



Join us!

You're Invited!

Join thought leaders, scientists, doctors, lawyers, and activists around the world in a new a global initiative which will break the spell of the COVID narrative that has mesmerized so many people for the past year.

People desperately want a change. The time is now. Festering dissatisfaction and dismal prospects for the future, and now the experimental “vaccine” disaster have become the Achilles Heel of the Agenda.

There is an “elephant in the room” that has simply not been acknowledged. Government policy has *caused* avoidable deaths. That is homicide. We have been watching officially coordinated genocide unfolding daily, ongoing crimes against humanity. And now thanks to government’s strong-armed “vaccine” policy numbers of *totally unnecessary deaths will skyrocket!*

Join thousands taking action to hold decision makers to account for complicity in causing those deaths!

- Send this message out *often* and in everywhere possible—social media, emails, blogs or podcasts.
- Highlight government incompetence that is killing people: their wilful ignorance, criminal negligence, contradictions, totally arbitrary mandates that are counter to science.
- Let city councillors, public health officers and government know their complicity in crimes and even in causing unnecessary deaths is known to the public.

MANY VOICES—ONE MESSAGE Delores Cahill, Dr. Fuellmich, Dr. Mercola, and the iconic [British Medical Journal](#) are calling it “murder” (see page 3): When you and I join them crying “Murder!” from every quarter, government, the media, and the pharmaceutical companies will have no place to hide.

You are needed!! This word must reach far and wide to be effective. Please send this on to your friends and colleagues wherever they are in the world...and share these ideas with your personal and professional circles. Inspire and motivate them to join the chorus. These unnecessary deaths must stop.

Thanks for all you do!

Chidakash

Being Free

TABLE OF CONTENTS

<i>Introductory Letter of Invitation</i>	1
<i>Table of Contents</i>	2
What Would You Call It?	3
Definitions of Murder	
An Unprecedented Opportunity	4
Introducing, Checkmate and United Voices—One Message	
A New Focus	5
Describes our weakness and how to turn it into a strength	
A Call to Action and Talking Points	6
Checkmate—RECLAIMING THE NARRATIVE – Abstract	
Checkmate—RECLAIMING THE NARRATIVE: sets out rationale for this UNITED VOICES-ONE MESSAGE initiative, and describes the opportunity it offers to change the prevailing narrative.	7 - 11
APPENDICES	
1. “Murder!” They Cried: Demonstrates how simple statements of fact become evidence that makes allegations of criminal negligence, culpable homicide and potentially murder logical, reasonable and even compelling.	12
2. Managing a Pandemic or Criminal Negligence? Outlines what a reasonable public health responses to an infectious disease outbreak looks like, and compares it with the government’s handling of the COVID crisis.	13
3. How to Mismanage a Pandemic: Shows how long-established medical practice and standard terms have been redefined in ways that have exaggerated the threat of the "epidemic" and handicapped the ability to effectively assess risks, track and manage the virus, and evaluate treatments	14
4. Chart of Coercion shows the obvious similarity between Government COVID measures and Communist brainwashing techniques used in Korea to control people and force compliance.	15
5. 10 stages of Genocide Offers another lens to disturbing implications of government COVID policies	16
6. The Nuremberg Code Shows how the experimental “vaccine rollout” blatantly violates every guideline created 74 years ago to protect people in medical experiments just like this one.	17-18



WHAT WOULD YOU CALL IT?

Wilful killing: “[Causing death] by act or by omission...if death is the foreseeable consequence of such an omission.”

Criminal negligence: [Causing death by] “...doing anything, or omitting to do anything that it is [one's] duty to do, or show[ing] wanton or reckless disregard for the lives or safety of other persons.”

Culpable Homicide: “... is murder (c) where a person, for an unlawful object, does anything that he knows or ought to know is likely to cause death, and thereby causes death to a human being, notwithstanding that he desires to effect his object without causing death or bodily harm....”

Crime against humanity: “*An act committed against any civilian population and in a widespread or systematic manner, and must be based on a policy by a State, an organization or a group*”

Headings Are Links

THE BRITISH MEDICAL JOURNAL CALLS IT SOCIAL MURDER:

“**Editorials** [Emphasis is added]

Covid-19: Social murder, they wrote—elected, unaccountable, and unrepentant

After two million deaths, we must have redress for mishandling the pandemic.

Murder is an emotive word. In law, it requires premeditation. Death must be deemed to be unlawful. How could “murder” apply to failures of a pandemic response? Perhaps it can’t, and never will, but it is worth considering. *When politicians and experts say that they are willing to allow tens of thousands of premature deaths for the sake of population immunity or in the hope of propping up the economy, is that not premeditated and reckless indifference to human life? If policy failures lead to recurrent and mistimed lockdowns, who is responsible for the resulting non-covid excess deaths? When politicians wilfully neglect scientific advice, international and historical experience, and their own alarming statistics and modelling because to act goes against their political strategy or ideology, is that lawful?* Is inaction, action? ...**At the very least, covid-19 might be classified as ‘social murder’.**”

<https://doi.org/10.1136/bmj.n314> (Published 04 February 2021)



INTRODUCING CHECKMATE AN UNPRECEDENTED OPPORTUNITY

For the past year we have proven Government health and policy decisions are misguided and counter-productive—and often lethal. We have tons of evidence.

However, We are “attacking” an area the government isn’t even bothering to defend. When we raise our voices to decry the “mistakes”, the damage and the faulty science of Government’s “anti-COVID” policy, Government effectively says, “So what!”

Government doesn’t care. It has already—obviously!—written off science and well-established medical protocols—along with thousands of lives needlessly lost. They project a dominant narrative that has neutralized the ability of most people to hear or understand the truth when it is presented to them.

CHECKMATE is a proposal that will convert this dominant narrative into a devastating indictment of Government policies and motives. By holding Government and public health agencies to account for policies that have led to tens of thousands of unnecessary deaths, our many united voices will make *one message* the new dominant narrative. Now, particularly with deaths from the fraudulent vaccines set to increase exponentially, people will listen.

UNITED VOICES—ONE MESSAGE is the strategy. We only need thought leaders, doctors, scientists and researchers to recognize the huge leverage that will come to us when we agree to join one another in calling attention to these *unnecessary* deaths—at *every* opportunity. Once-disregarded studies and reports will become an inexhaustible source of *evidence*, proving the government *had to know* what it was doing and *knowingly caused people to die unnecessarily or it has been criminally negligent*.

OUR “NEW NORMAL” The people will respond. Those millions who have seen the fraud for what it is; who have felt powerless and voiceless for months; who have been chafing under inhumane, illogical, contradictory and unscientific government mandates; who are wondering what happened to truth, and why what is so obvious has not been named for what it is. They are a tinderbox that will explode with relief and re-galvanized sense of purpose when they hear the undeniable truth finally spoken out loud in this new conversation.

AN UNPRECEDENTED OPPORTUNITY

Once people understand our “ONE MESSAGE” of murder, see the depth of the deception and realize the most of the loss of life we have suffered was unnecessary, they will see that government, Big Pharma, the medical industry and the media have collaborated in committing global genocide.

The tidal wave of fury that will follow offers an opportunity to end the pharmaceutical and media monopolies as well as the public worship of the allopathic medical industry. ***We must be ready with a new strategy and message in place to guide the next steps into a new world of our choosing.***



A NEW FOCUS – REDEFINING THE BATTLEFIELD

For a year, our efforts to educate people *about COVID* and the alleged pandemic have had a scatter-gun approach, with information covering masks, lockdowns, vaccines, “cases”, numbers, deaths, Gates, the WHO, the WEF and on and on... different topics, different points, which, for lack of a central focus tying it all together, have ultimately left the majority of people confused and overwhelmed.

With **UNITED VOICES—ONE MESSAGE** the same information becomes a collaborative effort focussed not on COVID and the “pandemic”, but on *people who needn’t have died*. It becomes evidence proving government’s wilful actions have caused *unnecessary* deaths of countless innocent and vulnerable people.

Our “scatter-gun” will then become a laser exposing acts of criminal negligence and culpable homicide, *proving that Government, Big Pharma and the media have violated the trust people had in them:*

***Government has consistently sacrificed public health and safety
to gain increased power and control.***

TALKING POINTS- REFERENCES - RESOURCES *

The appendices offer speakers unique perspectives from which to view government policies.

They offer stimulating ideas and sound bites that can be used to shift public attention from the fake threat of “COVID” to the genuine threat of government tyranny.

Our documents are offered as an open resource.

Please draw on them for talking points. Print them, post them in blogs, websites and social media. Use them as a springboard for your own creativity. Reformat them in whatever ways will make the message gain impact and go further.

A CALL TO ACTION

With mainstream media, wholly complicit in the COVID fraud, we are the ones who must step up now to declare the crime, in all our many voices. This alleged crisis has never been about public health. These thousands of deaths are the collateral damage in a government campaign to force our submission to their control.

THE MESSAGE

The mismanagement of this crisis is not an accident, or a mistake. *It is policy.* It is deliberate. It is premeditated. It is about control. And it raises disturbing questions about intent.

Govt has failed to alter its policies even as data shows they have had little effect on the virus and caused more deaths than COVID.

This has *never* been about health. Considering the national and international scale at which this fraud has been conducted we are talking about genocide and crimes against humanity.

***If you are silent when the crime is clear,
you are complicit.
The crime IS clear.
It is time to cry “Murder!”***

TALKING POINTS

1. This general document and its Appendices can be “mined” for talking points and sound bites by anyone preparing for rallies, interviews or blogs, or just posting in social media. They highlight the duplicity and criminality of government actions and expose its motives.
2. These papers also offer unique perspectives that make sense of the contradictory and illogical “health” policies of Govt’s allegedly “anti-COVID” measures and why we lost our Rights and Freedoms.
3. The fresh and stimulating ideas of these documents will direct public attention to what Government desperately wants to keep hidden: namely its murderous and unlawful grab for power and control.
4. *Many contradictions that are illogical and make no sense from a health perspective, do make sense from the perspective of increasing state control.* For example: a) Violation of public trust. b) Violation of Govt’s obligation to serve and protect. c) Their contradictory policies. d) Violation of established health practices and protocols e) Government and media suppression of COVID cures.
5. High numbers of Government-caused *unnecessary* deaths can be leveraged to our advantage by linking them to the alarming reports and increasing concern about the experimental “vaccine”.
6. Information gathered to persuade government to change its policies can be re-purposed to prove Government knew or was duty bound to know months ago that it was causing unnecessary deaths.

** NOTE: When publicly alleging criminal actions, it is more effective to frame them as questions, requests for clarification, comparisons with law—and it also avoids potential counter-charges of libel or slander.

CALL TO ACTION

We ask your help, so government, health officials and the media will know that they cannot hide from charges of criminal negligence, genocide and crimes against humanity.

1. ***Spread the message.*** Use every opportunity in videos, interviews, blogs and posts, to add questions and highlight the allegations. **
2. ***Use the data from your area of expertise*** to show how deaths caused by government were *predictable and unnecessary.*
3. ***Invite other voices.*** Pass this on to your colleagues, followers and members. Encourage them to use their creativity in addressing politicians, health officials, media journalists, city hall and letting them know that we know.

ABSTRACT

CHECKMATE—RECLAIMING THE NARRATIVE

For months we have suffered *predictable, unnecessary deaths resulting from government policies*. When any government or person takes action or fails to take action, knowing those actions or lack of action will harm or kill someone unnecessarily, *whether intentional or not, it is called murder*. When it is official policy causing widespread disruption and deaths *it is called genocide, or a crime against humanity*.

It is time to recognize that the vast range of science, graphs, studies, videos, statistics, and blogs of the past year constitute a compelling web of evidence proving unnecessary deaths caused by Govt policy—with the media fully complicit.

This one message delivered by many voices will make the implication of murder irresistible. *We must see our science as evidence and link it to the possibility of murder at every opportunity.*

Once we shift the *intention* of our fact gathering from serving science, to the *application* of science in alleging murder we'll have the missing—and critical—component to our argument: *emotion*.



When we cry “Murder!” people will be able to resonate at an emotional level. They will be shocked into considering once by-passed arguments and data from past months in a different way. It will change conversations and eat away at the dominant narrative of the Government. Those who have seen through the fraud will experience the allegations like a lightning rod for their frustration and sense of powerlessness. And the meme will take off.

By presenting data supporting our allegations of murder, criminal negligence, crimes against humanity, we strip away any defence they may claim of plausible deniability. Specifically:

1. Their crime will be out in the daylight for all to see.
2. It will be hard for them to continue on, knowing they can no longer plead ignorance.

This Checkmate—United Voices Initiative will succeed because it will give us:

1. **A SIMPLE DOMINANT NARRATIVE** that we refer to at all times: “*This is Murder!*”
2. **A UNIFIED VOICE** saturating media 24/7, with the many proofs of murder.
3. **AN EMOTIONAL FOCUS ON DEATHS** in which every death further indict the Govt.

AND THEN WHAT? EVERY ENDING IS A NEW BEGINNING

When the emotional weight of a chorus of substantiated allegations crying “Murder!” everywhere grows nationally and internationally, Public outrage will turn against the corrupted web of power that so abused their trust: government, Big Pharma, the allopathic medical industry and the media — *the momentum of the narrative will swing to us*.

We must have a strategy in place, a vision that will guide us in co-creating new social structures that support humanity and the planet. With the experience of Checkmate thought leaders could expand this collaborative initiative, guiding a global co-creation of a new more conscious world.

CHECKMATE – RECLAIMING THE NARRATIVE THE RATIONALE

PART I – CURRENT PLAY

MOUNTAINS OF EVIDENCE...

A vast amount of information constantly researched and updated has become victim of its own volume. People are scared, confused and overwhelmed. Most have lost the capacity to understand or process information. They've wrapped themselves in their beliefs and slammed the door shut.

...GOING NOWHERE

The other side remains dominant and their "Agenda" continues to plough right ahead:

- loss of life and damage to the economy and society is accelerating;
- surveillance, censorship and enforcement of unlawful mandates are skyrocketing;
- feelings of vulnerability and exposure, and fearfulness continue in full force.

THEIR THREE PILLARS OF SUCCESS

They have largely neutralized opposition because—

They have consistently employed:

1. A SIMPLE DOMINANT NARRATIVE that they adhere to at all times
2. A UNIFIED VOICE saturating all media 24/7, that gives validity to fraudulent information
3. A CONSTANT FOCUS ON CASES DEATHS stoking fears and despair

PART II – NAMING THE BEAST

BEARING WITNESS – THOUSANDS OF EYES

We are watching innocent people dying needlessly: physically, emotionally, spiritually and socially.

THE CRIME

1. Although Govt knows there are many successful COVID cures and life-saving treatment protocols, *It has knowingly caused unnecessary deaths* by withholding those cures and blocking word of them from reaching thousands of people who needed them.
2. Although Govt knows its anti-COVID measures are more lethal and devastating than the virus itself, *It has knowingly caused unnecessary deaths* by continuing to use them and forcing compliance.
3. Although Govt knows children and adults to the age of 70 have near zero to low risk from COVID, *It is causing unnecessary deaths* by propagandizing and coercing them to take part in an untested gene modification experiment with zero benefits and a high risk of injury or death.

THE CHARGE

For months we have suffered *predictable, unnecessary deaths resulting from government policies*. When any government or person takes action or fails to take action, knowing those actions or their lack of action will harm or kill someone unnecessarily, *whether intentional or not, it is called murder*. When it is official policy causing widespread disruption and deaths, *it is called genocide, a crime against humanity*.

WHODUNNIT?

Government. We have seen an extraordinary, lethal fraud perpetrated on humanity by governments and decision makers across the globe. They may have caused the deaths of millions and are vulnerable to charges of murder under any number of guises: willful murder, criminal negligence, culpable homicide, crimes against humanity, and genocide. (See pg 2, App.)

Mainstream Media. Failing in their due diligence and professional obligations, mainstream media have wholeheartedly hyped and propagated Government lies and generated fear. By publishing disinformation leading to thousands of unnecessary deaths, they have made themselves accomplices in these murders.

Hospitals and Doctors. Under sustained pressure from government, media, their own professional organizations, and indeed the public itself—many physicians have been coerced into violating both their Hippocratic Oath, which demands protection of the client, and the Nuremberg Code which removes “following orders” as an excuse in medical experimentation on humans. *Any deaths resulting from the inoculation make the person administering it potentially complicit with the govt in murder.* (App 16)

EVIDENCE OF PREMEDITATION

Violation of Trust. After an unwarranted emergency declaration alleging a pandemic, Govt and media threw people into a state of fear, knowing confusion and panic would cause them to turn to Govt, health officials and their doctors, trusting in the belief that they would be working to serve and protect them.

Declaring War. By saying we are at “war”, Government and media created a subliminal message that those who ask questions or don’t comply, are *betraying* the country and *causing* deaths, and must be reported. This has escalated to where many now support violent police intervention and incarceration.

Disinformation. On one side Govt created false “facts” (e.g. HCQ is dangerous) and on the other it has censored doctors and legitimate science. The branded anyone asking questions a “conspiracy theorist.”

Weaponizing a Noble Instinct. Government subverted the natural instinct to support one another by coming together in a crisis into motivation to *separate* from and attack each other, by using slogans like “Stay home. Stay Safe.” “We stand together, apart.” “Wear a mask to save others.” “Don’t be selfish.”

Pattern of Tyranny Govt “anti-COVID policies” running counter to standard health practice and protocols are consistent with known practices of brainwashing, coercion, and genocide. (App pp. 12-15)

PART III – A STRATEGIC OPPORTUNITY

THE POWER OF A WORD

The thought of deliberately killing someone is abhorrent to most people. It cannot be ignored. When we invoke this word, “*murder*”, it will be noticed!

Although public debate has been at loggerheads for months, we *have a unique opportunity as public concern grows over the dangers of the “vaccine” to build a resonance in the community.*

It is time to recognize that the vast range of science, graphs, studies, videos, statistics, and blogs of the past year constitute a compelling web of evidence proving unnecessary deaths have been caused by Govt policy with the media fully complicit.

This one message delivered by many voices will make the charge of murder irresistible. We must see our science as evidence and link it to the allegation of murder at every opportunity.

PART IV – CHANGING THE GAME

THE CHALLENGE

For a year we have had to play catchup in a “game” in which the other side has used fear to trap people’s minds with a fake pandemic. When a person is in emotion, particularly in fear, emotion is the only language they will understand and they are less able to use logical discernment. Therefore science, statistics, facts and logic are often beyond the comprehension of people who are anxious or in fear.

For the past year Government has succeeded in making emotion the winning “argument” so to speak and used it to turn neighbor against neighbor and family member against family member.

OUR OPPORTUNITY

Govt is now trapped in its own success. No one likes what is happening. The present is Orwellian. The future is worse. We are given no options. We have no freedoms. We must comply. The sense of powerlessness is overwhelming. We are in a pressure cooker with no hope and no one to blame.

Once we shift the *intention* of our fact gathering from pure science, to the *application* of science in alleging murder, we’ll have the missing—and critical—component to our argument: *emotion*.

When we cry “Murder!” people will resonate at an emotional level. They will be shocked into considering once by-passed arguments and data from past months in a different way. It will change conversations and eat away at the dominant narrative of the Government.

By crying “Murder!” we become the release valve for the pressure cooker they’re in. We give people an option to reframe their unbearable reality. It will give them someone to blame—and reason to take action.

By using the word “murder”, we interrupt the narrative, put officials on the defensive and make it possible to engage the government and other political drivers of this tragedy on our terms.

NOWHERE TO HIDE

Policy makers and enforcers have clearly not concerned themselves with the devastating consequences of their decisions and their actions. Otherwise they would have altered them. This implies intention.

By presenting data supporting our allegations of murder, criminal negligence, crimes against humanity, we strip away any defence they may claim of plausible deniability. Specifically:

1. Their crime is out in the daylight for all to see.
2. It will be hard for them to continue on, knowing they can no longer plead ignorance.

NOT JUST ANOTHER CONSPIRACY THEORY

We know any individual alleging Government murder will automatically be labeled an extremist, and conspiracy theorist—especially by the people and institutions being charged.

However that may even strengthen—the impact of this charge because:

PART V – CHECKMATE

"A CAMPAIGN TO CRY 'MURDER!'"

When leading medical and human rights thought leaders and researchers, alternative broadcasters and presenters make these allegations implicitly (raising questions) or explicitly at every opportunity they will take hold in the public mind. They will gain credibility. They will gain momentum. The emotional weight of a chorus of substantiated allegations crying “Murder!” will grow nationally and internationally.

The impact of an unending litany of questions will be devastating, each with an implied accusation:

“How can you say what you have done is not negligence leading to death?”

"When you deliberately withhold information on proven cures, isn't that killing people?"

"Are you saying that you didn't know that people were dying because of your policy

In addition:

1. It will distract the other side at a critical time in its “vaccine rollout”.
 2. It will become a lightning rod for people’s dissatisfaction, frustration and powerlessness.
 3. It will light up the contradictions of their “vaccine”, awaken people and motivate them to resist

Most importantly where once so many lines of argument and evidence competed for public attention, *A Campaign to Cry ‘Murder!* will draw them together as evidence supporting a single emotional message.

...OUR THREE PILLARS OF SUCCESS

This Checkmate—United Voices Initiative will succeed because it will give us:

1. A SIMPLE DOMINANT NARRATIVE that we refer to at all times: "*This is Murder!*"
 2. A UNIFIED VOICE saturating media 24/7, with the many proofs of murder.
 3. AN EMOTIONAL FOCUS ON DEATHS in which every death further indictsthe Govt.

We will have hijacked their" successful formula and made it ours:



“CHECKMATE!”

THE FACTS...	...DEMAND ANSWERS
<p>1. There are many successful treatments for COVID</p> <p>Documented: Doctors worldwide¹ have saved up to 100% of patients using Hydroxychloroquine,^{2,3} Ivermectin,⁴ Azithromycin, Quercetin, SMT,⁵ Methadone, Vitamins D3, C,⁶ K2, Corticosteroids, Ozone, Zinc, and more.</p> <p>Doctors announcing these <i>life-saving</i> protocols are silenced and can even lose their jobs,^{7,8} and for months Govt has only said “Take the vaccine!” Why?</p>	<p>WHY is Govt withholding these cures from us?*</p> <p>Do you know someone who died from COVID after failing to receive these life-saving treatments? Have you ever heard a Public Health Officer recommend them?</p> <p><i>Why do Govt mandates weaken your immune system?</i>⁹ by reducing oxygen, exercise, social connection and joy; and increasing isolation, anxiety and fear, which has potentially devastating psychological impacts.</p>
<p>2. Anti-COVID Measures are killing thousands</p> <p>Documented: anti-COVID measures have been lethal. <i>10x more people die from lockdowns than the virus</i>¹⁰ They’re being denied critical checkups, treatments and surgeries ; and dying from overdose, despair, suicide.¹¹</p> <p>Tragically it is known and documented Govt mandates for masks,¹² lockdowns,¹³ and distancing do not work and harm both personal health and society as a whole.</p>	<p>WHY are Govt measures more deadly than COVID?^{10*}</p> <p>If Govt knows—and it must know—that <i>its anti COVID measures endanger public health and safety</i>, why is it intensifying those measure instead of changing them? Why is Govt actively forcing compliance to policies that are causing unnecessary deaths, social devastation and economic upheaval instead of restoring community health and vitality?^{14, 24}</p>
<p>3. COVID “Vaccines” Kill and Injure Healthy People</p> <p>Documented: This is <i>not</i> a “vaccine”¹⁵ rollout. It is an mRNA genetic experiment¹⁶ never used successfully in humans¹⁷ and not fully safety tested.¹⁸ It enters cells and becomes a <i>self-replicating part of the body</i>¹⁹ that can trigger the immune system into attacking its own cells.²⁰ Perfectly healthy people are already reporting devastating effects and a high rate of fatalities.²¹</p>	<p>WHY have Vaccines NO BENEFITS and ONLY RISKS?*</p> <p>Vaccine manufacturers admit their “vaccines” do NOT give protection from COVID, or prevent spread.²² Govt says <i>nothing changes</i>: masks, distancing and lockdowns will go on and we’re to have 2, now 3 shots!²³ Why is Govt pressuring healthy people with near-zero COVID risk, to take a jab and risk permanent damage and death as well as unknown future risks? ²⁴</p>

If I were to do nothing, I'd be guilty of complicity.” DaShanne Stokes

FOOTNOTES*: 1.<https://www.medicineuncensored.com> 2 Database of all HQC Studies 3.HCQ therapy: a nationwide study 4. Ivermectin in Treatment of COVID-19 5. Sequential multidrug treatment for COVID-19 6. Immune-boosting role of vitamins D, C, E, zinc, selenium and omega-3 7. Frontline doctor fired 8. They threatened to fire my colleagues 9. Model Health Mask Facts 10. Rethinking the lockdown 11. Cost of Lockdowns 12. Masking: A Review of the Evidence 13. Lockdowns Don’t Prevent Spread 14. How Government Creates Panic 15. Synthetic mRNA Covid vaccines: mRNA Shots Are Legally Not Vaccines 16. Vaccine Authorization: mRNA covid vaccines: a risk benefit analysis; Review of Drosten Report 17. Life-Threatening Reaction to PEG; Technology Never Used on Humans 18. Vaccines lead to lung risk; Vaccine: Unscientific and Deceitful; Trials Fail to Assess Safety; CHD Vaccine Safety Concerns; Vaccine Nanoparticles Never Approved 19. Antibody Dependent Enhancement; How the Vaccine Works 20. mRNA:DNA hybrids; Antibody causes severe lung injury 21. Vaccine Adverse Events 22. Pfizer Admits Vaccine Doesn’t Prevent COVID 23. Fauci: Masks still needed 24. Vaccine Injury Data; Vaccines could kill 50 million; Dr. Cahill: Deaths within months; Risk of worsening disease; 24. BMJ: Social Murder

RECOMMENDED LINKS: COVID Report: tiny.cc/CoVidReport; COVID Stats tiny.cc/CoVidData *For full URLs and more references go to TruthInAction.info/Murder

APPENDIX 2 MANAGING A PANDEMIC OR CRIMINAL NEGLIGENCE?

Have you wondered what happens in a pandemic? This chart describes established pandemic procedures and invites you to compare them with your experience of the past months.

PANDEMIC MEASURES	COVID-19 MEASURES
Authorities and doctors inform people as information comes in, taking care to avoid starting a panic.	Politicians present information in ways that highlight the threat, and create a climate of fear.
People judged to be most at risk are identified and precautions are taken to isolate and protect them.	The <i>entire</i> population is subjected to extreme measures including 70-80% who are at low risk. ¹
More and more seriously ill people are found and affect more and more neighbourhoods.	For many, cases of illness are generally only heard about in the media or at second or third hand.
Throughout the entire country emergency rooms and hospital wards are overcrowded. Staff is on overtime.	At height of COVID surge, there are reports of underutilized hospitals, and many empty beds. ²
Established pandemic protocols are rigorously followed. Accurate statistics, and terminology is critical.	Established protocols are often not followed. Counts are unreliable. The term “case” is misused. ³
Strict tallies are kept of cases and deaths so epidemiologists can evaluate the risks of the disease.	The media conflates cases with deaths. Doctors told to list deaths by other causes as COVID deaths. ⁴
Statistics show “excess” deaths significantly above the normal mortality rates for the period.	Number of deaths overall are not much different from normal year-over-year mortality rates.
The suspected pathogen is isolated and studied to prove it is the cause of the symptoms of the illness.	No lab or govt has shown it has isolated a virus it has proven to cause COVID-19 symptoms. ⁵
If tests used on people confirm their symptoms are caused by the pathogen, then they’re called a “case”.	PCR tests misused at high cycles on asymptomatic people generate over 90% false positive “cases” ⁶
Broad communications are essential with doctors, specialists and nurses to create treatment protocols.	Renowned scientists are discredited and concerns of front-line doctors are rejected. ⁷
As soon as treatments are shown to be effective, it is immediately communicated throughout the system.	Successful treatments are ignored and doctors are banned from sharing treatment discoveries. ⁸
Throughout the pandemic the priority is on health not profits, and getting people safely back to normal life.	Makers of vaccines dominate media for months saying the <i>only</i> way back to normal life is a vaccine.
Clear consistent guidelines are established as soon as possible in order to find a cure quickly and efficiently.	Guidelines are inconsistent, illogical and contrary to science, and we’re never any closer to the end.
Politicians and health authorities try to minimize negative impact on people, businesses and economy.	Right from the start businesses are told to stop operating. The economy is <i>deliberately</i> collapsed.
People follow health guidelines confident govt and health authorities have their best interests at heart.	People follow guidelines, under fear of social pressure, being reported to police, and heavy fines.
People struggle with a health crisis knowing they are being helped by government.	People are struggling with the social, psychological and economic upheaval <i>caused by government</i> . ⁹

¹ World Doctors Alliance www.Acu2020.org ² CanadaAvoidsSurge: tiny.cc/eya2tz ³ CDC confuses tests: tiny.cc/gya2tz

³ No PCR Standard: tiny.cc/kya2tz ⁴ When is COVID: tiny.cc/mya2tz Cases Versus Deaths: tiny.cc/CoVidData (from 24:30 min);

Non-COVID deaths: tiny.cc/yya2tz ⁵ No Virus Proved: tiny.cc/yya2tz ⁶ NYT - False Positives: tiny.cc/6za2tz

⁷ Doctors Attacked tiny.cc/aza2tz (6:45min) ⁸ Front Line Doctors: tiny.cc/cza2tz ⁹ Crimes Against Humanity: tiny.cc/gza2tz

HOW TO MISMANAGE A PANDEMIC

COVID Changed Critical Terms and Scientific Protocols

TERM	MEANINGS BEFORE 2020	MEANINGS AFTER JANUARY 2020
PANDEMIC	Until 2012 A pandemic was only declared if an infectious disease caused extremely high numbers of deaths internationally. The 1918 Spanish flu (which killed millions) is usually the example given.	With COVID no number of deaths is required to declare a pandemic. An infectious disease needs only to cross a border. The term “Pandemic” was redefined in 2012 after heavy lobbying by vaccine manufacturers after the fake SARS pandemic. ¹
CAUSE OF INFECTION	A cause is named only after a suspected agent of infection is first isolated; cultivated and shown to cause the same symptoms in a new subject following Koch's postulates. ²	With COVID The 140 yr old Koch gold standard to identify cause of symptoms has been ignored. ³ No lab in the world has isolated any agent shown to cause COVID symptoms.
CASE	Only people ill and showing symptoms, were tested. Only after they had been tested by a doctor and the cause of the illness was determined, would they be called a “case”	With COVID a perfectly healthy person with no symptoms can be called a “case”. They are diagnosed by a PCR test which it's inventor explicitly stated was not to be used for diagnosis.*
ASYMPTOMATIC SPREADER	Asymptomatic meant absence of symptoms: healthy. Therefore asymptomatic people are not infectious and are not spreaders— However if they are vaccinated they can become spreaders through viral shedding. ⁴	With COVID some studies say 20% of people without symptoms are contagious. Others say 40-45%. Still other studies suggest that 80%, This is all meaningless anyway though because they're using a PCR test which is totally unreliable. ^{4 5 *}
TESTING	Diagnostic testing is done using a procedure proven to identify an infectious agent consistently with a high degree of reliability.	With COVID PCR testing was not designed for diagnosis. There is no standard use. Results are inconsistent with up to 100% false positives! ^{6 *}
ISOLATION	Isolation procedures and protocols were used selectively to protect those who were ill and the those identified as vulnerable.	With COVID all healthy people, including those with near zero risk of becoming ill are isolated and subjected to procedures that are not necessary.*
CAUSE OF DEATH	The cause of death listed in a death register is understood to be the prevailing reason that caused someone to die.	With COVID in spite of what may have actually caused the death, financial and political incentives often mean even suspicion of COVID is sufficient to list COVID as cause of death. ^{7 *}
VACCINE	A vaccine is created from a weakened form of a natural infectious agent which is intended to stimulate an immune response in the body.	With COVID instead of using a natural virus, this is a new synthetic patented technology that alters DNA in body cells and puts those vaccinated at risk of a lethal auto-immune response. ⁸

These changes are unique to this COVID crisis. They created an unwarranted climate of fear and have severely compromised efficient management of the crisis right from the start:

- **They confuse communication of critical information between front line doctors**
- **They handicap critical coordination and management of resources⁹**
- **They deprive the numbers of “cases” and deaths of any meaning at all.**

APPENDIX 4 **The Biderman Report (1956) and COVID-19 Measures**

* “Communist Coercive Methods for Eliciting Individual Compliance”

The Chart of Coercion below, is taken from a report by Dr. A.D. Biderman, *identifying Chinese and Korean brainwashing techniques* used to make captured American servicemen *psychological* as well as physical prisoners.^{**} Compare Biderman’s Chart with your experience since February, 2020.

Chart of Coercion	COVID-19 Measures
Isolation <ul style="list-style-type: none"> • Deprives individual of social support of their ability to resist • Makes individual dependent upon the captor • Individual develops an intense concern with self. 	Isolation <ul style="list-style-type: none"> • Social distancing • Isolation from loved ones, massive job loss • Solitary confinement semi-isolation • Quarantines, containment camps
Monopolization of Perception <ul style="list-style-type: none"> • Fixes all attention upon immediate predicament • Frustrates all actions not consistent with compliance • Eliminates stimuli competing with those controlled by the captor 	Monopolization of perception <ul style="list-style-type: none"> • Restrict movement • Create monotony, boredom • Prevent gathering, meetings, concerts, sports • Dominate all media the 24/7, censor information
Induced Debility and Exhaustion <ul style="list-style-type: none"> • Weakens mental and physical ability to resist • People become worn out by tension and fear 	Induced debility <ul style="list-style-type: none"> • Forced to stay at home, all media is negative • Not permitted to exercise or socialize
Threats <ul style="list-style-type: none"> • Cultivates anxiety and despair • Gives demands, and consequences for non-compliance 	Threats and Intimidation <ul style="list-style-type: none"> • Threaten to close business, levy fines • Predict extension of quarantine, force vaccines • Create containment camps
Occasional Indulgences <ul style="list-style-type: none"> • Provides motivation for compliance • Hinders adjustment to deprivation • Creates hope for change, reduces resistance • This keeps people unsure of what is happening 	Occasional Indulgences <ul style="list-style-type: none"> • Allow reopening of some stores, services • Let restaurants open but only at a certain capacity • Increase more people allowed to gather • Follow concessions with tougher rules
Demonstrate Omnipotence <ul style="list-style-type: none"> • Demonstrates futility of resistance • Shows who is in charge • Provides positive motivation for compliance 	Demonstrate Ominpotence <ul style="list-style-type: none"> • Shut down entire economies across the world • Create money out of nowhere, force dependency • Develop total surveillance with nanochips and 5G
Degradation <ul style="list-style-type: none"> • Makes resistance seem worse than compliance • Creates feelings of helplessness • Creates fear of freedom, dependence upon captors 	Humiliation or Degradation techniques <ul style="list-style-type: none"> • Shame people who refuse masks, don't distance • Make people stand on circles and between lines • Make people stand outside and wait in queues • Sanitation stations in every shop
Enforcing trivial demands <ul style="list-style-type: none"> • Develops habit of compliance • Demands made are illogical and contradictory • Rules on compliance may change • Reinforces who is in control 	Enforcing trivial demands <ul style="list-style-type: none"> • Close parks, beaches, playgrounds • Masks to be worn at home, or alone outdoors • Changing limits on people allowed to be together • Sanitizers to be used over and over in a day

APPENDIX 5

10 FACES OF GENOCIDE

Government policy caused thousands of unnecessary deaths among the old and vulnerable. In violation of long-established medical protocols and the Nuremberg Code, Government is moving aggressively to have everyone receive an un-safety-tested experimental

10 Stages of Genocide	COVID-19
1. CLASSIFICATION: All cultures have categories to distinguish people into “us and them” by ethnicity, race, religion, or nationality: German and Jew, Hutu and Tutsi.	We are experiencing a social divide—“us” and “them”—such as has never been seen before. This is underscored daily in the mainstream and social media .
2. SYMBOLIZATION: We give names or other symbols to the classifications. We name people “Jews” or “Gypsies,” or distinguish them by colors or dress; and apply the symbols to members of groups. When combined with hatred, symbols may be used to identify groups.	Those not complying with the mandates are judged and called “anti-maskers”, “deniers”, “conspiracy theorists”, “selfish” and are often easily recognized as those not wearing masks.
3. DISCRIMINATION: A dominant group uses law, custom, and political power to deny the rights of other groups. The dominant group is driven by an exclusionary ideology that would deprive less powerful groups of their rights, advocating monopolization or expansion of power by the dominant group.	Government influenced by Corporate and Big Pharma deny small businesses the right to operate. Workers are denied employment. Big corporations continue to operate with huge increase in profit and power to the ultra rich, including eugenist Bill Gates.
4. DEHUMANIZATION: One group denies the humanity of the other group....At this stage, hate propaganda in print and on hate radios is used to vilify the victim group. Hate speech fills the propaganda of official radio, newspapers, and speeches.	Government and media marginalize anyone questioning their mandates. They use socially divisive propaganda labels like “selfish deniers”, “irresponsible” and even “killers”, exhibiting dangerous “vaccine hesitancy”.
5. ORGANIZATION: Genocide is always organized, usually by the state.... Sometimes organization is informal...Special army units or militias are often trained and armed...States organize secret police to spy on, arrest, torture, and murder people suspected of opposition to political leaders.	Interprovincial health advisory committees meet regularly to organize lockdown mandates and enforcement. The government readies the military to administer vaccines; promote track and trace; People told to snitch on neighbours opposing the mandates.
6. POLARIZATION: Hate groups broadcast polarizing propaganda. Motivations for targeting a group are indoctrinated through mass media. The dominant group passes emergency laws or decrees that...erode fundamental civil rights and liberties.	Broadcasts dominate the media 24/7 with reports on rising cases and deaths, artificially driving up fear of the virus and non-compliers. They use any opportunity to judge deniers and vaccine hesitancy.
7. PREPARATION: National or perpetrator group leaders plan the “Final Solution” They often use euphemisms to cloak their intentions, such as referring to their goals as “ethnic cleansing,” “purification,” or “counter-terrorism.” They indoctrinate the populace with fear of the victim group. Leaders often claim that “if we don’t kill them, they will kill us.”	From the beginning of the alleged pandemic, the ultimate solution has always been vaccination which we are told will “protect” us, bring us to the “new normal”. The populace is told the “deniers” are dangerous and that they must be vaccinated so the lives of the vaccinated won’t be threatened by the unvaccinated.
8. PERSECUTION: Victims are identified and separated out because of their ethnic or religious identity. Sometimes they are even segregated into ghettos, deported into concentration camps. ...basic human rights become systematically abused	Mandatory isolation is set up, quarantine, quarantine hotels and isolation camps. Freedom to assemble, to work and to travel is denied. The unwilling are being coerced into accepting vaccination.
9. EXTERMINATION begins, and quickly becomes the mass killing legally called “genocide.”	Vaccinations begin. Experts warn they’ll irrevocably change the genome and could destroy the immune system causing unimaginable deaths, and suffering.
10. DENIAL is the final stage that lasts throughout and always follows genocide.. They block investigations of the crimes, and continue to govern until driven from power by force	Censorship rises to unprecedented levels. Doctors, scientists, researchers are de-platformed. Opposing voices are banned.

bioengineered mRNA genetic agent, with unknown potential to cause high levels of deaths and suffering.

APPENDIX 6

THE NUREMBERG CODE (1947)

NO LONGER ABOUT THE NAZIS THEN – IT IS ABOUT US NOW

10 standards established by the Nuremberg war crimes tribunal oblige physicians running experiments on human subjects to ensure *voluntary informed consent* of the human subjects and to protect their right to control their own body. These standards are part of medical codes world wide, in ethics *and in law*.

Here the Nuremberg Code is formatted on the left for easy comparison to the current Experimental COVID-19 “vaccine” (ECV) trial, Phase III. Italics indicate violations of the Code. (Summary at bottom.)

THE NUREMBERG CODE 1947	COVID PRACTICE 2020-21
10 PRINCIPLES OF PERMISSIBLE MEDICAL EXPERIMENTS	
<p>“...The protagonists of the practice of human experimentation justify their views on the basis that such experiments yield results <i>for the good of society that are unprocurable by other methods*</i> or means of study. All agree, however, that certain basic principles must be observed in order to satisfy moral, ethical and legal concepts.” [Emphasis is added]</p>	
<p>1. The voluntary consent of the human subject is absolutely essential. This means that the person involved <i>should have the legal capacity to give consent; ...and be able to exercise free power of choice:</i></p> <ul style="list-style-type: none"> • <i>... without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion.</i> • <i>[The information necessary]... to make an understanding and enlightened decision.</i> • This latter element requires <i>that before the acceptance of an affirmative decision by the experimental subject [the subject]] should be told:</i> <ul style="list-style-type: none"> • <i>the nature, duration, and purpose of the experiment;</i> • the method and means by which it is to be conducted; • <i>all inconveniences and hazards reasonably to be expected</i> • <i>the effects upon his [or her] health or person which may possibly come from his participation in the experiment.</i> <p>2. The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs, or engages in the experiment. <i>It is a personal duty and responsibility which may not be delegated to another with impunity</i></p> <p>2. The experiment should be such as to yield fruitful results for the good of society, <i>unprocurable by other methods or means of study, and not random and unnecessary in nature.</i></p>	<p>The vaccines are being forced on people and with diminished cognitive ability and others in nursing and care homes, often without informed family consent.</p> <p>Every element listed here has been part of the COVID experience See Summary below.</p> <p>Doctors are often uninformed. Govt and media keep information from the public.</p> <p>Subject isn't told the ECV is experimental and is not fully tested as a “vaccine”.</p> <p>There is no requirement or protocol to inform subjects of ECV risks.</p> <p>Those giving the ECV are often equally ignorant of the nature of the experiment and its risks.</p> <p>Neither is it made clear that this is a registered safety trial, without standard safety protocols, which is using its human subjects effectively as “test animals” to obtain information on the very risks they should be apprised of.</p> <p>Doctors, nurses, paramedics, and lay volunteers are unaware they must ensure not only that the subject consents to the ECV but is also fully informed and understands the risks before consenting.</p> <p>Other methods (HCQ, Ivermectin, Quercetin, Azithromycin, Zinc, Copper, Methadone, Vitamins D3, C K2, Corticosteroids, Ozone) all offer superior results than the ECV.</p>

3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results justify the performance of the experiment.	Animal trials were inadequate and in demonstrated high risk of devastating damage from a vaccine intended to fight a coronavirus whose history indicates it is mild and short-lived.
4. The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.	Often there is no observation period, no monitoring, no follow up. Subjects die at home.
5. No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur; except, perhaps, in those experiments where the experimental physicians also serve as subjects.	Perhaps this is why there has been such a drive to have care givers and nurses receive the CRV first, sometimes with terrible results.
6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.	The majority of people, at near zero risk from COVID, are still being told coerced to take the unknown risks of the Experimental Vaccine
7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability or death.	The strident urgency of administering the Experimental COVID Vaccine to as many people as possible has replaced protection of subjects as a priority.
8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.	Temporary ECV stations are often run by people with limited training and no ability to assess, document or follow up on side effects, so post-ECV deaths and adverse events go unnoted, discounted or denied.
9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.	People refusing the ECV are facing a threat of being denied critical social and economic intercourse if they do not submit to participation in the ECV experiment.
10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject.	Politicians, not scientists, are in charge of the COVID “vaccine” experiment which is pushed forward in spite of the growing evidence from science, statistical studies, and testimony from tens of thousands of medical experts around the world.

To see the unedited version of the Nuremberg Code go to <http://www.cirp.org/library/ethics/nuremberg/>

IN SUMMARY Aggressive Government campaigns to inoculate an unsuspecting and ill-informed populace with an untested “medical” agent of genetic modification—the product of a technology never before used in humans—which has been fraudulently mislabelled a “vaccine” even though it is still in the Phase III testing stage constitute *egregious and often multiple violations of every single paragraph of the Nuremberg Code*.

Government, with complicit media, have used fraudulent declarations of public emergency, censorship of critical information, unlawful mandates and overreaching controls, fraudulent data and protocols, and coercive social and economic force to induce the populace to submit to taking part in the experiment.