

A HARD LOOK AT MANDATORY LIVE VIRUS VACCINATIONS: WHAT'S REALITY AND WHAT TO DO

Dear Parents and Grandparents,

We are writing this letter as concerned parents, grandparents, physicians, health professionals, and clergy for the health and well-being of our children, grandchildren, and also ourselves. Everything reported here, either from direct scientific papers or explicit written reports by reputable leaders, is based on fact—not rumor or myth. The scientific research below, which suggests the upcoming live virus squalene adjuvant swine flu vaccination may be compromising to the health and well-being of you and your loved ones, is overwhelming. The costs—including life-threatening, life-crippling side effects and death—are high; the theoretical benefits are questionable—at best. **Our interest is that you have enough valid scientific data to make an informed choice in the best interest of the health of yourself and your children.** The decision of whether or not to vaccinate is a personal one. Every parent should be allowed full freedom to accept or reject vaccines for their children and themselves. We should be allowed the privilege of “informed consent,” the same as with any medical procedure that includes the possibility of adverse reactions. Parents are ultimately responsible for their own health and the health of their children.

11 POINT SUMMARY:

1. The proposed swine flu, squalene adjuvant, live virus vaccination is neither adequately or sufficiently tested, nor proven effective or safe; it is uninsurable and can stimulate the onset of a variety of debilitating auto-immune diseases, and is a serious assault on the immune system.
2. The swine flu vaccine contains dangerous & life-threatening fillers, including adjuvants such as squalene, animal tissues, which may include pig tissue, viral and bacterial proteins, and live viruses—all of which contain pig DNA.
3. Live viruses have a history of lethal danger, disease, and are contagious. Secondary Spread of live viruses from those vaccinated with a live virus lasting up to three weeks is a well-known fact.
4. The swine flu appears to have been laboratory generated and designed to have its dangerous effects amplified by the use of all the available swine flu vaccines.
5. The United States government classifies the bird flu virus as a biological weapon.
6. If the government intent is to make the live virus squalene adjuvant swine flu vaccination mandatory for all Americans, it is a violation of the Bill of Rights of the Constitution of the United States.

7. Analysis from the British Medical Journal article titled, *Influenza Vaccination: Policy Versus Evidence*, presents evidence from a systematic review based on a meta-analysis of all the research that shows inactivated vaccines have little or no effect on preventing or minimizing the flu.

8. Those who refuse the live virus squalene adjuvant swine flu and regular flu vaccinations may be jailed or held indefinitely in internment camps established by states or FEMA because the so-called swine flu pandemic has been, as far as we are concerned, unnecessarily classified as a Level 6 Pandemic, potentially allowing international law to override the United States Constitution to justify American martial law and detention for vaccine refusers.

9. Attempts by the United States government to increase the demand for flu vaccinations through fear are explicitly revealed in a classified, private CDC (Center for Disease Control) sponsor conference for vaccine manufacturer executives entitled “7-step Recipes to Increase Demand for Flu Vaccination”.

10. The best way to be protected from any flu including the H1N1 live virus swine flu is to have a healthy immune system by living a natural, earth-connected way of being, which includes: organic, plant-source-only foods, supplements including nano-silver, vitamin C, A, and D, medicinal immune-building mushrooms and herbs, and specific aromatherapy oils. Physicians of the State of Arizona Board of Homeopathic and Integrated Medicine Society have found that usually one to three Vitamin C IV's of 50,000 milligrams will give 100% relief from this or any flu in the instance one actually gets the flu. Other effective treatments include nano-silvers and Oxygen Treatment Therapy (OTT). This is a safe, less expensive, simple, and more effective treatment as compared to Tamiflu (Tamiflu, although supposedly designed for the antiviral effect, is a psychotropic drug that has significant brain and nervous system side effects, which are toxic and debilitating). These healthy approaches have been historically proven to be far more safe and effective than generated vaccines, which have truly never been scientifically proven to be either safe or effective except for building the economic pockets of the vaccine companies. In other words, there are strong international and national vested interests on many levels backing these inadequately tested, dangerous, and ineffective vaccines. These vested interest groups are not exactly concerned about your health.

11. We have options and we can create more. It is important that we all take a stand while we are still healthy enough to be standing.

BRIEF SUMMARY:

There are two reasonable questions that must be asked: (1) Is the swine flu live virus squalene adjuvant vaccine safe and effective, and if so, (2) will vaccinating 95% or more of the general population provide any more protection for the whole population? If both of these questions were answered in the affirmative, then we would have a reasonable justification for mandatory vaccinations. However, the overwhelming scientific data suggests just the opposite.

The live virus swine flu has not been adequately tested, proven safe or effective, is non-insurable, and because of the well-known phenomena of Secondary Transmission of live virus vaccines (meaning it can be contagious), it may actually increase the transmission of the virus.

This live virus vaccine has 2.3 times more genetic mutability, and added adjuvant toxicity than a natural virus because it includes squalene. Squalene has significant autoimmune inflammatory effects, and general severe autoimmune effects, which are a significant potential threat to the health of the individual. According to congressional hearings in 2004, squalene was considered the main cause of 300,000 GIs with Gulf War Syndrome who are now applying for complete disability. Aside from the horrendous, misery and ill health created by the Gulf War Syndrome, based on our understanding of the 1918 flu pandemic (which some significant scientific work has suggested was precipitated by the water-oil adjuvant that was part of the typhus vaccine and unknowingly given to the soldiers to protect against typhus), it appears that the water-oil adjuvant in combination with the Spanish Flu was the main precipitator of the millions of deaths that occurred. Research at that time, which was limited because they didn't even know about viruses, suggests that the high percentage of deaths in soldiers (healthy young men) was connected to the adjuvant, which gave them a hyper-immune, auto-immune response and cytokine storm (strong inflammatory reaction) 3 to 6 months after receiving the vaccine. This explains why so many of them died from hemorrhagic pneumonia, activated by the viral flu. The use of squalene as an adjuvant in the vaccine, which causes severe health symptoms on its own, could actually mirror the whole 1918 scenario. The interaction of the flu and the hyper-immune auto-immune imbalance response to the squalene (a water-oil adjuvant) could theoretically pre-dispose people who receive the vaccine with this live virus in it to mimic the actual pandemic called the Spanish Flu of 1918. Please understand that this deadly synergy of squalene and the live virus in a vaccine is theoretical and there is no proof that this is the potential case, except the research on the actual cause of the 1918 Spanish Flu. However, this just adds to the potential risk of a squalene-based live virus swine flu vaccination.

According to the British Medical Journal article titled, *Influenza Vaccination: Policy Versus Evidence*, evidence from a systematic review based on a meta-analysis of all the research shows “vaccines have little or no effect on preventing or minimizing the flu.”

Essentially, the benefit to risk ratio is extremely poor from a scientific point of view. In answering the second part of the question, all the vaccine studies to date show that vaccinating 95% or more of a population does not make a difference in stopping outbreaks of the particular disease people were vaccinated for. In fact, based on the scientific evidence, mass mandatory vaccinations with a highly mutable live virus could actually activate a real and lethal pandemic rather than prevent it. **Therefore, from a purely scientific perspective, there is no valid reason for mandatory vaccinations.** For this reason we believe that all people have a constitutional, religious, philosophical, and medical right to the freedom of choice of whether or not to be vaccinated.

In essence, as confirmed by veteran US Constitutional attorney Larry Becraft, **there is no basis in statutory law for state official mandates, county cooperation, or public compliance, in-so-far-as forced vaccinations and/or quarantines, even during officially declared epidemics**

or pandemics. Presidential executive orders lack the legal power to force or enforce vaccination and/or quarantine mandates on the American people. Likewise, state statutes and administrative rules and regulations pertaining to compulsory vaccinations and quarantines advanced by health departments shall be prohibited as violations of fundamental human rights, religious freedoms, and just compensation for personal property secured by the US Constitution. Given these conclusions, **it is official malfeasance for state and federal health officials to advance such unconstitutional policies and engage such procedures.** Furthermore, health officials may be held accountable for gross criminal negligence: engaging in broadcasting flu warnings, using the news media to relay deadly predictions of pandemic morbidity and mortality, or otherwise sensitizing people to promote compliance with vaccination or forced quarantines while grossly neglecting their mental health and quality of life; increasing anxiety, phobia, and depression, and causing severe economic damages from the medical, psychosocial, and behavioral impacts of these public health malpractices.

To be clear from a legal point of view, no one has any constitutional authority at the Federal or State level to enforce mandatory vaccinations. However, waiting until legal suits are filed afterwards is not an option because irreversible damage may be done by then to our global family. The State officials are more vulnerable to official malfeasance. Lawsuits on one level also have the immediate power to veto Federal mandates of forced vaccinations. At the state level we have protection from Federal mandates...and in practical reality we have more personal access to state politicians to get them to vote against any Federal mandates, as they are more directly accountable to the public. For further information, please see: www.PandemicFluOnline.com.

ONE SENTENCE SUMMARY:

The overwhelming scientific studies and research do not in any way support the action of mandatory flu, squalene adjuvant, live virus vaccination; to do so might result in the desecration of a significant amount of God's creation of humanity on planet earth; the science strongly suggests that mandatory vaccinations are both immoral and ethically illegal (ethics that are core in the Judaic-Christian system) and this mandatory vaccination violates the basic Ten Commandments in at least 6 ways: Thou shall not murder, steal, lie, bear false witness, engage in idol worship (money and power), envy or covet.

We also recommend reading *Vaccine Safety Manual* by Neil Miller for additional scientific information on the subject as well as Cochrane collaboration/influenza studies, which show virtually no benefit to the flu vaccines. Also check Oct. 6 BMJ, Dec 2006 New England Journal of Medicine, and Feb. 2005 Archives of Internal Medicine. [Http://thinktwice.com](http://thinktwice.com)

FOR A MORE DETAILED SCIENTIFIC DISCUSSION AND EXPLANATION ON EACH POINT, PLEASE READ FURTHER. FOR A CLEAR SET OF ACTION PLAN OPTIONS, GO TO POINT 11 ON PAGES 20-22.

Potential Vaccination Risks:

1. The proposed swine flu, squalene adjuvant, live virus vaccination is neither adequately or sufficiently tested, nor proven effective or safe; it is uninsurable and can stimulate the onset of a variety of debilitating auto-immune diseases, and is a serious assault on the immune system.

At issue is what we consider to be the serious deception and general misinformation about the safety of the impending live virus swine flu vaccine, which is neither adequately tested nor safe, although the so-called “researchers” have publicly declared it safer than the regular flu vaccine before even beginning the testing process. They may be right in that the regular flu vaccine was anything but safe. There were an average of 8,364 adverse reactions to the flu vaccine reported to the federal government in 2007 and 2008. The Vaccine Adverse Event Reporting System (VAERS) is a passive reporting system, notorious for under-representing true reaction rates. Passive reporting systems may capture just 1 percent or less of true damage to recipients of pharmaceutical drugs (as noted by David Kessler, former head of the FDA). Based on the VAERS data, calculations suggest an average of 850,000 life threatening, life crippling side effects, or deaths associated with all vaccinations given per year based on an extrapolation of the CDC data. Dr. Marie-Paule Kieny, Director of the Initiative for Vaccine Research at the World Health Organization (WHO) Headquarters, even stated herself that vaccines “do induce adverse reactions and this can be the case as well for adjuvanted vaccines and non-adjuvanted vaccines.” She also said the vaccine safety data is, for certain populations, significantly lacking; and for quite a few populations, there is no data at all to verify the safety of vaccines—including children, those over 65, pregnant mothers, and asthmatics.

Dr. Kieny actually says that she doesn’t even know what the proportions of the ingredients are in the 4.9 billion vaccines they are about to inject into people. There have been no complete clinical trials for a medical product that is about to be administered on mass to pregnant women and children. There literally is no data for this vaccine as per its use in children, pregnant women, and asthmatics. There is a considerable amount of data with squalene in Gulf War vets receiving both an experimental anthrax vaccine and experimental HIV vaccine. It is highly associated with at least 300,000 vets who have made permanent claims for total disability. Animal research also supports these findings.

As reported in the Irish Times, the Lancet recently stated: “Countries need to assess carefully the risks and benefits of the rapid approval of a human swine flu vaccine to avoid repeat of past problems with mass-vaccination.” According to the London Evening Standard, WHO officials have warned that H1N1 vaccines may be unsafe. The Institute of Science and Society has said that the vaccines will be far more deadly than the swine flu, and that mass vaccinations are a recipe for disaster.

The new swine flu live virus vaccine could be more dangerous than "seasonal" flu vaccines because some of them are using new technologies, and all of them are being fast-tracked,

reducing testing periods and safety requirements before licensing occurs. As mentioned earlier, the doctor responsible for overseeing the trials has already claimed the shot is "really as safe, actually if not safer," than previous flu vaccines. That's a curious statement considering he is still recruiting test subjects and the trials have not yet begun. This is anything but a scientific attitude and certainly does not inspire confidence in the found results—especially if they are already predetermined.

2. The swine flu vaccine contains dangerous & life-threatening fillers, including adjuvants such as squalene, animal tissues, which may include pig tissue, viral and bacterial proteins, and live viruses—all of which contain pig DNA.

The contents of this live swine flu virus vaccine injection are cause for concern. One of the most dangerous substances contained in this injection is squalene. There are over two-dozen animal studies that show squalene's ability to induce severe autoimmunity. Research at this point suggests squalene is heavily associated with the debilitating and life-destroying Gulf War Syndrome. Because of this, there is a serious risk of a Gulf War Syndrome outbreak amongst the vaccinated general public. Of course, this autoimmune syndrome will not show up after one week of human vaccine trials, nor will autism, Guillain-Barre syndrome (a demyelization of the nervous system that can paralyze a person from the neck down), or an assortment of autoimmune disorders including type 1 diabetes. In one study of over 100,000 vaccinated children in Finland, there was a 147% increase in the rate of type 1 diabetes in those vaccinated. The lack of sufficient testing on this experimental live virus vaccine raises many concerns. There are no criteria on its efficacy or valid statistics to speak of. During the 1976 swine flu scare, the swine flu vaccine itself killed hundreds & sickened countless others, and had an unusually high rate of Guillain-Barre Syndrome associated with it.

Dr. Leonard Horowitz, author of *Emerging Viruses: AIDS And Ebola: Nature, Accident or Intentional?* says the swine-bird-human flu strain, reported to be found first in Mexico in late-March 2009, most likely came from Dr. James S. Robertson and his colleagues in association with the US Center for Disease Control (CDC) and vaccine manufacturer Novavax, Inc., which was ready to profit from the release. Nobody else takes H5N1 Asian-flu infected chickens, takes them to Europe, extracts their DNA, combines their proteins with H1N1 viruses from the 1918 Spanish flu isolate, additionally mixes in some swine-flu genes from pigs, then reverse engineers them to infect humans, he said. True Ott, PhD., N.D. also gives evidence of this being a laboratory generated virus, and associates the origin of this lab-generated flu with Novartis International AG, which happens to be the world's largest multinational pharmaceutical company. He feels the key figure in making this lab-generated virus is Dr. Jeffrey Taubenberger. What is key to this understanding is that two researchers have made a very strong case for this being a laboratory-created virus.

<http://uncensored.co.nz/2009/04/30/dr-horowitz-mexicanswine-flu-made-in-lab/>

Some of the new H1N1 (swine flu) vaccines are going to be made by Novartis. These shots will probably be made in PER.C6 cells (human retina cells) and contain MF59, a potentially debilitating adjuvant. MF-59 is an oil-based adjuvant primarily composed of squalene. All rats injected with squalene (oil) adjuvants developed a disease that left them crippled, dragging their paralyzed hindquarters across their cages. Injected squalene can cause severe arthritis and severe immune responses, such as autoimmune arthritis and lupus. Reference (1): Kenney, RT. Edleman, R. "Survey of human-use adjuvants." Expert Review of Vaccines. 2 (2003) p171. Reference (2): Matsumoto, Gary. Vaccine A: The Covert Government Experiment That's Killing Our Soldiers and Why GI's Are Only the First Victims of this Vaccine. New York: Basic Books. P54.

LIST OF VACCINE FILLERS & ADJUVENTS: This list, officially administered by design with every vaccine provided to the public, in addition to the squalene that appears to be in this upcoming swine flu vaccine, is of great concern to many parents and grandparents, with the announcement that they will start vaccinating children and pregnant women first and then "wait to see if there are too many adverse events" (including seizures, neurological problems, and death).

In addition to the viral and bacterial RNA or DNA that is part of the vaccines, here are the fillers:

- **Aluminum hydroxide** - directly linked to causing Alzheimer's disease
- **Aluminum phosphate** - directly linked to causing Alzheimer's disease
- **Ammonium sulfate** - an inorganic chemical compound used as fertilizer and "protein purifier"; known to cause kidney & liver damage, gastrointestinal dysfunctions
- **Amphotericin B** - an "antifungal disinfectant" and anti-biotic, which damages the urinary tract, bowels, and heart functions
- **Animal tissues** (a causal element for all the various auto-immune diseases associated with vaccination): **horse blood, rabbit brain, dog kidney, monkey kidney, chick embryo, chicken egg, duck egg, pig blood, Porcine (pig) pancreatic hydrolysate of casein** (the pig protein/tissue is an additional objectionable issue for Jewish and Muslim people)
- **Calf (bovine) serum & fetal bovine serum** (cow blood is recognized as a significant transmitter of Mad Cow Disease)
- **Betapropiolactone**
- **Formaldehyde** - used as "a preservative & disinfectant", known to cause cancer, chronic bronchitis, eye irritation when exposed to the body's immune system
- **Formalin**
- **Gelatin**
- **Glycerol**
- **Human diploid cells (originating from human aborted fetal tissue)**
- **Hydrolyzed gelatin**
- **Monosodium glutamate (MSG)** - now known to cause cancer in humans, also linked to obesity
- **Neomycin** (anti-biotic)

- **Neomycin sulfate** (anti-biotic)
- **Phenol red indicator** - a highly toxic disinfectant dye, attributed to liver, kidney, heart & respiratory damage
- **Phenoxyethanol (antifreeze)** - proven to have extreme neurotoxic side effects
- **Potassium diphosphate**
- **Potassium monophosphate**
- **Polymyxin B**
- **Polysorbate 20**
- **Polysorbate 80** – associated with infertility when injected
- **Residual MRC5 proteins**
- **Sorbitol**
- **Sucrose**
- **Thimerosal (mercury)** - a neurotoxin linked to psychological, neurological, & immunological problems—especially autism. Nervous system damage (such as sub-acute sclerosing panencephalitis (SSPE), brachial plexitis, post-vaccinal encephalitis, transverse myelitis and peripheral neuropathies), kidney disease, birth defects, dental problems, mood swings, mental changes, hallucinations, memory loss, and inability to concentrate can occur. Symptoms also include tremors, loss of dermal sensitivity, slurred speech, and—in rare cases—even death and paralysis. This additive alone was the catalyst for another recent Class Action Lawsuit organized by mothers of children born with autism & the many related behavioral disorders associated with it. Autism is now occurring at levels never seen before in history; depending on the state, its rate is now 1 in 67 to 1 in 150. The autism rates used to be 1 in 20,000. Mercury may also be associated with the significantly increased rates of senility and Alzheimer's, which is associated with five or more successive flu vaccinations. Although most mercury (thimerosal) has been removed from children's vaccines, it is still in all flu vaccines at toxic doses.
- **Tri(n)butylphosphate,**
- **VERO cells, a continuous line of monkey kidney cells** - linked to the SV-40 virus known to cause leukemia
- **Washed sheep red blood cells**

*This data is available via: www.mercola.com

<http://articles.mercola.com/sites/articles/archive/2001/03/07/vaccine-ingredients.aspx>

THESE ADDITIVES ARE GIVEN TO OUR CHILDREN WITHOUT PUBLIC KNOWLEDGE OR CONSENT.

What's the problem with this horrendous looking list? The problem is two-fold: (1) the adjuvants are added to increase inflammation and immune response in the system, and (2) the adjuvants are significantly detrimental to the overall welfare of the organisms, according to the neurosurgeon Russell Blaylock, M.D., an expert in this field. His research suggests the vaccinations may cause brain swelling and inflammation for up to two years. This alone would be enough to significantly disrupt the immune and endocrine systems, as well as increase senility, activate Alzheimer's, and other brain dysfunctions. For example, Hugh Fudenberg, MD, Founder and Director of the Neuro Immuno Therapeutic Research Foundation, reported at the NVIC International Vaccine Conference in Arlington, Virginia in September 1997, that five

consecutive seasonal (yearly) flu shots increases the risk of Alzheimer's disease ten fold. Other devastating side effects of vaccines involve neurological damage, including encephalitis, transverse myelitis, peripheral nerve damage, autism, seizures, mental retardation, language delays, behavioral problems, multiple sclerosis, and SSPE (sub-acute sclerosing panencephalitis). There is also significant animal research that supports Blaylock's findings.

The veterinary research has shown that vaccines can cause a wide range of brain and nervous system damage. In the Merck Manual it states, in regard to its own products, that vaccines can cause encephalitis (brain inflammation and damage). Merck states, "Examples are the encephalitis following measles, chicken pox, rubella, small pox, vaccinia, and many other less well-defined viral infections."

Although dog and cat research doesn't necessarily mean it will be the same for humans, it is highly probable this animal research is revealing what is really happening with human vaccines. Because of this, there is much to learn by looking at the animal vaccine research. The following is a summary of some of this research.

In the Canine Health Concerns (CHC) study, reports show that 73.1% of the dogs developed short attention spans within three months of being vaccinated. 72% of the dogs were considered to be nervous and worrying within three months post vaccination. It is interesting that dogs can develop paralyzed rear legs and death shortly after a vaccine shot and that paresis is listed as a symptom of encephalitis in the Merck Manual. *The Science of Vaccine Damage* by Catherine O'Driscoll outlines results from several animal studies regarding the effects of vaccinations on dogs and cats as collaborated by a team at Purdue University School of Veterinary Medicine.

Vaccinated dogs in the produced study developed autoantibodies to their own bio-chemical protein structures, which included antibodies against fibronectin, laminin, DNA, albumin, cytochrome C, cardiolipin, and collagen. The fibronectin is involved in tissue repair, cell multiplication and growth, and the differentiation between tissues and organs. The vaccinated dogs also developed autoantibodies to laminin affecting adhesion, differentiation, spreading, and proliferation and moving of cells. **What the vaccines are doing is disrupting the natural intelligence of the cells.** The vaccinated dogs also developed autoantibodies to their own collagen, which is about one quarter of all the protein in the body and thus, in the CHC 1997 study of 4,000 dogs there was a much higher number of dogs developing mobility problems shortly after they were vaccinated. The dogs also developed autoantibodies to their own DNA.

The AVMA (American Veterinary Medical Association) Vaccine-Associated Feline Sarcoma Task Force conducted several studies to determine why 160,000 cats each year in the USA developed terminal cancer at their injection sites. Veterinarians around the world, as well as the British Government, have acknowledged the fact that cats do get vaccine-induced cancer. In August 2003, the Journal of Veterinary Medicine reported an Italian study that showed dogs also developed vaccine-induced cancer at their injection sites. It is no coincidence that vaccine-site cancer is a possible sequel to human vaccines. For example, Dr. Berniece Eddy, a microbiologist at the National Institutes of Health (NIH), has proven that both dead and live vaccines carry a monkey retrovirus (SV-40) that produces an inheritable cancer in experimental animals. It is unfortunate to note that this monkey retrovirus (SV-40), which is spread from

human to human and from mother to child, also appears frequently in human cancer sites. In 1987, Dr. Hilleman, head of all vaccine production of Merck Pharmaceuticals, stunned the world with his public admissions that mass vaccination campaigns of the 1950s and '60s likely caused thousands of cancer deaths each year. This was due to the presence of SV-40. Doctors estimate that the virus was injected into tens of millions during the vaccination campaigns, including several million in Canada. It is also widely acknowledged that vaccines can cause a fast acting, usually fatal, disease called autoimmune haemolytic anaemia (AIHA). People may die from this in days. In the Merck Manual of Diagnosis and Therapy, even though Merck is a multinational vaccine manufacturer, it states that AIHA may be caused by modified live virus vaccines (MLV). The British Government's Working Group also acknowledged this.

The veterinary research also showed a connection between vaccine events and arthritis. Again, it is no accident that the New England Journal of Medicine reported it is possible to isolate the rubella virus from affected joints in children vaccinated against rubella. It also reported isolating viruses from the blood of women with prolonged arthritis following vaccination. In 2000, the CHC's 1997 findings indicated that polyarthritis and other diseases like amyloidosis, which affects organs in dogs, were linked to the combined vaccines given to dogs. The dog research also confirms our explanation of human autoimmune responses to vaccination because they also found that dogs produced antibodies against their own DNA and their own tissues, such as found in heart cells. When we look at this picture from a broader perspective, it is not too hard to show scientifically that vaccines can put people into an allergic state, which may range from mild to anaphylactic shock and death. There are also some individuals who have an inherited faulty B and T cell functioning and therefore are very susceptible to abnormal immune reactions to vaccinations. The Merck Manual warns that patients with or from families with genetically altered B and or T cell immune cell deficiency history should not receive live virus vaccines due to the severe rate and risk of infection. How is this going to work when vaccinations are mandated with no medical or religious exceptions? In other words, some of these B and T cells will manifest as food allergies, neurological deterioration, eczema and heart disease. A deranged immune response may lead to inflammatory conditions such as arthritis, colitis, pancreatitis, and a number of autoimmune diseases as well as cancer and leukemia. The more serious meaning of this is that people with these conditions can die if they receive these live virus vaccinations because their immune systems are not strong enough to handle viral assault from modified live virus vaccinations. Some veterinarians have actually said, "I think that vaccines... are leading killers of dogs and cats in America today."

A major mechanism, which is the explanation for these life-threatening autoimmune and inflammatory diseases, such as type 1 diabetes, severe rheumatism, Guillain-Barre, SIDS (sudden infant death syndrome), other autoimmune diseases, and death, is that all the foreign animal tissues in a vaccine can set off an autoimmune response, which is the cause of all of these "diseases", which attack various organs and tissues according to one's genetic pre-disposition toward a particular inflammatory disease. What that means is these animal tissues are foreign antigens that the body responds to as antigens in an attempt to eliminate the foreign invaders. In essence, the immune system creates an attack against these unhealthy invaders with its own antibodies. However, in the case of an autoimmune response, these foreign tissues create a cross reaction that ends up attacking our own organ tissues, which are similar to the animal tissues that were injected, such as attacking the beta cells of the pancreas, the brain cells, and the myelin

sheaths. These two factors combined with the danger of a live virus create a potentially lethal effect.

SO WHAT IS THE PROBLEM WITH LIVE VIRUSES?

3. Live viruses have a history of lethal danger, disease, and are contagious. Secondary Spread of live viruses from those vaccinated with a live virus lasting up to three weeks is a well-known fact.

We have to understand that live virus vaccines have a history of danger and disease, especially of the disease that is targeted. For example, the live polio flu vaccine virus that was used from 1979 – 2000 was pulled off the market because the vaccine itself was considered to be the major cause of polio and as such, Dr. Salk, the inventor of the vaccine, admitted this to be the case.

The contagious power of a live virus vaccine is no longer new information. It is scientifically recognized that an attenuated live virus vaccine can be contagious. The scientific term for this is called Secondary Transmission. Translated into common language, it means if all the children are vaccinated with a live virus, the adults who haven't been vaccinated are significantly more likely to pick up the live virus from being in contact with children. The current science has found those who are injected with a live virus vaccine are releasing the live virus from their bodies for up to three weeks, contrary to the inaccurate theory that everyone needs to be vaccinated to stop an epidemic, which is a false and unproven justification. The real danger is the opposite. The live virus vaccinated people can infect everyone else.

There is also significant research to show that in populations that are 95% fully vaccinated, viral infection outbreaks still occur. This is extremely well documented with major communicable diseases such as measles and pertussis. For further information please see: <http://thinktwice.com/7reasons.pdf> or <http://www.opposingviews.com/questions/should-schools-require-that-children-be-vaccinated>.

Another piece of important information regarding the danger of live viruses was an “informal” clinical trial of the avian flu live virus vaccine on about 200 Polish vagrants, which resulted in 11 immediate deaths and 20 subsequent deaths. This amounted to about 15% of the test population that died. The doctors and nurses involved were charged with murder. This happened in 2008. It obviously makes the point that it is not an exaggeration to say that live virus vaccinations may be extremely dangerous and lethal.

We also saw this lethal effect in the 1960s and 1970s when Australian Aborigine infants began to mysteriously die at astonishing rates—1 of every 2 babies after being vaccinated. Archie Kalokerinos, M.D. eventually made the connection when he realized the babies were dying after being vaccinated against pertussis and other diseases. Heath officials had recently initiated a mass vaccination program to “protect” Aborigine babies; their deaths corresponded with the program. He wrote a book called *Every Other One* documenting this tragic and preventable event in detail.

Although this is not an analysis of vaccinations in general, it obviously leaks over into this discussion. This however, is a specific exploration of the potential dangers versus the minimal benefits of live virus vaccines.

4. The swine flu appears to have been laboratory generated and designed to have its dangerous effects amplified by the use of all the available swine flu vaccines.

Although there are some valid humanitarian concerns, based on the pattern of the 1918 swine flu in which the flu came lightly in spring/summer and came back heavily in the fall, which may be fueling this push to vaccinate or go to prison consciousness, there are some very incriminating and questionable facts regarding the intentions behind this massive push. For example, Baxter International Incorporated was in the application process for supplying avian flu vaccinations to European countries in the event of an epidemic when they “accidentally” shipped live avian flu vaccines to 18 countries in Europe. A laboratory technician tested the Baxter Seasonal Flu vaccines sent to the Czech Republic and discovered that they were contaminated with a highly pathogenic version of the avian flu, which could have launched a global pandemic. The total amount of the pathogenic avian flu virus sent to these 18 countries was 72 kilograms (over 150 pounds), which is a lot. Because Level 3 precautions were in place, such contamination “could not have happened accidentally” according to experts in the field. In spite of this so-called “accident”, Baxter was rewarded with a lead role in developing, producing, and disseminating the swine flu vaccine for the labeled “Level 6 pandemic”.

It normally takes a minimum of 12-18 months to create a vaccine after a virus has been identified. How is it that Baxter Laboratories, after receiving the seed culture of the swine flu virus that was provided in May 2009, announced that they would have the vaccine ready by July of 2009. One can't help but question how they were able to do this in 2 months rather than the usual 12-18 months until we understand the reality of the situation. True Ott, PhD, ND points out that the patent for the Swine Flu vaccine on November 4th, 2005 by Novartis International AG was granted on February 19, 2009 before the Swine Flu “pandemic” even began. The US patent office granted US patent number 20090047353A for a “Split Influenza Vaccine with Adjuvants”. The so-called “Swine Flu” grabbing headlines today is actually a recombinant, or “split-influenza” virus consisting of A-strain Bird-Flu (H5N1), Swine Flu (H1N1) and multiple strains of human flu (H3N2)—the 1918 Killer Flu that killed untold millions of people.

According to True Ott, PhD, N.D., Dr. Jeffrey Taubenberger was quite likely the primary author of the Novartis' Nov. 6, 2005 “provisional” patent application. On page 2, paragraph 32 of the patent publication it says, “The influenza virus [that the ‘invention vaccine’ is designed to protect against] may be a reassortant strain, and may have been obtained by reverse genetics techniques. Reverse genetics techniques allow influenza viruses with desired genome segments to be prepared in vitro using plasmids.” The remnant of the paragraph then goes into very specific detail as to the actual mechanics of how the pandemic virus was actually created by

Taubenberger's Ft. Detrick team. At the very least, the author of the patent application had to have studied Taubenberger's various published reports on his work at Detrick, for the wording and science is virtually verbatim. As Dr. True Ott points out, this paragraph is even more incriminating by the words "may have been obtained". Who "obtained" this virus and for what reason was it "obtained"? With this detailed information as it's explained here, it appears that Novartis then sold the vaccine prototype to its subsidiary—Baxter Laboratories—and possibly other vaccine companies so they could have it ready for the fall. Great timing and a great financial move—create a lab-generated virus and have the vaccines ready to go for phase 2 demands for a vaccine. The more serious issue for the health of the public may be, as Dr. Ott's evidence shows (<http://www.pandemicfluonline.com>), that the Novartis vaccine material with the live virus and squalene adjuvant is designed to facilitate the further mutation of the pandemic into more lethal waves of increasingly virulent and deadly diseases, rather than curtail and limit the existing outbreak.

Other virus experts are aware that this Swine Flu is a laboratory-generated virus. This current swine flu is at best between 4-8% a match in terms of genetic material to its closest genetic relatives and there is no remotely close match in the public NIH databases. This implies that between 92-96% of the viral genetic code is from spliced laboratory genetic material from previous swine, avian, and 1918 human flu viruses. Aware of these insider facts, a significant number of virologists and other health professionals and scientists stated that this had to be produced in a laboratory and could not occur naturally. This includes Adrian Gibbs, the inventor of Tamiflu who has gone on record stating that the very metrics (nucleic acid ratios) as well as genetic history indicates that this virus is passed through eggs, i.e.: it was created in a laboratory situation. Other whistle blowers include world famous virologist, author, and masters in public health, Dr. Leonard Horowitz who has actually identified the highly probable laboratory location and the highly likely scientists who created it. Former NIH employee Alexander S. Jones has done a genetic analysis using data from Andrew Rambaut at the University of Edinberg, which indicates that this virus is mutating approximately 2.3 times faster than any natural swine or avian flu virus has ever done. Although we do not have 100% evidence, for obvious reasons, the overwhelming proof is that this was a laboratory created virus. It is important to note that once a virus undergoes a significant mutation, the vaccine that was made for it is no longer designed for the mutated virus, assuming any clinical effect from the vaccine.

5. The United States government classifies the bird flu virus as a biological weapon.

According to the United States government, in its own export regulations, the bird flu virus has been classified as a biological weapon. Given the evidence, this so called swine flu is a bioengineered virus and therefore a component of a biological weapons system as defined by Section 175(a) of the BWATA (Biological Weapons Anti-Terrorism Act of 1989). It is designed like the "bird flu" to "deliver toxins and microorganisms so to deliberately inflict disease and death on people, while being disguised as injections for prophylactic, protective, or other peaceful purposes." In other words, by their own definition the US accurately views live virus vaccines as potential tools for biological warfare, and in this context, restricts the export of

untested, untried, and potentially lethal “experimental vaccines” as biological weapons to rogue nations. The obvious question is why would we attempt to force the same untested and untried potentially lethal live vaccine onto American citizens and particularly our children?

6. If the government intent is to make the live virus squalene adjuvant swine flu vaccination mandatory for all Americans, it is a violation of the Bill of Rights of the Constitution of the United States.

The push behind mandatory vaccinations for the live virus swine flu has reached the highest level in our nation. Although this plan did not start with President Obama, for whatever good or bad intentions, he announced to the public that every man, woman and child should receive the vaccine this fall along with seasonal flu shots. For the record, Obama said he believes vaccinations should be mandatory. Upping this pressure to recklessly vaccinate with an untested live virus vaccine is at best irresponsible as even the statistical scientific evaluation of the effectiveness of flu vaccines suggests all flu vaccinations have had negligible success up until this time. In a scientific review of the data titled: *Are US Flu Death Figures More PR Than Science?*, it says: “CDC states that the historic 1968-9 “Hong Kong Flu” pandemic killed 34,000 Americans. At the same time, the CDC claims 36,000 Americans annually die from flu.” As of August 2009, the swine flu has killed approximately 1,000 people worldwide, according to CNN, which is a lot less than 36,000. This is hardly a traditionally defined pandemic in terms of numbers, yet there has been a major media fear/panic, which preps the people to take this untested and potentially lethal flu vaccine without even a freedom of choice. An uninformed public without adequate compensation for damages, loss of property, life, liberty, or the pursuit of happiness required under the US Constitution, is not really acting with choice.

The U.S. Constitutional Amendment I states: “Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof.” Amendment IV secures the right of the people to be secure in their persons, houses, papers, and effects, against unreasonable searches and seizures; Amendment V states that “No person shall be deprived of life, liberty, or property, without due process of law” and Amendment VIII states, “cruel and unusual punishment [shall not be] inflicted.” In context of the U.S. Constitution, the health and natural immunological adequacy of the human body represents private property and is not to be taken or compromised for “public use, without just compensation.”

At this point live virus flu vaccinations are seen to be mandatory for children and most likely will become mandatory for all Americans with refusal possibly resulting in being put in internment camps. Federal health officials are starting to recommend that most Americans get three flu shots this fall: one regular flu shot and two doses of the live vaccine made against the new swine flu strain. School children who have never had a flu shot are targeted for four shots in the fall—twice for seasonal flu, twice for pandemic swine flu. (July 15, 2009 news). This unprecedented Department of Health’s 2009 flu response plan calls for people—*especially children*—to receive three or four different live flu virus vaccines simultaneously, which is especially dangerous considering the combining of laboratory-engineered live flu viruses in these vaccines with other viruses resident in the human body (such as seasonal influenza) have the

potential be lethal, undermine natural immunity, and/or produce more auto-immune and other diseases in people locally and globally.

The question when considering any medical treatment is what are the risks versus the benefits? We need to look at potential benefits to this or any other flu vaccine to make a reasonable risk-benefit analysis. It is already clear the risks are too high...are they balanced, or a secondary concern as compared to the benefits?

7. Analysis from the British Medical Journal article titled, *Influenza Vaccination: Policy Versus Evidence*, presents evidence from a systematic review based on a meta-analysis of all the research that shows inactivated vaccines have little or no effect on preventing or minimizing the flu.

The science by our own CDC (Center of Disease Control) shows that flu vaccines are somewhere between 0-14% effective. Research in Israel shows they are 1% effective with a general lowering of the immune system. In general, the most thorough analysis on all the flu vaccine data was reported in the British Medical Journal article entitled *Influenza Vaccination: Policy Versus Evidence*, which gives evidence from a systematic review based on a meta-analysis of all the research showing that, “inactivated vaccines have little or no effect on the effects measured.” The paper states most studies are of poor methodological quality and little comparative evidence exists on the safety of these vaccines. It shows that in children under 2 years, inactivated vaccines had the same field efficacy as placebo. Similar results were found in an article from The Cochrane Database of Systematic Reviews. 2 (2008), titled, *Vaccines for Preventing Influenza in Healthy Children* where review of 51 studies involving more than 294,000 children, found there was “no evidence that injecting children 6-24 months of age with a flu shot was any more effective than placebo.” In children over 2 yrs, it was effective 33% of the time in preventing the flu.

In a study of 800 children with asthma, half were vaccinated and the other half did not receive the influenza vaccine. The two groups were compared with respect to clinic visits, emergency department (ED) visits, and hospitalizations for asthma. This study failed to provide evidence that the influenza vaccine prevents pediatric asthma exacerbations. (*Effectiveness of influenza vaccine for the prevention of asthma exacerbations*. Christly, C. et al. Arch Dis Child. 2004 Aug; 89(8): 734-5). The American Thoracic Society’s 105th International Conference, May 15-20, 2009, San Diego quotes: “The inactivated flu vaccine does not prevent influenza-related hospitalizations in children, especially the ones with asthma...In fact, children who get the flu vaccine are **three times more at risk for hospitalization** than children who do not get the vaccine.”

Vaccines are also minimally effective for adults and the elderly. In a review of 48 reports (more than 66,000 adults), titled: *Vaccines for preventing influenza in healthy adults* from The Cochrane Database of Systematic Reviews. 1 (2006), it quotes, “Vaccination of healthy adults only reduced risk of influenza by 6% and reduced the number of missed work days by less than one day (0.16) days. It did not change the number of people needing to go to hospital or take

time off work.” In a review of 64 studies over 98 flu seasons of elderly living in nursing homes, flu shots were non-significant for preventing the flu. For elderly living in the community, vaccines were not (significantly) effective against influenza or pneumonia according to *Vaccines for preventing influenza in the elderly*: The Cochrane Database of Systematic Reviews. 3(2006).

Efficacy is a difficult word because it can simply mean the stimulation of antibody production, but we are defining it in terms of protecting you against the flu, which is a practical clinical approach. We have ample clinical evidence and hundreds of testimonies which show that adequate vitamin A, vitamin D, vitamin C, as well as the use of medicinal herbs and mushrooms, can significantly reduce the occurrence of colds and flus far more effectively than a vaccine without all the potential serious side effects these vaccines can cause—including death, Guillain-Barre syndrome (a demyelization of the nervous system that can paralyze a person from the neck down), rheumatoid arthritis, a variety of autoimmune diseases, type 1 diabetes, and autism. In other words, the risk/benefit analysis, which is how we normally assess these kinds of medical decisions, is horrendous. The risks are very high and the benefits are minimal—and we have several options that are more safe and effective.

“FIRST DO NO HARM.” —HIPPOCRATES

If you feel the risks are high and the actual scientific proof of benefits are low...and therefore do not want to take the risk...and prefer others around you do not take the risk (and increase the likelihood of spreading the live virus to you)...there is another obstacle in the path to sovereignty over our own body and mind:

8. Those who refuse the live virus squalene adjuvant swine flu and regular flu vaccinations may be jailed or held indefinitely in internment camps established by states or FEMA because the so-called swine flu pandemic has been, as far as we are concerned, unnecessarily classified as a Level 6 Pandemic, potentially allowing international law to override the United States Constitution to justify American martial law and detention for vaccine refusers.

The United States Emergency Medical Powers Acts and Federal legislation, including the Patriot Acts I, II and III, the Biomedical Advanced Research and Development Authority (BARDA) and others provide for mandatory vaccination or drugging. **No exemptions (religious or otherwise) are provided.** Those who refuse will be classified as felons at the state level, subject to immediate incarceration and quarantine of indefinite length in jails or other facilities reserved for such "vaccine refusers." In a frightening "Big Lie" propaganda move, those who doubt the effectiveness of unproven, uninsurable vaccines are being called "Vaccine Resisters" and being equated to a new form of "terrorism." Fortunately this desperate attempt to quash reasonable and scientific disagreement and alarm has not been successful so far. Parents and grandparents still have some power to protect their children, grandchildren, and themselves from possible harm.

However, by defining this situation as a Level 6 Pandemic, it allows martial law to potentially take this right of sovereignty away.

Those who refuse at the Federal level may be subject to immediate incarceration and quarantine of indefinite length, probably in FEMA camps already set up across the US.

This means that untested, potentially lethal vaccines and dangerous drugs like Tamiflu could be forced upon people who do not wish them and who would face incarceration or worse if they choose not to accept them. The CDC has said there would be no exemptions and has admitted there would be "a certain amount of human wastage".

We are urging you to write your local and state representatives communicating the importance of allowing philosophical, religious, and medical exemptions. We are also urging you to pay particular attention to your diet and are urging you to take immune enhancing medicinal mushrooms, herbs, and nano-silver combinations, which are effective immune builders and anti-virals. Such protocols are available at: <http://www.treeoflife.nu/whybirdflu.html> and in Mike Adams' book: *How to Beat the Bird Flu*.

Councilwoman Emily Naeole, of the County of Hawaii, has directed her chief administrators to advance the outlined RESOLUTION to sustain the right to exercise religious freedom to decline this fall's flu vaccines. This RESOLUTION supports religious families (and philosophical objectors), by their choice and declaration of religious (or philosophical) conviction, from the 2009 flu vaccination program, as per the Hawaii Revised Statutes, Title 19, Department of Health, Chapter 321, Section 11 health rules, that provides such exemptions in non-epidemic periods. This RESOLUTION may apply to anyone in the County of Hawaii, and delivers a message to state and federal health officials to remain in compliance with state, federal, and constitutional laws granting this freedom to choose.

This drafted RESOLUTION can be modified, custom tailored, to serve people in every county and township in the United States.

What this practically means is that "We the People" are issuing notice to preserve a CRITICAL US Constitution Law, according to the Fifth Amendment in Bill of Rights, that says, "No person shall be...deprived of life, liberty, or property, without due process of law; nor shall private property be taken for public use, without just compensation." Our bodies and our immune systems are our sovereign properties according to Supreme Court decisions, the US Constitution, and international law. Presently there is no form of compensation for the property loss (of natural immune system function) and injury that may result from this live virus vaccination program. Therefore, such action as mandatory vaccination, compromising or utilizing by intoxication a person's immune system to allegedly protect the "public's health," is illegal according to the US Constitution.

THIS RESOLUTION and grass roots action plan can help everyone bring greater awareness and urgent dialogue to our communities and legislative officials, "from the bottom up." We are strongly recommending this action plan be advanced in every township or county, in every state of America, and involve a local attorney as a volunteer.

We are encouraging activists everywhere to advance this urgent and compelling RESOLUTION as a positive action, advancing this novel and compelling legal argument that has been neglected thus far.

Please remember there are more parents, grandparents, alternative, complementary, and natural health professionals, and clergy concerned about these matters, including basic human rights, than there are politicians and drug-makers concerned about making money off vaccinations, and/or depleting world populations. If you want to know more about these two prevalent theories of why this genocidal behavior is being attempted and tolerated please see the websites of [Dr. Leonard Horowitz](#), [Mike Adams](#), [pandemicfluonline.com](#), and/or [ConsciousMediaNetwork.com](#).

At this point in our discussion, it may be useful to consider the wise teachings of Thomas Jefferson:

“WE HOLD THESE TRUTHS TO BE SELF-EVIDENT: THAT ALL MEN ARE CREATED EQUAL; THAT THEY ARE ENDOWED BY THEIR CREATOR WITH CERTAIN UNALIENABLE RIGHTS; THAT AMONG THESE ARE LIFE, LIBERTY, AND THE PURSUIT OF HAPPINESS.”

Pursuit of happiness includes health. A person who is not healthy is less likely to be happy and when they are not healthy they have less willpower against slavery. As Thomas Jefferson said, **“THE CARE OF HUMAN LIFE AND HAPPINESS, AND NOT THEIR DESTRUCTION, IS THE FIRST AND ONLY OBJECT OF GOOD GOVERNMENT.”**

9. Attempts by the United States government to increase the demand for flu vaccinations through fear are explicitly revealed in a classified, private CDC (Center for Disease Control) sponsor conference for vaccine manufacturer executives entitled “7-step Recipes to Increase Demand for Flu Vaccination”.

It appears as though the will of the US government and the WHO are trying to create a world health government that simply doesn't acknowledge the sovereign rights of an individual over their own body. There was even a clandestine CDC sponsor conference for vaccine company executives that actually taught a “7-step Recipes to Increase Demand for Flu Vaccination”, which specifically documents techniques designed to frighten people about influenza and increase vaccination rates. Because this attempt to undermine our consciousness and ability to thoughtfully make healthy sovereignty choices over our body is so blatant, it highlights the contradiction between what they say and what is happening. They are attempting to override our right to individual health by creating a bogus definition of pandemic and therefore using this classification as an international justification to use potentially lethal, untested, uninsurable, ineffective, life-destroying vaccines on the public in what appears to be a highly unethical way. This live virus vaccine may actually be the key to setting off a real pandemic.

We know quite well that by building a healthy immune system using herbs, nano-silver, medicinal immune building mushrooms, eating healthy food, focused prayer, and using aromatherapies (which was the only successful antidote during the black plague), people will

have a much higher chance of surviving. As in all disease exposures, a healthy immune system, a sovereign healthy body, and a happy person are the keys to health and the prevention of disease. As one should be able to see from this whole discussion, the activity of the WHO (World Health Organization) with its Codex plan supported by the highest levels of the US government is for the weakening of our health. Attempts by Codex to outlaw supplements, organic foods, and even organic farming (recent attempts stopped by the public action of American citizens of bills HR475 and S825 and in Canada bill 251), are concerted efforts to undermine our immune systems and the quality of our lives.

10. The best way to be protected from any flu including the H1N1 live virus swine flu is to have a healthy immune system by living a natural, earth-connected way of being, which includes: organic, plant-source-only foods, supplements including nano-silver, vitamin C, A, and D, medicinal immune-building mushrooms and herbs, and specific aromatherapy oils. Physicians of the State of Arizona Board of Homeopathic and Integrated Medicine Society have found that usually one to three Vitamin C IV's of 50,000 milligrams will give 100% relief from this or any flu in the instance one actually gets the flu. Other effective treatments include nano-silvers and Oxygen Treatment Therapy (OTT). This is a safe, less expensive, simple, and more effective treatment as compared to Tamiflu (Tamiflu, although supposedly designed for the antiviral effect, is a psychotropic drug that has significant brain and nervous system side effects, which are toxic and debilitating). These healthy approaches have been historically proven to be far more safe and effective than generated vaccines, which have truly never been scientifically proven to be either safe or effective except for building the economic pockets of the vaccine companies. In other words, there are strong international and national vested interests on many levels backing these inadequately tested, dangerous, and ineffective vaccines. These vested interest groups are not exactly concerned about your health.

In short summary, there are two key points: (1) The scientific research shows that the swine flu live virus vaccine is not sufficiently tested, and is uninsurable, unnecessary, unsafe, with a horrendously poor risk/benefit ratio. As a result, its use is unconscionable. (2) Contrary to the belief that everyone needs to be vaccinated to protect everyone else, just the opposite is true. The use of a live virus vaccine is actually more likely to spread the infection and make the situation worse, contrary to the mythical belief that is being used to justify mandatory vaccinations. Based on these two points, the research suggests that we have a high-risk situation with very little benefit. It is our feeling that it is the right of the individual to choose to be vaccinated or not in the absence of any compelling evidence whatsoever that mass vaccinations will make a positive difference; people's right to choose for religious, ethical, medical, or self-

preservation reasons takes precedence over any state, country, or any supposed world safety issues.

11. We have options and we can create more. It is important that we all take a stand while we are still healthy enough to be standing.

- **OPTION 1:** We have a powerful approach IF EVERYONE CHOOSES TO STAND UP FOR THEIR HEALTH AND WELL-BEING. We are recommending this be the major action people take: Use the template letter included at the end of this document as a helpful format for sending your input to your state and local representatives. Simply personalize and send this template letter to your state governor, state health representatives, state congress people, and your local representatives. Connect with a lawyer and your local county government people, and then your state government people and **strongly urge them to commit to definitively support our right to religious, philosophical, and medical exemption to the vaccination program as well as the right to self-quarantine at a location of their own choice.**

The more people who take this action, the more they may be willing at the local and state level and eventually the federal government level to take actions to realize vaccinations are neither safe or effective, and there is no evidence to support herd vaccinations, therefore there is no evidence to support mandatory vaccinations. In this context we are talking about the right of the public citizens to have choice of whether to vaccinate or not, as it is in many other countries. The County of Hawaii Council is an example of such an action. We are advising all peoples, counties, and townships to make such a resolution and then take it to the state level as a major strategy to make this happen. So we are asking you to advance this resolution and educate your community as to why this resolution is urgent and compelling. This is a novel and compelling legal argument that has never been done before. The County of Hawaii Council is also in the process of advancing a county resolution to sustain the right to exercise religious freedom to exempt religious families by their choice and declaration of religious conviction from the 2009 flu vaccination program, as per the Hawaii Revised Statutes, Title 19, Department of Health, Chapter 321, Section 11 health rules, this is to apply to anyone in the county, and to positively demand the state be in compliance with this county resolution. This tactic can be actively applied to every county and township in the United States. What this practically means is that according to the Fifth Amendment in the Bill of Rights of the US Constitution, “No person shall be...deprived of life, liberty, or property, without due process of law; nor shall private property be taken for public use, without just compensation.” Our bodies and our immune systems are our sovereign property according to the law of the US Constitution and international law. Presently there is no form of compensation for the property and injury that may result from this live virus swine flu vaccination.

Further support of a state-focused campaign comes from Attorney Alan Philips in Chapel Hill, N.C. at vaccinerights.com and pandemicfluonline.com. He and veteran US Constitutional attorney Larry Becraft raise a tremendously important point, which is that WHO does not have jurisdiction over the internal affairs of individual member nation states—its jurisdiction concerns the international spread of infectious risk or disease only. That is, the WHO cannot legally mandate vaccines for small town America at the state level. The WHO may exercise strong influence with its recommendations, but ultimately, the final decision for each country lies with the individual country. Similarly, the U.S. federal government lacks authority under the U.S. Constitution to require vaccines of state residents, which is why all vaccine requirements and exemptions for state residents are enacted at the state law level. So, the primary (if not sole) focus for an organized response to the threat of mandatory pandemic flu vaccines should be authorities at the state level.

It is important to note that non-medical vaccine exemptions available for routine immunizations in most states (i.e., philosophical and/or religious) may not be available if vaccines are mandated in the context of a declared emergency. So it is important to take action now to avoid being forced to choose between an immunization and quarantine, especially since that quarantine could be in a government facility. State laws vary, so be sure to review your state's emergency laws. It is suggested that if your state laws don't include a religious or philosophical exemption in an emergency, and also the right to self-quarantine at a place of your own choosing, then that is also something we strongly suggest you communicate to your state legislators that they implement such changes in the emergency procedures.

The PandemicFluOnline.com group has designated August 17-23 as "Pandemic Flu Awareness Week." Some interpret this as a Call to Action, during which week they intend to write letters to the governor, state secretary of health and human services (or equivalent official in their state), state representatives, and possibly other state public health officials who deal directly with immunization matters. We suggest that you join us in this endeavor, and that you use the one-sentence summary, the brief summary, the eleven point summary in this paper, and the template letter, and request or demand the implementation of policy that recognizes and protects citizens' right to make their own informed decisions about whether or not to take an experimental, minimally tested flu vaccine or be select to other emergency medical treatments or protocols. We also strongly urge public health authorities' to give assurance that we will be given the right to self-shield, self-quarantine and self-isolate in our homes or other legal locations of our choosing, should shielding, quarantine or isolation be deemed necessary. In this way, through the enactment of better policy and legislation, which is presently being completed by the Legal Group at PandemicFluOnline.com, we can make our voices heard and encourage public health officials to make more informed choices amidst the ongoing fear-based hype and confusion surrounding the pandemic swine flu phenomenon.

- **OPTION 2:** Contact congress people and senators with mass emails and direct discussion supporting our constitutional right to choice—as has been validated by the

Canadian government. It is our responsibility as parents and grandparents, religious people who are sincerely acting as our “brother’s keepers” to invoke the Biblical teaching to preserve health and life, and secular humanitarians to not take this potentially disastrous, deadly immune disordering squalene adjuvant filler live virus immunization. In this discussion it is important to support our right to build and protect our healthy immune systems with the use of healthy food, supplements, medicinal mushrooms and other immune building herbs, and highly effective and safe treatments for the Swine flu virus such as: nano-silvers, Vitamin C IV’s, and OTT (Oxygen Treatment Therapy) a highly potent and safe remedy for the Swine Flu (available at the Tree of Life and at restandrepair.tv).

We have a constitutional right to sovereignty over our own bodies and our healing. Thomas Jefferson taught that: **sovereignty in a true democracy means having the right to choose our own medicines, herbs, and remedies that we deem necessary for our body and for our children; and when and if the government tries to usurp that power for its own agenda we lose sovereignty, health, and democracy and the government loses its validity.**

- **OPTION 3:** Email or fax this information to local TV and radio stations. Call or fax to your State and National political representatives. Try to create town meetings to inform as many people as possible about these issues because informed people are people who can make intelligent choices for the preservation of health and well-being. This could turn out to be the most successful strategy because in the town meetings political action to protect us against the live swine flu vaccination is created.
- **OPTION 4:** Write a small article for LOCAL, community newspapers. Watch for samples on www.PandemicFluOnline.com.
- **OPTION 5:** Check out www.oathkeepers.org. Share this with our local law and military folks. A PDF for easy printing is available online at www.Dr.Tenpenny.com.
- **OPTION 6:** Have at least 3 weeks of food on hand and be prepared for “Self-Shielding”—asserting the right to self-quarantine in your own home or location of your choice.
- **OPTION 7:** Leave the country. Note: communities are developing outside of the US that will continue the energy of life, harmony, and peace ([COL Nicaragua](http://COLNicaragua)).
- **OPTION 8:** Go numb, feel hopeless, and take the shot.

SUMMARY CONCLUSION:

There are two reasonable questions that must be asked: (1) Is the swine flu live virus squalene adjuvant vaccine safe and effective, and if so, (2) will vaccinating 95% or more of the general population provide any more protection for the whole population? If both of these questions were answered in the affirmative, then we would have a reasonable justification for mandatory vaccinations. However, the overwhelming scientific data suggests just the opposite.

The live virus swine flu has not been adequately tested, proven safe or effective, is non-insurable, and because of the well-known phenomena of Secondary Transmission of live virus vaccines (meaning it can be contagious), it may actually increase the transmission of the virus.

This live virus vaccine has 2.3 times more genetic mutability, and added adjuvant toxicity than a natural virus because it includes squalene. Squalene has significant autoimmune inflammatory effects, and general severe autoimmune effects, which are a significant potential threat to the health of the individual. According to congressional hearings in 2004, squalene was considered the main cause of 300,000 GIs with Gulf War Syndrome who are now applying for complete disability. Aside from the horrendous, misery and ill health created by the Gulf War Syndrome, based on our understanding of the 1918 flu pandemic (which some significant scientific work has suggested was precipitated by the water-oil adjuvant that was part of the typhus vaccine and unknowingly given to the soldiers to protect against typhus), it appears that the water-oil adjuvant in combination with the Spanish Flu was the main precipitator of the millions of deaths that occurred. Research at that time, which was limited because they didn't even know about viruses, suggests that the high percentage of deaths in soldiers (healthy young men) was connected to the adjuvant, which gave them a hyper-immune, auto-immune response and cytokine storm (strong inflammatory reaction) 3 to 6 months after receiving the vaccine. This explains why so many of them died from hemorrhagic pneumonia, activated by the viral flu. The use of squalene as an adjuvant in the vaccine, which causes severe health symptoms on its own, could actually mirror the whole 1918 scenario. The interaction of the flu and the hyper-immune auto-immune imbalance response to the squalene (a water-oil adjuvant) could theoretically pre-dispose people who receive the vaccine with this live virus in it to mimic the actual pandemic called the Spanish Flu of 1918. Please understand that this deadly synergy of squalene and the live virus in a vaccine is theoretical and there is no proof that this is the potential case, except the research on the actual cause of the 1918 Spanish Flu. However, this just adds to the potential risk of a squalene-based live virus swine flu vaccination.

According to the British Medical Journal article titled, *Influenza Vaccination: Policy Versus Evidence*, evidence from a systematic review based on a meta-analysis of all the research shows “vaccines have little or no effect on preventing or minimizing the flu.”

Essentially, the benefit to risk ratio is extremely poor from a scientific point of view. In answering the second part of the question, all the vaccine studies to date show that vaccinating 95% or more of a population does not make a difference in stopping outbreaks of the particular disease people were vaccinated for. In fact, based on the scientific evidence, mass mandatory vaccinations with a highly mutable live virus could actually activate a real and lethal pandemic rather than prevent it. **Therefore, from a purely scientific perspective, there is no valid reason for mandatory vaccinations.** For this reason we believe that all people have a

constitutional, religious, philosophical, and medical right to the freedom of choice of whether or not to be vaccinated.

In essence, as confirmed by veteran US Constitutional attorney Larry Becraft, **there is no basis in statutory law for state official mandates, county cooperation, or public compliance, in-so-far-as forced vaccinations and/or quarantines, even during officially declared epidemics or pandemics.** Presidential executive orders lack the legal power to force or enforce vaccination and/or quarantine mandates on the American people. Likewise, state statutes and administrative rules and regulations pertaining to compulsory vaccinations and quarantines advanced by health departments shall be prohibited as violations of fundamental human rights, religious freedoms, and just compensation for personal property secured by the US Constitution. Given these conclusions, **it is official malfeasance for state and federal health officials to advance such unconstitutional policies and engage such procedures.** Furthermore, health officials may be held accountable for gross criminal negligence: engaging in broadcasting flu warnings, using the news media to relay deadly predictions of pandemic morbidity and mortality, or otherwise sensitizing people to promote compliance with vaccination or forced quarantines while grossly neglecting their mental health and quality of life; increasing anxiety, phobia, and depression, and causing severe economic damages from the medical, psychosocial, and behavioral impacts of these public health malpractices.

To be clear from a legal point of view, no one has any constitutional authority at the Federal or State level to enforce mandatory vaccinations. However, waiting until legal suits are filed afterwards is not an option because irreversible damage may be done by then to our global family. The State officials are more vulnerable to official malfeasance. Lawsuits on one level also have the immediate power to veto Federal mandates of forced vaccinations. At the state level we have protection from Federal mandates...and in practical reality we have more personal access to state politicians to get them to vote against any Federal mandates, as they are more directly accountable to the public. For further information, please see: www.PandemicFluOnline.com.

ONE SENTENCE SUMMARY:

The overwhelming scientific studies and research do not in any way support the action of mandatory flu, squalene adjuvant, live virus vaccination; to do so might result in the desecration of a significant amount of God's creation of humanity on planet earth; the science strongly suggests that mandatory vaccinations are both immoral and ethically illegal (ethics that are core in the Judaic-Christian system) and this mandatory vaccination violates the basic Ten Commandments in at least 6 ways: Thou shall not murder, steal, lie, bear false witness, engage in idol worship (money and power), envy or covet.

“LIBERTY IS TO THE COLLECTIVE BODY, WHAT HEALTH IS TO EVERY INDIVIDUAL BODY. WITHOUT HEALTH NO PLEASURE CAN BE TASTED BY MAN; WITHOUT LIBERTY, NO HAPPINESS CAN BE ENJOYED BY SOCIETY.” –Thomas Jefferson

“NEVER DOUBT THAT A SMALL GROUP OF THOUGHTFUL COMMITTED CITIZENS CAN CHANGE THE WORLD; INDEED IT IS THE ONLY THING THAT EVER HAS.” —Margaret Mead

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Prof. David Wagner, Transformational Science, University of Integrated Science, CA

Rabbi Gershon Winkler

David Wolfe, J.D., M.A., Author, Speaker

Philip Madeley, BSc Environmental Management, Essene Priest, Vegan Live Food Teacher

[Today's Date]

[Local State Representative Title]

Physical Address Line 1

Physical Address Line 2

City, State, Zip Code

Dear [State Governor, Department of State Health Representative, State Representatives, County Representatives, City and Local Representatives],

The world research as summarized by the British Medical Journal presents evidence from a systematic review based on a meta-analysis of all the research that shows vaccines have little or no effect on preventing or minimizing the flu. Live virus vaccinations have serious potential side effects, including: death, Guillain-Barre syndrome (a demyelization of the nervous system that can paralyze a person from the neck down), rheumatoid arthritis, a variety of autoimmune diseases, type 1 diabetes, and autism.

The scientific research shows that herd vaccinations (vaccinating over 95% of the population) do not make any difference in protecting the population from the virus and it is scientifically recognized that an attenuated live virus vaccine can be contagious for up to three weeks, which is known as Secondary Transmission. In other words, any reasonable scientific person would conclude that vaccines are neither safe nor effective. The government has made it clear this is the case by not allowing people to make claims against the vaccine companies for the damage that is done. In other words, vaccines are so unsafe that they are uninsurable.

We as parents and grandparents, given the unsafe, ineffective, and uninsurable status of the flu vaccine demand exemption options. In specific, we request the same exemptions allowed for any other vaccine: religious, philosophical, medical, and the right to self-quarantine.

Constitutional legal authorities have made it clear that the WHO and the Federal Government cannot mandate what a nation state does, they can only recommend a position. The state has the final say, and in this context given this information, the lawyers have suggested it may be considered official malfeasance for state and federal health officials to advance such unconstitutional policies and engage in such procedures. I am speaking to you directly to make a difference at the state level by including these exemptions. We know there is not necessarily time to pass a law, but there is time to make implement exemptions in the state emergency procedures, and I am strongly suggesting you do that.

For further information, please contact me, as I am able to give you detailed legal and scientific information explaining this request in more depth.

Respectfully,
Name, Address, Phone, Email