We assimilate a wide range of public health risks into everyday life, without straining to eradicate them at enormous and indefensible economic, social and political cost. As much as containing the virus itself, part of this strategy must be to arrest the contagion of pandemic fear.

The letter to the government reads: “We are writing as scientists and scholars concerned about the confused and contradictory directions currently being promoted in the management of the covid-19 pandemic. We are being told simultaneously that we have successful vaccines and that major restrictions on everyday life must continue indefinitely.

Both propositions cannot be true. We need to give more weight to the data on the actual success of the vaccines and less to theoretical risks of vaccine escape and/or surge in a largely vaccinated population. It is time to reassess where we are and where we go next.

Phase One of the covid-19 vaccination programme will shortly be completed, with every vulnerable adult in the UK having been offered two injections. It is clear that the vaccines are fully delivering on the promise of the clinical trials. We can be very confident that they will reduce covid deaths by around 98 per cent and serious illness by 80-85 per cent. This level of protection against serious illness seems not to be significantly affected by any of the variants that have been observed, because of the breadth of T-cell responses.

The DfE recommendations on face covering and social distancing in schools should never have been extended beyond Easter. Mandatory face coverings, physical distancing and mass community testing should cease no later than 21 June along with other controls and impositions. All consideration of immunity documentation should cease.

We have learned that a good society cannot be created by obsessive focus on a single cause of ill-health. Having endured the ravages of 2020, things are very different as we enter the spring of 2021. It is more than time for citizens to take back control of their own lives.”

**Signatories (in alphabetical order):**

Professor Anthony Barrett, FRS
FMedSci, FRSE, Bacteriology, University of Aberdeen

Dr Gerry Quinn, MRCGP, FFPH, former Director of the Communicable Disease Surveillance Centre (Wales).

Emeritus Professor John Scott, CBE, FRSA, FBA, FAcSS, Sociology, University of Essex

Professor Karel Silvers, FRCR, FRCP, FFPM, Medicine, University of Buckingham

Professor Matthew Wood, Psychology, University of Nottingham

Dr Chao Yang, Health & Social Care Statistician, Kingston University and University of London

Professor John Watkins, Epidemiology, Cardiff University

Professor Lisa White, Modelling and Epidemiology, University of Oxford

Professor Jackie Cassell, FFPH, Deputy Dean, Brighton and Sussex Medical School

Professor Angus Dalgleish, FRCP, FRCPATH, FMedSci, Oncology, St George’s, University of London

Professor Robert Dingwall, FAcSS, HonMPhD, Sociology, Nottingham Trent University

Professor Sunetra Gupta, Theoretical Epidemiology, University of Oxford

Professor Carl Heneghan, MRCGP, Centre for Evidence Based Medicine, University of Oxford

Professor Mike Hulme, Human Geography, University of Cambridge

Dr John Lee, formerly Pathology, Hall York Medical School

Professor David Livermore, Medical Microbiology, University of East Anglia.

Professor Paul McKeigue Genetic Epidemiology and Statistical Genetics, University of Edinburgh

Professor David Paton, Industrial Economics, University of Nottingham

Emeritus Professor Hugh Pennington, CBE, FRCPATH, FRCP (Edin), FMedSci, FRSE, Bacteriology, University of Aberdeen

Mike Hulme, professor of human geography, University of Cambridge said: “It is increasingly clear that pursuing a strategy of virus eradication is delivering an increasingly unfavourable risk-benefit ratio. Eradication is an unattainable goal. In the meantime, the damage to the country’s broader social, political and economic health caused by this misguided strategy deepens.

It is time to commit to a prudent and balanced strategy for managing covid-19 risk in society, a strategy which this Open Letter points towards.
Special thanks to our warehouse hubs, and all those giving their valuable time to distribute The Light around the country.

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Artist Samantha S
Lighthouse logo: and Adrian W Photographic

Thank You

MAY 20TH 2021
Coronavirus (Covid-19) Vaccine Deaths & Adverse Reactions

MANUFACTURER | REACTIONS | DEATHS
--- | --- | ---
Pfizer/BioNTech | 175673 | 382
Astra Zeneca/Oxford | 676083 | 806
Moderna | 5567 | 4
Brand Unspecified | 2158 | 21
TOTAL | 859,481 | 1213


IT IS ESTIMATED ONLY 10% OF CASES ARE REPORTED

The Vaccine Press Gang

Medical fascism is on the march. On 17th May a government minister warned that ‘vaccine refusers are the principal threat to the final lifting of lockdown restrictions on June 21’. An apparently co-ordinated media campaign began, with several commentators pointing an accusatory finger at people who refuse to be experimented on.

On Sunday 16th May, the day before the pubs reopened in England, Times writer and Orwell Prize winner Janice Turner suggested that spreading of the Indian variant was caused by ‘reckless vaccine avoidance, tweeting: ‘Infuriating and sad. We risk not having our freedoms returned in June because people refuse to get vaccinated’.

Mail on Sunday columnist Dan Hodges tweeted: ‘The solution to the covid crisis is not to pretend there’s not an issue with a small but significant number of people being offered the vaccine not accepting the vaccine. The solution is to ensure those people refusing to get vaccinated get vaccinated’.

Hodges, Turner and fellow members of the ‘vaccine press gang’ never consider legitimate reasons for this reluctance. Have they seen the Yellow Card data on suspected adverse reactions? Did several countries ban the Astra Zeneca vaccine for no reason? Blood clots and blindness are noise rather than signal to these journos, who seem to want free-thinking people to be pursued like a fox by a pack of hounds, held down and injected against their will. This is barbaric.

The tone was set back in February, in Nick Cohen’s Observer column titled ‘it is only a matter of time before we turn on the unvaccinated’. Using the term ‘vaccine apartheid’ positively, Cohen claimed a ‘journalistic duty’ to attack dissidents such as Piers Corbyn and Toby Young.

The drumbeat is getting louder. A Sun editorial ‘jab them up’ ridiculed ‘anti-vaxxers’ and their wacky conspiracy theories about a ‘global takeover’.

‘With every new stat proving jabs have slashed hospitalisations and deaths, these dimwits look increasingly like Flat Earthers. Except more dangerous.’

Strangely, covid admissions declined to almost nothing last summer, without a vaccine, but facts shouldn’t get in the way of a good propaganda piece. In the Evening Standard, Nimco Ali, close friend of Boris Johnson’s occult-practising partner Carrie Symonds, wrote ‘we should uncouple, unfollow and evict from the pub anyone who refuses to get vaccinated.’ Ali has ‘zero tolerance for the stupidity’ of such people. Ominously, she urged Britons to accept a medical surveillance system, meanwhile Michael Gove’s wife Sarah Vine was spitting bile in the Daily Mail.

The worst invective was by Sean O’Grady in the Independent. ‘This is what we do about anti-vaxxers: no job, no entry, no NHS access’, O’Grady opined unironically. With faulty comparisons to drink-driving and smoking indoors, O’Grady argued that ‘everyone who refuses a vaccine could be a killer on the loose, and should be judged accordingly’. Comments below the line were a heartening antidote.

Responding to a hateful monologue by Iain Dale on LBC, James Delingpole tweeted: ‘Dear @iaindale your ENTIRE schtick is about how nice and reasonable you are. Yet here you are stigmatising a group of informed, thoughtful people with perfectly valid reasons not to submit to experimental gene therapy for a bug with a 99.8 per cent survival rate.’

Journalists should be able to write freely. But as most people appreciate, a line must be drawn at incitement. Hodges, Cohen and O’Grady are not only pushing pseudo-scientific totalitarianism. Arguably, they are engaging in domestic terrorism.

One Rule For Them.

Lee Simpson - www.leesimpsonart.com

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Are We Being Misled By Design?

by CALLY STARFORTH

Throughout the last fifteen months we have had rolling death counts from the mainstream media warning us of a deadly plague. We are told that if we do not submit to tyranny and dikat, we are doomed. But why are the numbers seemingly so high? Is this part of an ongoing exercise to frighten and coerce the public into obeying even more authoritarian measures?

There are many reasons why so-called covid deaths cannot be safely assumed to be so. The not fit for purpose PCR test being one, the vague symptoms (or lack of) another. But there are specific signs that the need for a high death count was known in advance. One indicator is that the way mortality statistics are recorded was changed.

In the USA the CDC published guidelines on March 24th 2020 changing the way cause of death is collected for statistical purposes. The result was unreliable data.

In the UK too, the rules changed. From the middle of 2019, the NHS began rolling out a new national system of medical examiners, apparently to ‘PCR test the quality of mortality data’. When covid arrived, along with it came new guidance for doctors completing death certificates. A medical examiner signing a death certificate no longer needs to have seen the patient at all. His ‘attendance’ could be virtual, even a mere telephone consultation. And covid was now anisable direct or underlying cause of death.

Then on March 26th 2020, the Chief Coroner for England and Wales issued new guidance stating that although covid-19 was a ‘notifiable disease’ under the Health Protection Notification Regulations (2010), for the purposes of the Coronavirus Act 2020 it wasn’t a notifiable disease, so no inquest was needed. To add to the confusion, death data has been pulled from four different sources, allowing a death to be counted multiple times, thereby massively inflating the daily death toll.

Meanwhile NHS England, NHS Improvement and NHIS (tech arm) were commissioned to develop a data platform to: ‘provide a single source of truth about the rapidly evolving situation; data will then be integrated, cleaned and harmonised in order to develop the single and reliable information that is needed to support decision-making’.

the remarkable disappearance of flu and pneumonia, perhaps Sepsis has morphed into covid.

Even after a death is coded in MUSE, ICD software itself can then reclassify it. For example both cancer and a positive covid test would be mentioned on the death certificate under MUSE. The data then goes through ICD coding where the underlying cancer cause will be ignored and bingo! Another death from covid.

There is little doubt that the authorities want us to believe the death rate from covid is far higher than in reality. I suggest they are doing this to create terror so they can bring in unconstitutional and oppressive measures in line with Agenda 21/30 and the banker power grab whilst using us as guinea pigs for the experimental ‘vaccines’.

Sources:


Are We Being Misled By Design?

#MasksAreUseless

by JESSICA PETERS

Masks Are Useless And No One Has To Wear One

A Most a year into the New Abnormal and its bedazzled masks are a constant visual reminder of the dystopia we all endure on a day-to-day basis.

A once peaceful trip to the shops is now replaced by a sea of masks, judging eyes and unwanted questioning. Although masks were first introduced on a voluntary basis and government officials had publicly explained the concept of face coverings in stopping a virus, it wasn’t long before the rule was amended to no longer include choice after experts ‘shifted their thinking’. This has introduced a new level of fear showing clear discrimination flooded the internet after many shop workers and security staff relished their new found power without any previous training or the interpretation of legislation - which isn’t all that surprising considering Chief of Police Dame Cressida Dick admitted that this rule would be unenforceable and instead encouraged the public to shame shoppers who dared to show their smiling faces in public.

Pre-recorded government-compliant messaging is booming over the tannoy system in shops. As it is against the law to enter without a face covering or a medical exemption, but is that entirely true?

The legislation introduced for this rule is titled The Health Protection (Coronavirus, Wearing of face coverings in a relevant place) (England) Regulations 2020. This defines a face mask as a covering of any type which covers a person’s nose and mouth.

Section 4 of this Regulation is called “Reasonable Excuse”. It lists the reasons why a person may not follow this mask rule and includes medical, mental and health disabilities but also for those who may suffer ‘severe distress’ as a result of either putting on, wearing or removing a face covering. Additionally the government website also offers information on the use of exemption cards, stating that while some may feel more comfortable to carry proof of their exemption with them, it is not a legal requirement and you should not be required to produce one in order to access any service, public or private.

Over the last year scientists, professors and real journalists across the world have worked tirelessly to publish true and accurate information surrounding not only the inefficacy of the face coverings but also the dangers of prolonged and inaccurate use by the general public.

On a personal tip, the level of enforcement does seem to vary depending on the area or the shop you happen to be in but if I should be asked whether I can put on a face mask my response is a polite “no, thank you”. 9 out of 10 times I find the worker, already overworked and underpaid, will just accept my response as simply as I presented it to them, for fear of making their day any more strenuous than it already is. If they question further I would yield to tell them that I am “exempt”. And should the shop worker be feeling over-zealous that day and choose to challenge me on the reason for my exemption I would politely remind them that I do not need to show proof of my exemption and that this should have been made clear to them during training. You can ask for a manager if the situation is not quickly resolved, and it’s a good idea to save the links for both the face covering legislation and the government guidance on exemption cards - should you need to request the assistance of a manager, these links will evidence your rightful claims.

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That Nurse Who Does Ask Questions

by JENNA PLATT

I am a dual-qualified nurse currently walking around London wearing a sandwich board that says ‘Nurses are scared to speak out’. Here is my story about why this feels necessary:

I am 34 years old and have been qualified for 12 years. My experience has predominantly been care of the elderly, specialising in improving communication and care, especially around end of life care.

I am a big believer in supporting individuals to make their own decisions, even if they feel unwise to us, and have great success with individuals maintaining a good quality of life through positive risk-taking. This supported individuals to continue to do the things they loved and enjoyed with support and not simply saying ‘no it’s too risky’. One example was supporting an individual with dementia to make her own cup of tea which sounds small but that developed into her interacting with staff during their breaks and coming out of her room and sharing stories of her life. I do not think this relationship would have developed if we had said ‘no it is too risky’.

I am office-based but with my experience and knowledge I began to look at the evidence around mask wearing and the behaviour emerging that I saw and had happened to me where people appeared more aggressive and hostile towards each other, possibly due to being ‘faceless’.

One day out I was pushed and shouted at by 2 different individuals and that was the day I decided I was no longer going to wear a mask to help others feel better, as it was changing people’s behaviour in a negative way.

I kept busy during lockdowns and didn’t pay too much attention to what was going on as I threw myself into work, giving me time to do lots of things I was previously unable to do.

I offered my services for free in my local health area and was not taken up. Of all the volunteers who wanted to give their time to free to do their part only a handful were taken up on their offer.

Something didn’t seem right with the amount of advertising in supermarkets and over tannoy, the rules did not make any sense. One way systems where you were required to walk past many more people than you would normally, because there were arrows on the floor.

The messaging seemed heavily focused on fear and making people feel helpless. There was no messaging from what I have seen about common sense natural health and fitness. If the government were able to educate the public on health during lockdowns this could have supported the NHS to reduce the demand for other services aside from covid patients.

I started to discuss this on social media and from what staff were reporting to me there was a ‘culture of silence’ developing and people felt unable to ask questions. As a nurse this is what we are trained to do – ask questions. Questions help inspire improvements.

There was no longer any debate – do this and if you have a question/opinion you are an idiot.

The endless reports of death counts – without context or perspective. What can we compare this to? How many people would usually be expected to die in a given day / week / month?

If you asked questions, you became tarred with the brush of being selfish, uncaring and ‘how dare you, don’t you know people are dying? Don’t you know nurses are working really hard!!!’

The questions were not acknowledged or considered and people were being shamed and then silenced.

I walked from Stoke-on-Trent to London (151 miles) over 10 days to raise awareness that it is okay to ask questions and they shouldn’t cause conflict. That created a community of people who were sharing their experiences. I set off to hand deliver a letter to Boris Johnson - they didn’t take it and I needed to post it – but that was okay as I had connected people together along the way and had supported individuals who felt unheard.

I continued to create content based on what people said they were having problems with.

I have attended and will continue to attend protests because I feel very strongly about pro-choice, informed voluntary consent and I am completely against coercion, overt or subvert.

I am currently walking London for 5 hours a day to raise awareness that some nurses are scared to speak out. People ask me to share the stories of those who reach out to me. Currently I am one person doing the best that I can with the time that I have available and can not carry out interviews with each individual. People ask what nurses are scared of and why they are scared. People also say that I don’t look scared to speak out as they see me with a sandwich board.

I address these points first and I am scared. I am concerned about the way I am portrayed in the media and the impact this will have on my ability to pay my bills and keep my registrations. This however feels like the most important thing to do and morally the right thing to do. Nurses are scared to lose their jobs, they are scared that they will become scapegoats for the things they have witnessed. They have financial commitments just like everybody else and have worked hard to do the job they do and don’t want to be forced out. The individual stories are not mine to tell, and I don’t want to get them wrong. However, there are clear patterns emerging:

1. Heavy focus on audits rather than benefits to patient experience, no review dates or discussion on the impact these are having positively/negatively on both staff and patient wellbeing.

2. Working conditions – bullying, harassment, coercion, being ostracised or threat of job loss. If you ask questions, you become the problem.

3. Decline in quality of life and person-centred care. A focus around the hysteria and perceived risk of covid rather than discussing the actual risk to individuals and then planning their care accordingly.

Patients missing appointments, needing surgery which, if they had attended appointments, could have been unnecessary. Individuals not being with families and loved ones during times of loss and grief but being invited the day after death to collect the person’s belongings. Each individual who has reached out to me has a very different injustice depending on their work environment.

I want to support nurses and inspire them to speak out in the best interests of their patients and work colleagues For some reason it has been turned on us that we are the problem and there are many nurses and professionals out there who are lost, confused and alone, without support from colleagues, management, unions or the Nursing Midwifery Council.

I am asking for a meeting with The NMC to discuss the concerns with nurses and trying to clarify the myths and rumors that health and social care staff are concerned of and to have our questions answered. This is what I was trained to do. This to me is what being a nurse is about - doing what is right even if it is unpopular, seeking debate and evidence-based rationale, asking questions and putting the patient at the heart of care.

2 dogs, I extremely supportive husband.
hello@lockdownalternative.com
Instagram: that_nurse_who_asks_questions

Alarming Rise In Alcohol Deaths

by JESSICA PETERS

After 15 months of draconian measures imposed by the Johnson Regime, the wider consequences are beginning to surface in the form of figures sourced from the Office for National Statistics (ONS) and therefore undeniable, even to the mainstream media. Although a lot of information is yet to be released in relation to lockdown deaths and impacts, we can already see the irreversibly bleak picture that has been inflicted on some of the most vulnerable members of our society.

The ONS have released information surrounding the number of alcohol-related deaths for last year and the results are harrowing. In 2020 the ONS registered 7,423 deaths from alcohol-related issues in England and Wales, this is defined as deaths directly caused by a misuse of alcohol. This figure is a 20% increase from the year preceding and is also the highest rate of alcohol deaths we have seen in England and Wales for 20 years.

Of those 7,423 deaths, 80% were from alcohol-related liver disease, 10% from mental or behavioural disorders linked to alcohol abuse and 6% from alcohol poisoning.

While government departments and services perform public displays of bewilderment, we need only look at the policies and procedures imposed on the British people over the last 14 months to begin to understand the reasons. Given that this massive increase in alcohol-related deaths began in March of 2020 (the same month the lockdown was imposed and off-licences were somehow somehow considered ‘essential businesses’), coupled with the apparent subversion of our National Health Service into a ‘Covid-Only’ Health System, it would not be far-fetched to deduce that these gross infringements on the lives and rights of everyone may have significantly contributed to the further deterioration of the nation’s health and well-being.
Scientists Find Pollutants In Face Masks

Swansea University scientists have uncovered potentially dangerous chemical pollutants that are released from disposable face masks when submerged in water. The research reveals high levels of pollutants, including lead, antimony, and copper, within the silicon-based and plastic fibres of common disposable face masks.

The study, led by Dr Saurabh Shrivastava and supported by the Innovative Materials, Processing and Numerical Technologies (IMPACT) and the SPECIFIC Innovation & Knowledge Centre, found high levels of harmful pollutants, leachable heavy metals and micro-plastics, such as lead, copper and Polychlorinated Biphenyls (PCB) in the face coverings they bought.

At a time when face coverings are legally mandated (though anyone is exempt) across the nation and introduced into our children’s daily lives via their schools, the findings of this study are even more alarming in that it raises such an important questions of what harm can be caused to the general public by the use of these masks? And, once disposed of, what impact will this have on our future generations?

Lizzie Prior, Great British Beach Clean Coordinator at the Marine Conservation Society said: “The amount of PPE our volunteers found on beaches and inland this year is certainly of concern. Considering mask wearing was only made mandatory in shops in England in late July, little more than three months before the Great British Beach Clean, the sharp increase in PPE litter should be a word of warning for what could be a new form of litter polluting our beaches in the future.”

The findings reveal significant levels of pollutants in all the masks tested – with micro/nano particles and heavy metals released into the water during all tests. Researchers conclude this will also have a substantial environmental impact and, in addition, raise the question of the potential damage to public health.

Dr. Shrivastava said: “It is, therefore, imperative that stricter regulations need to be enforced during manufacturing and disposal/recycling of Disposable Face Masks to minimise the environmental impact. There is also a need to understand the impact of such particle-leaching on public health. One of the main concerns with these particles is that they were easily detached from face masks and leached into the water with no agitation, which suggests that these particles are mechanically unstable and readily available to be detached into the mouth. A full investigation is necessary to determine the quantities and potential impacts of these particles leaching into the environment and the levels being inhaled by users during normal breathing. This is a significant concern, especially for health care professionals, key workers and children who are required to wear masks for large proportions of the working or school day.”

The research team includes Professor Trystan Watson, Dr Javier Delgado Gallardo and Dr Geraint Sullivan.


Is There Still Power in The Unions?

When I started working full-time in a bakery back in 1993, I was told that the first two things I should do on my first day were to find the staff canteen and ask to speak to the Union Shop Steward. Ten years later, I became a Shop Steward myself and eventually the Branch Secretary (‘Convener’ in old parlance). My mantra to the managers was: “As long as we have fair pay and fair play in a safe working environment, we’ll do much more than go ‘slogging rarely seen’”. When recruiting new members I used to stress to them the importance of collective power and the need to leave egos at the door, or risk the company dividing and ruling us. As a result there was a fairly solid ‘kick one of us and we all cry’ vibe in the factory.

Trade Unions can be a genuine, positive force when they do things properly. Many of the workers’ rights that exist today have been hard won and their trade unions have been crucial in securing them. Even though the TUC have on occasion been too quick to reject new generations of workers’ voices, they have still been the main platform for workers to speak to each other in solidarity.

It seems that some Union leaders have simply used their organisations as a platform for their own politics, super-imposing their beliefs, fears and opinions on their respective memberships, rather than working hard to reflect the real concerns and aspirations of the people they’re supposed to represent. Some of them now look to be acting as sales reps for big pharma, advertising and pushing the ‘vaccine’ on their members without so much as a risk assessment (3).

The TUC haven’t helped matters either. For years now, their response to anything (particularly austerity during the David Cameron regime) has amounted to nothing more than slogans, marches and rallies. Oddly, rather than encourage a ‘come one, come all’ mentality, where workers from all backgrounds and walks of life come together in common endeavour and solidarity, the TUC appear to favour breaking Union members down into various identity groups (4), which only serves to open the door for divide and rule within the Trade Union Movement.

Trade Union membership has dropped considerably down the years for Unison members working in workplaces. I’ve seen Unionised workplaces that exist today have been hard won properly. Many of the workers’ rights that we have today have been hard won when workers came together in numbers to protect themselves. If there’s one thing I’ve learned over the years it’s that the unions have to stand together and stick up for their members and fight for the things they believe in.

They have to fight to stop the big pharma, advertising and pushing the ‘vaccine’ on their members without so much as a risk assessment (3) and this will likely get worse as businesses continue to struggle (if not go under) and companies are allowed to use ‘covid’ as a vehicle to ditch staff and move further into automation.

With the trade unions, it seems that many trade union leaders have failed to understand their role in representing the interests of their members and the wider public. They need to step up to the plate and meet the challenges of the current crisis head-on, rather than simply allowing themselves to be sidelined.

The TUC have an important role to play in the current crisis. They need to be a voice for working people, not just for the wealthy few. They need to be a voice for those who are being left behind by the current crisis, not just for those who are already in a position of power.

The TUC have an important role to play in the current crisis. They need to be a voice for working people, not just for the wealthy few. They need to be a voice for those who are being left behind by the current crisis, not just for those who are already in a position of power.

Thank you for reading. Please pass the Light on when you’ve read it.
Banking, Or Organised Crime

Professor Richard Werner, an economist and academic, asked a London taxi driver one day, “what do you think creates and allocates the money supply in the UK?” The taxi driver rubbed his chin for a while then said, “the Bank of England.” Reasonable answer you might think. “But,” said Werner, “the Bank of England only supplied 3% of the money in this country. Who do you think creates and allocates the other 97%?” The taxi driver didn’t know. Do you?

The truth is shocking. 6% of our money supply is created and allocated by private banking corporations – profit-oriented enterprises. Banks can choose who to give it to and for what purpose. With such power banks can direct the economy of a nation for their own profit.

The popular misconception about banks, and one we were all taught in school, is that they invest money from people who want to use the bank as a store of wealth. The money is recycled in the short term for working capital, then some of the interest gained is given back to the saver. This ‘received knowledge’ is wildly inaccurate. Banks actually create new money by issuing credit - loans, overdrafts and mortgages. The revenue is created when you sign on the dotted line of your loan contract, or when you use your credit card. Your signature, your action, creates the ‘money’ there and then.

This is how any loan works: a bank makes a loan to A, say £10,000. This makes an asset for A, held in the bank’s book-keeping as an asset. But now A ‘owes’ to the bank, so this asset also becomes a ‘liability’ of the bank.

This double-entry book-keeping covers the fraud of creating money (if anyone else did this it would be fraud, but banks get away with it, because it’s officially-sanctioned, organised crime). Meanwhile A, not realising s/he has just created the money, thinks s/he now owes something to the bank.

On top of that the bank that just created £10,000, can now, because of Fractional Reserve Banking (a variable % of a bank’s money must be held in cash reserve) make another loan of up to £9000, to customer B from which they can also impose interest. Then they can loan up to 90% of new asset £9000 to C, and charge C interest. Interest upon interest, plus the ‘assets’ returned in cash over an agreed period time, all out of thin air.

Not only can the bank create money, it can make more money out of what it creates, plus get back the money it created in the first place from the sweat equity of its customers, who have to work for several years to pay off the original ‘debt’! So they lose the whole system.

It makes your head spin realising just how much money banks can make. From the original £10,000 (which didn’t exist) we have theoretically generated £277,000, plus 3 amounts of compounded interest.

There is a high level of deception that goes on in finance, obscuring the reality. The public are more and more aware of the dangers. Some economists have likened the financial system to a giant vampire squid, constituting a huge challenge to our freedom. People don’t understand what is happening to their money. Josh Ryan Collins of the New Economics Foundation says of the UK. “This is a dysfunctional financial system. It is not working for society, or for the economy; it is a highly inefficient allocation of capital.”

It is when you look at the big picture - how this kind of banking contributes to increasing poverty - that the reality gets bleak. Britain has the largest share of private debt in the world. By 2007 the UK had become the most highly leveraged nation of any major economy. During the inevitable ‘credit crunch’ the government largely ignored private debt and focused on the far less significant public sector debt. They targeted public sector spending – and used it as an excuse for austerity policies that hit the most vulnerable members of society.

Before 2008 food banks were unheard of. Today 1.3 million people are in need of them, mainly because of that other iniquitous austerity measure, ‘Universal Credit’. The public sector debt only accounted for around 10% of all debt, and this percentage is shrinking year on year. 90% of UK debt is in secured or unsecured loans, property and business loans, and speculative investments or ‘finance intermediation’. This percentage is still on the increase. Since the crash of 2008 nothing has really changed. We bailed out the banks, and after a bit of hand-wringing they went back to business as usual. And why not? The UK is also one of the most deregulated countries in the world in terms of finance.

Commercial banking is the cause of the boom and bust cycle. A huge percentage of loans are made not for projects that benefit society or increase wealth on the ground through job creation, but for assets like houses. When more money is created and enters the economy as mortgage loans, but houses themselves do not increase in number to cover the demand, this pushes up prices, resulting in an asset bubble, which as we all know will eventually burst. Banks then refuse loans, house prices tumble, people lose their investment and banks take possession of the property. Most of bank lending is for assets; very little of it goes to sustainable projects that bring wealth to communities. This can and needs to change now.

What we have is unsustainable and morally corrupt, but few realise this is the root of most of our problems.

A quote often attributed to the banking family of Rothschild says, “Give me control of a nation’s money supply, and I care not who makes the laws.” The saying is apocryphal. But William Pitt definitely made the following statement in 1791, at the inauguration of the first National Bank of the United States: “Let the American people go into their debt-funding schemes and banking systems, and from that hour their boasted independence will be a mere phantom.” Unfortunately Britain’s banks have followed this example, inveigling their customers into debt-slavery, while a small handful of corporate banking behemoths become wealthier than the wildest imaginations of Croesus.

Freedom Looks Like This

I am still charged after another epic and unforgettable Saturday 24th April on the streets of London. Hundreds of thousands of lovers of freedom assembled from across Britain. Most had either been at the last Worldwide Freedom Rally on the 20th March or seen the fire in the eyes of friends who had. They were the ones who refused to live in fear, despite being surrounded by it in their communities. They’ve had enough of a game that started with 3 weeks to flatten the curve, something never intended by the instigators. They do not believe that Matt, Chris, Patrick and Boris have our best interests at heart. They want to retain ownership of their bodies and an immune system that has served us since man began.

The police had been risibly unable to deal with the previous mass rally, wandering around in small troops of 20 or so like a herd of human platoon with orders not to kill,
Scotland: A Year Of Lockdown Deaths & Avoidable Harm

The world median coronavirus infection fatality rate is 0.23% [1]. Death rates vary from country to country depending on many features including age - countries with older populations are likely to see many more deaths – and factors such as lower death rates in countries with previous immunity from exposure to other coronaviruses. A typical flu season might see a fatality rate of around 0.1% (1,000 deaths per million people) while a ‘bad’ flu season might be 0.2% to 0.3% (2,000 to 3,000 deaths per million people). Fatality on the cruise ship Diamond Princess was 1.3% [2] while the 1918 Spanish flu was estimated at between 1% and 6% [3].

National Records of Scotland (www.nrscotland.gov.uk) is the Scottish Government department responsible for collecting information, including data on deaths, about Scotland’s people. From the start of the pandemic to 28 March 2021 (week 12), there were 9,958 official deaths where coronavirus (covid-19) was “mentioned on the death certificate” [4]. In a population of 5,463,300 people (which is the latest NRS population estimate as at mid-2019 [5]), deaths from covid-19 therefore equate to 0.18% of the population, and thus 99.8% of the population did not die.

Rounding Scotland’s population estimate to higher (6,000,000) and lower (5,000,000) round numbers to simulate boundaries to the population estimate, deaths are estimated at between 0.1% and 0.2%.

Arguably, the accumulating “rolled-up” 9,958 deaths straddles two flu seasons. Meanwhile, ‘regular’ flu has disappeared.

Covid-19 adversely affects older people. The worst affected were the very old, the average age of death from covid-19 being 82 years. Survival rates among the working population of Scotland (younger than 65 years) varies between 99.93% and 99.99%. Over the course of the pandemic it is estimated that 33% of deaths were in care homes, 60% were in hospitals and 6% were at home or non-institutional settings (as at 4 April 2021) [6].

There is controversy with coronavirus testing [7] and consequently death certificates might not be accurate. In NHS Lothian, for example, the total number of cycles that PCR is run for is 40 or 45 depending on the assay used [8]. To get a sense of the impact of the pandemic in Scotland free from these controversies, one approach is to assess deaths from any cause over a long period.

To further place the 9,958 official ‘coronavirus death certificate’ deaths into context, in the same period (week 12, 2020 to week 12, 2021) there were 59,088 non-coronavirus deaths in Scotland, including 16,686 from cancer and 15,818 from cardiovascular disease (heart attacks and strokes).

Meanwhile, a recent Scottish Government Freedom of Information request [9] shows that deaths in Scotland for the period 3 March 2020 to 1 February 2021 where people have died solely from covid-19 with no other pre-existing medical condition was just 596 deaths.

Conclusion: The data is in and there is nothing to see. Even the official coronavirus death data, being those mentioning coronavirus on the death certificate, amounts to a bad flu that has historical equivalent peaks in maximum deaths. Indeed, Scotland’s ‘standby Nightingale hospital, the Louisa Jordan, was not needed. There is no existential threat.

The only unanswered question, therefore, is: did lockdown help limit the death rate? Over 30 studies now suggest the answer is a resounding no [10a,b]. Moreover, Simon Wood, Professor of Computational Statistics, School of Mathematics, University of Edinburgh, suggests the R rate was below 1 before the first full lockdown, raising questions of “first whether full lockdown was necessary to bring infections under control, or whether more limited measures might have been effective, and second whether the several month duration of full lockdown was appropriate” [11].

According to a recent report, 379 Statutory Instruments have been introduced to micromanage every aspect of our lives and remove freedoms [13]. Emergency UK legislation, including the Coronavirus (Scotland) Act 2020, was introduced in April 2020 and has been extended twice. It is now set to expire on 30 September 2021, 78 weeks after we were told ‘three weeks to flatten the curve’.

A new approach is needed and lockdowns must never be repeated: The Health Advisory & Recovery Team (HART) (https://www.hartgroup.org) – a group of highly qualified UK doctors, scientists, economists and psychiatrists – points out that many international studies show that lockdowns have proven to be a complete failure. HART group recommends 8 steps to move forward, including stopping mass testing of healthy people, stopping mask mandates and the reinstatement of the existing pandemic planning policies from 2019 [14].

The harms of lockdown are considerable; and coalitions challenging the government’s response to the pandemic. Such alternate views rarely get mainstream news coverage or worse are censored or vilified for holding a different opinion. These include the UK Medical Freedom Alliance (https://www.ukmfreedom.org/), Doctors4CovidEthics (https://doctors4covidethics.medium.com/) and the Covid19 Assembly (https://covid19assembly.org/). The latter includes Dr Martin Kalfdorf, professor of medicine at Harvard University and Dr Clare Craig, NHS Consultant Pathologist; they want to audit every official covid-19 death in the UK.

Perhaps the best known are the tens of thousands of epidemiologists and public health scientists as signatories to the Great Barrington Declaration (https://gbdeclaration.org/). The Spectator magazine [15] suggests there has been a well-orchestrated attempt to suppress and discredit the Great Barrington Declaration, pointing out that Devi Sridhar, a public health advisor to the Scottish government and University of Edinburgh employee, denounced the declaration as not ‘scientific’. The Spectator goes on: “A bit rich considering Devi’s PhD is in social anthropology, whereas Sunetra Gupta, one of the GBD authors, is an international expert on infectious diseases.”

Lastly, church leaders are also now challenging the government; an open letter – with almost 1,500 signatories as at 21/4/2021 – was recently sent to Boris Johnson outlining serious concerns on vaccine passports [16].

In summary: the average age of death from covid-19 in Scotland is on average 0.18%.

References:
[10b] https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/
[16] https://vaccinepassportletter.wordpress.com/
Irish Traveller Wedding Held Despite Council and Police Pressure & Fines

A couple were undeterred from celebrating their special day despite severe warnings and pressure from local council officials and gardaí (Irish Police) to cancel their wedding due to public health guidelines. Bride and Groom Willie Stokes and Shelby Kelly celebrated their wedding in style with family and friends at a large marquee reception in County Longford Ireland in May.

The 120-strong wedding party courageously defied an emergency court order that was issued earlier in the day to cancel the wedding and to remove a 2,000 sq ft marquee. Local authority figures and armed gardaí liaised with members of the bridal party to stop the wedding from going ahead. Despite incurring penalties and court order injunctions, the happy partygoers rightfully poured into the wedding tent after council officials and the Gardaí left the scene.

The happy couple posted wedding pictures online and reported having “a great night” of celebrations. Other celebrators also posted joyous wedding pictures on social media with one partygoer mocking critics by saying they were only “jealous” of seeing people having fun. Family and friends supported the happy couple’s decision to go ahead with the wedding by saying “It is killing ye (to) see people getting back to normal”.

Since the wedding, the newlywed couple and other members of their family were all ordered to pay 3,000 Euro compensation following a special court sitting in Longford town. Judge Keenan Johnston said the contempt and defiance of a court order by attendees was akin to a “law of chaos” in view of current covid19 rules and a gross lack of respect to frontline workers. During the court hearing, the wedding celebrants issued heartfelt apologies regarding their actions.

As expected, government funded and out of touch Traveller Representative group Pavee Point patronised the wedding revellers. A spokesperson for the group reported, “It just shouldn’t have happened.” The work that the HSE and Traveller organisations have done to educate Travellers, to see this is just very reckless and disappointing”.

In a sour world where fun and joyous occasions are cancelled and prohibited, it is wonderful to see peaceful disobedience in full display to celebrate one of life’s special moments.

Free Lottery Tickets, NFL & Baseball Games, Beer & Donuts Used As Vaccine Bribes In US

Several State lotteries, giant corporations and major sports leagues are effectively offering bribes to presumably ‘vaccine hesitant’ Americans as part of Biden’s goal to get 70% of the US adult population vaccinated with at least one shot by July.

Ride-share giants Uber and Lyft will promote rides to and from tens of thousands of vaccination sites through their apps, the White House also said. “People will be able to simply select a vaccination site near them, follow simple directions to redeem their ride, and then get a ride to take them to and from a nearby vaccination site free of charge.”

The new campaigns join a range of consumer-focused incentives unveiled in recent days, including a micro-brewery in Buffalo, New York offering beer to patrons who accept a vaccine shot. McDonald’s will promote vaccine information on coffee cups and also said it will unveil a billboard in New York’s Times Square this month displaying vaccine information. California joined the list of states offering free lottery tickets to those who had taken the experimental shot. It already includes New York, Ohio, Maryland, Kentucky, Colorado and West Virginia. New York’s Mayor De Blasio is also offering willing participants tickets to a range of the city’s top destinations and experiences, which will be made available at a discount or for free, to those who’ve received the covid-19 vaccine.

Xavier Becerra, the health secretary, said in a statement the public-private partnerships “will help more people make informed decisions about their health and learn about steps they can take to protect themselves and their communities”.

Vaccination rates across the US have slowed as officials encounter vaccine-resistant, free-thinking swathes of the population. There is now an increasingly fervent public and private sector effort to meet drops in vaccine trial participation demand head-on. Unilever offered free ice cream, including popsicles and Klondike shakes, to health workers and people getting vaccinated at several vaccination sites.

The doughnut chain Krispy Kreme is offering one free doughnut per day for the rest of 2021 to customers who present proof of being fully vaccinated. The NFL announced during the Global Citizen’s VAX Live: The Concert to Reunite the World event that they would be giving away 50 tickets to Super Bowl LVI to vaccinated people who shared why it was important to get the shot. According to a recent Kaiser Family Foundation survey, 47% of people who said they want to “wait and see” before being experimented on also said paid time off to get it would make them more likely to get the shot.

The question we would like to ask is, why is there such a need for this massive marketing campaign during what they keep claiming is a genuine pandemic that we must all be very afraid of at all times? One can’t help question whether if we stopped listening to all the fearmongers, their attempts to provide a solution to a non-existent problem might also disappear.

Melbourne Locked Down Down Again

Australia is entering its 4th covid-inspired lockdown in Melbourne, the country’s second-largest city. The lockdown began Thursday May 27th and was set to remain in place for a week for Melbourne and the rest of Victoria state after a new cluster of cases was uncovered, yielding 26 new infections, including one person who was sent to intensive care, the AP reports.

Another 10,000 people have reportedly had some form of contact with those infected.

“Unless something changes, this will be increasingly uncontrollable,” Victoria Acting Premier James Merlino said.

Australia’s federal government declared Melbourne a hot spot, allowing the city to tap additional federal resources.

PM Scott Morrison said 218 military personnel would be dispatched to Victoria to help administer vaccine doses to the population. Additional doses have been sent to Victoria, where only 3.9 million doses have been administered so far among a population of 26 million.

Health Minister Greg Hunt described the lockdown as “highly regrettable, but necessary restrictions under the current circumstances.”

Under the terms of the strict lockdown, people will only be able to leave home to shop for food and essential items, provide or receive care, exercise, work or study if they are unable to do so from home, and to get vaccinated. Masks will be compulsory indoors and outdoors.

Cafés and restaurants will only be able to sell takeout, and schools will close once again, reverting to all-remote instruction for the duration of the lockdown. Professional sports events in Melbourne will continue, but crowds won’t be allowed.

Raising the sense of alarm, Australian authorities said the variant that caused the latest outbreak is the same one first identified in India, which has made its way across Europe and the US by now. Australia’s Chief Medical Officer Paul Kelly confirmed that it was the Indian variant designated as a ‘variant of concern’ by the WHO.

The new Melbourne cluster was allegedly found after a traveler from India became infected while in hotel quarantine in South Australia state earlier this month. The traveler was not diagnosed until he returned home from Adelaide to Melbourne.
Indian Crisis Likely Due To Vaccines, Not Covid

India is currently witnessing a COVID-19 surge of unprecedented proportions, with an allegedly triple-mutant strain stretching the nation’s healthcare infrastructure to the limits. The uncertainty hanging over the situation is compounded by viral despatches of dead bodies piling up in morgues; of people dropping dead in the streets; of despondent souls jumping off their balconies and of funeral pyres all over the country. There will be no public service-minded Big Tech censorship in this instance.

This is supposedly Wahan 2.0. Any social media addict would be forgiven for thinking that India’s population of 1.3 billion might suffer a dip before the year is out.

Amidst the toxic miasma of fear-mongering, coherent explanations over this surge are hard to come by. Therefore, one needs to resort to correlations and proxies in order to gauge causations and effects. For starters, one should compare the yearly death tolls (from all causes) before and after the advent of COVID-19 in India, particularly for the year 2021. But relevant data will only be available a year from now. Many will die as a result of continued lockdowns which generally weaken the immune system. Essential medical procedures will be deferred as hospitals are compelled to focus on COVID-19.

Rising socioeconomic despair will naturally lead to a surge in suicides. In the end, not all coronavirus deaths can be directly attributed to the virus no matter how “experts” add them up. Other correlations must also be explored in the Indian context. India was rather late in joining the mass vaccination bandwagon. Throughout 2020, its COVID-19 mortality figures were moderated by world standards due to the efficacy of low-cost treatment protocols. Hydroxychloroquine (HCQ) was sanctioned for early stage treatment from March 2020 onwards while a few months later, India’s most populous state of Uttar Pradesh (population 231 million) replaced HCQ with Ivermectin (an anti-parasitic drug).

The results were highly encouraging. As the TrialSiteNews (TSN) reported on Jan 9, 2021:

> “By the end of 2020, Uttar Pradesh — which distributed free Ivermectin for home care — had the second-lowest fatality rate in India at 0.26 per 100,000 residents in December. Only the state of Bihar, with 128 million residents, was lower, and it, too, recommends Ivermectin.”

Despite having the coronavirus situation under control, New Delhi was under immense pressure from various international lobbies and their local proxies to roll out a mass broadly charts this anomaly. Not only have India’s COVID-19 cases surged in tandem with increased vaccination, the trajectory of infections and inoculations can be neatly superimposed as the above graph suggests.

Can one infer that there may be a correlation between increased vaccinations and infections? This is not the first time that gene-based therapies ended up creating new viral chimeras. The World Health Organisation (WHO) recently admitted that a Bill & Melinda Gates Foundation (BMGF)-backed vaccine program was responsible for a new polio outbreak in Africa. The usual suspects were also behind a vaccination-linked polio surge in Pakistan and Afghanistan.

Vaccines causing deadly outbreaks of the very diseases they are supposed to eradicate happen to be a 21st century phenomenon – brought to AstraZeneca and Covaxin (Bharat Biotech) vaccines used in India may have produced a similar effect. Dr. Harvey Risch, professor of epidemiology at Yale University, has estimated that over 60 percent of all new COVID-19 cases seem to occur among the vaccinated. Dr. Michael Yeadon, former vice president and chief science officer at Pfizer, fears a more alarming outcome which includes the possibility of “massive-scale depopulation”. These are not your average basement-dwelling conspiratorial loons.

“The vaccine,” to paraphrase Francis Bacon, “is now appearing to be worse than the disease itself.” Gene-based vaccines open up a Pandora’s Box of what systems theorists call “emergence”. The human body is a complex system that may react unpredictably to interferences at its most substrate (or genetic) levels. As a result, mutant-ramped-up vaccinations. Therefore one should resort to another layman-friendly proxy to see whether similar correlations exist elsewhere. How about a comparison within the most coronavirus-affected nation on earth – the United States of America?

Reports thus far suggest that States which have been resisting mass vaccinations and/or mandatory masking, at least in relative terms, are generally faring better than those adhering to draconian COVID-19 guidelines. Just weeks after Texas lifted its public mask mandate – featuring full crowds at bars, restaurants and concerts no less – COVID-19 cases as well as hospitalisations dropped to its lowest levels since October 2020.

The current White House occupant, who continues to make a buzz over his mental acuity, nonetheless penned the move as a symptom of “Necandoral thinking”. In the meantime, South Dakota Governor Kristi Noem, a prominent opponent of mandatory masking, is using COVID-19 restrictions elsewhere to lure businesses to her state. Other red states such as Florida and Arizona have moved to ban the so-called vaccine passports.

Rather coincidentally, the annual flu has virtually disappeared in the United States since the onset of the pandemic. It must be a modern medical miracle! How will India fare?

With the surge affecting the nation badly, the CEOs of Google, Microsoft and Apple, among others, have pledged heartfelt aid to India. With friends like these, one wonders why Indians cannot question the COVID-19 narrative on Twitter, Facebook or YouTube without being summarily banned or censored. If India can concede the digital rights of its own citizens and the digital sovereignty of the nation to Big Tech, then how is it going to crowdsource solutions for COVID-19? Or deal with any other future crisis for that matter?

An Indian scientific paper which tentatively explored a laboratory origin for COVID-19 can be summarily removed after concerted condemnation from Western academics but a similar claim made by the former head of the US Centers for Disease Control (CDC) appears relatively palatable. Isn’t this a textbook example of neoliberal racism?

Indians should also question why Africa has not been badly affected thus far, despite a South African variant hovering in the region. This is a continent mired in conflicts, poverty, serious healthcare deficits and other Third World-related woes. It lacks world-class scientists and institutions which India admittedly has. Why, if Africa does not pose an economic threat to the Western oligarchy, the way Asia does? Or maybe, mass vaccinations haven’t yet taken off in Africa?

For the time being, India cannot reverse course on its vaccination drive and adopt measures similar to the one employed by the Eisenhower administration during the 1957-58 Asian Flu pandemic. The fear genie is already out of the bottle. Big Tech controls the digital narrative in India as it does elsewhere. Even if New Delhi manages to tame the ‘COVID-19 crisis’ within the next few weeks or months, Big Tech will still be around to stifle India’s destiny.

Ultimately, this game is much bigger than COVID-19; it is about world domination through perennial mass-manufactured crises until a Great Reset is achieved.

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Project Veritas Exposes Media Propaganda

Project Veritas made its latest contribution to the fight against international mainstream media corruption when it uploaded a series of three undercover video recordings to YouTube between 13 & 15 April 2021. The videos show CNN (Cable News Network) Technical Director Charlie Chester discussing a propaganda-based agenda in news reporting that is aimed at influencing viewers and driving up ratings for CNN - one of the leading US mainstream broadcast networks and a multinational news-based TV channel.

Clearly uncomfortable with the direction coming from head of network, Chester states that CNN used covid to boost ratings by selling fear to viewers, and is on tape saying “we were creating a story there that we didn’t know anything about...that’s propaganda, you know?” He states that CNN practises the “art of manipulation” to change the world; other major news items are also discussed.

Whilst the idea that news channels are used to implement agendas and disseminate propaganda will not come as a surprise to readers of ‘The Light’ or others, this latest Project Veritas expose will hopefully make a clear and irrefutable video and audio content. Truth is paramount. We never deceive our audience. We do not distort the facts or the context. We do not “selectively edit”.

Rule #2 – We do not break the law. We maintain one-party consent when recording someone is inherently moral and ethical. We never record when there is zero-party consent. In areas where we are required to have consent from all parties, we seek legal guidance (abridged).

Rule #3 – During our investigations we do not disrupt the peace. We do not infringe on the 1st Amendment rights of others. (abridged)

Rule #4 – The undercover investigations we pursue are judged by us to be of “vital public interest” and “profound importance.” Undercover investigative reporting is necessary because...there’s no other way to get the story.” Whereas the Society of Professional Journalists allows for undercover techniques, if undercover techniques are necessary to expose issues of vital public importance, we believe they are not only allowed but required.

Rule #5 – We Protect the Innocent When Possible - Embarrassing private details are not to be investigated. We stay away from irrelevant, embarrassingly intimate details about private citizens’ personal lives. We look for individual wrong-doing and judge its public importance. The irrelevant religious or sexual dispositions of our targets are not to be investigated.

Rule #6 – Transparency. Our methods and tactics must be reasonable and defensible. We use the “Twelve Jurors on Our Shoulder” rule. The work has to be done with such a degree of integrity that it can withstand scrutiny in both law and ethics. We are comfortable with transparency. We must be willing to be ready to disclose our methods upon publication.

Rule #7 – Verifying and Corroborate Stories – Evaluate impact on third parties and Newsworthiness of Statements Alone. We consistently consider the probable truth or falsity of statements, examine any reasons to doubt the veracity of underlying assertions and whether the assertions are newsworthy. When possible, we will confirm with our subjects that their statements captured on video are accurate and truthful (abridged)

Rule #8 – Raw Video. In certain circumstances we may release the “raw” video to the press and or the public. But as a rule, we do not.

Rule #9 – Subject Anonymity. We investigate and question sources before promising anonymity. Once we confirm, we will do everything in our power to protect the identity of our confidential sources.

Rule #10 – Being Accountable. Admit mistakes and correct them promptly.

Rule #11 – We do not manufacture content. We do not put words in our investigative subjects’ mouths. We do not lead the horse to water. Our purpose is to elicit truth.

You can also follow JamesO’Keefe on Telegram.
C DC sued for massive fraud: Tests at 7 universities of ALL people examined showed that they did not have Covid, but just Influenza A or B – EU statistics: ‘Corona’ virtually disappeared, even under mortality.

A clinical scientist and immunologist-virologist at a southern California laboratory says he and colleagues from 7 universities are suing the CDC for massive fraud. The reason: not one of 1500 samples of people tested ‘positive’ could find covid-19. All people were simply found to have Influenza A, and to a lesser extent Influenza B. This is consistent with the previous findings of other scientists, which we have reported on several times.

Dr. Derek Knauß: “When my lab team and I subjected the 1500 supposedly positive covid-19 samples to Koch’s postulates and put them under an SEM (electron microscope), we found NO Covid in all 1500 samples. We found that all 1500 samples were primarily Influenza A, and some Influenza B, but no cases of covid. We did not use the bulls*** PCR test. When we sent the rest of the samples to Stanford, Cornell, and a couple of the labs at the University of California, they came up with the same result: NO COVID. They found Influenza A and B. Then we all asked the CDC for viable samples of covid. The CDC said they can’t give them, because they don’t have those samples.

So we came to the hard conclusion through all our research and lab work that covid-19 was imaginary and fictitious. The flu was only called ‘covid,’ and most of the 225,000 deaths were from co-morbidities such as heart disease, cancer, diabetes, pulmonary embolism, etc. They got the flu which further weakened their immune systems, and they died.

I still tried to find one viable sample with covid-19 to work with. We who conducted the lab test with these 1500 samples at the 7 universities are now suing the CDC for covid-19 fraud. The CDC still has not sent us a viable, isolated and purified sample of covid-19. If they can’t or won’t, then I say there is no covid-19. It’s fictional.

The four research papers describing the genome extracts of the covid-19 virus never managed to isolate and purify the samples. All four papers describe only small pieces of RNA that are only 37 to 40 base pairs long. That is NOT a virus. A viral genome normally contains between 30,000 to 40,000 base pairs.”

Now that covid-19 is supposedly so bad everywhere, how come not one lab in the world has completely isolated and purified this virus? That’s because they never really found the virus. All they ever discovered were small pieces of RNA that were not identified as the virus anyway. So what we’re dealing with is just another flu strain, just like every year. Covid-19 does not exist and is fictitious. I believe that China and the addition: “This test cannot exclude other diseases caused by other viral or bacterial pathogens.”

In other words, we cannot prove that the people who get sick and are hospitalised, and very occasionally die, were sickened by a new coronavirus called SARS-CoV-2, nor can we prove that it caused them to develop a new disease called ‘covid-19’. It could just as easily be a different virus and a different disease. (And since all the symptoms, including severe pneumonia, correspond seamlessly to what flu can cause historically in vulnerable people... ‘if it looks like a duck and walks like a duck, it is a duck.’

Earlier this year, Samuel Eckert’s German Team and the Isolate Truth Fund pledged a reward of at least $265,000 for any scientist who can provide incontrovertible proof that the SARS-CoV-2 virus has been isolated and therefore exists. They too pointed out that not one lab in the world has yet been able to isolate this coronavirus. That sum has now been increased to 1 MILLION EUROS.

Yes, systems scientists claim they have, but this ‘isolation’ consists only of a sample from the human body, which is a ‘soup’ full of different kinds of cells, remains of viruses, bacteria, et cetera. With the help of ‘loopy’ research computers one then searches for some (residual) particles that may indicate a virus that once existed or may still exist, after which this is designated as ‘evidence’.

In late December 2020 there was a similar initiative to the one in recently published a statement on “the continuing controversy over whether the SARS-CoV-2 virus has been isolated or purified. But based on the official Oxford definition of “isolation” (“the fact or condition of being isolated or sealed, a separation from other things or persons, standing alone”), common sense, the laws of logic and the rules of science dictate that any unbiased person must come to the conclusion that the ‘Sars-CoV2’ virus has never been isolated or purified. As a result, no confirmation of the existence of the virus can be given.”

‘The logical and scientific implications of this fact are that the structure and composition of something whose existence cannot be proven cannot be known, including the presence, structure and function of hypothetical spike or other proteins. The genetic sequence of something that has never been found cannot be known, nor can the “variants” (mutations) of something whose existence has not been demonstrated. It is therefore impossible to show that Sars-CoV2 causes a disease called Covid-19.’

Not surprisingly, the world’s largest biotech company, China’s BGI, recently launched a new PCR test that can simultaneously test for influenza A, B and corona. Apart from the proven fact, acknowledged through various lawsuits, that a PCR test cannot prove infection with any virus whatsoever, BGI’s explanation that both diseases are so difficult to distinguish from each other and that they have therefore made only one test, says more than enough.

If the testers IS no different at all, ‘covid’ is just another name for ‘old familiar’ flu viruses, and this is just another clever marketing trick?

With worldwide, government-controlled, 24/7 fear propaganda by the mass media, most people have come to believe that there is indeed a life-threatening virus that makes people sick much faster and more severely than seasonal flu. However, even the latter is demonstrably not the case. Influenza A has been the leading cause of death from pneumonia in the developed world for years.

But send people designated as severe covid patients to a few ICU’s, put cameras on them constantly, instruct a few physicians that they should only discuss the worst cases, and you have your televised pandemic. The argument ‘we are doing it because otherwise care will be overburdened’ was undermined by governments itself some time ago, by rejecting offers of additional ICU beds or staff, because ‘it is not necessary’. Was this perhaps a rare time the truth was told?

Not surprisingly, that official figures show that after the normal traditional flu season nothing is out of the ordinary, and according to the EU statistics (EuroMOMO) there is even a significantly lower mortality, society – if it really was about a virus and public health – should immediately go back to normal to start repairing the huge damage caused by government policies.

However, as many now know, that will never be done, and that is because this carefully planned pandemic hoax is helping carry out an ideological agenda, the ‘Great Reset’ (formally known as The New World Order), which aims to largely demolish the society and economy of the West, and then subject it to a technocratic totalitarian dictatorship, in which all our freedoms, civil liberties and rights to self-determination will be done away with once and for all.

At least that is their plan.
HOW SAFE ARE VACCINES?

Most people who vaccinate their children do not realise the kind of ingredients contained in vaccines - even if they do know, they may not fully understand what that particular ingredient does or what it means.

This is to help those individuals better understand what they are injecting into the bodies of their loved ones.

Mercury

Mercury is 500 times more toxic than lead and is second only to Plutonium as the most toxic metal known to man. Injected mercury is different than ingested mercury. Tiny doses cause damage to the brain, gut, liver, bone marrow, nervous system and/or kidneys. Linked to autoimmune disorders, and neurological disorders like autism. In addition, mercury is a known carcinogen. Many people have mercury amalgam fillings, complicating matters by creating a build up of mercury in the body. There are NO safe amounts of mercury established for humans. For many years children received 237 micrograms (mcg) of mercury in vaccines during their first two years of life. Not one study exists showing it’s safe to inject mercury into humans.

Aluminium

Aluminium is a heavy metal that is neurotoxic and there is evidence that aluminium in vaccines can cause brain and immune system dysfunction and that some people may be genetically more susceptible to being harmed by aluminium adjuvants in vaccines. The American Academy of Pediatrics confirms aluminium affects the body negatively. Repeated exposure to aluminium can have damaging effects.

If following the recommended schedule of the CDC, a child gets injected every couple of months with more aluminium. Studies with mice demonstrate a transient rise in aluminium levels in brain tissue. This means aluminium builds up in the brain and potentially other organs. Aluminium is widely associated with breast cancer.

More recent research shows a link between aluminium and Alzheimer’s Disease.

Aborted Foetal Tissue

A number of vaccines—including varicella, rubella, hepatitis A, shingles, and rabies—are made using foetal embryo cells, and have been for decades. The reason given is that the viruses tend to grow better in these cells, and foetal cells can divide for a long time before dying. However, the use of actual human foetal cells poses the question of how the foetal DNA will interact with the virus and, eventually, the human into which it is injected. It remains unclear what kind of dangerous immune response this has been provoking, but according to the Sound Choice Pharmaceutical Institute, a biomedical research organisation, there have been distinct spikes in autism rates in the years when vaccines grown in human foetal cells were introduced. In my opinion, the moral implications here are huge.

Squalene

The World Health Organization (WHO) describes squalene as “a component of some adjuvants that is added to vaccines to enhance the immune response.” The WHO notes that most people who have received squalene-containing vaccines are in older age groups, and that we don’t really know how this component might impact younger people.

A 2000 study found that a single injection of squalene adjuvant produced arthritis in rats, and many believe squalene-containing anthrax vaccine to be the main culprit in triggering Gulf War Syndrome among American troops who served in the Persian Gulf War in the early 1990s.

Polysorbate 80

A preservative used in vaccines called Polysorbate 80 is so toxic that it should never touch your skin or be ingested. Studies with lab rats show this preservative has both carcinogenic and infertility effects. Yet this known carcinogenic ingredient is found both in Merck’s cancer vaccine, Gardasil, and also used in chemotherapy given to cancer patients. The safety of using this chemical in vaccines has been poorly studied, and according to the Material Safety Data Sheet (MSDS) for Polysorbate 80, it may cause adverse reproductive effects and cancer based on animal testing data.

The MSDS also indicates that no safety testing has been done in humans.

Formaldehyde

Formaldehyde is added to vaccines to kill unwanted bacteria and viruses that might be present during the manufacturing process. It is also used as a preservative and as a stabilizer to help maintain the integrity of the vaccine.

Monosodium Glutamate (MSG)

More commonly known as a food additive, MSG is also used as a stabilizer to help preserve the vaccine and can cause a number of side effects including headaches, nausea, and allergic reactions.
More commonly known as a food additive, MSG is also used as a stabilizer to help vaccines remain unchanged when exposed to heat, light, acidity or humidity, according to the CDC. MSG consumption is notorious for causing headaches in some people. It can also cause fatigue, disorientation and heart palpitation, per the Mayo Clinic. MSG has been called an “excitotoxin,” which is a term used to describe a class of chemicals (usually amino acids) that over-stimulate neuron receptors in the brain, causing them to die.

The following is a list of vaccines containing aborted foetal cells:

**Polio Vaccines:**
- Pentacel, DT Polio Absorbed, Quadracel, all by Sanofi
- Measles, Mumps, Rubella Vaccines:
  - MMR II, Meruvax II, MRVax, Biovax, ProQuad, MMR-V, by Merck
  - Priorix and Erolalix by GlaxoSmithKline
- Varicella Vaccines for Chickenpox or Shingles:
  - Varivax, ProQuad, MMR-V, and Zostavax all by Merck
  - Varilrix by GSK
- Hepatitis Vaccines:
  - Vaqta by Merck
  - Havrix and Twinrix by GSK
  - Avaxim and Vivaxim by Sanofi
  - Epaxal by Crucell/Berna
- Rabies Vaccine:
  - Imovax by Sanofi

According to Helen Ratajczak, former senior scientist at a pharmaceutical firm, there is a link to brain damage and human DNA in vaccines. DNA in vaccines is taken up by human cells and recombined into our genome.

Today’s vaccines contain GMOs, hormones from infected cows, pigs, chickens and monkeys, untested virus combinations (like H1N1), aluminum, mercury, emulsifiers, and crossbred bacteria from animals, mosquitoes, and diseased humans:

- **Measles Live Virus Vaccine**: (Attenuvax) Made by Merck. Two injections are given; one at 1 year and another at 4 years old. Contains gelatin, sorbitol, sodium chloride, bovine cow serum, egg protein, and human albumin.
- **Diphtheria, Tetanus and Polio Vaccine**: Five injections given between 2 and 6 years of age, plus boosters ‘recommended’ every 10 years. Contains formaldehyde, phenoxyethanol, and aluminum phosphate.
- **DTaP, IPV, HBV and Hib**: (Diphtheria, tetanus, polio, hepatitis B and Haemophilus influenza type B) Given to infants 2 to 12 months with boosters less than a year later. Contains aluminum hydroxide, formaldehyde, and bovine cow serum.
- **Gardasil HPV: Human Papillomavirus Vaccine Made by Merck**. Administered to children as young as 9 years of age for a rare sexually transmitted disease. Contains polysorbate 80, sodium chloride, aluminum, and a ‘denatured’ (fragmented and weakened) form of the virus.
Canadian Pastor Arrested For Worship

by JACK PHILLIPS

Officials in Calgary, Canada, said they arrested Artur Pawlowski, a street preacher who allegedly defied local lockdowns over the weekend.

“Earlier today, police arrested two organizers of a church service who were in violation of a new court order obtained by Alberta Health Services (AHS) in relation to mandatory compliance of public health orders for gatherings,” said the Calgary Police Service in a statement on Saturday.

His brother, David Pawlowski, was also taken into police custody. Both were charged with allegedly organizing an illegal in-person gathering as well as “requesting, inciting or inviting others” to join them, according to police.

The force said that Alberta’s provincial government obtained a bench order from a court that applies to “protests, demonstrations and rallies” that imposes “new restrictions on organisers of protests and demonstrations requiring compliance with public health orders including masking, physical distancing and attendance limits.”

“It is important to understand that law enforcement recognises people’s desire to participate in faith-based gatherings as well as the right to protest. However, as we find ourselves in the midst of a global pandemic, we all must comply with public health orders in order to ensure everyone’s safety and wellbeing,” the police service added.

Canadian Preacher Artur Pawlowski Arrested, Charged After Allegedly Defying Public Health Orders

A video uploaded on Twitter that appeared to show his arrest on a highway included Pawlowski’s voice: “If you are watching this video, it means that they have successfully arrested me.” It included a link to a crowdfunding website for his legal defense.

During the covid-19 scamdemic, the Pawlowski brothers have held gatherings and have denied officials’ entry into their church located in Dover, Calgary, according to reports.

Pawlowski drew headlines several weeks ago after he compared police with the Nazi Gestapo paramilitary forces and fascists. “And they did it again! Today, the Gestapo Attacked our Church Again! History is being repeated in front of our eyes! Another sad day for Freedom and democracy!” Pawlowski wrote on April 24.

Before that, in a viral clip, he was seen in a video telling officers: “I do not co-operate with Gestapo!”

“I'm not interested in any word that you have to say. I do not co-operate with Gestapo, I do not talk to the Nazis,” Pawlowski told officers on Easter Sunday weekend, adding, “Brown shirts of Adolf Hitler. You are Nazi, Gestapo, communist, fascists! I do not co-operate with Nazis!”

On April 3, Pawlowski was fined $1,200 for allegedly holding a public gathering of more than 15 people at his Street Church, in violation of covid-19 health orders. “I grew up under a communist dictatorship behind the Iron Curtain, under the boot of the Soviets, and I'm telling you that's no fun at all. It was a disaster,” he said in the interview. “So, it was like a flashback when those police officers showed up at my church. Everything kind of came back to life from my childhood, and the only thing I could do is to fend off the wolves as a shepherd, and I used my voice to get rid of them,” Pawlowski added.

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A Million Euros For Sample Of Covid-19

Many investigations and reports have been generated around the world concerning the disastrous covid-19 pandemic; however, for some people and institutions, it has not been satisfactorily proven that it is the cause that generates the deaths attributed to it.

After several initiatives that offered rewards to whoever managed to isolate the virus from someone supposedly contaminated with it, the group led by evangelist pastor and journalist Samuel Eckert breaks the record by offering the equivalent of $1.2 million on its website.

“1 million € for scientific proof of the existence of a coronavirus, including documented control attempts of all steps taken in the laboratory, Dr. Derek Knauss, and his colleagues from 7 universities against the Centers for Disease Control and Prevention (CDC) for massive fraud.

After testing 1,500 samples from people who tested ‘positive’ for covid-19, these scientists found that ALL of the samples had evidence of Influenza A and Influenza B, something that had already been discovered in other cases, and none of covid-19.

“When my lab team and I subjected the 1,500 supposedly positive covid-19 samples to Koch’s postulates and put them under an SEM (electron microscope), we found NO covid in all 1,500 samples. We found that all 1,500 samples were primarily Influenza A and some Influenza B, but no cases of covid,” said Knauss.
Orson Welles caused a nationwide panic with his broadcast of ‘War of the Worlds’, a realistic radio dramatization of a Martian invasion of Earth. Orson Welles was only 23 years old when his Mercury Theatre company decided to update H.G. Wells’ 19th-century science fiction novel ‘War of the Worlds’ (1898) for national radio. Despite his age, Welles had been in radio for several years, most notably as the voice of ‘The Shadow’ in the hit mystery programme of the same name. ‘War of the Worlds’ was not planned as a radio hoax, and Welles supposedly had little idea of the havoc it would cause.

The show began on Sunday, 30th October 1938, at 8 p.m. NBC announced: “The Columbia Broadcasting System and its affiliated stations present Orson Welles and the Mercury Theatre on the air in ‘War of the Worlds’ by H.G. Wells.

Sunday evening in 1938 was prime-time in the golden age of radio, and millions of Americans had their radios turned on. But most of these Americans were listening to ventriloquist Edgar Bergen and his dummy ‘Charlie McCarthy’ on NBC and only turned to CBS at 8:12 p.m. after the comedy sketch ended and a little-known singer went on. By then, the story of the Martian invasion was well underway.

Welles introduced his radio play with a spoken introduction, followed by an announcer reading a weather report. Then, seemingly abandoning the storyline, the announcer took listeners to “the Meridian Room in the Hotel Park Plaza in downtown New York, where you will be entertained by the music of Ramon Raquello and his orchestra.” Dance music played for some time, and then the scare began.

An announcer broke in to report that “Professor Farrell of the Mount Jenning Observatory” had detected explosions on the planet Mars. Then the dance music came back on, followed by another interruption in which listeners were informed that a large meteor had crashed into a farmer’s field in Grovers Mills, New Jersey. Soon, an announcer was at the crash site, describing a Martian emerging from a large metallic cylinder. “Good heavens,” he declared, “something’s wriggling out of the shadow like a gray snake. Now here’s another and another one and another one.

They look like tentacles to me...I can see the thing’s body now. It’s large, large as a bear. It glints like wet leather. But that face, it...it...ladies and gentlemen, it’s indescribable. I can hardly force myself to keep looking at it, it’s so awful. The eyes are black and gleam like a serpent. The mouth is kind of V-shaped with saliva dripping from its rimless lips that seem to quiver and pulsate.”

The Martians mounted walking war machines and fired “heat-ray” weapons at the puny humans gathered around the crash site. They annihilated a force of 7,000 National Guardsman, and after being attacked by artillery and bombers the Martians released a poisonous gas into the air. Soon “Martian cylinders” landed in Chicago and St. Louis.

The radio play was extremely realistic, with Welles employing sophisticated sound effects and his actors doing an excellent job portraying terrified announcers and other characters. An announcer reported that widespread panic had broken out in the vicinity of the landing sites, with thousands desperately trying to flee.

In fact, that was not far from the truth. Perhaps as many as a million radio listeners believed that a real Martian invasion was underway. Panic broke out across the country. In New Jersey, terrified civilians jammed highways seeking to escape the unseen alien marauders.

People begged police for gas masks to save them from the toxic gas and asked electric companies not to turn off the power so that the Martians wouldn’t see their lights. One woman ran into an Indianapolis church where evening services were being held and yelled, “New York has been destroyed! It’s the end of the world! Go home and prepare to die!” When news of the real-life panic leaked into the CBS studio, Welles went on the air as himself to remind listeners that it was just fiction.

There were rumours that the show caused suicides, but none were ever confirmed. The Federal Communications Commission investigated the programme but found no law had been broken. Networks did agree to be more cautious in their programming in the future.

Orson Welles feared that the controversy generated by “War of the Worlds” would ruin his career. In fact, the publicity helped land him a contract with a Hollywood studio, and in 1941 he directed, wrote, produced, and starred in ‘Citizen Kane’ – a movie that many have called the greatest American film ever made.

Whether he intended to or not, Orson Welles’ radio broadcast on Oct 30th 1938, announcing an invasion from Mars, caused mass hysteria across the United States as thousands flooded police stations, newspapers, radio stations and government bodies with panicked calls from people who genuinely believed Welles’ dramatization of H.G. Wells’ ‘War of the worlds’ was real.

This is the power of a mass broadcast system. By just using the audio of a wireless radio transmission, Welles convinced millions that earth was under attack, despite there being no evidence of it from the real world in front of them – either in their personal vicinity nor by contact from more distant networks of family and friends.

Now imagine what is possible with video as well as audio, and it was everywhere, on every channel, all day, every day. Mass hysteria?

How One Radio Broadcast Caused Mass Panic In U.S.

by THE SMITHSONIAN & HISTORY CHANNEL

INTERNATIONAL NEWS

The Israeli People’s Committee Report of Adverse Vaccine Events

Related to the Corona Vaccine, April 2021

“Never has a vaccine injured so many”

Doctors for Covid Ethics

The Israeli People’s Committee, an independent investigative group that comprises medical, legal, and epidemiological expertise, has released a summary report on the experience of mass experimental vaccinations in Israel, which uses the Pfizer mRNA vaccine.

The data collected by the group paint a grim picture:

• The overall mortality in the January-February vaccination period was higher in 2021 than in any other year within the preceding decade. In the age group of 20–29 years, mortality in this time period exceeded that of the previous year by 32%.

• 288 deaths overall, mostly within the first 10 days after vaccination, were reported to the group. This number is more than six times greater than the 45 deaths officially admitted to by the Health ministry.

• The group gives the following estimates for the mortality among the vaccinated: overall, 1:5,000; age 20–49 years, 1:13,000; age 30–69 years, 1:6,000; age 70+, 1:1,600.

• Across lethal and non-lethal adverse events there was a relatively high rate of cardiac-related injuries, 26% of which occurred in young people below the age of 40, a high prevalence of massive vaginal bleeding, neurological, skeletal and skin damage, and events directly or indirectly related to coagulopathies (myocardial infarction, stroke, miscarriages, disruption of blood flow to the limbs and pulmonary embolism).

According to the authors, the compilation of the report was severely hampered by obstruction on the part of government authorities, involving in particular the shutting down of all monitoring and tracking systems for adverse events.

Vaccine Events

According to the authors, the compilation of the report was severely hampered by obstruction on the part of government authorities, involving in particular the shutting down of all monitoring and tracking systems for adverse events.

Mass panic?
We are fighting a war against the fake pandemic, the coronavirus hoax, the covid frauds and the global warming pseudoscience – the hoax behind the covid hoax.

We are battling against the many, pseudoscientific lies behind the unnecessary and deadly lockdowns, the pointless and dangerous masks, the absurd social distancing and the toxic hand sanitisers. And, of course, the experimental injections which are being dishonestly sold to a gullible and unsuspecting public, by a fierce and extensive array of conspiracy practitioners.

The war has reached a critical point. The lies being told by the conspirators (by which I mean the politicians, the representatives of unrepresentative organisations such as the World Health Organisation and the World Economic Forum, the paid advisors, the psy-op specialists, the secret services, the medical establishment and the crooked bought and paid for journalists) are accumulating rapidly and forming a veritable mountain of deceit, misdirections and blatant dishonesties.

Those of us fighting on the right side of this war spend much of our time accumulating new evidence in our favour. If we were ever allowed to debate the fraud, I would need a truck to carry all the scientific papers I have acquired. We have more than enough solid facts in our armoury. We can easily blow away the opposition’s flimsy lies in our armoury. We can easily much of our time accumulating directions and blatant dishonesties. We need to spread the truth outside those who already know that the covid-19 myth is based on fraudulent fake science. We need to accelerate the rate at which we share the truth with the unknowing. Marches and twitter conversations can, I know, be comforting and reassuring. It’s easy to feel alone in a world where the mainstream media is committed to promoting the dishonest pro-vaxx arguments. But to win the war we have to reach out, into the scary world where people believe what they’ve been told about masks and jabs. We will win by sharing the truth with as many people as possible. People who believe that the experimental ‘vaccine’ works are, by definition, terminally trusting and gullible. They are buying a deliberately manufactured myth and a network of self-sustaining lies. They are the sort of trusting innocents who probably still believe that Father Christmas squeezes down chimneys once a year.

We need to share the facts which prove, without any question, that the experimental jabs have killed and maimed tens of thousands. To do this we simply share government figures from the US and the UK. We need to share the evidence proving that although the virus is real it is no more deadly than the annual flu virus and that it was a hoax to claim that we are facing the greatest threat to human health since the Black Death. As I’ve said for over a year, it isn’t the virus that is a hoax – the hoax lies in the way that the virus has been marketed, promoted and advertised.

We are going to win this war by reaching out to people outside the resistance movement. And we will do this by presenting the truth in a solid, reliable, entertaining and irresistible way. We have to promote the truth so that we convert those who have been tricked, lied to and convinced by organisations such as the BBC.

The mainstream media won’t allow us to debate these issues. We can’t use Face-19 or Twitter because these platforms are owned by the fascist cabal trying to take over the world. We are living in a totalitarian society where the truth is suppressed by the authorities. I have believed for many months that we need to reach out by sharing our information in the only way we can: through distributing leaflets, by handing out copies of The Light Paper and by emailing copies of documents which prove the Government, the media doctors and the broadcasters are living through their teeth.

It isn’t difficult to do. There are leaflets and articles aplenty on www.vernoncoleman.com and www.wtf-wtf.org. Facebook or Twitter because these platforms are owned by the fascist cabal trying to take over the world. We are living in a totalitarian society where the truth is suppressed by the authorities. I have believed for many months that we need to reach out by sharing our information in the only way we can: through distributing leaflets, by handing out copies of The Light Paper and by emailing copies of documents which prove the Government, the media doctors and the broadcasters are living through their teeth.

And for addresses try using media. info – a website which contains the contact details of newspapers, magazines, radio and television. We need an army of people prepared to do these things. Send out five emails a day and you can consider yourself a Major in the Resistance Army. Ten emails a day and you’re a Colonel. Fifteen emails a day makes you a Brigadier. And if you send out twenty emails a day then you can call yourself General.

My suggestion? Send out the regularly updated article ‘Updated – How Many people Are the Vaccines Killing?’ to doctors, journalists and politicians. Or send the video and transcript of ‘Final, Irrefutable Proof that the covid-19 Pandemic Never Existed.’ Only by sharing the truth will we win this war.

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www.vernoncoleman.com

Join My Army To Win This War

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I in the summer of 2019 I moved to London after almost 3 years of travelling to make a career for myself in the music industry. After a few months of busking in Leicester and Trafalgar Square I was making enough money per hour to quit my job. I saved all my tips and invested it in creating a 15-piece, high-end functions band... which was due to launch in March 2020.

The month when all venues were forced to close due to the ‘covid’ scandal. But instead of complaining, I created London’s only outdoor jam event named the ‘Outside Jam’, hosting 21 jams over 6 months in summer 2020 (almost 1 a week). Audiences would tip us and this would be spread equally to the band - the only paid gigs all summer for most! However, in December the government decided everything had to close, and with the cold weather outside the game was up. Live music was officially over - or so I thought. That’s when the idea struck me to reform the Outside Jam and relaunch it as the Jam For Freedom - a protest against the unscientific and destructive policies attacking our career and ambitions. And we would tour the ENTIRETY of the UK with our live music, in defiance of the so called ‘10 mile’ restriction!

Our first gig on January 23rd 2021 in my hometown of Watford was a great success, with 2 hours of live pro freedom tunes belted from the band and dancing from the public! It did however result in the arrest of supporter Andy for the crime of handing out our ‘contaminated’ leaflets and getting too close to people. He refused to leave the area which led to the unlawful arrest and his being held in custody overnight. Our drummer, Felipe, himself a migrant from Brazil who moved to the UK for its culture of freedom and live music, was ordered to leave the area and fined. I was also ordered to pack and leave for ‘causing alarm and distress’.

But this didn’t deter us. We headed home and formed a masterplan to raise enough money to get a motorhome to travel the UK and bring free live music to 21 different cities, and in February began doing local jams to raise the cash. First up was Tower Bridge (where I took a live haircut whilst performing to show solidarity with the self-employed), Turnham Green (where we got an hour and a half of tunes in to a large crowd before police ordered us out) and then Wood Green where we made the high street smile before large crowds in the area led to more police orders to stop. In just over 4 weeks from our first gig we managed to raise enough to rent a motorhome for a 3 week tour. A large part came from a single private donor that loved what we were doing and had seen us play live twice.

We started our tour in Windsor, heading to Brighton and then detouring to Bishops Park in West London after being invited to a pro-freedom rally. We brought the equipment and fantastic musicians around us provided the backdrop to an incredible gig where around 200 people danced, hugged and sang. Midway through singing ‘I Want to Break Free’ I was arrested. My first ever arrest at 26! The people were angry. Shortly after, they detained Pier Corbyn as well and we made acquaintance in the back of the police van. I ended up spending a night in the cell and now have to attend a court date on June 10th to defend my ‘crime’ of helping mental health and protecting the sacred art of live music.

The day after my release I took the jam to Southend-On-Sea. Although the cops did move us on from the high street, they also pulled us over to ‘check I was insured’! Obviously I was. We then took the jam to a supporter’s sofa where the remainder of the crowd joined in the fun. Unfortunately, due to the police’s contacting the owner of the motorhome and revealing to him our ‘illegal’ activities and my arrest, we then unfortunately were forced to return it. But once again, this did not stop us. I continued to gig across London, opening up for Piers Corbyn on his Mayoral campaign, Primrose Hill; playing to hundreds singing Hey Jude in Leicester Square for the end of the 20th March Freedom rally, and then to Walton-on-Thames, Surrey.

Approximating the end of March, we had built up enough publicity that we were pulling in enough donations to just about make it work. A kind donor offered us enough money to go toward a cheap people carrier! With that we were off on our second tour across the country where we went as far as Glasgow and played 17 jams through April.

At the end of the freedom rally on the 24th of April we played for a couple of hours to hundreds in Hyde Park. Clearly not pleased with our happiness, police recklessly marched in and damaged our equipment. Luckily no crew members were hurt. Little did we know that a certain 3-time inductee to the rock and roll hall of fame, by the name of Eric Clapton, was watching this very gig live, mid-way through writing his new song ‘Where Have All the Rebels Gone’ in collaboration with Van Morrison. Well Eric, you’ve found them! Eric proceeded to donate £1000 to us, which brought us from broke to bouncing with glee! He has also lent us a bus to get around in! In response we were able to finance our May-June tour which will visit 26 areas throughout England, Wales and Scotland.

To support us and find our JAM-PACKED tour diary of free gigs visit: www.jamforfreedom.com

The Freedom Network - You Know Who You Are!

The Freedom Network has been running for six months now and we have over 300 hubs across the UK and beyond. The idea is to unite people from all walks of life who are on the same page and looking for the same thing - freedom. At TFN we do not just talk, we listen and we take action. Individuals have reached out to us, having not had contact with like-minded folk for nearly a year, suffering in their silence. When they make contact, their relief is insurmountable because they know they are no longer alone. Others contact us because they have established local groups already and want to join up to take the next step. This is how we network.

We are not a centralised organisation, there is no membership and no fee. We are simply a means for people to find others and meet in their local areas, so if you want to be part of a group of people – an international network - who choose to live a normal life, one that is your right and allows you to stand where you want, with whom you want, when you want and for whatever reason you want, then stand with us.

We are creating parallel communities to live outside the matrix; we are organising conferences and inviting expert speakers to remind us how to thrive in this new paradigm that is unfolding as we work for a new beginning whilst the current system collapses around our feet.

We support each other as we mourn those we have lost, through following the narrative. We have set up a support group for the young people who will be the leaders, the survivors of the ‘Hunger Games’ who will take mankind forward. These support groups will be established in each hub community. If you have something you want to share with like-minded folk, if you want to be part of the awakened gathering, if you feel lonely and vulnerable or passionate and excited, we are here for you, to help you do the job that you have been put on this earth to do. You know who you are and now you know who we are.

Join us at www.thefreedomnetwork.co.uk

50 Members Of Common Law Court Submit Declaration Of Bias

The Declaration states that there is bias and business entanglement between Milton Keynes Council and Milton Keynes Court and therefore the Court is unable to maintain its impartiality, preventing independence and unable to serve justice. The Declaration states that the relationship between the corporations is in breach of both English Law and international treaties.

The Declaration contained evidence of the claim ranging from Halsbury’s Law, the Bangalore Principles and Moto Proprio. The two organisations were instructed by the people to suspend any and all claims brought to Milton Keynes Magistrates Court by Milton Keynes Council until such times as full disclosure is made. The two businesses will be acting unlawfully if they fail to execute the instruction.

It is for this reason that 15 Lawful Counsellors from Common Law Court Four Counties recently attended a scheduled hearing on behalf of Paul Watson in the matter of council tax. Eight Police Constables were brought into the court but were immediately dismissed by the Lawful Counsellors as there was no breach of the peace and no crime. The case was adjourned by the judge as he refused to proceed.

The Magistrates Court have adjourned this landmark hearing until Tuesday 22nd June 2021 at Milton Keynes Magistrates Court at 10am. Common Law Court Four Counties would like to engage the support of anyone who can attend from 9.30 a.m. on the morning of the case. There is a planned march from the Court to the local Council Offices on the same morning.

https://www.facebook.com/Commonlawcourtfourcounties

Any press enquiries please call our marketing team on 01908 904991 or clc4@protonmail.com with a subject line ‘COUNCIL TAX HEARING’ clc4.org
Preventers & Promoters Of Respiratory Diseases

**How do prophylactics prevent disease and can you really catch covid-19 from 5G?**

Prophylactics are either synthetic medicines, or medicinal plants, Omega 3 oils, probiotics and vitamins, likely to prevent people from contracting disease; they can also help to reduce disease severity. The emergence of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is postulated to be responsible for covid-19 disease, and much discussion has surrounded the use of prophylactics in its prevention. Can this disease really be prevented? Evidence suggests it can.

Ivermectin and hydroxychloroquine are synthetically-created medicines; both are celebrated anti-parasitic drugs with well-documented safety profiles and proven, highly potent, antiviral and anti-inflammatory properties. They are inexpensive and feature on the WHO list of essential medicines. Anti-viral pharmaceutical prophylactics have been used for decades to prevent and reduce disease severity. Whilst the U.S. FDA and UK MHRA have not yet approved ivermectin and hydroxychloroquine for prevention of, or treatment of covid-19 disease, studies suggest the individual use of these medicines may prevent and reduce disease severity. There are also a number of medical plants with anti-viral and anti-inflammatory properties in medical trials that almost match the effectiveness of their synthetic alternatives. Quercetin and quinine are two powerful natural alternatives. Vitamin D is also a celebrated prophylactic, well-known for preventing respiratory tract infections.

Promoters of disease are chemicals or environmental contaminants which may encourage serious illness. It has been postulated that 5G spreads covid-19. How can this possibly be? It sounds a ridiculous notion. So, let us discuss, disease preventers and promoters in a clear and simple way:

**Vitamin D**

People with higher baseline vitamin D are 60% less likely to die of covid-19, therefore it makes perfect sense to follow NHS advice and supplement with up to 4000 International Units (IU) per day. This is an easy way of reducing the likelihood of contracting respiratory tract disease and of reducing its severity (Martineau 2017). And this makes it the super-hero in the fight against covid-19 disease. In a Spanish study, supplemental vitamin D3 reduced covid-19, ICU admissions by 82% and mortality by 64%. Many enthusiasts have been lobbying the UK government since early March 2020, calling for vitamin D supplementation for all, especially the most vulnerable, known to suffer innate vitamin D deficiency: black and ethnic minorities, older people, diabetics and those with obesity conditions. Reduction in deaths in Europe correlate with latitude, sun exposure and corresponding vitamin D levels, as in the Far East, where Cambodia and Laos have suffered only a handful of deaths. Vitamin D influences regulatory T-cell responses, essential for defence against bacterial infections. Optimising vitamin D absorption with a synergistic blend of magnesium and vitamin K2 increases vitamin D uptake. Also, when you are insulin sensitive and eating a low-carb diet, you produce healthy ketone levels, which help inhibit cytokine hyper-inflammation, a primary cause of covid-19 deaths.

**Quercetin and Quinine:**

Studies confirm the role of many plants against respiratory viruses. Phytochemicals demonstrate activity against coronaviruses through viral entry inhibition, replication enzyme inhibition and blockage of viral release. Quercetin is a natural anti-histamine with anti-inflammatory properties; it also helps transport zinc into cells. Zinc is vital for healthy immune function and a combination of zinc and an ionophore was in 2010 shown to effectively block viral replication of SARS coronavirus in cell culture. Where hydroxychloroquine is unsustainable, quercetin or quinine (tonic water) may be a better substitute, as they also mimic hydroxychloroquine in inhibition and blockage of viral replication. Hydroxychloroquine: Hydroxychloroquine helps shuttle zinc into human cells to block SARS-CoV-2 RNA-dependent RNA polymerase (the enzyme required for viral replication). Many doctors worldwide have reported great success with hydroxychloroquine and zinc in combined use, as a prophylactic. A medical review in the January 2021 issue of The American Journal of Medicine suggests, use of hydroxychloroquine and zinc reduced hospital entry. July 23, 2020, Dr. Harvey A. Risch, professor of epidemiology at Yale, suggested, the primary benefit of hydroxychloroquine comes from zinc, which inhibits viral replication.

**Ivermectin**

Evidence suggests Ivermectin can be useful at all stages of covid-19, especially as a prophylactic. In August 2020, Uttar Pradesh and Bihar distributed free Ivermectin and by the end of 2020, both states had the lowest death rates in India. A WHO-sponsored review suggests Ivermectin can reduce deaths by 83%. Dr. Andrew Hill of Liverpool University, describes Ivermectin as a potentially transformative treatment. In the U.S., Dr. Pierre Kory of the Covid-19 Critical Care Alliance suggests clinical studies show a large magnitude of benefits with Ivermectin, both as a prophylactic and treatment of all phases of covid-19 and keeps those with early symptoms from cytokine hyper-inflammation. While Ivermectin certainly appears to be useful, optimising your vitamin D levels should be your primary strategy.

**Hydroxychloroquine:**

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**Promoters of Disease**

The connection between covid-19 and 5G is inconclusive. One theory suggests 5G has promoted the emergence of covid-19. In Dr. Arthur Firstenberg’s book, ‘The Invisible Rainbow’, a claim is made that as the world has become electrified, viral pandemics have followed, and suggests a correlation between the 1918 Spanish flu pandemic and roll out of the first radio telegraphs. Dr. Thomas Cowan suggests 5G produces EMF-induced cellular toxicity. Poor immune function, possibly caused by EMF in those with electro-sensitivity, combined with unhealthy living, may have enhanced infection. Two of the areas hardest hit by covid-19, Wuhan and Northern Italy, implemented 5G just before their outbreaks; perhaps lowering natural immune defence and promoting chronic inflammation; although those who died, mostly were older people with obesity and diabetes, with insulin resistance being the common factor. High blood sugar will create an open back-door osmosis opportunity, for viral entry into cells. Any correlation with 5G may be a red herring, hiding apparent innate vitamin D deficiency; and in the UK, a reported incident where a married couple ended up seriously hyper-inflamed with covid-19, two weeks after receiving their flu vaccine, like 5G, could be coincidental, but should be given our careful consideration.

**For ever.**

KAREN KING
Veggie Armageddon Pantry

I have always been interested in natural health, but my journey into health mastery really began at the age of 32 when I was hit by an entirely unexpected health emergency. Following a course of antibiotics prescribed for a minor health condition, I suddenly found myself hospitalised and in a critical state after a major reaction to the drug. Despite being fit and healthy, the antibiotic sent my body into extreme shock, resulting in Type 1 diabetes and crippling arthritis. Before I knew it, I could barely walk and holding a cup of tea or doing up buttons became impossible. I was hospitalised for weeks and the doctors told me there was no hope of a cure. My future looked bleak. My recovery triggered a new thirst for knowledge. I developed a burning desire to find out what further hidden cures for disease might exist that could benefit humanity. I moved to Andalucía in Spain, purchased an organic farm and set about deepening my understanding of old plant varieties and our ancestors’ gardening techniques, along with the relationship between soil conditions, nutrient levels and health. Due to modern industrial farming methods, our soils worldwide are woefully deficient in minerals and so are we, if we eat food grown on those depleted soils. So as most people simply can’t get enough nutrients from their food, supplementation is a vital and a major key to reversing symptoms of disease by restarting the body’s innate ability to self-repair. Today, over 30 years since my recovery, I have been lucky enough to have advised thousands of clients and I am more convinced than ever that most disease can be primarily explained as nutrient deficiency and toxicity. I have also been privileged enough to have met, interviewed and worked with many of the leading lights in the natural health world, from whom I learned so many miraculous solutions to the health issues of today!

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Check out Clive’s new Telegram channel at: https://t.me/clivedecarle-health

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Clive will be writing regular articles for The Light and we welcome him aboard.

Please pass the Light on when you’ve read it.
We have grown up believing that smallpox is highly contagious, indiscriminate and deadly; that it killed many millions worldwide and that we were only saved from its ghastly ravages by the development of vaccinations; but this is simply not true and quite possibly the result of modern medical propaganda.

Vaccines didn’t eradicate smallpox, they made it worse; it was already on the decline by the time vaccines were introduced in 1796 but then it began to rise again. The disease was at its peak during the 1700s, though it was often confused with other illnesses such as chicken pox, measles, shingles, scarlet fever and secondary syphilis.

In modern times, it is a somewhat mythical disease but in days gone by it was a lethal, everyday scourge that you were lucky to avoid. Anxiously accepted as a part of life, some chose to purposefully infect themselves to get it over with. This ‘arm-to-arm’ (or up the nose) transfer was called variolation and involved matter from an infected pustule being pricked into the skin of the recipient. It was a risky procedure because there was always a chance of catching some other hideous disease or dying.

In 1796, historical ‘golden boy’ Edward Jenner began experimenting on cows after hearing about a local farmer who had apparently gained smallpox immunity by inoculating himself with cowpox secretions. Jenner hypothesised that because cows didn’t carry the same transmissible diseases as humans they would be safer to use as hosts. He swiftly began trialling the method.

James Phipps was one of the first to be immunised by Jenner as a young child, by the time he died he had been vaccinated over 20 times. He was 20. Jenner also tested the vaccine on his own son, who became crippled and died at 21. Both men died of tuberculosis, which some researchers attribute to the smallpox vaccine. (Eleanor McBean, The Poisoned Needle).

Though he was a keen pupil of esteemed surgeon John Hunter, Jenner sat no examinations and purchased a £15 medical degree from St. Andrew’s University only after he had been practising for twenty years. His opponents considered him vain, potbellied, crafty and greedy—‘a self-deluded quack who omitted vital information and denounced his findings only to reassert them when it suited him.’ Nevertheless, he somehow managed to convince those in the right places and received £30,000 grant from parliament (roughly £3 million by today’s standards) to continue his work.

The Vaccination Act of 1853 made compulsory for all babies under the age of three months to be vaccinated in England. Before this, the two-year death rate from the disease was 2,000, whereas 18 years later, during the pandemic of 1871, it had reached 44,800. It is estimated that 90% of those who fell ill had been vaccinated.

Opposition grew towards vaccination as the situation got worse, not better. Anti-vaccination leagues and societies formed throughout the country with dedicated high-profile members. Local guardians defended the rights of citizens and communities stood together to fight government tyranny. Protests took place and teams produced pamphlets and flyers with titles such as: ‘Vaccination: its fallacies and evils’, ‘Vaccination, a Curse’ and ‘Horrors of Vaccination’.

Huge numbers of people across the land worried that the vaccine was unsafe and unproven. Parents were fined and thrown in prison for not immunising their children but their commitment to the cause didn’t waver. Through fierce, persistent and active opposition, parliament eventually passed an act in 1898 that removed penalties and allowed parents to choose whether to have their children vaccinated.

Alfred Russell Wallace, a naturalist and biologist, charted European deaths from smallpox and the vaccine and reported that: “the vaccine has actually increased susceptibility to the disease. The conclusion is in every case the same: that vaccination is a gigantic delusion; that it has never saved a single life; but that it has been the cause of so much disease, so many deaths, such a vast amount of utterly needless and altogether undeserved suffering, that it will be classed by the coming generation among the greatest errors of an ignorant and prejudiced age, and its penal enforcement the foulest blot on the generally beneficent course of legislation during our century.”

The real problem with smallpox was filth and lack of hygiene. Sir Edwin Chadwick, a social reformer, toured populous working class areas of England and produced the 1842 Sanitary Report, which compelled the councils to provide better facilities.

He said: “Smallpox, typhus, and other fevers occur in common conditions of foul air, stagnant putrefaction, bad house drainage, sewers of deposit, excrement sodden sites, filthy street surfaces, impure water, and overcrowding, and the entire removal of such conditions is the effectual preventive of diseases.”

The construction of London’s sewers, which had begun in 1766, was completed by the mid-1860s and sanitation throughout the country, along with health, slowly improved with the introduction of the Public Health Act in 1875, which laid out detailed plans for more effective drainage, clearance of waste and rubbish, and regular maintenance of sewers.

Natural hygienist and physician, Dr. Russell T. Trall, considered smallpox “essentially...not a dangerous disease” and Joel Uritsky, MD, director of the National Immunization Program and Early Smallpox Response and Planning at the CDC stated more recently that “Smallpox has a slow transmission and is not highly contagious.”

H Valentine Knaggs, a physician and naturopath, somewhat radically claimed that smallpox was a beneficent disease, a healing crisis. He said: “The body is ridding itself of toxins. Medical intervention interferes with the process. Smallpox is an outbreak of carbuncles, simultaneously, all over the body. In a natural world, those who survived would be healthy, full of vitality and have great immunity from future disease.”

Dr Vivian Vetrano, in her essay on smallpox, writes: “If hygienic care had been resorted to in the beginning of smallpox...no complications would have occurred and there would rarely be a genuine pustule.” But why back when, patients were kept in bed, in warm rooms with dirty blankets and closed windows. Doctors applied gauze that had been soaked in corrosive mercuric chloride or carbolic acid and tightly bound the dressings; white blood cells were destroyed, the pus couldn’t escape, toxicity increased and a second fever followed.

It would seem that medical intervention did not eradicate the disease but rather aggravated it. A doctor at the time remarked: “As it is palpable to all the world how fatal smallpox proves to many of all ages, so it is clear to me from all the observations that I can possibly make, that if no mischief be done, either by physician or nurse, it is the most safe and slight of all diseases.”

For further information, read: ‘Sanitation Vs. Vaccination - The Origin of Smallpox’ by Walter S. Hadwen, M.D. or Dr. Sheri Tenpenny’s ‘Report of the CDC’s Public Forum on Smallpox’ at vaclib.org (8th June 2002).
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