heart inflammation) than normal.

Even with that manipulation, the number of deaths reported post-vaccination against COVID-19 is beyond anything we've ever seen. According to Kirsch, the rate of death from COVID-19 shots exceeds that of more than 70 vaccines combined over the past 30 years, and it's about 500 times deadlier than the seasonal flu vaccine,⁷ which historically has been the most hazardous.

Other serious effects are also off the charts. For example, Israeli data show boys and men between the ages of 16 and 24 who have been vaccinated have 25 times the rate of myocarditis (heart inflammation) than normal.⁸ Additionally, many young people are actually dying as a result of this myocarditis.⁹

Malone points out that, in re-reading the most current version of the Emergency Use Authorization (EUA) that governs these COVID shots, he discovered that the FDA opted not to require stringent post-vaccination data collection and evaluation, even though they had the latitude to do so.

As noted by Weinstein, this is yet another anomaly that needs an answer. Why did they opt for such lax data capture, because without it, there's no

way of evaluating the safety of these products. You cannot identify the danger signals if you don't have a process for capturing effects data and evaluating all of it.

"The whole logic of EUA is you're basically substituting real-time capture of key information for prospective capture of key information," Malone explains. "But to do that, you've got to get the information and it has to be rigorous."

Other Anomalies

Furthermore, as noted by Weinstein, if you release a vaccine under emergency use — because you say there's an unprecedented health emergency and there are no other options, therefore it's worth taking a larger than normal risk — then you still would not give it to people who are at no or low risk of the disease in question.

This would include children, teens and healthy individuals under the age of 40, at bare minimum. Children appear naturally immune against COVID-19¹⁰ and have been shown to not be disease vectors,¹¹ and people under 40 have an infection fatality ratio of just 0.01%.¹² That means their chances of survival is 99.99%, which is about as good as it gets.

Pregnant women would also be excluded as they are a high-risk category for any experimentation, and anyone who has recovered from COVID would be excluded as they now have natural immunity and have no need for a vaccine whatsoever. In fact, a recent Cleveland Clinic study^{13,14} found people who had tested positive for SARS-CoV-2 at least 42 days prior to vaccination reaped no additional benefit from the jabs.

Yet all of these incredibly low-risk groups are urged and even inappropriately incentivized to get vaccinated, and this too is anomalous behavior. Part of the risk-benefit analysis is not only the risk of serious outcomes and death from the disease, but also the availability of alternative treatments, and here

we have the third massive anomaly.

We've seen a clear suppression of information showing that there are not just one but several effective remedies that could reduce the risk of COVID-19 to a number of cohorts down to virtually zero. Examples include hydroxychloroquine and ivermectin, both of which have been safely used for decades in many millions of people around the world.

The precautionary principle dictates that as long as a drug or treatment strategy doesn't do harm, even if the positive effect may be small, it should be used until better data or better treatments becomes available. This is the logic they used with masks (even though the data overwhelmingly showed no statistical benefit and there are a number of potential harms).

But when it comes to hydroxychloroquine and ivermectin, they suppressed the use of these drugs even though they are extremely safe when used in the appropriate doses and have been shown to work really well in many dozens of studies. As noted by Kirsch in his article:¹⁵

"Repurposed drugs [such as hydroxychloroquine and ivermectin] are safer and more effective than the current vaccines. In general, early treatment with an effective protocol reduces your risk of dying by more than 100X so instead of 600,000 deaths, we'd have fewer than 6,000 deaths. NOTE: The vaccine has already killed over 6,000 people and that's from the vaccine alone (and doesn't count any breakthrough deaths)."

Doctors are also being muzzled and their warnings suppressed and censored. Dr. Charles Hoffe has administered Moderna's COVID-19 "vaccine" to 900 of his patients. Three are now permanently disabled and one has died. After writing an open letter to Dr. Bonnie Henry, the provincial health officer for British Columbia, in which he stated that he's "been quite alarmed at the high rate of serious side-effects from this novel treatment,"¹⁶ his hospital privileges were yanked.

Bioethics Laws Are Clearly Being Broken

In a May 30, 2021, essay,¹⁷ Malone reviewed the importance of informed consent, rightly concluding that censorship makes it so that informed consent simply cannot be given. Informed consent isn't just a nice idea or an ideal. It is the law, both nationally and internationally. The current vaccine push also violates bioethical principles in general.

"By way of background, please understand that I am a vaccine specialist and advocate, as well as the original inventor of the mRNA vaccine (and DNA vaccine) core platform technology. But I also have extensive training in bioethics from the University of Maryland, Walter Reed Army Institute of Research, and Harvard Medical School, and advanced clinical development and regulatory affairs are core competencies for me," Malone writes.

"Why is it necessary to suppress discussion and full disclosure of information concerning mRNA reactogenicity and safety risks? Let's analyze the vaccine-related adverse event data rigorously. Is there information or patterns that can be found, such as the recent finding of the cardiomyopathy signals, or the latent virus reactivation signals?"

We should be enlisting the best biostatistics and machine learning experts to examine these data, and the results should — no must — be made available to the public promptly. Please follow along and take a moment to examine the underlying bioethics of this situation with me ...

The suppression of information, discussion, and outright censorship concerning these current COVID vaccines which are based on gene therapy technologies cast a bad light on the entire vaccine enterprise. It is my opinion that the adult public can handle information and open discussion. Furthermore, we must fully disclose any and all risks associated with these experimental research products:

In this context, the adult public are basically research subjects that are not being required to sign informed consent due to EUA waiver. But that does not mean that they do not deserve the full disclosure of risks that one would normally require in an informed consent document for a clinical trial.

And now some national authorities are calling on the deployment of EUA vaccines to adolescents and the young, which by definition are not able to directly provide informed consent to participate in clinical research — written or otherwise.

The key point here is that what is being done by suppressing open disclosure and debate concerning the profile of adverse events associated with these vaccines violates fundamental bioethical principles for clinical research. This goes back to the Geneva convention and the Helsinki declaration.¹⁸ There must be informed consent for experimentation on human subjects."

Experimentation without proper informed consent also violates the Nuremberg Code,¹⁹ which spells out a set of research ethics principles for human experimentation. This set of principles were developed to ensure the medical horrors discovered during the Nuremberg trials at the end of World War II would never take place again.

Lines Have Been Crossed That Must Never Be Crossed

In the U.S., we also have the Belmont report,²⁰ cited in Malone's essay, which spells out the ethical principles and guidelines for the protection of human subjects of research, covered under the U.S. Code of Federal Regulations 45 CFR 46 (subpart A). The Belmont report describes informed consent as follows:

"Respect for persons requires that subjects, to the degree that they are

capable, be given the opportunity to choose what shall or shall not happen to them. This opportunity is provided when adequate standards for informed consent are satisfied.

While the importance of informed consent is unquestioned, controversy prevails over the nature and possibility of an informed consent. Nonetheless, there is widespread agreement that the consent process can be analyzed as containing three elements: information, comprehension and voluntariness."

Americans, indeed the people of the whole earth, are being prevented from freely accessing and sharing information about these gene therapies. Worse, we are misled by fact checkers and Big Tech platforms that ban or put misinformation labels on anyone and anything discussing them in a critical or questioning way. The same censorship also prevents comprehension of risk.

Lastly, government and any number of vaccine stakeholders are encouraging companies and schools to make these experimental injections mandatory, which violates the rule of voluntariness. Government and private businesses are also creating massive incentives to participate in this experiment, including million-dollar lotteries and full college scholarships. None of this is ethical or even legal. As noted by Malone:²¹

"... as these vaccines are not yet market authorized (licensed), coercion of human subjects to participate in medical experimentation is specifically forbidden. Therefore, public health policies which meet generally accepted criteria for coercion to participate in clinical research are forbidden.

For example, if I were to propose a clinical trial involving children and entice participation by giving out ice cream to those willing to participate, any institutional human subjects safety board (IRB) in the United States would reject that protocol.

If I were to propose a clinical research protocol wherein the population of a geographic region would lose personal liberties unless 70% of the population participated in my study, once again, that protocol would be rejected by any US IRB based on coercion of subject participation. No coercion to participate in the study is allowed.

In human subject clinical research, in most countries of the world this is considered a bright line that cannot be crossed. So, now we are told to waive that requirement without even so much as open public discussion being allowed? In conclusion, I hope that you will join me; stop to take a moment and consider for yourself what is going on. The logic seems clear to me.

1) An unlicensed medical product deployed under emergency use authorization (EUA) remains an experimental product under clinical research development.

2) EUA authorized by national authorities basically grants a short-term right to administer the research product to human subjects without written informed consent.

3) The Geneva Convention, the Helsinki declaration, and the entire structure which supports ethical human subjects research requires that research subjects be fully informed of risks and must consent to participation without coercion."

Again, if your schedule allows, I sincerely hope you take the time to listen to Weinstein's interview with Malone and Kirsch. Yes, it is very long — about 3 ½ hours — but they are all astute in their observations, which makes for an enlightening conversation. And remember to read and widely share Kirsch's article, "Should You Get Vaccinated?"²²



Search Results

From the 7/2/2021 release of VAERS data:

Found 438,441 cases where Vaccine is COVID19

Table

↓	↑ ↓	↓
Event Outcome	Count	Percent
Death	9,048	2.06%
Permanent Disability	7,463	1.7%
Office Visit	80,268	18.31%
Emergency Room	56	0.01%
Emergency Doctor/Room	56,915	12.98%
Hospitalized	26,754	6.1%
Hospitalized, Prolonged	64	0.01%
Recovered	157,888	36.01%
Birth Defect	239	0.05%
Life Threatening	7,822	1.78%
Not Serious	174,230	39.74%
TOTAL	† 520,747	† 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 438441 (the number of cases found), and the Total Percentage is greater than 100.

In the U.S, 328.9 million COVID vaccine doses had been administered as of July 2. This includes: 134 million doses of Moderna's vaccine, 182 million doses of Pfizer and 13 million doses of the Johnson & Johnson (J&J) COVID vaccine.

Of the 9,048 deaths reported as of July 2, 22% occurred within 48 hours of vaccination, 15% occurred within 24 hours and 37% occurred in people who became ill within 48 hours of being vaccinated.

This week's data for 12- to 17-year-olds show:

- 13,385 total adverse events, including 801 rated as serious and 14 reported deaths among 12- to 17-year-olds. Two of the nine deaths were suicides.
- The most recent reported death includes a 13-year-old boy (VAERS I.D. 1431289) with a previous history of COVID who suffered cardiac arrest and died 17 days after vaccination with Pfizer. Other reports include a 13-year-old boy (VAERS I.D. 1406840) who died two days after receiving a Pfizer vaccine, three 15-year-olds (VAERS I.D. 1187918, 1382906 and 1242573), four 16-year-olds (VAERS I.D. 1420630, 1426828, 1225942 and 1386841) and three 17-year-olds (VAERS I.D. 1199455, 1388042 and 1420762).

- 1,934 reports of anaphylaxis among 12- to 17-year-olds with 99% of cases attributed to Pfizer's vaccine, 1.1% to Moderna and 0.2% (or four cases) to J&J.
- 347 reports of myocarditis and pericarditis (heart inflammation) with 343 attributed to Pfizer's vaccine.
- 57 reports of blood clotting disorders, 56 attributed to Pfizer and 1 attributed to Moderna.

This week's total VAERS data, from Dec. 14, 2020 to July 2, 2021, for all age groups show:

- 22% of deaths were related to cardiac disorders.
- 50% of those who died were male, 45% were female and the remaining death reports did not include gender of the deceased.
- The average age of death was 74.7.
- As of July 2, 2,678 pregnant women reported adverse events related to COVID vaccines, including 994 reports of miscarriage or premature birth.
- Of the 4,456 cases of Bell's Palsy reported, 59% were attributed to Pfizer vaccinations, 39% to Moderna vaccine and 7% to J&J.
- 398 reports of Guillain-Barré Syndrome, with 47% of cases attributed to Pfizer, 40% to Moderna and 19% to J&J.
- 121,092 reports of anaphylaxis with 46% of cases attributed to Pfizer's vaccine, 46% to Moderna and 7% to J&J.
- 8,256 reports of blood clotting disorders. Of those, 3,959 reports were attributed to Pfizer, 2,699 reports to Moderna and 1,552 reports to J&J.
- 1,796 cases of myocarditis and pericarditis with 1,177 cases attributed to Pfizer, 563 cases to Moderna and 52 cases to J&J's COVID vaccine.

Pfizer says boosters needed, U.S. federal health agencies, scientists disagree

As [The Defender reported](#) today, U.S. federal health agencies and the maker of one of the most popular COVID vaccines are publicly at odds over if or when fully vaccinated people will need a third "booster" dose.

Pfizer [announced](#) Thursday it will seek [Emergency Use Authorization](#) from the FDA in August for a third dose of its COVID vaccine. The drugmaker predicted those who have been fully vaccinated will need a booster shot within six to 12 months of receiving their second dose of the Pfizer vaccine.

But the U.S. Department of Health and Human Services (HHS) hours later issued a [joint statement](#) by the FDA and Centers for Disease and Control and Prevention (CDC) saying, "Americans who have been fully vaccinated do not need a booster shot at this time."

The HHS statement did not explicitly [mention Pfizer](#), but said "a science-based, rigorous process" headed by the CDC, FDA and the National Institutes of Health would determine when or whether boosters were necessary.

Pfizer's [assertions](#) about the need for boosters contradict other research, and several experts pushed back against the claim.

“There’s really no indication for a third booster or a third dose of an mRNA vaccine, given the variants that we have circulating at this time,” [Dr. Céline Gounder](#), an infectious disease specialist at Bellevue Hospital Center in New York, [told the New York Times](#). “In fact, many of us question whether you will ever need boosters.”

[John P. Moore](#), professor of microbiology and immunology at Weill Cornell Medicine, [told the Washington Post](#):

“No one is saying we’ll never need a booster, but to say we need it now and give the public the impression the vaccines are failing and something needs to be done as a matter of urgency. ... The time isn’t now. The decisions that are going to be made will be made by federal agencies.”

Pfizer and BioNTech are developing a version of their COVID vaccine that targets the [Delta variant](#), [The New York Times reported](#) this week. The companies expect to begin clinical trials of the vaccine in August.

Pfizer and BioNTech reported — based on their own studies that have not been published, nor peer-reviewed, according to the Times — that a booster given six months after the second dose of vaccine increased the potency of antibodies against the original virus and the Beta variant by five- to tenfold.

Vaccine efficacy may decline six months after immunization, the companies said in a [news release](#), and booster doses may be needed to fend off virus variants. The vaccine makers said they will submit their findings to the FDA in the coming weeks, a step toward gaining authorization for booster shots.

17-year-old student required to get vaccinated suffers heart condition

Concerns around COVID vaccines and [heart inflammation](#), especially in young males, continue to circulate. But according to an [update](#) posted today on the CDC website, the agency’s researchers have concluded the benefits of the vaccine outweigh the risks of myocarditis after vaccination.

European drug regulators today [announced](#) they also have found a “possible link” between a “very rare heart inflammation” and the Pfizer and Moderna vaccines, but sided with U.S. regulators, saying they also believe the benefits of the shots outweighed any risks.

Meanwhile, [The Defender](#) continues to report on teens who have experienced heart issues after taking the vaccines — including a [17-year-old student](#) who developed symptoms of a heart condition about one week after his first dose of Pfizer’s COVID and subsequently was diagnosed with a heart condition.

The teen's father, Fabio Berlingieri, [told "Fox & Friends"](#) his son had COVID and recovered, but was required to get the vaccine in order to play soccer.

[Fox News medical contributor](#) Dr. Nicole Saphier, who appeared in the interview with Berlingieri, said the way the New York Times and the CDC are presenting the data regarding the adverse effects of vaccines in adolescents is "irresponsible."

"They cherry-pick the way they present the data. It's an all or none approach. They say either adolescents are fully vaccinated or every single one of them is going to get [COVID-19](#). That's the way they are balancing it right now," Saphier said.

Saphier said more weight should be given to potential adverse effects, like [myocarditis](#) and other [heart inflammation](#) issues, when deciding who should be vaccinated. She also encouraged the FDA to [look closer at vaccines](#) before recommending a universal policy.

Hundreds injured by COVID vaccines turn to GoFundMe for help

As reports of adverse events to COVID vaccines continue to grow in number, those injured by the vaccines are struggling to pay their medical bills.

As [The Defender reported](#) July 8, more than 180 people injured by COVID vaccines have had to turn to GoFundMe for help with large medical bills and other expenses, including [Emma Burkey](#) — the high school senior who underwent three brain surgeries due to blood clots after receiving J&J's COVID vaccine.

People facing huge medical bills after being injured by COVID vaccines have few options, beyond what their own health insurance covers. That's because under federal law, vaccine makers are shielded from liability.

Those injured by COVID vaccines can only file a claim for compensation through the [Countermeasures Injury Compensation Program](#) (CICP), run by HHS.

Since June 1, the CICP reported 869 pending cases but offered no further information. Since the program's inception in 2010, [only 29 claims](#) have been paid, with an average payout of around \$200,000. The other 452 claims (91.4%) were denied. Ten claims won approval but were deemed ineligible for compensation.

Biden plans to deploy federal teams in door-to-door COVID vaccine campaign

Making no mention of any safety concerns related to the vaccines, President Joe Biden this week [announced](#) plans to ramp up the federal government's efforts to get more Americans vaccinated under a new "door-to-door" program.

As [The Defender reported](#) this week, under Biden's program, the White House will deploy teams of officials from the CDC, Federal Emergency Management Administration and other federal

health agencies. Biden suggested the unique door-knocking approach was needed now that “we are continuing to wind down the mass vaccination sites that did so much in the spring.”

Biden said the administration will also “step up efforts to get vaccines to doctors who serve younger people so that [adolescents ages 12 to 18](#) can get vaccinated and — as they go for back-to-school check-ups or getting ready for their physicals they need for fall sports.”

Biden cited concerns over the COVID [Delta variant](#), which he said is more transmissible and has forced some European countries to return to lockdowns. He did not mention any of the safety concerns previously noted by the CDC and FDA, including [blood clots](#) and [heart inflammation](#), associated with the vaccines.

Number of cases among fully vaccinated continue to climb

Reports of COVID breakthrough cases among fully vaccinated people continue to rise, as [The Defender reported](#) earlier this week. As of June 28, the [CDC reported](#) 4,686 breakthrough cases resulting in death and hospitalization.

Nearly 30 people in Louisiana who were [fully vaccinated](#) against [COVID](#) died from the virus, according to the Louisiana Department of Health (LDH). Dr. Joseph Kanter, LDH state health officer and medical director, said 27 people between the ages of 28 and 93 have died with COVID more than two weeks after being fully vaccinated.

According to the [San Francisco Examiner](#), more than 7,550 breakthrough cases have been reported, through June 23, in Californians who were fully vaccinated. Most cases were minor, but 62 people died from COVID, according to the California Department of Public Health.

California’s public health agency reported 584 fully vaccinated people had been hospitalized with COVID infection, but hospitalization status wasn’t available for 46% of post-vaccination cases. On July 7, state health officials reported 2,013 new infections among all Californians, including 24 deaths.

According to a [report](#) by the Tennessee Department of Health (TDH), breakthrough cases have resulted in 140 hospitalizations and 20 deaths in the state. As of May 1, TDH has not counted all breakthrough cases as the CDC “asked that only severe outcomes (hospitalization or death) be reported.”

123 days and counting, CDC ignores The Defender’s inquiries

According to the [CDC website](#), “the CDC follows up on any report of death to request additional information and learn more about what occurred and to determine whether the death was a result of the vaccine or unrelated.”

On March 8, [The Defender](#) contacted the CDC with a [written list of questions](#) about reported deaths and injuries related to COVID vaccines. After repeated attempts, by phone and email, to

obtain a response to our questions, a health communications specialist from the CDC's Vaccine Task Force contacted us on March 29 — three weeks after our initial inquiry.

The individual received our request for information from VAERS, but said she had never received our list of questions, even though employees we talked to several times said CDC press officers were working through the questions and confirmed the representative had received them. We provided the list of questions again along with a new deadline, but never received a response.

On May 19, a CDC employee said our questions had been reviewed and our inquiry was pending in their system, but would not provide us with a copy of the response. We were told we would be contacted by phone or email with the response.

We have contacted the CDC numerous times since and were told nobody knew the specialist from the agency's Vaccine Task Force who contacted us in March, and our request was still pending in the system. It has been 123 days since we sent our first email inquiring into VAERS data and reports and we have yet to receive a response.

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

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