

Dear Customer,

The following is the proof-of-delivery for tracking number: 775797321370

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	Receptionist/Front Desk
<b>Signed for by:</b>	J.BAUSCH	<b>Delivery Location:</b>	9000 ROCKVILLE PIKE
<b>Service type:</b>	FedEx Standard Overnight		
<b>Special Handling:</b>	Deliver Weekday		ROCKVILLE, MD, 20852
		<b>Delivery date:</b>	Jan 21, 2022 12:59

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**Shipping Information:**

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<b>Tracking number:</b>	775797321370	<b>Ship Date:</b>	Jan 20, 2022
		<b>Weight:</b>	3.0 LB/1.36 KG

**Recipient:**

Dr. Anthony S. Fauci, NIAID  
31 Center Drive  
NIAID Central Drop Off  
ROCKVILLE, MD, US, 20852

**Shipper:**

Paul V. Sheridan, DDM Consulting  
22357 Columbia Street  
DDM Consulting  
Dearborn, MI, US, 48124

**Reference**

Forfeiture Letter



Thank you for choosing FedEx

22357 Columbia Street  
Dearborn, MI 48124-3431  
313-277-5095  
pvs6@cornell.edu

19 January 2022

VIA FEDEX AIR-BILL 7757-9732-1370

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and Complete Disconnection from Any Prior Accolades/Activities Related in *any way* to my alma mater – CORNELL UNIVERSITY**

Dear Mr. Fauci:

To the best of my extensive knowledge of Cornell University, **no member of the Cornell family has ever had a headline that even remotely duplicates the following.** <sup>1</sup>

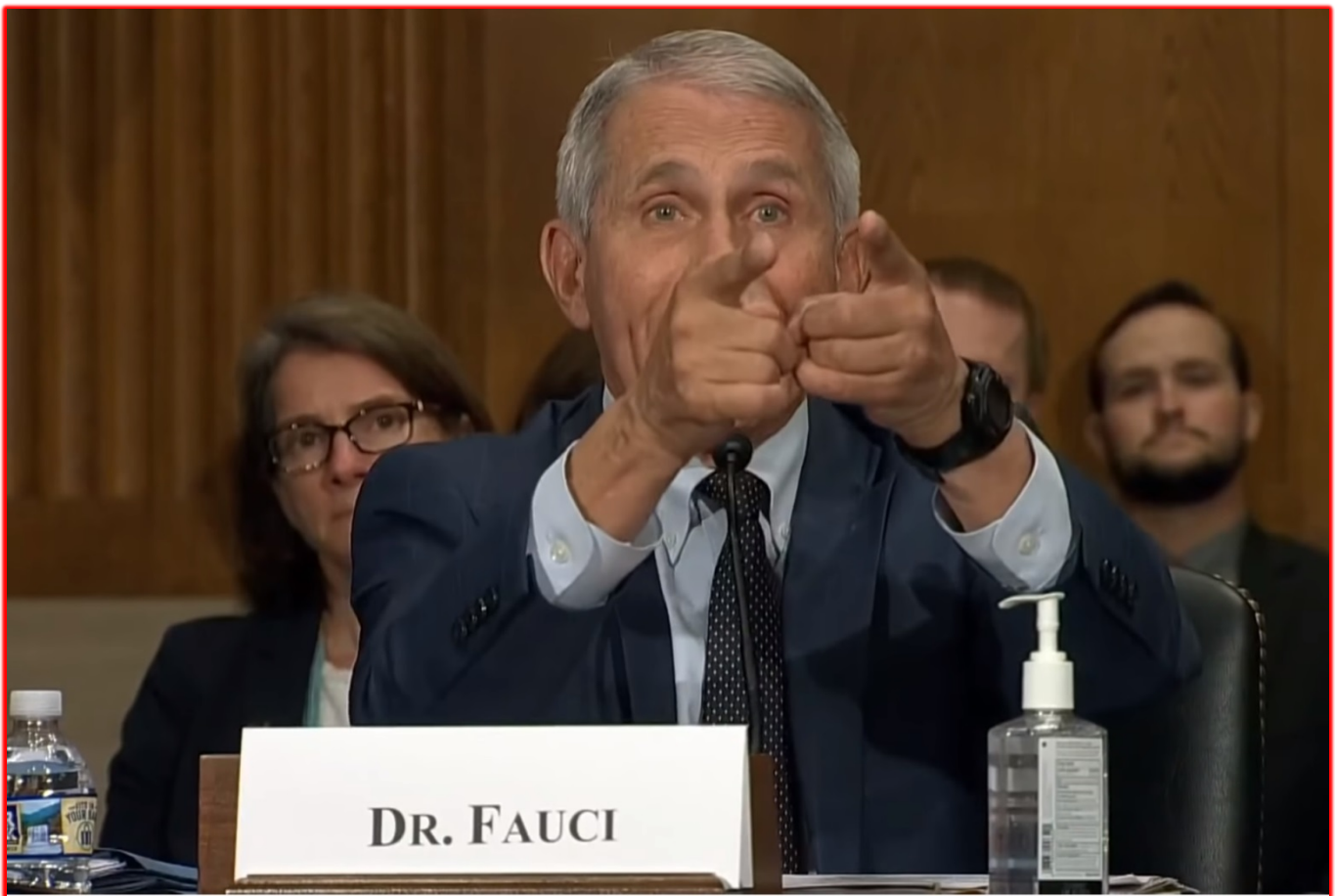


<sup>1</sup> There is one other person that will be receiving a similar 'Letter of Demand.'

## Context of Forfeiture Demand

The context of this forfeiture demand is made broad-based *by you*. The true timeframe is several decades, not merely the timespan connected to the so-called “COVID-19 pandemic.”

Whether examining (1) facts connected to the multi-facility Gain-of-Function research that led to the “SARS-CoV-2 virus,” or (2) what you and your associates in the pharmaceutical industry call a “vaccine,” or (3) what your comrades in government call “Operation Warp Speed,” or (4) what sycophants in academia call their “New Normal,” or (5) what you and your media/Big Tech co-conspirators call “disinformation” . . . no matter where the examination leads, **there is always found a commonality: The footprints and fingerprints of “America’s Doctor.”**



The most offensive aspect of the context, that completely justifies my demand that you forfeit all degrees and affiliations with Cornell University, is **the repeatedly demonstrated fact that you, Mr. Fauci, are deemed not trustworthy.** Implicitly, a liar has zero standing with the esteemed Cornell family, and your excommunication is more than justified on this perception alone.<sup>2</sup>

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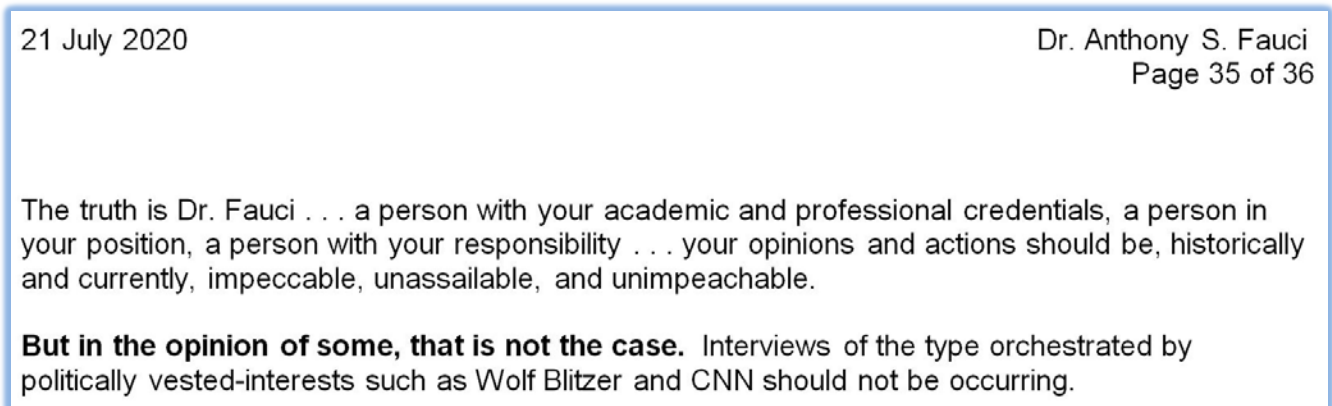
<sup>2</sup> Not alone in his assessment, in a widely disseminated interview of 7 August 2021, Cornell Professor of Chemistry and Chemical Biology, Dr. David B. Collum described your condition as **“pathological liar.”** (I reviewed this quote in my recent letter to Donald Trump impeachment attorney, Mr. Michael van der Veen; Attachment 1.)

**Year-2020 Recommendations to President Donald Trump That Fauci Be Terminated**

**My forfeiture demand is overdue.** In my letter to you of July 21, 2020, I presented the following screenshot; taken from a CNN report of four days prior:



On Page 35 of my July 21, 2020 letter, I stated (screenshot):

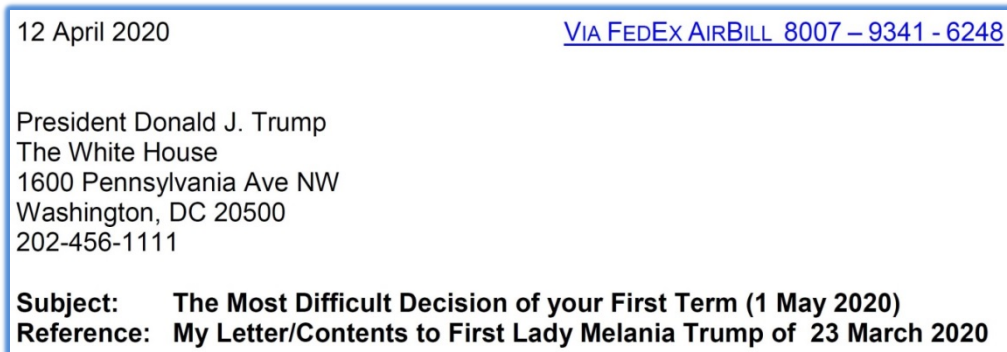


As early as July 2020 . . . **a few short months after long-planned deeds contributed to the infection of billions of human beings, with you a key suspect** . . . the corrupt legacy news media was compelled to ‘provide cover’ for America’s Doctor.<sup>3</sup>

<sup>3</sup> True to your inveracity, as experienced by me in the mid-1980s during your ‘HIV = AIDS’ fiasco, you did not respond in writing to my letter of July 21, 2020 (Attachment 2).

**Year-2020 Recommendations to President Trump That Fauci Be Terminated - Conclusion**

Long before it became trendy among senators and congress, and unknown to you, I had shared with President Trump my concerns regarding your incompetence, your unpatriotic motivations, your self-absorbed *modus operandi*, **and most importantly your lack of integrity**. My first COVID letter called for your immediate termination, way back on April 12, 2020 (screenshot):



Six months later, September 18, 2020, **I once-again chided the president for not acting on the clear and gathering evidence of your criminality** (screenshot):



**Had Trump acted presidential, the likelihood of the charge of genocide against you would not have acquired additional credibility** (Page 1 above).

Intermission One

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and Complete Disconnection from Any Prior Accolades/Activities Related in *any* way to my alma mater – CORNELL UNIVERSITY**

# The Real Anthony Fauci

.....  
**Bill Gates, Big Pharma, and  
the Global War on Democracy  
and Public Health**  
.....

**Robert F. Kennedy Jr.**

**NEW YORK TIMES BESTSELLING AUTHOR**

Children's  
Health Defense 

**Keys to Genocide: Fauci Inspired Criminal Fraud – Operation Warp Speed**

Despite Trump having a copy, and aware of the following **from 2003**, he continues to connect-with and promote “Operation Warp Speed.”

Application/Control Number: 09/869,003

Page 5

Art Unit: 1648

These arguments are persuasive to the extent that an antigenic peptide stimulates an immune response that may produce antibodies that bind to a specific peptide or protein but is not persuasive in regards to a vaccine. The immune response produced by a vaccine must be more than merely some immune response but must be protective. As noted in the previous Office Action, the art recognizes the term “vaccine” to be a compound which prevents infection. Applicant has not demonstrated that the instantly claimed vaccine meets even the lower standard set forth in the specification, let alone the standard art definition, for being operative in this regards. Therefore, claims 5, 7, and 9 are not operative as an anti-HIV-1 vaccine and therefore lack patentable utility.



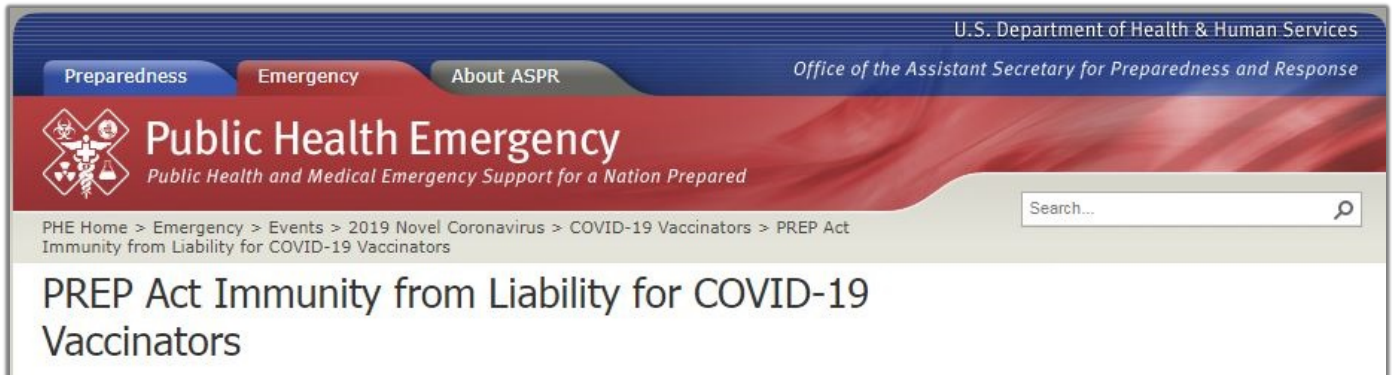
I had admonished you and Trump about Operation Warp Speed on page 32 in my letter of July 21, 2020.

I again chided Trump (and VP Michael Pence) in my letter of August 13, 2020.

But the obsessing Trump did not graduate from Cornell University . . .

**You did attend Cornell Mr. Fauci, and your participations in Operation Warp Speed are criminal, and are *directly* connectable to horrible injury and death on a global scale.**

**Keys to Genocide: Fauci Inspired Crime – Liability Immunity**



Consistent in purpose, consistent with your promotions of Operation Warp Speed, the charge of genocide is evidentiary; the latter includes your history of crimes against humanity, typified by your secret decades-old orchestration of *liability immunity*, which especially benefits (in billions-of-dollars in profits) the “COVID-19 Vaccinators.”



December 16, 2021 5:33 AM EST Last Updated 3 days ago

**The Great Reboot**

**Refugees lack COVID shots because drugmakers fear lawsuits, documents show**



**Keys to Genocide: Fauci Inspired Crime – Liability Immunity** - Conclusion

I was featured in a recent Stew Peters TV interview regarding your history, specifically regarding the global human consequences of the criminal conspiracy which *led to liability immunity*:



The interview focused on the vast evidence that confirms **willful misconduct, and how that evidence constitutes a voiding of liability immunity**. My interview was prompted in-part by my letter to Trump impeachment attorney, Mr. Michael van der Veen; an excerpt from Page 1:

**Civil Liability Case Definition**

The webpage of the US Department of Health and Human Services, covering the Public Readiness and Emergency Preparedness Act (PREP) states:

**Liability Immunity and Compensation**

In general, the liability immunity applies to entities and individuals involved in the development, manufacture, testing, distribution, administration, and use of medical countermeasures described in a Declaration. The only statutory exception to this immunity is for actions or failures to act that constitute willful misconduct.

**Relative to COVID-19, the defendants have and continue to act with willful misconduct. Evidence of such, already in the public domain, is not preliminary; it is overwhelming. Their misconduct ranges from subversion of informed consent, to coercion, to deception regarding *prior known defects in what defendants promote as a “vaccine.”* Existing evidence and then discovery will go far beyond mere misconduct . . . all the way to blatant criminality.**

**Your orchestration of ‘liability immunity’ implicitly constitutes willful misconduct. The phrase ‘liability immunity’ itself confirms a predilection for deceit. Your shameless endorsement of ‘liability immunity’ is a declaration that the “vaccines” you have injected into the innocent cannot withstand open examination and medical truthfulness.**<sup>4</sup>

<sup>4</sup> A sinister outcome of liability immunity: Exploitations by pharmaceutical comrades; exploitations that occurred **before** their for-profit “vaccine” was distributed (See ‘Emergency Use Authorization Lie #3,’ page 19 below)!

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)***

The general population, **the target of your genocide**, those that comprise true humanity; they are increasingly aware of the repulsive character of “America’s Doctor.” Their outrage is further inspired when informed of your Emergency Use Authorization (EUA) of December 11, 2020, offered in servility, in behalf of your comrade Mr. Albert Bourla of Pfizer.



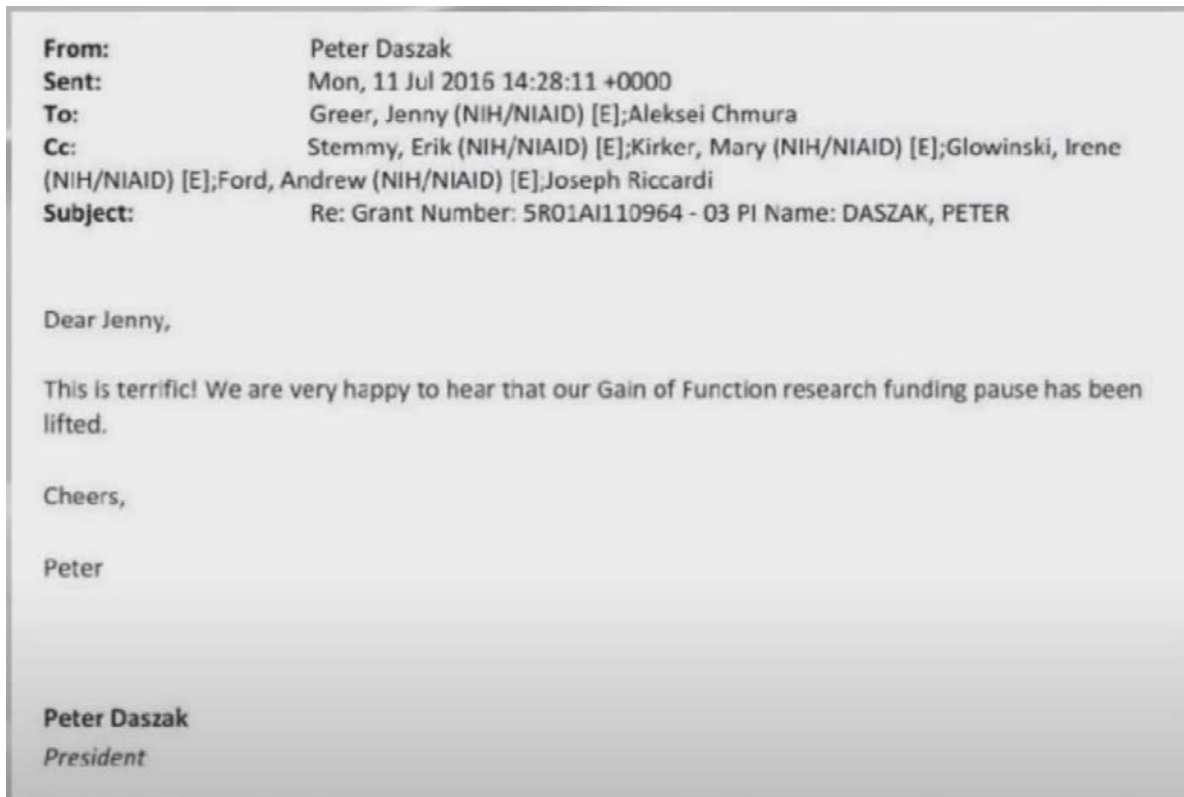
The underbelly of the COVID-19 EUA is three-fold. **Characteristically, all three are lies.**

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #1:** There is a public health emergency that has resulted from human infection by a naturally occurring virus called SARS-CoV-2.

Naturally occurring?! My placement of “SARS-CoV-2 virus” in quotation is purposeful and routine. Your claims that SARS-CoV-2 came from a Chinese bat are ludicrous. Your attempts to escape **treasonous culpability** by declaring (under oath at the US Senate) that the definition of Gain of Function (GOF) is “*nebulous*” **provides further confirmation that your integrity is an issue.**

There are no emails that explain to GOF co-conspirator Mr. Peter Daszak, that ‘Gain of Function’ is undefined or that he and your staff must use the latest “*operable*” revision:



The Project Veritas report by Mr. James O’Keefe, which details GOF negotiations between the DARPA PREEMPT program and Peter Daszak / EcoHealth Project DEFUSE have eliminated any remaining tolerance for your adolescent nonsense about “naturally occurring.”<sup>5</sup>

Your bluster that SARS-CoV-2 was spawned via a Chinese bat, was/is a “virus” *per se*, and that it was “naturally occurring” is a lie that is now an indelible part of your historical criminal legacy.

<sup>5</sup> See US Marine Corp Major Joseph Murphy (DARPA fellow) report of August 2021 to the IG of DoD: “SARS-CoV-2 matches the SARS vaccine variants the NIH-EcoHealth program was making in Wuhan.”

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #1:*** There is a public health emergency that has resulted from human infection by a naturally occurring virus called SARS-CoV-2.

***There never was a “public health emergency,” based solely on SARS-CoV-2.***

Regarding lethality of your GOF pathogen, marketed as SARS-CoV-2, you were fully aware of data which confirms that announcements by vested interests during 2020 were fraudulent:

**There never was a bona fide ‘public health emergency’ attributable to “SARS-CoV-2.”**<sup>6</sup>



Proof is now overwhelming, that the year-2020 declaration of a public health emergency (based solely on SARS-CoV-2) was a fraud. Proof is highlighted by, but not limited to, Lancaster, Pennsylvania, Oral Roberts University, and the nation of Nigeria.<sup>7</sup>

<sup>6</sup> Vested-interests include the NIH, NIAID, CDC, FDA, WHO, the UN, Donald Trump, China CDC, Klaus Schwab, hospital administrators, John Hopkins University, Cornell University administrators, Bill Gates, Albert Bourla of Pfizer; and face mask manufacturers. ‘Keys to Genocide’ items below detail **what *did* cause a genuine public health emergency**, but these causes had **no** direct connection to your GOF pathogen. From face masks, to lockdowns, to needle mandates; these non-SARS causes were deployed for marketability (See ‘**EUA Lie #2 : There is no medical / medicinal alternative to a Vaccine for the Successful Treating of the “SARS-CoV-2” Induced COVID-19’**).

<sup>7</sup> You and Big Academia are responsible-for and connectable-to the horror that has befallen a lovely family from Nigeria; see “*Mr. Anthony Fauci “Guidance” and the Case of Mrs. Jummai Nache*” (Pages 36 through 44 below).

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #1:*** There is a public health emergency that has resulted from human infection by a naturally occurring virus called SARS-CoV-2.

***There never was a “public health emergency,” based solely on SARS-CoV-2.***

## Walensky’s Comments on Comorbidities Among COVID-19 Deaths in Reference to Study on Vaccinated: CDC

The overwhelming number of deaths occurred in people who had four or more comorbidities

By [Nick Ciolino](#) | January 10, 2022 Updated: January 11, 2022



**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #1:*** There is a public health emergency that has resulted from human infection by a naturally occurring virus called SARS-CoV-2.

***There never was a “public health emergency,” based solely on SARS-CoV-2.***

**New York hospitals admit that nearly HALF of their 'covid' patients were admitted for other reasons after Gov. Kathy Hochul ordered them to disclose the key statistic**

- New York hospitals revealed Friday that 42% of COVID patients were admitted for other reasons, and tested positive for the virus only incidentally
- In NYC, the rate is higher with 51% of COVID patients admitted for other reasons
- Gov. Hochul pushed for the data after seeing total hospitalizations hold steady
- Omicron appears to be driving a higher rate of incidental hospitalization

By [KEITH GRIFFITH FOR DAILYMAIL.COM](https://www.dailymail.com)

**PUBLISHED:** 10:17 EST, 8 January 2022 | **UPDATED:** 11:02 EST, 8 January 2022



**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #1:** There is a public health emergency that has resulted from human infection by a naturally occurring virus called SARS-CoV-2.

***There never was a “public health emergency,” based solely on SARS-CoV-2.***

Your promotions of EUA Lie #1 has devastated the safety and well-being of Cornell University. That lie is fortified by the notion that PCR testing *per se* is reliable, regardless of absurdly high Cycle Threshold Values (CTV). According to you and your comrades in Day Hall, these PCR “results” justify ongoing and very recent headlines:



In your interview of July 17, 2020, when confronted with honest expertise, you stated:

*“What is now sort of evolving into a bit of a standard, that if you get a cycle threshold of 35 or more, that the chances of it being replication competent are miniscule. So that if somebody, and we do have patients, and it’s very frustrating for the patients as well as for the physicians, somebody comes in and they repeat their PCR and it’s like 37 cycle threshold. But you never, you almost never can culture virus from a 37 threshold cycle. So I think if someone comes in with 37, 38, even 36, ya gotta say, ‘Ya know it’s just dead nucleotides, period!’ ”*

In this interview you lied about the reporting of the CTV to patients that your comrades have declared as “positive.” You falsely claim that the reporting of the CTV is, “standard practice.” **So, Mr. Fauci, among whom is the sharing of the CTV “standard practice” ?!**

How many of the Cornell students and staff, that I have interviewed, that Day Hall had declared were “positive” (ala the headline above), were simultaneously told their CTV? **ZERO !!**

How many students/staff are aware that the practice that does afflict them involves a university administration fraud; how many are aware that Cornell’s routine PCR CTV is:

**45 !**

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #2:*** There is no medical/medicinal alternative to a Vaccine for the Successful Treating of the “SARS-CoV-2” Induced COVID-19.

A repulsive aspect of the COVID-19 pandemic is your success promoting the lie that the “virus” was a “surprise outbreak.” You primed that global “vaccine” scheme, not later than January 2017:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

Page 3 of my letter to attorney Mr. Michael van der Veen, I reviewed the following three issues: <sup>8</sup>

1. The notion that COVID-19 was a “surprise outbreak” is farcical.
2. The so-called “COVID-19 vaccine” is not in response to the SARS-CoV-2 virus; but the exact opposite! Attempts to patent mRNA contraptions, and market such as a “vaccine” for SARS-CoV-1 had failed. SARS-CoV-2 was intentionally released to overcome (“blow up!”) traditional systemic approaches to vaccine formulation, development, and safety confirmation protocols. A conspiracy theory? Hardly. Defendants and associated witnesses have already boasted of this reality, in public!
3. Establishment of ‘liability immunity’ in behalf of Subject 1 defendants is the result of a global criminality that is unprecedented in human history. In terms of evidence-based judgement, the only other entity that has so brazenly sought to be ‘immune from liability’ is Satan himself. We are dealing with evil greedy people.

<sup>8</sup> Items #1 and #2 connect to the rejection of the Fauci patent application (page 6 above). I wrote Item 2 to Mr. van der Veen several months prior to the *Project Veritas* release of January 10, 2022 (Footnote 4 above). However, I also detailed for Mr. van der Veen the vile source of the “blow up” sputum (Page 17, Attachment 1).

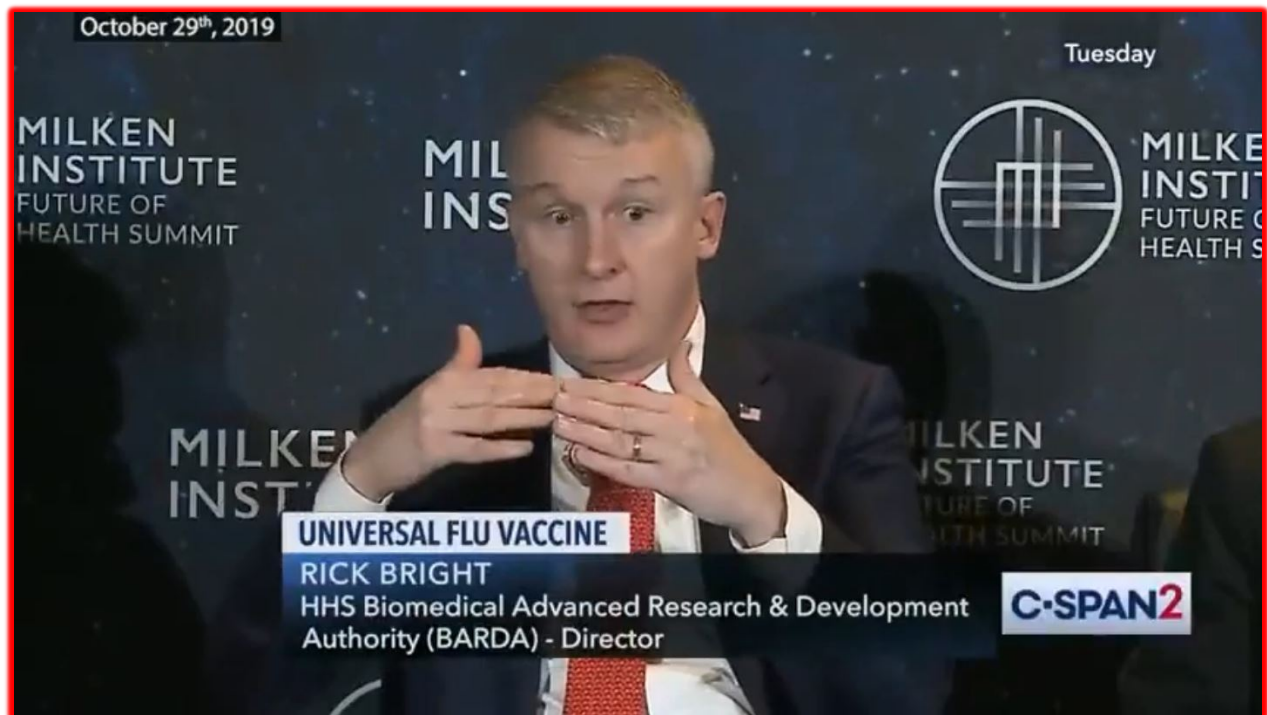


**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #2:** There is no medical/medicinal alternative to a Vaccine for the Successful Treating of the “SARS-CoV-2” Induced COVID-19.

Page 18 of my letter to Mr. van der Veen discusses how your “virus” was *also* being promoted by HHS/FDA; the organization that later issued the Emergency Use Authorization . . .

**On October 29, 2019**, a short walk to Pfizer’s New York headquarters, while on-stage right next to Health and Human Services (HHS) Director Rick Bright, you heartily endorsed Dr. Bright’s slightly re-worded, but equally ***staggering*** verbiage about a “surprise outbreak.”



*“There might be a need, or even an urgent call for an entity of excitement out there, that’s completely disruptive, that’s not beholden to bureaucratic strings and processes . . . But it is not too crazy to think that an outbreak of a novel avian virus could occur in China somewhere . . .”*

**Mere weeks later, December 2019, the first case of COVID-19 was proclaimed in China.**<sup>9</sup>

<sup>9</sup> A key guest of the Milken Institute was **Mr. Albert Bourla of Pfizer**, who promoted ***“the likelihood of developing a vaccine by the end of 2020.”*** Later his deadly mRNA contraption was deployed by a criminal EUA, its documented defects hiding behind the Fauci-inspired **liability immunity** . . . see pages 7 and 8 above.

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #2:*** There is no medical/medicinal alternative to a Vaccine for the Successful Treating of the “SARS-CoV-2” Induced COVID-19.

With fear inflicted upon the innocent population, and your pandemic in full global deployment, low-cost alternatives to a “vaccine” (budesonide, Ivermectin or hydroxychloroquine) would be officially resisted, while advocates would be libeled and slandered and threatened.<sup>10</sup>

But . . . Dr. Bright, the person who assisted your pandemic with “*an entity of excitement*”!?  
**What was Dr. Bright’s other role during your pandemic?**

“United States Department of Health and Human Services (HHS), Dr. Rick Bright, Director of the Biomedical Advanced Research and Development Authority (BARDA), disclosed potential safety risks and the lack of efficacy associated with use of chloroquine and hydroxychloroquine as therapeutic treatments for COVID-19.”

In my letter of July 21, 2020, five pages exposed ***your*** lies about hydroxychloroquine (HCQ), including collaboration with Surgisphere. Their “study” **was a fraud; so fraudulent that your “vaccine” marketeers at The Lancet were forced to retract its publication.**



<sup>10</sup> Your previous attempts to patent mRNA technology, under the marketing term “vaccine,” failed as late as 2003 (Page 6 above). Dr. David Martin and Dr. Reiner Füllmich have also presented enormous evidence regarding your customary threats/intimidations (Page 20, letter to Mr. Michael van der Veen; Attachment 1).

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

***EUA Lie #2:*** There is no medical/medicinal alternative to a Vaccine for the Successful Treating of the “SARS-CoV-2” Induced COVID-19.

In my letter of August 27, 2021, I detailed three non “vaccine” treatment protocols for COVID-19. In each instance I described **the overwhelming success of the protocols**, and listed sample *practicing* medical doctors: (1) *Hydroxychloroquine*, Dr. Vladimir Zelenko, (2) *Ivermectin*, Dr. Pierre Kory, and (3) *nebulized Budesonide*, Dr. Richard Bartlett. <sup>11</sup>

The August 2021 report by **US Marine Corp Major Joseph Murphy** is entitled, “SARS-CoV-2 matches the SARS vaccine variants the NIH-EcoHealth program was making in Wuhan.” On January 11, 2022, Senator Ron Johnson (R-WI) sent a letter to DoD, stating:

According to the Major’s disclosure, EcoHealth Alliance (EcoHealth), in conjunction with the Wuhan Institute of Virology (WIV), submitted a proposal in March 2018 to the Defense Advanced Research Projects Agency (DARPA) regarding SARS-CoVs.<sup>2</sup> The proposal included a program, called DEFUSE, that sought to use a novel chimeric SARS-CoV spike protein to inoculate bats against SARS-CoVs.<sup>3</sup> Although DARPA rejected the proposal, the disclosure alleges that EcoHealth ultimately carried out the DEFUSE proposal until April 2020 through the National Institutes of Health and National Institute for Allergy and Infectious Diseases.<sup>4</sup> The disclosure highlights several potential treatments, such as ivermectin, and specifically alleges that the EcoHealth DEFUSE proposal identified chloroquine phosphate (Hydroxychloroquine) and interferon as SARS-CoV inhibitors.<sup>5</sup>

In essence, EUA Lie #2 claimed that the only remedy for your “pandemic” was use of a needle, supplied by the individual on Page 9 above. That lie **constitutes criminal fraud**. In contrast, it must be re-emphasized . . . none of the three off-patent non “vaccine” protocols is covered by, nor *need* to be covered by, your liability immunity.

Assuming Major Murphy’s report is accurate, are you claiming that EcoHealth comrade Mr. Peter Daszak was aware of the benefits of Hydroxychloroquine (ala Project DEFUSE, way back in 2018), but you were ignorant while orchestrating your May 27, 2020 crap with Surgisphere and Politico?!

**But EUA Lie #1 and EUA Lie #2 pale in comparison to EUA Lie #3.  
Once again, evidence of Fauci footprints and fingerprints are everywhere.** <sup>12</sup>

<sup>11</sup> These are real practicing medical doctors, with real COVID-19 patients; **none** the latter have returned in under your vaccine marketing ruse: “break through cases” (Pages 16, 17 and 18 of Attachment 6).

<sup>12</sup> Footnote 3, page 8 above.

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

EUA Lie #1 and EUA L#2 were *dependent* on EUA Lie #3. Operation Warp Speed was the marketing brand for an operative that was predicated upon the globalist technocracy timetable of Mr. Klaus Schwab, and his “*COVID-19: The Great Reset.*” Alternatively, the hard data confirms, the EAU had minimal if-any connection to “safe and effective vaccines.”<sup>13</sup>

**Central to EUA Lie #3 is the Fauci-inspired conspiracy of liability immunity;** without it there is no possibility that the Pfizer needle would be deployed to infect the global population; a needle funded by the US Treasury, the source of billions in profits for “The Vaccine King.”



**The global populations are unaware of how corrupt the FDA ‘Emergency Use Authorization’ of December 11, 2020 really was. Given the pervasive but censored dangers of the Pfizer needle, humanity does not know the details of how corrupt the EUA needed to be.**<sup>14</sup>

<sup>13</sup> In my letter to you of 27 August 2021, I exposed the comradeship of Pfizer CEO Mr. Albert Bourla with the current president of my alma mater. Their comradeship goes far beyond conspiratorial membership at the COVID-19 New York State Forward Reopening Advisory Board (Page 20, Attachment 6).

<sup>14</sup> Similar to the awareness of your criminality among US citizens, global citizens are becoming aware of the same status for Mr. Albert Bourla. See report by Public Citizen, *Pfizer Power* (Attachment 7).

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

**Page 8 above:** “Your shameless endorsement of ‘liability immunity’ is a declaration that the “vaccines” you have injected into the innocent cannot withstand open examination and medical truthfulness.”

Attorney Tom Renz represents a Pfizer employee who is now protected under the Whistleblower Protection Act. **Six weeks prior to the EUA**, on October 22, 2020 the FDA Center for Biologics Evaluation and Research (CBER) secretly presented the following slide to Pfizer:

**FDA Safety Surveillance of COVID-19 Vaccines :**  
**DRAFT Working list of possible adverse event outcomes**  
**\*\*\*Subject to change\*\*\***

▪ Guillain-Barré syndrome	▪ Deaths
▪ Acute disseminated encephalomyelitis	▪ Pregnancy and birth outcomes
▪ Transverse myelitis	▪ Other acute demyelinating diseases
▪ Encephalitis/myelitis/encephalomyelitis/ meningoencephalitis/meningitis/ encepholopathy	▪ Non-anaphylactic allergic reactions
▪ Convulsions/seizures	▪ Thrombocytopenia
▪ Stroke	▪ Disseminated intravascular coagulation
▪ Narcolepsy and cataplexy	▪ Venous thromboembolism
▪ Anaphylaxis	▪ Arthritis and arthralgia/joint pain
▪ Acute myocardial infarction	▪ Kawasaki disease
▪ Myocarditis/pericarditis	▪ Multisystem Inflammatory Syndrome in Children
▪ Autoimmune disease	▪ Vaccine enhanced disease

You were fully aware of “adverse event outcomes” prior to your party with New York Governor Andrew Cuomo; your meeting with him of December 8, 2020 was in preparation for the FDA EUA **gala** of December 11, 2020 . . . a mere three days later.

Violating ‘Duty to Warn’ tort law, you never alerted President Donald Trump about the known horrors of the Pfizer mRNA needles, **prior-to** or after the Emergency Use Authorization.

You never alerted America about the October 2020 CBER presentation, especially their warning about Venous Thromboembolism; **you failed in your duty to warn Mrs. Jummai Nache.**<sup>15</sup>

<sup>15</sup> I detail your RICO crimes on Page 6 of my 27 August 2021 letter (Attachment 6). This instant letter concludes by declaring connections of your crimes against humanity, including the horrors caused by liability immunity, the EUA, “vaccine mandates,” and the Pfizer needle . . . the needled inflicted upon immigrants from Nigeria, **the Nache family.**

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

On page 10 of my March 6, 2021 letter to the Ivy League University presidents, I introduce the legal issue of ‘Duty to Warn.’ In any context, but especially your liability immunity and the known defects of the Pfizer needle, **their** failure to address ‘Duty to Warn’ in-behalf of students/staff constitutes willful misconduct (Attachment 8).

I also presented to the Ivy League, a screenshot from the Cornell “New Normal” webpage:

Is the vaccine safe? ! UPDATED MAR 3

All data currently available indicate that the vaccines are safe. Thus far, no serious long-term side effects have occurred and no study participants who received vaccine died of COVID-19. Some individuals do experience minor side effects that reflect the body’s immune response beginning; a tiny number of individuals have experienced allergic reactions and have required immediate treatment, which has been successful.

On August 27, 2021, I reviewed the following crap from the Cornell Health website (Attachment 6):

**How effective is the vaccine?**

Pfizer reports that the vaccine is 95% effective. Moderna reports that their vaccine is 94% effective.

“All data currently available”? “Pfizer reports that the vaccine is 95% effective”?!

Both are outrageous lies; one by commission, the other by omission.

**It came as no surprise that following receipt of my letters, Cornell administrators scrubbed both of these bold-faced, “vaccine” promoting lies from their websites.**

**An *alleged* source of these two Cornell administration lies is shown next.**

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

The NEW ENGLAND JOURNAL of MEDICINE

RESEARCH SUMMARY

**Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine**

F.P. Polack, et al. DOI: 10.1056/NEJMoa2034577

**CLINICAL PROBLEM**

Safe and effective vaccines to prevent severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection and Covid-19 are urgently needed. No vaccines that protect against betacoronaviruses are currently available, and mRNA-based vaccines have not been widely tested.

**CLINICAL TRIAL**

A randomized, double-blind study of an mRNA vaccine encoding the SARS-CoV-2 spike protein.

43,548 participants ≥16 years old were assigned to receive the vaccine or placebo by intramuscular injection on day 0 and day 21. Participants were followed for safety and for the development of symptomatic Covid-19 for a median of 2 months.

**RESULTS**

**Safety:**

Vaccine recipients had local reactions (pain, erythema, swelling) and systemic reactions (e.g., fever, headache, myalgias) at higher rates than placebo recipients, with more reactions following the second dose. Most were mild to moderate and resolved rapidly.

**Efficacy:**

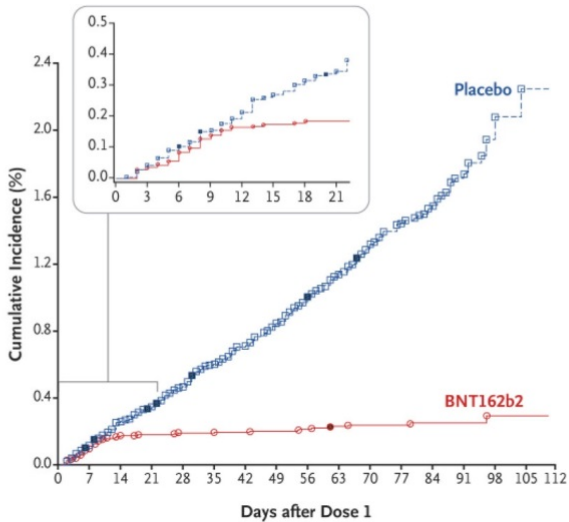
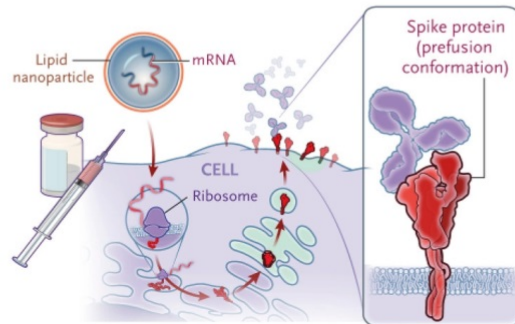
The vaccine showed protection 7 days after the second dose; 95% efficacy was observed.

**LIMITATIONS AND REMAINING QUESTIONS**

Further study is required to understand the following:

- Safety and efficacy beyond 2 months and in groups not included in this trial (e.g., children, pregnant women, and immunocompromised persons).
- Whether the vaccine protects against asymptomatic infection and transmission to unvaccinated persons.
- How to deal with those who miss the second vaccine dose.

**Links:** Full article | Quick Take | Editorial



**Vaccine efficacy of 95% (95% credible interval, 90.3 –97.6%)**

**CONCLUSIONS**

Two doses of an mRNA-based vaccine were safe over a median of two months and provided 95% protection against symptomatic Covid-19 in persons 16 years of age or older.

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

Perspective: Cornell administrators cannot make claims of “leadership” to a world class university; one that is world famous for its undergraduate, graduate, Doctor of Philosophy, Juris Doctor, and Doctor of Medicine degrees (to name a few); with specialties ranging from entomology, biological science, chemistry, genetic science, public health science, biomedical engineering, computer science, genetic engineering, food science, plant sciences, law, information sciences, veterinary medicine, mathematics, and statistical science . . . again, to name a few . . . **while those very same Cornell administrators are ostensibly claiming, by their words and deeds:**

**“We do not know the difference between Relative Risk Reduction versus Absolute Risk Reduction.”**

PFIZER'S INOCULATIONS FOR COVID-19 / MORE HARM THAN GOOD



## PFIZER'S ORIGINAL TRIAL REPORT

# DECEMBER 31 2020

- Published in New England Journal of Medicine
- Showed **2 months worth of safety & efficacy data**
- Described starting with 43,548 people divided into:
  1. **Treatment group** (received inoculation)
  2. **Control group** (received saline)

for 2 months to see who developed COVID-19
- ➔ • The claim was that the inoculations were safe and showed **95% efficacy 7 days after the 2nd dose**. But that 95% was actually **Relative Risk Reduction. Absolute Risk Reduction** was only **0.84%**.

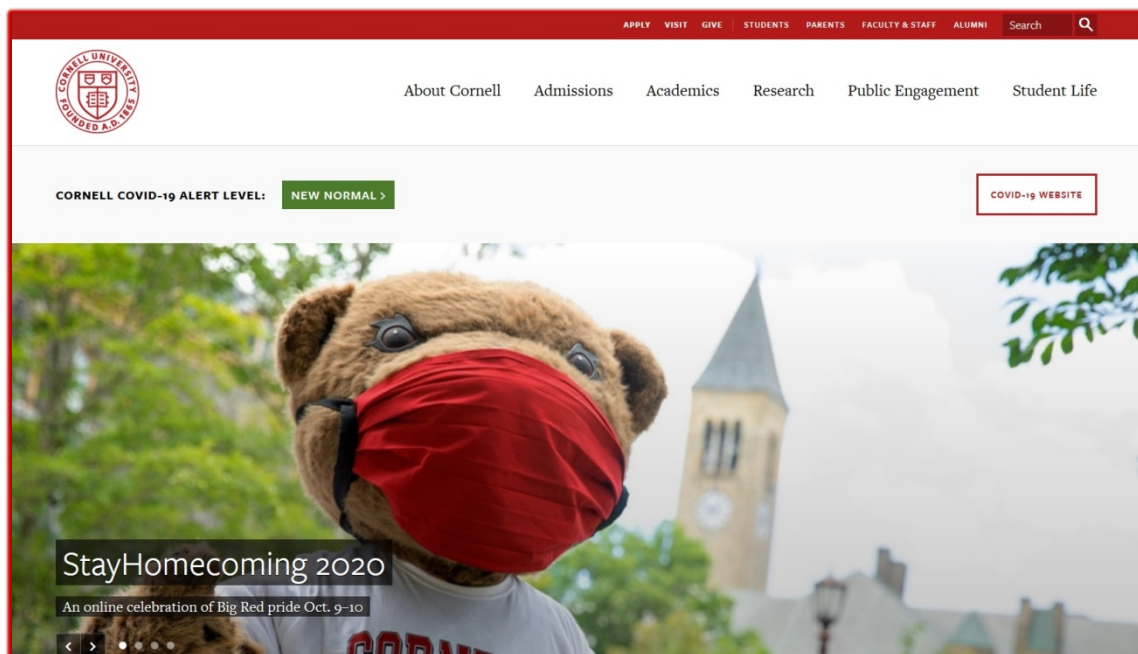
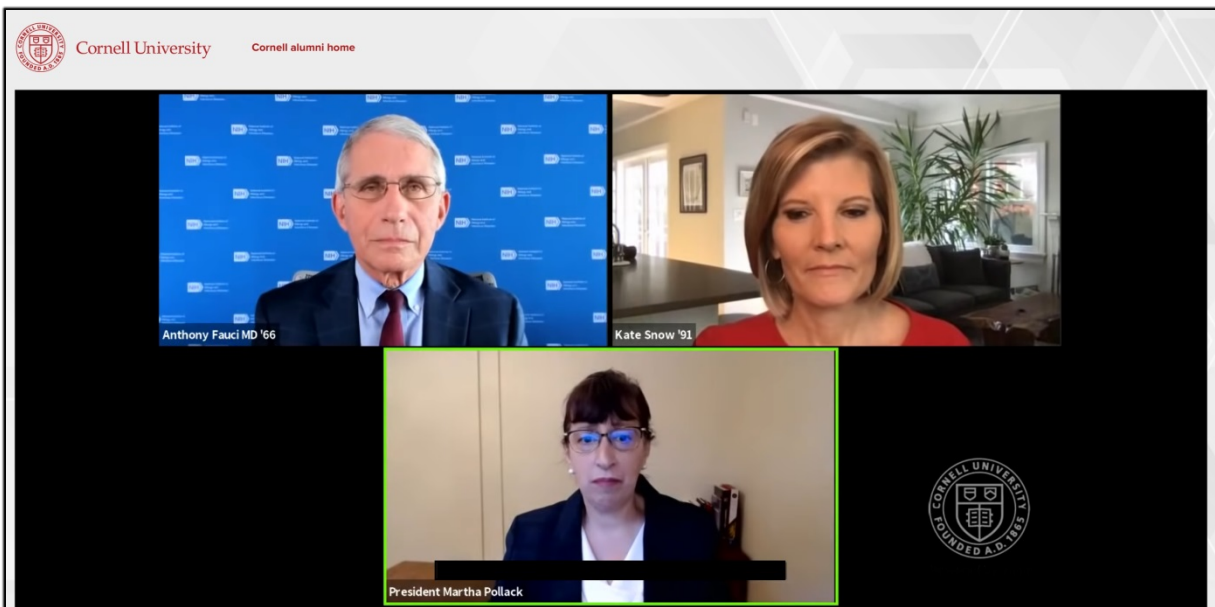


**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

**Mr. Fauci, the above “leadership” admonishment applies to dishonest Cornell administrators; therefore it applies to you in manifold!**

The next screenshot is your ‘vaccine mandate’ marketing stunt of October 9, 2020, identified by the repulsive term coined by Cornell administrators, “*StayHomecoming 2020.*”



**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

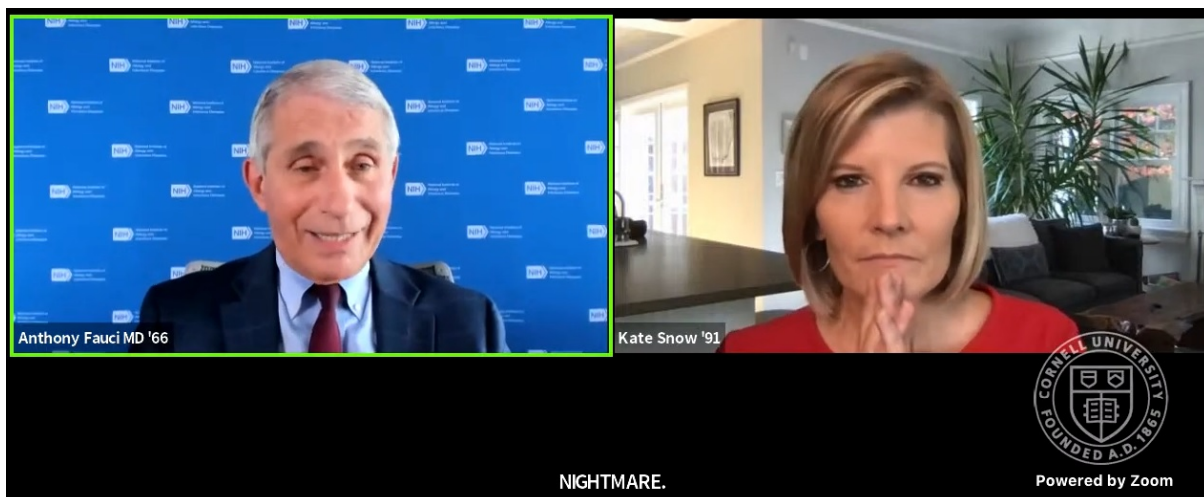
**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

That “America’s Doctor” would degrade the Cornell gala of HomeComing, **to exploit the gullibility** of University students and staff, reduces your status to the “demonic.” <sup>16</sup>

Similar to Cornell administrators, that scrub webpages but only after exposed as frauds, you are *intimately* familiar with Relative Risk Reduction (RRR) versus Absolute Risk Reduction (ARR). You too openly promoted the deception that the former **was** the latter: “95%.” **A bold-faced lie!**

But your antics at StayHomecoming 2020 were not restricted to receiving couched, pre-planned questions from three young coeds. It was a staging of your agenda in behalf of vested-interests; from upcoming vaccine mandates (in behalf of Mr. Albert Bourla), to your deceptions deployed to divert discussion away from your GOF research (in behalf of EcoHealth, the CCP, etc.). Presuming that the rest-of-us were born-yesterday, you exposed plans about your “perfect nightmare” :

“A brand new disease that jumps species, from an animal to a human reservoir, that’s respiratory spread, that has two conflating characteristics. One, it’s spectacularly efficient in its spread from human to human. And two, it has the capability of a high degree of morbidity and mortality, either in the general population, or among a subset or group. And sure enough, here we are in 2020, and we have my perfect nightmare. Namely, a pandemic that has already killed a million people worldwide, and is still raging throughout the world. So what keeps me up at night, is acting out the things that kept me up at night theoretically, is now keeping me up at night practically.”



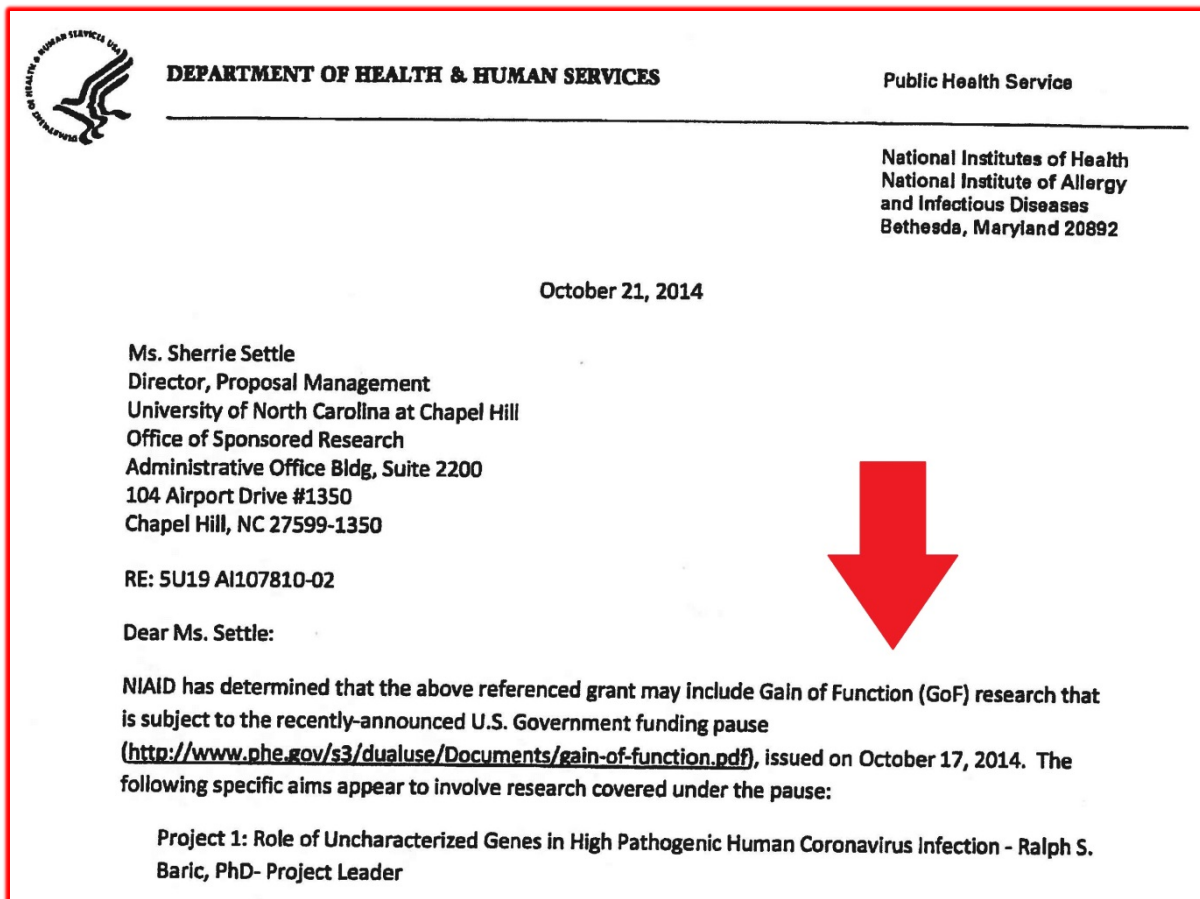
<sup>16</sup> The quotation marks indicate that this was not my descriptor.

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

At StayHomecoming 2020 did you not reveal the truth contained in your FOIA-released emails. Those emails confirm that **your “perfect nightmare” was a Gain of Function design criteria!**

During StayHomecoming 2020 you did not fret about “*nebulous*” definitions for Gain of Function, nor were you compelled to revise its definition to an “*operable*” version:



However (per Page 6 and Item 2 of Page 15 above), you **were** compelled to re-assert the underlying COVID fraud; that the “vaccine” was *in response* to your Gain-of-Function “virus.”

And certainly you were not compelled to explain to the Cornell StayHomecoming coeds, that the “vaccine” trials being conducted by Pfizer had already deviated-from and had already violated every basic requirement for “safe & effective” prove-out of any medicine; let-alone a new never-before licensed mRNA contraption for use in humans. **Why is that Mr. Fauci?**

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

**EUA Lie #3:** The Pfizer clinical trials conducted under *Operation Warp Speed* were competent, truthful and an accurate indicator of COVID-19 “vaccine” safety and effectiveness

A few weeks after Cornell StayHomecoming 2020, while celebrating the FDA ‘Emergency Use Authorization’ with ex New York Governor Andrew Cuomo, you were fully aware that a basic requirement of an EUA was Level 1 evidence **for safety**:

PFIZER'S INOCULATIONS FOR COVID-19 / MORE HARM THAN GOOD

## THE HIERARCHY OF EVIDENCE

- **A randomized control trial is LEVEL 1 Evidence**, the highest form of evidence there is. It is considered the Gold Standard and is the only way to prove something is true.
- **Models are LEVEL 5 or lower** as they are expert opinion/speculation.
- **Policy should be determined by the highest level of evidence available, LEVEL 1.**

**Levels of Scientific Evidence**

Level	Example of Evidence
Level 1	Meta-analysis of Homogenous RCTs <span style="border: 1px solid red; padding: 2px;">Randomized Control Trial</span>
Level 2	Meta-analysis of Level 2 or Heterogenous Level 1 Evidence Prospective Comparative Study
Level 3	Review of Level 3 Evidence Case-control Study Retrospective Cohort Study
Level 4	Uncontrolled Cohort Studies Case Series
Level 5	Expert Opinion Case Report Personal Observation
Foundational Evidence	Animal Research <i>In Vitro</i> Research Ideas, Speculation

Higher ↑ Lower


6

You and Cornell administrators were also fully aware that the Randomized Control Trials (that Cornell administrators claimed were the source for their webpages, and later their justification for vaccine mandates), did not occur with full competence and full validity.

For example, you and Cornell administrators were both fully aware that the trials had already been invalidated by an unblinding that occurred as early as July 2020 !

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - con't**

PFIZER'S INOCULATIONS FOR COVID-19 / MORE HARM THAN GOOD



## EARLY UNBLINDING OF RANDOMIZED CONTROL TRIAL = NO LONG TERM SAFETY DATA

### WHAT WAS SUPPOSED TO HAPPEN


Year	INOCULATED GROUP	PLACEBO GROUP	Notes
2020	[Grid of red dots]	[Grid of blue dots]	<b>July 27 2020 Phase III Begins</b> The participants are evenly divided into Inoculated and Placebo groups of about 21,000 each. The study is <b>blind</b> , so participants don't know which group they are in.
2021	↓	↓	
2022	↓	↓	
2023	↓	↓	<b>May 2 2023 End of Phase III Clinical Trial</b> This is the point where the trial can be <b>unblinded</b> and the Placebo group offered the intervention if it's indicated and they consent.

### WHAT ACTUALLY HAPPENED

Year	INOCULATED GROUP	PLACEBO GROUP	Notes
2020	[Grid of red dots]	[Grid of blue dots]	<b>July 27 2020 Phase III Begins</b> The participants are evenly divided into Inoculated and Placebo groups of about 21,000 each. The study is <b>blind</b> .
2021	[Grid of red dots]	NO DATA	<b>Dec 31 2020 Release 2 month data report. The trial is unblinded early.</b> <b>Crossover Occurs</b> The participants from the <b>Placebo Group</b> are given the opportunity to take the inoculation and by early 2021, the majority of them have crossed over to the inoculated group. It's <b>no longer a randomized control trial, as control group is gone.</b>
2022	↓ ↓	NO DATA	
2023	↓ ↓	NO DATA	<b>May 2 2023 End of Phase III Clinical Trial</b> The <b>long term safety data</b> that was supposed to be assessed at this point is <b>no longer possible to ascertain as the placebo group crossed over two years previously.</b>

9

PFIZER'S INOCULATIONS FOR COVID-19 / MORE HARM THAN GOOD



## PFIZER DID NOT FOLLOW ESTABLISHED PROTOCOLS

Regarding the persistent claim that the COVID-19 inoculation products do not need to be tested, because mRNA technology has already undergone testing: mRNA technology is the delivery mechanism, not the inoculation. That's like saying that since we've used syringes safely before, anything injected via syringe is safe. (And in fact, there are still a lot of unknowns about the effects of the mRNA delivery mechanism.)

NORMALLY, VACCINE DEVELOPMENT LOOKS LIKE THIS, WITH A TIMELINE OF 5 TO 10 YEARS.

1	2	3	4	5	6	7	8	9	10
In Vitro & Animal Models			Human Trials PHASE I Safety, dosing, immune responses	Human Trials PHASE II Safety & immune responses	Human Trials PHASE III Safety & efficacy				

RARELY, IT CAN BE DONE IN AS LITTLE AS 5 YEARS.

1	2	3	4	5
In Vitro & Animal Models	Human Trials PHASE I	Human Trials PHASE II	Human Trials PHASE III	

FOR THE COVID-19 INOCULATIONS, IT WAS DONE IN 1 YEAR.

2020	2021
[In Vitro & Animal Models]	PHASE III continues, but unblinded

← ROLLOUT BEGINS

- Animal testing was skipped
- Phases II/III were combined
- After 2 months of Phase II/III, Emergency Use Authorized
- The trials were unblinded
- Phase III trials are ongoing until 2023

14

**Keys to Genocide: Fauci Inspired *Emergency Use Authorization (EUA)* - conclusion**

At StayHomecoming 2020 you declared what truly motivated you and your Great Reset clients:

*“ The urgency of getting an intervention, both a vaccine and some of the therapies that you and I discussed a little while ago. To get them ready, because you know as a physician, and a physician-scientist, I am very **cognizant** of people getting sick and of people dying. That’s real stuff for me! That’s not a statistic. ‘Cause when you do it every day, it’s not a statistic. So, it doesn’t worry me, it gives me more energy to say, ‘We’ve gotta get a vaccine. We’ve gotta get drugs. And we’ve gotta get people to listen to us, when we say what the public health measures are that we need to follow.’ ”*<sup>17</sup>

Never during your mRNA needle sales campaign, have you admitted cognizance of the proven safety & effectiveness of low-cost medicines: Hydroxychloroquine, Ivermectin or budesonide. Instead, you have been spewing “guidance” that accommodates Mr. Klaus Schwab.



“Cognizant”? **Your “guidance” led to the FDA ‘Emergency Use Authorization’** of December 11, 2020; later promoted by Cornell administrators. The EUA was characterized by conspiracy, fraud, gross criminal negligence, depraved indifference, and treason . . . to name a few.<sup>18</sup>

<sup>17</sup> At no time during your mRNA needle sales campaign did you admit that the “people getting sick” included a University of Minnesota medical assistant named Mrs. Jummai Nache (See Pages 36 through 44 below).

<sup>18</sup> The presentation slides above (Pages 23, 27 and 28) are compliments of the Canadian COVID Care Alliance (CCCA) of December 16, 2021. CCCA is comprised of over 500 independent Canadian doctors, scientists, and health care practitioners. Their priority is the Hippocratic Oath and patient well-being, **not** the CCP, or Pfizer, or COVID-19: *The Great reset*. The CCCA video and pdf slides are here : <http://pvsheridan.com/CCCA/>

## Intermission Two

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and Complete Disconnection from Any Prior Accolades/Activities Related in *any* way to my alma mater – CORNELL UNIVERSITY**



**Crimes Against Humanity: Fauci Inspired Suicide / Murder of the World's Children**

Ten days after your Pfizer mRNA needle was released by the FDA Emergency Use Authorization, for use against the entire population of America, I wrote to you about your role in **the massive suicide death toll afflicting our children** (screenshot):

21 December 2020

VIA FEDEX AIRBILL 7817-8238-2240

Dr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Subject : I Hereby Accuse You of 'Gross Criminal Negligence'  
Connectable to the Death of Mr. Spencer William Smith \***

Consistent with your long history of inaccuracy, your lack of true responsibility, and your cowardice; you never responded. Throughout 2020 your "guidance" was enforced upon our children, from lockdowns, to vile face masks, to **your "vaccine mandate" that now directly connects you to horrible permanent injury and death among the world's children.**

Your crimes against our children occurred while you subverted the proven safety of off-patent medicines; favoring the needles from The Vaccine King and his major "investors" (Page 9 above).



**Your crimes against our children occurred while you and the criminal at-center were conspiring against anyone that questioned your "guidance" on lockdowns . . . the latter is a proven cause of the suicide death of our children.**



**Crimes Against Humanity: Fauci Inspired Suicide / Murder of the World's Children – con't**

My thesis of December 21, 2020 states that your criminality is connectable to the suicide death of our children. My thesis has not diminished; recent releases of your emails has further affirmed it:

## Leaked E-mails: Fauci, Collins Worked on “Quick and Devastating” Smear Campaign Against Anti-lockdown Message

by Veronika Kyrylenko December 20, 2021

[Facebook](#) [Twitter](#) [LinkedIn](#) [Email](#) [Print](#) [PDF](#)



Over a year ago, on Page 7 of my December 21, 2020 letter, I asserted:

**“It is abundantly clear, had the Smith family merely resided in Florida, wherein “lockdowns” are reduced to non-existence, the schools are open, and the students enjoy normal social interactions; in that residence the probability of the suicide death of a child, 16 year-old Spencer William Smith, drops to zero.”**

**Crimes Against Humanity: Fauci Inspired Suicide/Murder the World's Children - conclusion**

**As the whole world can now see**, my thesis of December 21, 2020 stating your criminality (and its connection to the suicide death of our children) has not diminished in validity. An example of **your vile email record confirms that you are the one that has been “devastating.”**

**From:** Collins, Francis (NIH/OD) [E] (b) (6)  
**Sent:** Thursday, October 8, 2020 2:31 PM  
**To:** Fauci, Anthony (NIH/NIAID) [E] (b) (6); Lane, Cliff (NIH/NIAID) [E] (b) (6)  
**Cc:** Tabak, Lawrence (NIH/OD) [E] (b) (6)  
**Subject:** Great Barrington Declaration

Hi Tony and Cliff,

See <https://gbdeclaration.org/> This proposal from the three fringe epidemiologists who met with the Secretary seems to be getting a lot of attention – and even a co-signature from Nobel Prize winner Mike Leavitt at Stanford. There needs to be a quick and devastating published take down of its premises. I don't see anything like that on line yet – is it underway?

Francis

Over a year ago, on Page 9 of my December 21, 2020 letter, I asserted:

**“Were it not for the fraud of ‘amplification,’ central to your lies of PCR-based testing as the ‘gold standard,’ the governor of Maine would not have had exaggerated ‘confirmed cases,’ and therefore would be unable to enforce her Bolshevik-styled lockdown . . . that 16-year-old Spencer William Smith had connected in the suicide note as his primary reason to take his own life.”**<sup>19</sup>

**Mr. Fauci, it's called manslaughter.** But before you assert your divinity, perhaps the fact that many are in-agreement with my thesis is instructive . . . especially if ‘the many’ are **typified** by a respectful front line nurse of the highest standing with her patients, and her employer.

Meet Nurse Ms. Morgan Wallace:

<sup>19</sup> Review of the ‘Big Testing Regime’ (from over a year ago) now connects to your “guidance” presented on Page 14 above, and your full awareness that the PCR regime deployed against the Cornell/Ithaca community has a CTV of 45! One can speculate why you and the Cornell administrators forgot about your pre-EUA PCR lectures of October 2020.

**Crimes Against Humanity: Murder by Withholding Successful COVID Protocols**

**“Everyone who died with COVID should be considered murdered.”**



The transcript of her January 4, 2022 talk is on Page 35 above. As expected, the video of her talk has been banned by your comrade Susan Wojcicki of YouTube. But I preserved a copy here:

<https://www.bitchute.com/video/Pi7zmmn5m4jw/>

**Crimes Against Humanity: Murder by Withholding Successful COVID Protocol - conclusion**

**“Everyone who died with COVID should be considered murdered.”**

New Hanover County School Board, Wilmington, North Carolina, 4 January 2022 (Transcript)

“I’m (nurse) Morgan Wallace. I am a 10-year employee of New Hanover County (hospital). I worked in cardiovascular ICU for five years I was your last line of defense with COVID.

We ran your heart and lungs outside your body with your chest open while you were bleeding on the floor. **And what I realized was that patients were needlessly dying because government withheld policies for treating COVID.**

**Everyone who died with COVID should be considered murdered.** Early treatment has always been effective.

I walked out of the hospital on the mandate day. I have my own practice, and I am the only person in town treating COVID patients prior to hospitalization.

**I also watched the entire staff at the hospital including in my unit get vaccinated and then get COVID. Amongst all other kinds of ailments, you have now loaded your body with millions of spike proteins and you are a ticking time bomb for cancer, blood clots, and whatever kind of ailment may come up in your body.**

And I’m tired of hearing people go and ask doctors can they be treated for COVID, **and their only option is a vaccine**, or go home, or go into the hospital where you’re not going to make it out.

**I’ll be happy to treat any one of you for COVID prior going to the hospital because early treatment has always worked.** I’m a member of the FLCCC Alliance, NC Physicians for Freedom, and the Medical Freedom Summit.

**And I would ask you all to please stop choosing fear and putting masks on our kids.**

The vaccine is not gonna work, early treatment has always worked, and government mismanagement of patients is why people have died.

And families have realized this and they are rising up and they are going to come after governments and the hospital.

**I was highly decorated and highly respected at New Hanover. I was the November 2020 employee of excellence, and I had a job opportunity this year from the chief medical director at this hospital and I chose to walk out and stand up for what is right.**

**So putting these masks on our kids is not going to help, nor is vaccination, and we all need to realize that.**

The cat is out of the bag and people are speaking globally, including the inventor of the vaccine.”

**Crimes Against Humanity****Mr. Anthony Fauci “Guidance” and the Case of Mrs. Jummai Nache**

Given both criminal and civil litigation in this case, I will not verbalize too much in this section.

However, rather than spewing “guidance” from a white tower, working instead in the real world of patients; the following portion of Nurse Wallace’s statement needs to be re-emphasized:

**“I also watched the entire staff at the hospital including in my unit get vaccinated and then get COVID. Amongst all other kinds of ailments, you have now loaded your body with millions of spike proteins and you are a ticking time bomb for cancer, blood clots, and whatever kind of ailment may come up in your body.”**

It is unlikely that Ms. Morgan has any knowledge whatsoever of the medical or legal case of **fellow-nurse Mrs. Jummai Nache**. . . .

For perspective, you are directed to read the excerpt of the medical report of Mrs. Nache; provided to attorney Mr. Michael van der Veen, Page 21 of Attachment 1:

In their medical report on Mrs. Jummai Nache of 21 May 2021, on Page 183, Dr. Andrew Boucher of the University of Minnesota Medical Center claims:

“Assessment:

Jummai P Nache is a 50 year old female patient who is following up after a prolonged admission and continued rehab after MIS-A. Her clinical course has left her with life-changing physical disfigurement which is almost certainly going to need amputation.

Most of our visit was spent again discussing the potential role of the vaccine in this process. Dr. Fontana shared the letter from the CDC stating that this was MIS-A without clear involvement from the vaccine, though it can't (and likely never will be) excluded as contributing to some extent. Since the last visit, and separate from the laboratory evidence discussed with the CDC, I did have the PF4 antibody testing done on a blood sample saved from around the same day as her arterial thrombotic events. This testing was negative. Thrombotic Thrombocytopenic Syndrome (TTS, previously termed VITT as mentioned in my previous note) is the syndrome linked to the infrequent CSVT and other thrombotic events linked to Johnson and Johnson vaccines.”

Diverting to a needle that Mrs. Nache was **not** injected with was no accident; Dr. Boucher was fully aware that the mRNA needle, twice-inflicted upon her, was from Pfizer Corporation.

Again, I do not intend to elaborate, instead I will let the following photos do the verbalizations.

You and the person of Footnote 1 have already seen many of the following, but you and she have characteristically ignored them . . . so, **once again** . . . look at these photographs . . . **take a good loooooong look Mr. Fauci.**

**Crimes Against Humanity**

**Mr. Anthony Fauci “Guidance” and the Case of Mrs. Jummai Nache**



Philip and Jummai Nache are from the African country of Nigeria. They moved to the United States and now they tell other Africans who moved here about Jesus.

**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**



**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**





**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**



**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**



**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**



**Crimes Against Humanity**

**Mr. Anthony Fauci "Guidance" and the Case of Mrs. Jummai Nache**



Crimes Against Humanity

Mr. Anthony Fauci “Guidance” versus the Nation of Nigeria

On Page 11 and Footnote 7 above I introduced the subject of Nigeria, as one of the exemplars for the reality, “There never was a ‘public health emergency,’ based solely on SARS-CoV-2.”

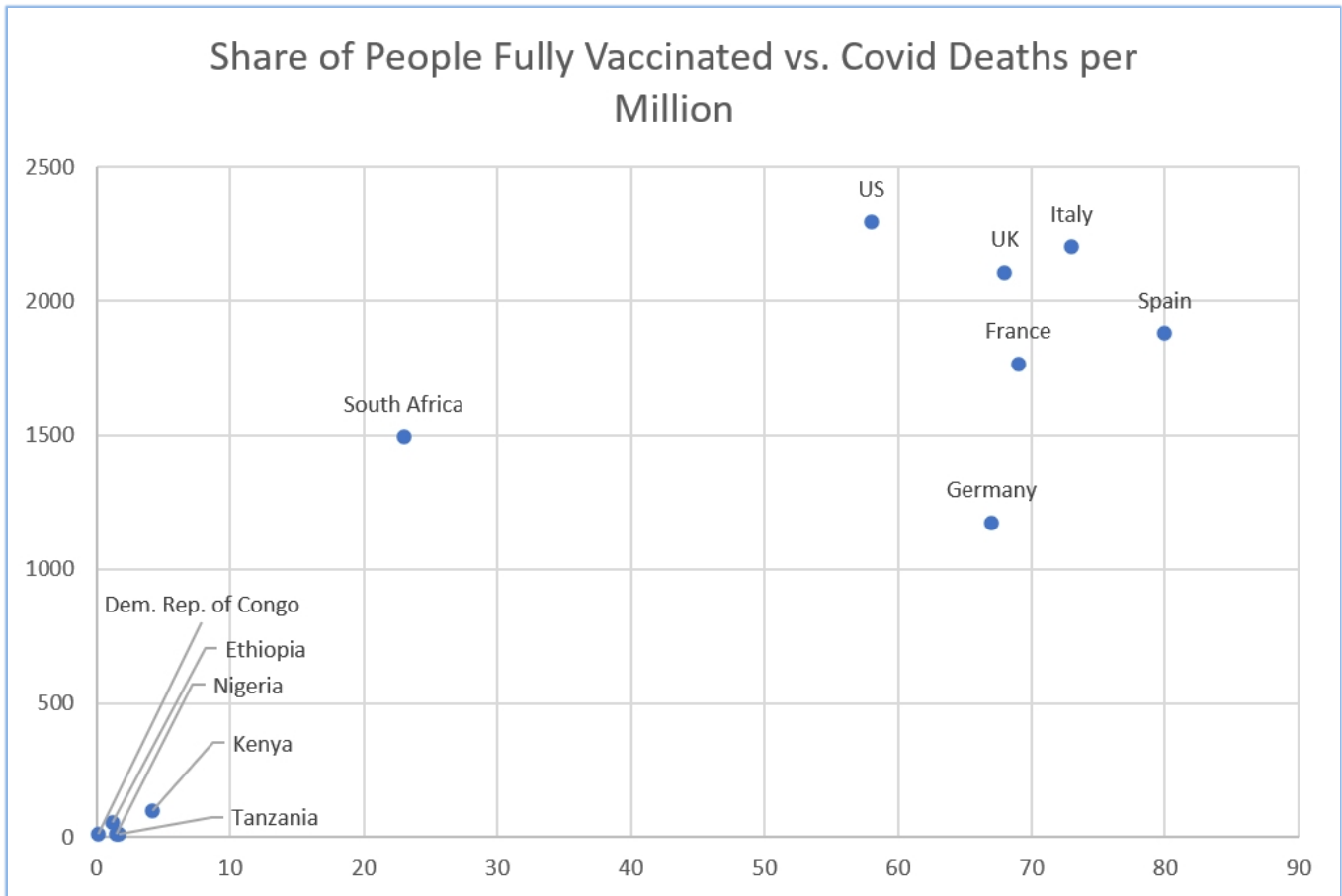
**MISES INSTITUTE**  
 Published on *Mises Institute* (<https://mises.org>)

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**With Low Vaccination Rates, Africa's Covid Deaths Remain Far below Europe and the US**

November 23, 2021 - 1:44 PM [Ryan McMaken](#) [1]

**Barely visible in the lower left corner we find the results of NOT submitting to the Fauci or University of Minnesota or Cornell University “guidance” :**



**Had the Nache Family remained in Nigeria, rather than being tyrannized by Fauci and University of Minnesota COVID-19 “guidance,” vaccine mandates, and lockdowns; their physical health and livelihoods would not be so compromised (Attachment 10).**

**Intermission Three**

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and Complete Disconnection from Any Prior Accolades/Activities Related in *any* way to my alma mater – CORNELL UNIVERSITY**



**Conclusion – Part One**

**Mr. Anthony Fauci: No CRIMINALITY IMMUNITY**

Whether coddling co-conspirator Dr. Peter Daszak for assistance with your “perfect nightmare,” or orchestration of liability immunity for characters such as Mr. Albert Bourla of Pfizer; your deeds are not protected by *Criminality Immunity*.

Whether investigating the origins of the so-called “virus,” or the process and long history by which the so-called “vaccine” for COVID-19 was developed and deployed; from beginning to end, **there is always a common denominator: The footprints and fingerprints of “America’s Doctor.”**



**If you need further affirmation of how your crimes are directly connectable to the horrors inflicted upon the Nache family (Pages 37 - 43 above), then I direct your attention to readership of Attachment 1.**

## **Conclusion Part Two**

To the best of my extensive knowledge of Cornell University; its founder, its founding philosophy, its remarkable and ongoing history of true contribution to the well-being of humanity; **there is no one in the Cornell family that even remotely caused or deserves the following headline:**



## **FORMAL DEMAND**

I make no suggestions/representations that I represent Cornell University in an *official* capacity. I am an ambassador in high standing as a member of the alumni family. In this capacity, and in the context of (1) the above discussion, (2) the gentleman pictured on Page 45, (3) the customary rules that dictate expulsion from Cornell, and (4) in-behalf of the Nache Family:

I hereby demand that you, Mr. Anthony Fauci, forfeit all degrees, that you disassociate from any affiliation, and completely disconnect from any prior accolades/activities that are related *in any way* to my alma mater – CORNELL UNIVERSITY

Cordially,

Paul V. Sheridan  
MBA: Class of 1980



**ADDENDUM CONTENT**

<b>This is Cornell</b>		Page 49
Preliminary Copy List		Page 50
		<u>Page Reference</u>
Paul V. Sheridan letter of November 20, 2021 to Mr. Michael van der Veen	Attachment 1	2, 15, 16, 17
Paul V. Sheridan letter of July 21, 2020 to Dr. Anthony Fauci	Attachment 2	3, 7
Paul V. Sheridan letter of April 12, 2020 to President Donald Trump	Attachment 3	4
Paul V. Sheridan letter of September 18, 2020 to President Donald Trump	Attachment 4	4
Paul V. Sheridan letter of August 13, 2020 to President Donald Trump and Vice President Michael Pence	Attachment 5	6
Paul V. Sheridan letter of August 27, 2021 to Mr. Anthony Fauci and Ms. Martha Pollack	Attachment 6	18, 19
Public Citizen Report : <b>PFIZER POWER</b> of October 19, 2021	Attachment 7	19
Paul V. Sheridan letter of March 6, 2021 to Ivy League University presidents	Attachment 8	20
Paul V. Sheridan letter of December 21, 2020 to Mr. Anthony Fauci	Attachment 9	31, 32, 33
Mises Institute report : <b>With Low Vaccination Rates, Africa's COVID Deaths Remain Far below Europe and the US</b>	Attachment 10	44

**Electronic Versions**<http://pvsheridan.com/sheridan2fauci-5-19january2022.pdf> (full)<http://pvsheridan.com/sheridan2fauci-5-19january2022-cvr.pdf>

## *This is Cornell*

*Cornell* may be likened to a genetically engineered, multicolored chimeric animal, produced by combining the genes of at least a half dozen parents; all of whom are convinced that they contributed the dominant genes.

From where I sit in the tower at the east end of the campus, the chimera has a distinctly greenish hue, reflecting the emphasis on technological advances in biology, the plant and animal sciences, and veterinary medicine that have made us world leaders in improving food production and maintaining environmental quality.

But the chimera's coat has many different colors, and those that predominate depend on the angle of viewing.

In a larger sense, *Cornell* is more than a complex mosaic of disciplines and schools. It is a place of great creativity, nurtured by remarkable individual freedom. It is an institution where excellence and hard work are expected . . . indeed these are the norm.

It is an international community, and those of us who travel abroad are constantly reminded of the respect we command throughout the world simply because we are from *Cornell*.

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and Complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

**Preliminary Copy List**

Mrs. Jummai Nache/ Mr. Philip Nache Hope of Nations Gospel Church 1021 Hennepin Ave # 2 Minneapolis, MN 55403 502-379-5428 / <i>By email</i>	Mr. Robert S. Harrison Board of Trustees Cornell University- 300 Day Hall Ithaca, NY 14853 607-255-3903 Shipper tracking xxxxxxxx	Dean Augustine M.K. Choi Weill Cornell Medical College 1300 York Avenue New York, NY 10065 212-746-5454 Shipper track 775829266383
Dr. Michael I. Kotlikoff Office of the Provost Cornell University - 300 Day Hall Ithaca, NY 14853 607-255-9924 Shipper track 775840675166	Mr. Joel M. Malina VP for University Relations 314 Day Hall Ithaca, NY 14853 607-255-9029 Shipper track 775876832516	Ms. Donica Thomas Varner Office of General Counsel Cornell University- 300 Day Hall Ithaca, NY 14853 607-255-3903 Shipper track 775829255077
Senator Rand Paul United States Senate 167 Russell Senate Office Bldg Washington DC, 20510 202-224-4343 Shipper track 775853076306	Congressman Jim Jordan United States Congress 2056 Rayburn House Bldg Washington, DC 20515 202-225-2676 Shipper track 775842255328	Mr. Thomas Renz, Esq Renz Law Firm, PC - Suite 162 1907 W. State Street Fremont, OH 43420 419-351-4248 <i>By email</i>
Mr. Ravi Batra, Esq. Law Firm of Ravi Batra, PC 142 Lexington Avenue New York, NY 10016 212-545-1993 <i>By email</i>	President Dr. William Wilson Oral Roberts University 7777 South Lewis Avenue Tulsa, OK 74171 918-495-6161 <i>By email</i>	Dr. Peter McCullough Baylor Heart & Vascular 3409 Worth Street - Suite 500 Dallas, TX 75246 214-841-2000 Shipper track 775876748935
Dr. Vladimir Zelenko Suite 011 3 Hamaspik Way Monroe, NY 10950 845-782-0000 <i>By email</i>	Dr. Pierre D. Kory FLCCC Alliance 6006 N Highlands Avenue Madison WI 53705 513-486-4696 <i>By email</i>	Dr. Richard Bartlett Suite 310 1330 East 8th Street Odessa, TX 79761 432-425-1258 <i>By email</i>
Mr. Marc L. Boom Houston Methodist Hospital 6565 Fannin Street Houston, TX 77030 713-790-3311 Shipper track 775853258390	Governor Kathy Hochul Governor of New York State NYS State Capitol Bldg Albany, NY 12224 518-474-8390 Shipper track 775840431746	Ms. Martha E. Pollack Office of the President Cornell University- 300 Day Hall Ithaca, NY 14853 607-255-5201 Shipper track 776213811785

# ATTACHMENT 1

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of November 20, 2021 to Mr. Michael van der Veen

23 Pages

Dear Customer,

The following is the proof-of-delivery for tracking number: **775271131063**

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	Receptionist/Front Desk
<b>Signed for by:</b>	M.GREEN	<b>Delivery Location:</b>	1219 SPRUCE ST
<b>Service type:</b>	FedEx Standard Overnight		
<b>Special Handling:</b>	Deliver Weekday		PHILADELPHIA, PA, 19107
		<b>Delivery date:</b>	<b>Nov 22, 2021</b> 11:04

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		<b>Weight:</b>	5.0 LB/2.27 KG

**Recipient:**

Mr. Michael van der Veen, Esq, Law Offices  
1219 Spruce Street  
vanderVeen, ONeill,Hartshorn,Levin  
PHILADELPHIA, PA, US, 19107

**Shipper:**

Paul V. Sheridan, DDM Consulting  
22357 Columbia Street  
DDM Consulting  
Dearborn, MI, US, 48124

**Reference**

**Consult Request Letter - Nache**



22357 Columbia Street  
Dearborn, MI 48124-3431  
313-277-5095  
pvs6@cornell.edu

20 November 2021

VIA FEDEX AIRBILL 7752-7113-1063

Mr. Michael van der Veen, Esq.  
van der Veen, O'Neill, Hartshorn, and Levin  
1219 Spruce Street  
Philadelphia, PA 19107  
215-515-6892

**Subject 1: The Nache Family versus Pfizer Incorporated, BioNTech SE, et al.**  
**Subject 2: The Nache Family versus EcoHealth Alliance, et al.**  
**Subject 3: The Nache Family versus University of Minnesota, et al.**  
**Subject 4: The Nache Family versus M Health Fairview Southdale Hospital, et al.**  
**Reference: The Global Rollout of COVID-19**

Dear Mr. van der Veen:

Thank you for receiving my several prior correspondences.

We are seeking a law firm with the political, financial, and legal wherewithal to gain justice for the Nache Family and, in so-doing, assert to the very powerful that their plans for global humanity are not merely unacceptable, but are knowingly harmful and provably criminal. We are seeking a law firm that will advocate with innate conviction, in open court, in behalf of all, especially for those that Jesus referred to when declaring:

*“Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.”*

### **Civil Liability Case Definition**

The webpage of the US Department of Health and Human Services, covering the Public Readiness and Emergency Preparedness Act (PREP) states:

#### **Liability Immunity and Compensation**

In general, the liability immunity applies to entities and individuals involved in the development, manufacture, testing, distribution, administration, and use of medical countermeasures described in a Declaration. The only statutory exception to this immunity is for actions or failures to act that constitute willful misconduct.

**Relative to COVID-19**, the defendants have and continue to act with willful misconduct. Evidence of such, already in the public domain, is not preliminary; it is overwhelming. Their misconduct ranges from subversion of informed consent, to coercion, to **deception regarding prior known defects in what defendants promote as a “vaccine.”** Existing evidence and then discovery will go far beyond mere misconduct . . . all the way to blatant criminality.

**Civil Liability Case Definition – con't**

Given the increasing public awareness of criminality, the following **preemptive** headline, from the most infamous mouthpiece of vested-interests, was anticipated and is welcomed:



If it were up to Mr. Albert Bourla and the Subject defendants, **the entire Amish population of Lancaster, Pennsylvania** would be arrested and placed in solitary confinement:



The Subject defendants are presumed (by the trusting and vulnerable public) to be morally pristine, proverbially squeaky-clean . . . honorable. When the innocent public learns of the exact opposite, and speak of such, **they** are then slandered as “criminals.”

Meanwhile, collectively, the American Bar Association appears to have lost all manner and resolve in their claimed stewardship of legal literacy . . .

**Civil Liability Case Definition – con't**

The COVID-19 lies spewed from the defendants are not restricted to lies-by-commission; their lies-by-omission are equally plentiful and insidious. To grasp that reality, highly promoted COVID-19 perspectives must be discarded. That process includes but is not limited to these facts:

1. The notion that COVID-19 was a “surprise outbreak” is farcical.
2. The so-called “COVID-19 vaccine” is **not** in response to the SARS-CoV-2 virus; **but the exact opposite!** Attempts to patent mRNA contraptions, and market such as a “vaccine” for SARS-CoV-1 had failed. SARS-CoV-2 was intentionally released to overcome (“blow up!”) traditional systemic approaches to vaccine formulation, development, and safety confirmation protocols. A conspiracy theory? Hardly. Defendants and associated witnesses have already boasted of this reality, in public!
3. **Establishment of ‘liability immunity’ in behalf of Subject 1 defendants is the result of a global criminality that is unprecedented in human history.** In terms of evidence-based judgement, the only other entity that has so brazenly sought to be ‘immune from liability’ is Satan himself. We are dealing with evil greedy people.

**The COVID-19 Civil Liability Litigation Exemplar** I am not aware of any more comprehensive than the horrors that were inflicted upon, and are now being endured by the plaintiffs: Mrs. Jummai Nache, her husband Philip, and their four daughters:



Philip and Jummai Nache are from the African country of Nigeria. They moved to the United States and now they tell other Africans who moved here about Jesus.



**Civil Liability Case Definition** – con't

Mrs. Nache during the Christmas holidays of 2020. On December 11 2020, Subject 1 defendants celebrated receipt of *their* long-sought gift; a COVID-19 “vaccine” Emergency Use Authorization:



Note her U of Minn ‘Physicians Group’ badge. After EUA, Subject 3 defendants threatened dismissal of employees, who were then coerced into injection with ultra-profitable but undisclosed mRNA contraptions, patented and distributed by Subject 1 defendants. At no time prior to **two** injections, was the Nache family informed that proven **non-vaccine treatments were repulsed by her employer**, or that U of Minn was aware of dangers with mRNA needles. That is, informed consent was **directly and aggressively** subverted by Subject 3 defendants.

**Civil Liability Case Definition – con't**

A non-smoker with zero hospitalizations her entire prior life, a model of respiratory, cardiovascular and general health; Mrs. Nache was untested for COVID but documented as asymptomatic. Under their illegal mandate, she was coerced by Subject 3 defendants into **the first dose of the Pfizer mRNA needle on 13 January 2021.**

**The second “required” Pfizer-BioNTech needle came on 1 February 2021:**

**COVID-19 Vaccination Record Card**

Please keep this record card, which includes medical information about the vaccines you have received.  
Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.

Last Name: Nache First Name: Jummai MI: P

Date of birth: 03/02/1971 Patient number (medical record or IIS record number): \_\_\_\_\_

Vaccine	Product Name/Manufacturer Lot Number	Date	Healthcare Professional or Clinic Site
1 <sup>st</sup> Dose COVID-19	COVID-19 Vaccine Mfg: Pfizer BioNTech Lot: EK9231 Exp: 4/30/21	<u>1</u> / <u>13</u> / <u>21</u> mm dd yy	M Health Fairview Southdale
2 <sup>nd</sup> Dose COVID-19	COVID-19 Vaccine Mfg: Pfizer BioNTech Lot: EL9262 Exp: 5/31/21	<u>2</u> / <u>1</u> / <u>21</u> mm dd yy	M Health Fairview Southdale
Other		____/____/____ mm dd yy	
Other		____/____/____ mm dd yy	

On the enclosed USB drive, you find **video recorded on 9 February 2021** which documents the agony that a *now-former* Medical Assistant, Mrs. Jummai Nache, endured at home after Subject 4 defendants, M Health Fairview Southdale Hospital, injected her with their second Pfizer needle.

Please view the following photos in-comparison to those on Pages 3 and 4 above!

**Civil Liability Case Definition – con't**



Three days later, 13 February 2021, after Philip recorded the video, with his wife's heart near total failure; she is rushed to intensive care, University of Minnesota Medical Hospital. Near death, U of Minn declares that only way to save her is by use of an artificial ventilator.

**With severe blood clots on 21 June 2021, both of Mrs. Nache's legs are amputated.**

With ongoing severe blood clot damage, on 20 July 2021, Mrs. Nache's former employer, the one that mandated the Pfizer needle, now amputates her left hand entirely, and most of the fingers on her right hand.



**Civil Liability Case Definition – Conclusion**

Prior to the Pfizer needles, Mrs. Nache was a Medical Assistant, employed at the University of Minnesota Physicians Group. **She was perfectly healthy, and had a long history of no respiratory or cardiovascular problems!** Prior to the *first* needle, U of Minn refused to administer a so-called COVID test (?!). This timeline is an excerpt from my earlier letter to Judge David N. Hurd, United States District Court, Northern District of New York:

US FDA hurriedly approves EUA in behalf of Pfizer-BioNTech. Marketing of the mRNA gene technology a “vaccine” commences. Former FDA head Mr. Scott Gottlieb is already installed on the Pfizer Board of Directors.	December 11 2020
First Pfizer mRNA needle mandated upon Mrs. Nache.	January 13 2021
Adverse reaction to Pfizer needle commences immediately; COVID symptoms restricted to blood clot induced “COVID toes.” Prior to first needle <i>no</i> health issues.	January 16, 2021
Second Pfizer mRNA needle.	February 1 2021
No respiratory symptoms, chest pain commences immediately, she cannot work.	February 2 2021
No respiratory symptoms, chest pain and heart palpitations severe, she is rushed to Urgent Care. Now, <b>after two needles</b> , COVID test hurriedly administered (?!).	February 6 2021
COVID test from February 6 asserted/recorded as positive; CTV obscured (?!).	February 7 2021
Heart deterioration critical; admitted to Fairview Emergency Room.	February 11 2021
Heart and <i>now</i> respiratory function near total failure; transferred to intensive care at University of Minnesota Medical Hospital.	February 13 2021
Near death, U of Minn declares only way to save life is use of ventilator.	February 14 2021
<b>Memo 1: IMPORTANT - We are now beyond a ‘14 day window’ since receiving second Pfizer mRNA needle.</b> This arbitrary 14-day-window is a CDC fraud (Please see Page 12 of Judge Hurd letter).	
U of Minn retests for COVID, continues to assert/record as positive; no CTV offered.	February 16 2021
Prior to Pfizer needles, never hospitalized. “A model of health.” <b>But after 14-day-window</b> U of Minn issues <b>an all new seven item diagnosis:</b> 1. Arterial blood clot 2. Respiratory distress 3. Cardiomyopathy 4. Anemia 5. Ischemia 6. Multiple Inflammatory Syndrome 7. Severe blood clot related damage to both legs, both hands, all fingers.	March 2021
<b>Without doing in-person exam</b> , Rochelle Walensky/CDC send letter asserting that her 1 – 7 diagnostic catastrophe is “un-related” to Pfizer mRNA needle.	March 31 2021
Her health destroyed, Mrs. Nache now living in continuous agony.	April May June 2021
Both legs amputated due to Item 7, severe blood clot induced damage.	June 21 2021
Left hand, fingers right hand amputated due to Item 7, severe blood clot damage.	July 20 2021
<b>Memo 2:</b> Final condition of Mrs. Jummai Nache, a former medical assistant, pictured on Page 6 above.	

**It is obvious why the COVID test was delayed until after the 14-day-window. Claims that the photos on Page 6 are “un-related” to the needles from Subject 1 defendants, and that there is no evidence of willful misconduct, is provably absurd, and at many levels.**

### Criminal Case Definition : SARS-CoV-2 and the 'Spike Protein'

If you humor Subject 1 and Subject 2 defendants (and their support/conspiratorial colleagues), they would convince you that a Chinese bat made its way to a fish market, and delivered an all-new 'Spike Protein' virus that no mechanism of Nature has ever managed to create.

To grasp their inveracity, we return to 2003/4. This was when the first coronavirus, SARS-CoV-1, was marketed to the global population. To cash-in, a "*pathological liar*" named Anthony Fauci attempted to secure a patent on what he intended to market as a "vaccine."<sup>1</sup>

The underlying theme/approach to Fauci's patent application? **mRNA**. The response from the United States Patent and Trademarks Office (USPTO) to his application? A screenshot from 2003:

Application/Control Number: 09/869,003 Page 5  
Art Unit: 1648

These arguments are persuasive to the extent that an antigenic peptide stimulates an immune response that may produce antibodies that bind to a specific peptide or protein but is not persuasive in regards to a vaccine. The immune response produced by a vaccine must be more than merely some immune response but must be protective. As noted in the previous Office Action, the art recognizes the term "vaccine" to be a compound which prevents infection. Applicant has not demonstrated that the instantly claimed vaccine meets even the lower standard set forth in the specification, let alone the standard art definition, for being operative in this regards. Therefore, claims 5, 7, and 9 are not operative as an anti-HIV-1 vaccine and therefore lack patentable utility.

It is no surprise that the CDC was recently compelled to re-write the 'standard art definition' for the term 'vaccine' . . . versus its first use and meaning, deployed by Edward Jenner . . . in 1802!<sup>2</sup>

<sup>1</sup> The descriptor "*pathological liar*" is quoted from a public interview of 7 August 2021 by Cornell University Professor of Chemistry and Chemical Biology, Dr. David B. Collum.

<sup>2</sup> This fraudulent conspiratorial behavior is consistent with the ongoing behavior of the "pathological liar," and now his vile attempts before Senator Rand Paul to re-define the term 'Gain of Function.'

**Criminal Case Definition : SARS-CoV-2 and the Spike Protein – con't**

On 14 January 2004, the Department of Health and Human Services' (HHS), Centers for Disease Control (CDC), finalized their webpage, "Severe Acute Respiratory Syndrome (SARS)." That page introduces the original 2003 SARS as follows:

**"Severe acute respiratory syndrome (SARS) is a viral respiratory illness caused by a coronavirus, called SARS-associated coronavirus (SARS-CoV)."**

As the acronym declares, SARS is a respiratory illness. Understandably, nowhere in the 2003/2004 SARS-CoV-1 CDC materials do you find terms such as:

encephalomyelitis  
Guillain-Barré syndrome  
Encephalitis/myelitis/encephalomyelitis/meningoencephalitis/meningitis/encepholopathy  
myocarditis / pericarditis  
Multisystem Inflammatory Syndrome  
acute myocardial infarction  
disseminated intravascular coagulation  
**thromboembolism**

**And nowhere in those SARS-CoV-1 materials do you find the term: *Spike Protein!***



**"There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak."**

Clearly "Candidate H," or President Trump, was never going to be informed of the impossibility that **"*emergence of the novel furin cleavage site*"** was engineered by Chinese bats . . . and the latter's skillful insertion of the spike protein.

**Note A:** The spike protein, *and* its appearance at a gene on chromosome 15 of the CoV strand, is key to understanding (1) **'Gain of Function' crimes** of Fauci and Subject 2 colleagues, (2) vastly increased transmissibility of SARS to humans, and (3) most importantly, broad foreknowledge of the associated adverse events that destroyed the health of Mrs. Nache.

**Criminal Case Definition : SARS-CoV-2 and the Spike Protein – CONCLUSION**

The following internal FDA presentation, which was shared with Subject 1 defendants, et al., pre-dates the FDA EUA by only six weeks:



# CBER Plans for Monitoring COVID-19 Vaccine Safety and Effectiveness

Steve Anderson, PhD, MPP  
Director, Office of Biostatistics & Epidemiology, CBER

VRBPAC Meeting  
October 22, 2020

## FDA Safety Surveillance of COVID-19 Vaccines : DRAFT Working list of possible adverse event outcomes \*\*\*Subject to change\*\*\*

- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis/  
meningoencephalitis/meningitis/  
encephalopathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease
- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome  
in Children
- Vaccine enhanced disease

**Criminal Case Definition – Part 2 :****Foreknowledge of the Dire Health Events as Derived from the Underlying Strategy of ‘Gain of Function’ and its Cleavage Site Insertion of the Spike Protein**

Several Freedom of Information (FOIA) demands were successful in the releasing of some Fauci, NIAID and NIH email files.

It was not Chinese bats, fluttering around a fish market, that were sending urgent emails to Fauci in early 2020 regarding the COVID-19 pandemic, and the SARS-CoV-2 virus. One ‘Dear Tony’ astutely declared, ***“It looks engineered!”***

With a similar assessment, on Friday February 21, 2020, fellow Cornell University graduate, Dr. Michael Jacobs, sent an urgent *“more sticky”* email to Fauci:

i am a cornell medical school cumc (b) (6) graduate. i am associate professor of dermatology at weill-cornell in private practice. (b) (6)  
alexander tarakhovskiy is (b) (6) and a professor at rockefeller university. he is a virologist.

we have been following the corona virus pandemic closely, and a few days ago became alarmed at the news that the chinese government is sterilizing their paper money from hubei province.

we think that there is a possibility that the virus was released from a lab in wuhan, the biotech area of china. we also think that the virus might be complexed with another organism, such as a yeast or fungus, to make it more sticky.

A few months later, on 21 July 2020 I sent a 37-page letter to Fauci requesting answers to a series of ten questions. My first question was specific, but purposely eliminated wiggle-room:

During the US GOF moratorium, the total amount of US taxpayer funds that were deployed to the Wuhan Laboratory of Virology in China is TBD. One media report stated:

“In 2014, the NIH approved a grant to EcoHealth Alliance designated for research into ‘Understanding the Risk of Bat Coronavirus Emergence.’ The project involved collaborating with researchers at the Wuhan Institute of Virology to study coronaviruses in bats and the risk of potential transfer to humans.”

**QUESTION 1**

Is the essence of these media reports true; that while employed by the US taxpayer you were directly (or indirectly) connectable to the funding of research or the funding of a research facility that is connectable to the SARS-CoV-2 virus and the resulting COVID-19 pandemic?



**Criminal Case Definition : INTERMISSION**

In my letter of 2 July 2021 to Michigan senators Gary Peters and Debbie Stabenow, I requested their assistance with acquisition of Anthony Fauci/NIAID/NIH emails during the relevant timeframe (late 2019 thru mid-2020), and further **that such be unredacted**.

Shortly after the FOIA emails release, after his receipt, and after chairing several Senate COVID hearings (along with Senator Ron Johnson R-WI); none of which advocated proven inexpensive non-vaccine treatments, Senator Peters splashed himself upon social media, such as YouTube.



While standing in front of the Michigan facility of Subject 1 defendants, Senator Peters proclaimed loyalty to his real constituent: Pfizer Corporation:

*"I just got done meeting with President Biden, talking about how we need to make sure we're getting more vaccine out as quickly as possible, and getting into more people's arms."*

*Behind me is the (Michigan) Pfizer manufacturing facility that's making the Pfizer vaccine that's gonna get us through this COVID crisis."*

Compared to the liability immune billions pouring into their true constituent, the two senators feel no responsibility to Michigan constituents/Taxpayers. Despite receipt of my letter, and follow-up telephone calls and voicemails to both their local and Washington offices, neither responded.

**Note B:** The relevant point of this Intermission; my request for unredacted Fauci/NIAID/NIH emails is to obtain further evidence of not only criminal activity, but direct connections between government officials (US and otherwise) and Subject 1 / Subject 2 defendants.

Anyone doubting the veracity of those connections should note that ***all*** of redacted portions of the few emails released deploy United States Department of Justice Code (b)(6) as their basis for the redaction.



**(b)(6)** is the DOJ code indicating that the redacted material, if released, could jeopardize an ongoing criminal investigation . . . see Page 11 sample email above.


**Criminal Case Definition – Part 2 :****Foreknowledge of the Dire Health Events as Derived from the Underlying Strategy of ‘Gain of Function’ and its Cleavage Site Insertion of the Spike Protein – con’t**

In rebuttal to accusations of *ad hocism*, we ask the first Subjects-crucial question:

- In early 2020, was there occurrence, detection and scientific documentation that connects an emerging virus, that **“looks engineered,”** to the listing of vaccine adverse outcomes, later internally discussed at the FDA on October 22, 2020 (Page 10 above)?

To the best of my knowledge, never before in history has a virus, that is relegated by-definition and acronym, to respiratory illnesses, been assigned the additional cause of **thromboembolism !** Specifically, there is no indication in the literature that SARS-CoV-1 ever caused **blood clots . . . disseminated intravascular coagulation . . . stroke . . . extremity amputations !**


But according to Subject 1 and Subject 2 defendants, and Fauci, we are supposed to submit to their notion that such a grotesque extension of disease causation, from a SARS inducing virus, came *naturally* from Chinese bats?!



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Research Paper

### Thromboembolism risk of COVID-19 is high and associated with a higher risk of mortality: A systematic review and meta-analysis

Mahmoud B. Malas<sup>1,\*</sup>, Isaac N. Naazie<sup>1</sup>, Nadin Elsayed, Asma Mathlouthi, Rebecca Marmor, Bryan Clary

*Department of Surgery, University of California San Diego Health System, San Diego, CA 92093, United States*

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ARTICLE INFO	ABSTRACT
<p><i>Article History:</i> Received 18 August 2020 Revised 31 October 2020 Accepted 2 November 2020 Available online 20 November 2020</p>	<p><i>Background:</i> Studies have suggested that there is increased risk of thromboembolism (TE) associated with coronavirus disease 2019 (COVID-19). However, overall arterial and venous TE rates of COVID-19 and effect of TE on COVID-19 mortality is unknown.</p> <p><i>Methods:</i> We did a systematic review and meta-analysis of studies evaluating TE in COVID-19. We searched PubMed, Cochrane, and Embase for studies published up to June 12, 2020. Random effects models were used</p>

The literature of early 2020, connecting the new “SARS virus” to the listing on Page 10 above, **especially thromboembolism**, is overwhelming.

The current definition of **thromboembolism** from the CDC website:

“ . . . a medical condition that occurs when a blood clot forms in a deep vein. These clots usually develop in the lower leg, thigh, or pelvis, but they can also occur in the arm.”

**Criminal Case Definition – Part 2 :**

**Foreknowledge of the Dire Health Events as Derived from the Underlying Strategy of ‘Gain of Function’ and its Cleavage Site Insertion of the Spike Protein – con’t**

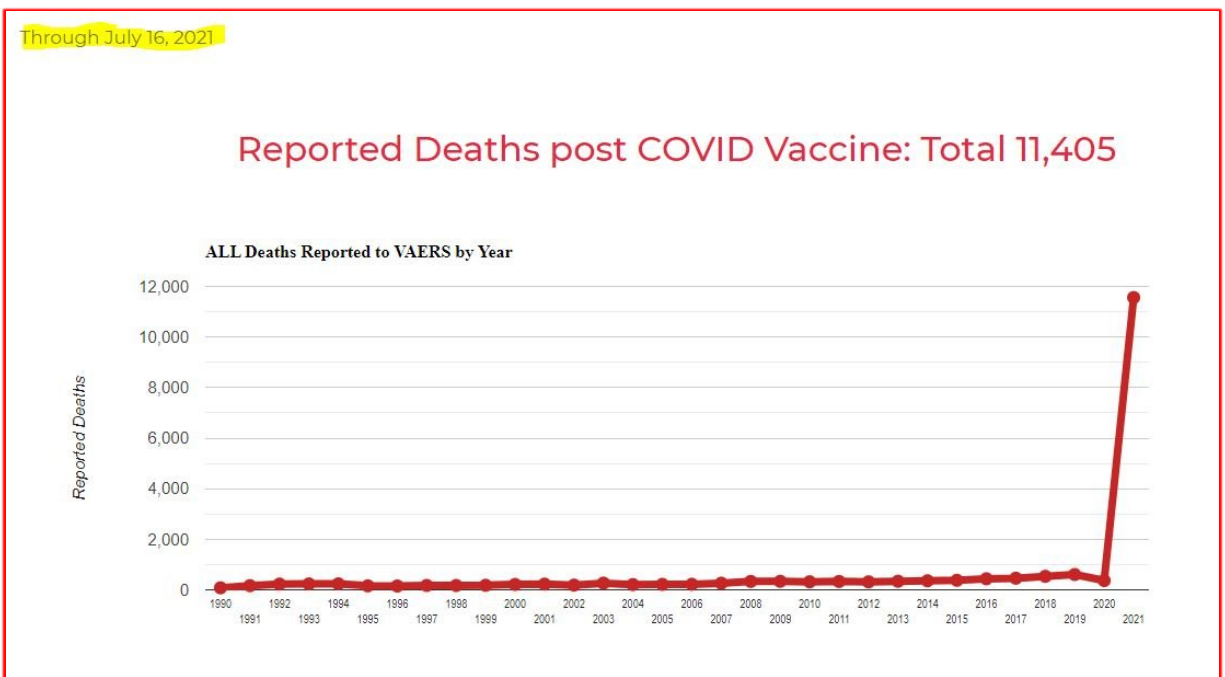
In rebuttal to accusations of *ad hocism*, we now ask a second Subjects-crucial question:

- Since FDA issuance of Emergency Use Authorization (EUA) in behalf of their suitors on 11 December 2020, has occurrence, detection and scientific documentation been issued that directly connects the Pfizer mRNA needle to adverse outcomes, such as those **discussed prior** at the FDA on October 22, 2020 (Page 10 above)?

Never before in history has an alleged remedy for disease caused more injury and death than the Pfizer mRNA needle . . . In my letter of 27 August 2021 to Cornell University President Ms. Martha Pollack (who served Pfizer CEO Mr. Albert Bourla on the New York Forward Reopening Advisory Board), who had mandated the Pfizer mRNA needle for all students and staff, I declared:



**“Your so-called ‘approved vaccines,’ that you have injected into the arms of unsuspecting but coerced Cornell students and staff, has killed and horribly maimed more human beings in the first six months of deployment than all vaccines combined during the previous twenty years!”**



**Criminal Case Definition – Part 2 :****Foreknowledge of the Dire Health Events as Derived from the Underlying Strategy of ‘Gain of Function’ and its Cleavage Site Insertion of the Spike Protein – con’t**

Answering the second Subjects-crucial question; does the literature connect the Pfizer mRNA needle to adverse outcomes, the adverse vaccine outcomes that were discussed *prior* by everyone from Fauci, to the FDA, to EcoHealth, to Pfizer to Cornell University?

**The answer is a resounding ‘Yes!’ But the recent literature now connects all issues germane to the Nache Family plaintiffs:**

**The creation of SARS-CoV-2 and its utterly unnatural spike protein,**

**Thromboembolism and its causation, the spike protein,**

**The so-called “COVID vaccine” (i.e. the Pfizer mRNA needle), and the fact that it is characterized fully, in its clinical role, to “*induce endogenous production of Spike*” !**

**Abstract**

Since the start of the COVID-19 outbreak, the race for testing new platforms designed to confer immunity against SARS-CoV-2, has been rampant and unprecedented, leading to conditional emergency authorization of various vaccines. Despite progress on early multidrug therapy for COVID-19 patients, the current mandate is to immunize the world population as quickly as possible. The lack of thorough testing in animals prior to clinical trials, and authorization based on safety data generated during trials that lasted less than 3.5 months, raise questions regarding vaccine safety. The recently identified role of SARS-CoV-2 Spike glycoprotein for inducing endothelial damage characteristic of COVID-19, even in absence of infection, is extremely relevant given that most of the authorized vaccines induce endogenous production of Spike. Given the high rate of occurrence of adverse effects that have been reported to date, as well as the potential for vaccine-driven disease enhancement, Th2-immunopathology, autoimmunity, and immune evasion, there is a need for a better understanding of the benefits and risks of mass vaccination, particularly in groups excluded from clinical trials. Despite calls for caution, the risks of SARS-CoV-2 vaccination have been minimized or ignored by health organizations and government authorities. As for any investigational biomedical program, data safety monitoring boards (DSMB) and event adjudication committees (EAC), should be enacting risk mitigation. If DSMBs and EACs do not do so, we will call for a pause in mass vaccination. If DSMBs and EACs do not exist, then vaccination should be halted immediately, in particular for demographic groups at highest risk of vaccine-associated death or serious adverse effects, during such time as it takes to assemble these boards and commence critical and independent assessments. We urge for pluralistic dialogue in the context of health policies, emphasizing critical questions that require urgent answers, particularly if we wish to avoid a global erosion of public confidence in science and public health.

On the enclosed USB you will find the file:

‘SPIKE---SARS-CoV-2\_mass-vaccination-Urgent-questions-vaccine-safety-24may2021’

which shows that the above excerpt is from a submission authored by hundreds of practicing medical doctors worldwide.

**Criminal Case Definition – Part 2 :**

**Foreknowledge of the Dire Health Events as Derived from the Underlying Strategy of ‘Gain of Function’ and its Cleavage Site Insertion of the Spike Protein – CONCLUSION**

Regarding *ad hocism*, hiding what was known and when; that domain belongs to vested interests:

**nature**

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NEWS FEATURE | 24 August 2021

## COVID vaccines and blood clots: what researchers know so far

Scientists are trying to understand why a small number of people develop a mysterious clotting disorder after receiving a COVID jab.



“Somebody knew something in 2015 and 2016 which gave rise to my favorite quote of this entire pandemic. And by that, I am not being cute. My favorite quote of this pandemic was a statement made in 2015 by Peter Daszak. The statement that was made by Peter Daszak, reported in the National Academy of Press Publications in February 12, 2016; and I am quoting,

**‘We need to increase public understanding of the need for medical countermeasures such as a pan-corona-virus vaccine. A key driver is the media, and the economics will follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profits at the end of the process.’”**

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LIFE & ARTS | IDEAS | THE SATURDAY ESSAY

### Bill Gates: The Best Investment I’ve Ever Made

Global health groups that buy and distribute medicines are a sure bet for saving lives, but their government funding is now in danger, and even the biggest philanthropies can’t fill the gap

By [Bill Gates](#)  
Jan. 16, 2019 7:01 pm ET

**Criminal Case Definition – Part 3 : “Blow it up!”**

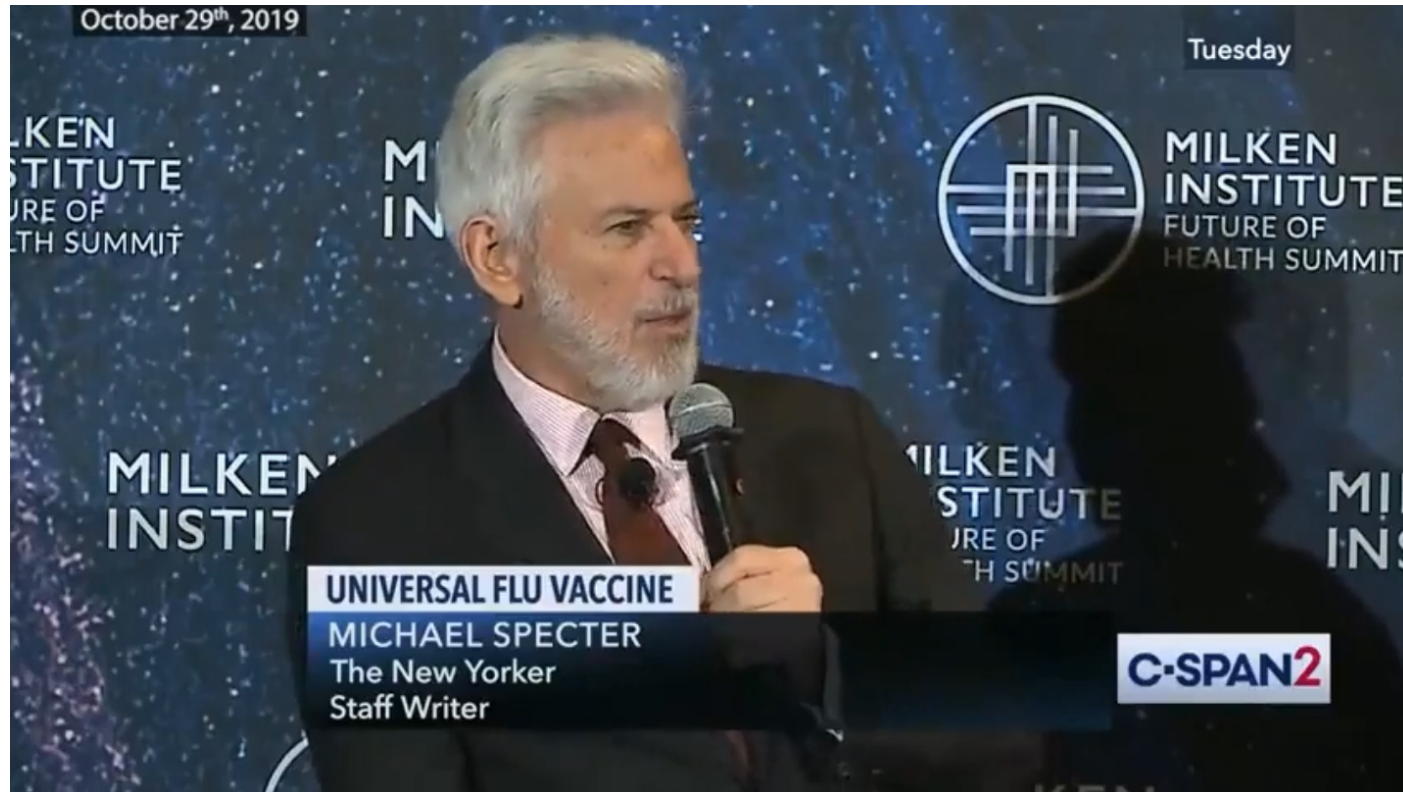
As active promoters and participants in the ‘Gain of Function’ research at the Wuhan Laboratory of Virology, Anthony Fauci and Subject 2 defendants were fully aware of the strategic purpose of that research:

- Later-named SARS-CoV-2, a virus that was manipulated to deploy a Spike Protein, was intentionally released to justify an Emergency Use Authorization, for a patented mRNA needle, protected from product liability, that would enjoy BILLIONS in profits for Subject 1 defendants (constituents of a Michigan senator).<sup>3</sup>

In Item 2 on Page 3 above I stated, **“The so-called ‘COVID-19 vaccine’ is not in response to the SARS-CoV-2 virus; but the exact opposite!”**

But to further comprehend the veracity of that reverse ordering statement, we must review the farcical ‘Future of Health Summit,’ by the vested-interest Milken Institute, of October 29, 2019. A summit that was staged a few weeks before paid Chinese actors were filmed “collapsing” in the streets due to a virus that was engineered by Chinese bats.

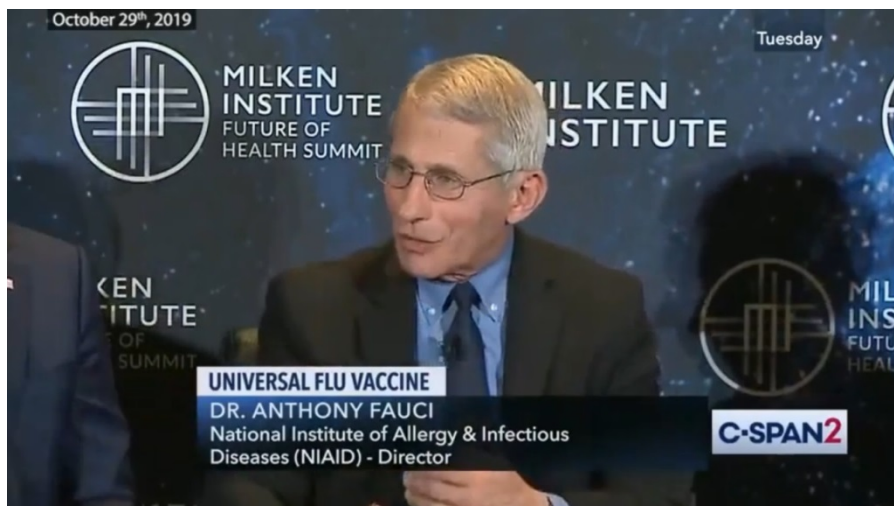
This summit was hosted by close friend and “global warming” colleague to Cornell University President Ms. Martha Pollack, Mr. Michael “*blow it up*” Specter:



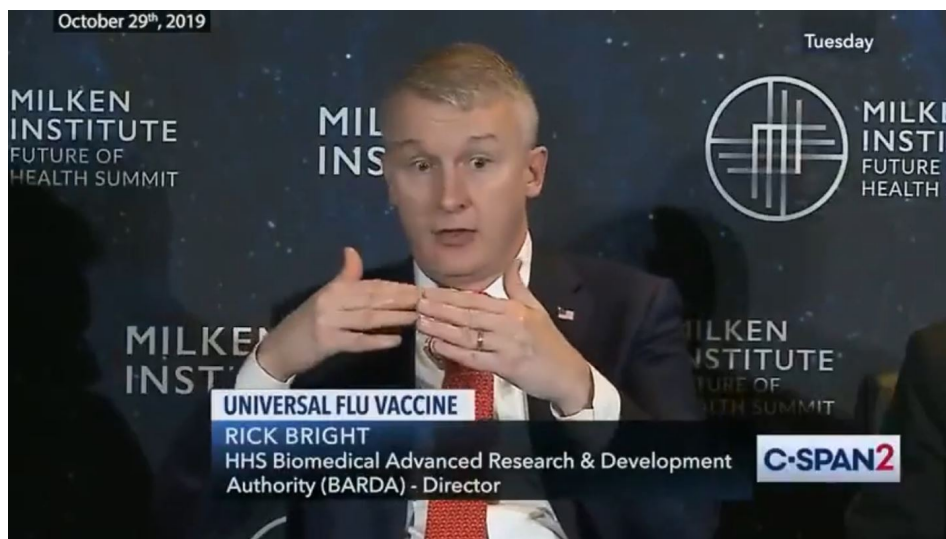
<sup>3</sup> To quell any doubts about the veracity of this assertion, please review the picture and re-read Peter Daszak quote from Page 16 above. The Michigan senator is discussed on Page 12 above.

**Criminal Case Definition – Part 3 : “Blow it up!” – CONCLUSION**

A regular attendee at the Milken Institute, this “health” summit featured “America’s Doctor” :



Another luminary (?) featured on stage was HHS Director Rick Bright, who stated:



“There might be a need, or even an urgent call for an entity of excitement out there, that’s completely disruptive, that’s not beholden to bureaucratic strings and processes...But it is not too crazy to think that an outbreak of a novel avian virus could occur in China somewhere . . .”

A few weeks later, in December 2019, the first case of COVID-19 was reported in China. The enclosed USB contains a video of this pre-pandemic summit; the pandemic that three years earlier Fauci referred to as a “surprise outbreak.” <sup>4</sup>

<sup>4</sup> But of no surprise, throughout 2020 a live and repeated guest of the Milken Institute was Subject 1 defendant, **CEO Mr. Albert Bourla**, who promoted “*the likelihood of developing a vaccine by the end of 2020.*” His defective mRNA contraption was deployed by a fraudulent EUA, its defects hiding behind liability immunity . . .

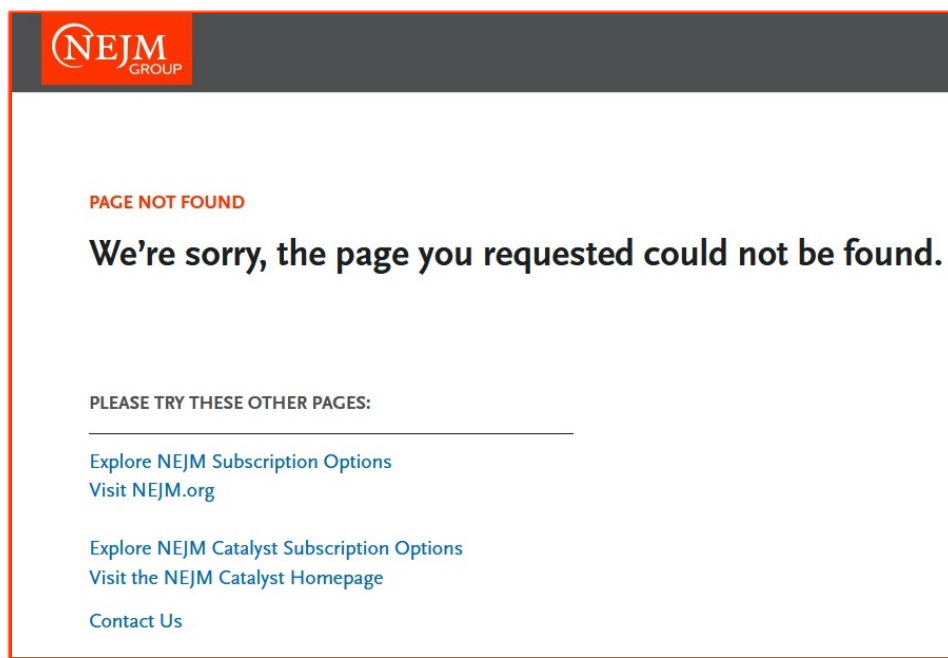
**Criminal Case Definition – Part 4 :****University of Minnesota Aware of Dangers of mRNA Needles,  
Directly and Aggressively Subverted Informed Consent**

On Page 4 above, below the Christmas photo of Mrs. Nache, I discussed crimes committed by Subject 3 defendants. The University of Minnesota, a vested-interest in the Pfizer contraption, splattered themselves with headlines, once again, atop the most infamous of mouthpieces:



This was part of the conspiracy to prevent the public, **or U of Minn employees**, to be informed of low-cost alternative treatments to COVID-19. Absolutely central to the fraudulent FDA Emergency Use Authorization, **and its “no known alternatives” requirement**, the crimes of the Subject 3 defendants relating to the above June 3, 2020 headline were also central to their illegal vaccine mandate, which was later *horribly* inflicted upon Mrs. Nache.

But the University of Minnesota study, that attempted to debunk the therapeutic success of hydroxychloroquine, was so implicitly flawed, that the New England Journal of Medicine (NEJM) was forced to retract it:



Obviously, there was no follow-up headline from the Washington Post announcing the NEJM retraction. In my first COVID letter to him, written on 21 July 2020, I go into great detail on the exact same conspiratorial crimes committed by “America’s Doctor.”



**Criminal Case Definition – Part 5 : Underbelly of COVID-19 – Gain of Function Research**

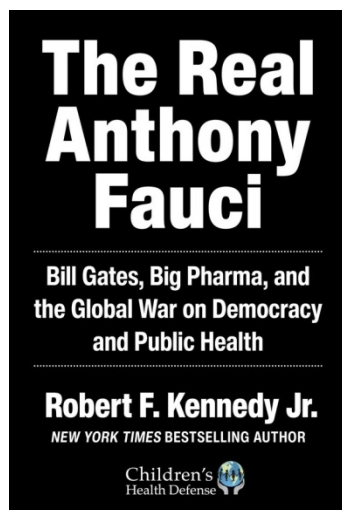
With great fervor, “America’s Doctor” has protested his innocence with respect to the Gain of Function (GOF) research that resulted in the SARS-CoV-2 spike protein enhanced virus; the underbelly of the entire COVID-19 horror show. Fauci’s protestations, especially before Senator Rand Paul, amount to adolescent nonsense.

Expert witnesses of great value to establishing the crimes (i.e. willful misconduct) **of all four Subject defendants**; expertise which in-turn **obliterates** any notion that “liability immunity” remains viable, are Dr. David Martin and Dr. Reiner Füllmich:



On Page 15 of my 27 August 2021 letter to Cornell University’s Ms. Martha Pollack and NIAID’s Mr. Anthony Fauci, I discuss the July 2021 meeting of The Coronavirus Investigation Committee. In the ‘Public Videos’ file of the enclosed USB you will find a copy of that testimonial record.

In addition to these two globally recognized experts, the enclosed complimentary copy, recently released on 16 November 2021, the Robert F. Kennedy book, **THE REAL ANTHONY FAUCI**, lists hundreds of potential witnesses in the ‘Dedications & Acknowledgements’ section.



His adolescent protestations? Enclosed USB lists ‘Fauci: GOF Defunding Notice,’ which contains 75 pages of letters written by the NIH/NIAID ending their US-based Gain of Function research.

## **Conclusion and Formal Request**

The evidence of “willful misconduct” already in the public domain is overwhelming:

### **Liability Immunity and Compensation**

In general, the liability immunity applies to entities and individuals involved in the development, manufacture, testing, distribution, administration, and use of medical countermeasures described in a Declaration. The only statutory exception to this immunity is for actions or failures to act that constitute willful misconduct.

In their medical report on Mrs. Jummai Nache of 21 May 2021, on Page 183, Dr. Andrew Boucher of the University of Minnesota Medical Center claims:

“Assessment:

Jummai P Nache is a 50 year old female patient who is following up after a prolonged admission and continued rehab after MIS-A. Her clinical course has left her with life-changing physical disfigurement which is almost certainly going to need amputation.

Most of our visit was spent again discussing the potential role of the vaccine in this process. Dr. Fontana shared the letter from the CDC stating that this was MIS-A without clear involvement from the vaccine, though it can't (and likely never will be) excluded as contributing to some extent. Since the last visit, and separate from the laboratory evidence discussed with the CDC, I did have the PF4 antibody testing done on a blood sample saved from around the same day as her arterial thrombotic events. This testing was negative. Thrombotic Thrombocytopenic Syndrome (TTS, previously termed VITT as mentioned in my previous note) is the syndrome linked to the infrequent CSVT and other thrombotic events linked to Johnson and Johnson vaccines.”

Diverting to a needle that Mrs. Nache was **not** injected with was no accident; Dr. Boucher was fully aware that the mRNA needle, twice-inflicted upon her, was from Pfizer Corporation.

### **Formal Request**

Your website states that you offer both personal injury and criminal litigation counseling. You also state that you offer (free) case consultations. Please know that I am just one of a very large group of dedicated people that are investigating, relentlessly, the true reasons for the death and harm caused by the Reference. We formally seek your assistance with the four Subjects.

Please feel free to contact me or the Nache Family at any time.

Respectfully yours

Paul V. Sheridan

Attachment/enclosures

**Contact Information for Plaintiff, the Nache Family**

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Minneapolis, MN 55403  
502-379-5428

philnache@streamofnations.com (preferred)

philnache@yahoo.com

**Hard Copy Attachments Listing**

- a. Letter from Paul V. Sheridan to Judge David N. Hurd – 21 September 2021 (includes 1 – 5 Tabs)
- b. Cover Note and Judge Hurd Ruling of 12 October 2021
- c. Letter from Paul V. Sheridan to Senator Gary Peters and Senator Debbie Stabenow of 2 July 2021 (no response)
- d. The Fauci-COVID Dossier authored/assembled by Dr. David E. Martin (abridged version, complete version on USB Drive)

**USB Drive**

Various text and video files as discussed in cover letter

**Book**

*THE REAL ANTHONY FAUCI* by Robert F. Kennedy Jr.

# ATTACHMENT 2

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation,  
and complete Disconnection from Any Prior Accolades/Activities  
Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of July 21, 2020 to Dr. Anthony Fauci

40 Pages



July 29, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 128318100005333

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	
<b>Signed for by:</b>	KBRANCH	<b>Delivery Location:</b>	
<b>Service type:</b>	FedEx Ground		Bethesda, MD,
<b>Special Handling:</b>		<b>Delivery date:</b>	Jul 29, 2020 14:05

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**Shipping Information:**

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<b>Tracking number:</b>	128318100005333	<b>Ship Date:</b>	Jul 22, 2020
		<b>Weight:</b>	0.3 LB/0.14 KG

**Recipient:**

Dr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301- 496 - 5717

**Shipper:**

SHERIDAN PAUL V  
22357 Columbia Street  
DEARBORN, MI, US,  
313-277-5095

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July 22, 2020

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<b>Signed for by:</b>	A. SWANN	<b>Delivery Location:</b>	1501 ECKINGTON PLACE NORTHEAST
<b>Service type:</b>	FedEx Standard Overnight		WASHINGTON, DC, 20002
<b>Special Handling:</b>	Deliver Weekday	<b>Delivery date:</b>	Jul 22, 2020 10:11

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**Shipping Information:**

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<b>Tracking number:</b>	395029515508	<b>Ship Date:</b>	Jul 21, 2020
		<b>Weight:</b>	2.0 LB/0.91 KG

**Recipient:**

pres donald trump, the white house  
1600 pennsylvania, nw  
The White House, DC, US, 20500

**Shipper:**

paul sheridan,  
22357 COLUMBIA ST  
DEARBORN, MI, US, 48124

Signature Proof of Delivery is not currently available for this Tracking Number. Availability of signature images may take up to 5 days after delivery date. Please try later, or contact Customer Service at 1.800.Go.FedEx(R) 800.463.3339.

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July 25, 2020

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**Delivery Information:**

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<b>Signed for by:</b>	Signature on File	<b>Delivery Location:</b>	DAY HALL
<b>Service type:</b>	FedEx Ground		Ithaca, NY, 14853
<b>Special Handling:</b>		<b>Delivery date:</b>	Jul 24, 2020 12:21

---

**Shipping Information:**

---

<b>Tracking number:</b>	128318100005364	<b>Ship Date:</b>	Jul 22, 2020
		<b>Weight:</b>	1.3 LB/0.59 KG

**Recipient:**

President Martha E. Pollack  
Cornell University  
300 Day Hall  
Ithaca, NY 14853  
607-255-5201

**Shipper:**

SHERIDAN, PAUL V  
22357 COLUMBIA ST  
DEARBORN, MI, US, 481243431

Proof-of-delivery details appear below; however, no signature is available for this FedEx Ground shipment because a signature was not required.

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22357 Columbia Street  
Dearborn, MI 48124-3431  
313-277-5095  
pvs6@cornell.edu

21 July 2020

VIA FEDEX GROUND-BILL 1283181-00005333

Dr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301- 496 - 5717

**Subject: Your Official Response to SARS-CoV-2 / COVID-19 Related Questions \***

Dear Dr. Fauci:

In the 10 July 2020 edition of the Financial Times you made claims about your reputation:

“ I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven't been on television very much lately.”

The subject offers you the opportunity to further assert your *“reputation ... for speaking the truth at all times,”* and may fulfill your desire to be on television.

Indeed, in a letter to President Trump of 12 April 2020, I used the following as an introduction; a speech covered by CSPAN television (screenshot from letter)



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2017.)

Your ability regarding future events is astounding. Relying upon your expertise and your statement to the Financial Times, I have assembled COVID-19 related questions for your official response.

\* An e-version of this letter is available at: <http://pvsheridan.com/sheridan2fauci-1-21july2020.pdf>



**Discussion**

As a courtesy, my alma mater, Cornell University, will receive a copy of this material.

Copies will be forwarded to medical doctors, health practitioners, professional nursing organizations, and hospital administrators.

Both US (state and federal) and non-US government officials. Owing to your desire to be on television, the media will also receive courtesy copies.

**Questions / Requests Listing**

Funding Research at the Wuhan Laboratory of Virology (China)	Page 3
Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine	Pages 4 - 8
Censorship-of Promising COVID-19 Treatments – Nebulized Budesonide	Page 9
SARS-CoV-2 Tests, “Confirmed COVID-19 Cases” And the So-Called “Second Wave”	Page 10 - 11
The Lack-of-Efficacy and Well-Known Dangers of Socialized/Mandated PPEs : The Tyranny of “Virtue Signaling”	Pages 12 - 16
Enforced Nationwide Falsification of the ‘Cause of Death’ (COD) on Death Certificates, and the Deafening Silence of Dr. Anthony S. Fauci	Pages 17 - 19
Enforced Nationwide Falsification of the COVID-19 “Confirmed Cases,” and the Premeditated Promotions of Dr. Anthony S. Fauci	Pages 20 - 23
Horrific Avoidable Deaths of Elders in Nursing Homes, and the Deafening Silence of Dr. Anthony S. Fauci	Pages 24 - 25
YouTube Censorship, Google Search Limitations/Manipulations, and Verily (Project Dragon)	Pages 26 - 27
Forced Vaccinations: <b>The Government Has the Right to “Plunge a Needle Into Your Arm”</b>	Page 28
Koyaanisqatsi : <b>“You Have No Right Not To Be Vaccinated”</b>	Pages 29 - 32
Speculations	Page 33
Conclusions	Pages 34 - 35
Courtesy Copy List	Page 36

### Funding Research at the Wuhan Laboratory of Virology (China)

It has been widely reported that GOF research was considered so dangerous to the well-being of life on Planet Earth, that moratoriums were enacted by numerous national governments, and criminalized any activity that directly or indirectly engaged in such.

During the time that you reported to President Barack Obama, a GOF moratorium was in-effect in the USA. You and President Obama were fully aware of the dangers of GOF viruses. Next, you and he touring the Vaccine Research Center at NIH:



During the US GOF moratorium, the total amount of US taxpayer funds that were deployed to the Wuhan Laboratory of Virology in China is TBD. One media report stated:

“In 2014, the NIH approved a grant to EcoHealth Alliance designated for research into ‘Understanding the Risk of Bat Coronavirus Emergence.’ The project involved collaborating with researchers at the Wuhan Institute of Virology to study coronaviruses in bats and the risk of potential transfer to humans.”

#### QUESTION 1

Is the essence of these media reports true; that while employed by the US taxpayer you were directly (or indirectly) connectable to the funding of research or the funding of a research facility that is connectable to the SARS-CoV-2 virus and the resulting COVID-19 pandemic?

### **Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine**

As you are fully aware, the World Health Organization (WHO) has been actively involved in the censorship of information regarding the use of hydroxychloroquine-based treatment of patients that are alleged to be infected with the SARS-CoV-2. A platform; and there are many, where this censorship has occurred involves Ms. Susan Wojcicki and YouTube:



A very small sampling of three of the most dedicated and experienced medical doctors that have been subjected to this censorship abuse next.

Two of the most dedicated and trusted medical doctors, **whose YouTube video had received nearly 6 million views prior to being censored by Ms. Wojcicki**: Dr. Dan Erickson and Dr. Artin Massihi of Accelerated Medical Care in California. An important portion of their video involved hydroxychloroquine-based treatment of patients:



A doctor in our birth state (New York) was also censored by Ms. Wojcicki, but his interview content was later resurrected by President Donald Trump's personal attorney, Mr. Rudy Giuliani. Contrary to the absurd misinformation campaign and ongoing scare-tactics by the Washington Post, et al., Dr. Vladimir Zelenko has had a 99.7% survival rate using hydroxychloroquine-based treatment of patients . . . **and he has had zero heart-related "side effects."**



There are many, many, many more tragic examples that we could present.

In stark contrast, you gave a highly motivated interview with Politico regarding your pre-conceived notions against the use of hydroxychloroquine. Your basis was the May 22, 2020 report by the pro-vaccine company Surgisphere. The report appeared in Lancet, and was authored by doctors that promote global vaccination; Mandeep Mehra, Sapan Desai, Frank Ruschitzka, and Amit Patel.

## Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis



Mandeep R Mehra, Sapan S Desai, Frank Ruschitzka, Amit N Patel

### Summary

**Background** Hydroxychloroquine or chloroquine, often in combination with a second-generation macrolide, are being widely used for treatment of COVID-19, despite no conclusive evidence of their benefit. Although generally safe when used for approved indications such as autoimmune disease or malaria, the safety and benefit of these treatment regimens are poorly evaluated in COVID-19.

**Methods** We did a multinational registry analysis of the use of hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19. The registry comprised data from 671 hospitals in six continents. We included patients hospitalised between Dec 20, 2019, and April 14, 2020, with a positive laboratory finding for SARS-CoV-2. Patients who received one of the treatments of interest within 48 h of diagnosis were included in one of four treatment groups (chloroquine alone, chloroquine with a macrolide, hydroxychloroquine alone, or hydroxychloroquine with a macrolide), and patients who received none of these treatments formed the control group. Patients for whom one of the treatments of interest was initiated more than 48 h after diagnosis or while they were on mechanical ventilation, as well as patients who received remdesivir, were excluded. The main outcomes of interest were in-hospital mortality and the occurrence of de-novo ventricular arrhythmias (including sustained or non-sustained ventricular tachycardia or ventricular fibrillation).

**Findings** 96 032 patients (mean age 53·8 years, 46·3% women) with COVID-19 were hospitalised during the study period and met the inclusion criteria. Of these, 18 688 patients were in the treatment groups (1868 received chloroquine, 3783 received chloroquine with a macrolide, 3016 received hydroxychloroquine, and 6221 received hydroxychloroquine with a macrolide) and 77 344 patients were in the control group. 10 698 (11·1%) patients died in hospital. After controlling for multiple confounding factors (eg, sex, race or ethnicity, body-mass index, underlying cardiovascular disease and its risk factors, diabetes, underlying lung disease, smoking, immunosuppressed condition, and baseline disease severity), when compared with mortality in the control group (9·3%), hydroxychloroquine (18·0%; hazard ratio 1·335, 95% CI 1·223–1·457), hydroxychloroquine with a macrolide (23·8%; 1·447, 1·368–1·531), chloroquine (16·4%; 1·365, 1·218–1·531), and chloroquine with a macrolide (22·2%; 1·368, 1·273–1·469) were each independently associated with an increased risk of in-hospital mortality. Compared with the control group (0·3%), hydroxychloroquine (6·1%; 2·365, 1·935–2·900), hydroxychloroquine with a macrolide (8·1%; 5·106, 4·106–5·983), chloroquine (4·3%; 1·751, 1·210–4·596), and chloroquine with a macrolide (6·5%; 4·011, 3·344–4·812) were independently associated with an increased risk of de-novo ventricular arrhythmia during hospitalisation.

**Interpretation** We were unable to confirm a benefit of hydroxychloroquine or chloroquine, when used alone or with a macrolide, on in-hospital outcomes for COVID-19. Each of these drug regimens was associated with decreased in-hospital mortality but with an increased frequency of ventricular arrhythmias when used for treatment of COVID-19.

**Funding** William Grey Distinguished Chair in Advanced Cardiovascular Medicine at Brigham and Women's Hospital.

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This online publication has been corrected. The corrected version first appeared at [thelancet.com](http://thelancet.com) on May 29, 2020

See Online/Comment  
[https://doi.org/10.1016/S0140-6736\(20\)31174-0](https://doi.org/10.1016/S0140-6736(20)31174-0)

Brigham and Women's Hospital  
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University Heart Center,  
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As you are aware, Lancet, Surgisphere, and WHO are vested-interests in the deployment of vaccines in-general, especially with respect to SARS-CoV-2. An amateurish anti-Trump Washington Post headline hurriedly blared with gala, an anti-hydroxychloroquine headline:



But the embarrassing retraction was not caused by “a faulty data set.” It is well-known that Surgisphere actively hid and then refused to release the underlying data sets. Like YouTube/WHO, their “investigation” was a concerted attempt to mislead the world through censorship.

Your May 27 Politico interview occurred **a mere 5 days after the thelancet.com publication of Surgisphere’s “investigation.”**



In that globally distributed interview, contextualized-by and based-upon the Surgisphere “investigation,” you bold-facedly declared:

“I’m not so sure it (hydroxychloroquine), should be banned, but clearly the scientific data is really quite evident now about the lack of efficacy for it, and even the possibility that there could be, not could be but there is, you know, likelihood that under certain circumstances, might be rare but you’d see it, adverse events particularly with regard to cardiovascular and the arrhythmias that might be associated with it (hydroxychloroquine), I mean there was suspicion of that for a while, but as data comes in it becomes more clear. So I’m not so sure that you’d want to ban it, but certainly the data are clear right now.”

But then, without prompting by Politico, you began promoting vaccines:

“ When we first developed a vaccine, I said it would be about a year to a year-an-a-half, and that was in January.<sup>1</sup> So a year from January is December. I still think that we have a good chance, if all the things fall in the right place, that we might have a vaccine that would be deployable by the end of the year, by November or December.”

Substantiated charges of fraud continue to be levied against those behind the retracted Surgisphere “investigation.” The retraction and frenzied global spin occurred on June 4, **a mere 6 business days after you offered yourself to Politico.**

There was no objective investigation; the report you eagerly embraced was nothing more than an anti-Trump, anti-hydroxychloroquine ruse, and by-design an insidious promotion of vaccines.

Because of your Politico/Surgisphere interview, you are now a person “associated with it.” Consistent with the YouTube/WHO agenda, your interview was *not* censored by Ms. Wojcicki.

## QUESTIONS 2

1. Similar to the retraction by Lancet/Surgisphere, do you intend to publically retract any part of your May 27, 2020 interview, **especially with respect to your assertions about “data”?**<sup>2</sup>
2. Do you intend to offer a public apology to your colleagues in the medical profession who had been successfully deploying a hydroxychloroquine treatment, but were further vilified upon your endorsement of the Lancet/Surgisphere “investigation”?
3. Do you intend to alert national governments including but not limited to the US, France, United Kingdom, etc., regarding the fact that **the Surgisphere “investigation” was anything BUT “rigorously done.”**<sup>3</sup> You may also wish to advise WHO regarding the premature cancelation of their Solidarity Trial, etc.
4. Given the general negativity of censorship, especially in regard to global health, and the First Amendment, do you intend to publically denounce the affiliations of WHO and various social media platforms, and the latter’s practice of kneeling to the former regarding platform content?

<sup>1</sup> **January?!** Given how little was known about SARS-CoV-2, due to censorship (by the Wuhan Laboratory and those associated with it), it is astounding that you were already “develop(ing) a vaccine.” In this context please review the screenshot on Page 1 above, and Question 1 above.

<sup>2</sup> Given the lack of data and your unsubstantiated “suspicions,” **versus** the practices of Dr. Vladimir Zelenko, the life-saving experiences of Michigan State Representative Karen Whitsett, and in the interest of quelling this post-GOF-moratorium pandemic; will you reverse your prior claim, re-specifying there is little evidence that hydroxychloroquine, when dispensed properly, a medication that has been in global use since 1955, results in “cardiovascular and the arrhythmias.” Certainly, given the breath of use/patient conditions during these last 65 years, if your “suspicions” were substantive, then data-based confirmation of “cardiovascular and the arrhythmias.” would be overwhelming.

<sup>3</sup> You are not alone in your inaccuracy relative to this Surgisphere fraud. Immediately after its publication the pro-vaccine Washington Post featured the sputum from Professor William Schaffner, a professor of preventive medicine and infectious diseases at Vanderbilt Medical Center, who declared the “investigation” as, “**rigorously done.**” I emailed him inquiring about the basis of that claim, but he refused to respond.

## Censorship of Promising COVID-19 Treatments – Nebulized Budesonide

Given ongoing public outcry, including the 17 June 2020 letter of Texas Senator Ted Cruz to Google CEO Sundar Pichai, against the servility and censorship demands of vested-interests such as WHO, the interview of Dr. Richard Bartlett has not yet been removed from YouTube:



In his interview the good doctor declares that connecting the 65-years of global deployment of hydroxychloroquine to claims of cardiovascular problems is . . . quote . . . **“ridiculous!”**

The interview is focused on the treatment of the COVID-19 induced ‘cytokine storms’ in the lungs. His protocol involves nebulized Budesonide, vitamin supplements and anti-biotics. His success statistics are as good, or better than hydroxychloroquine. Similar to hydroxychloroquine costs, but unlike the billions of taxpayer dollars you have spent and continue to spend on vaccines, Dr. Bartlett’s protocol is available now, and involves approximately \$100.

### QUESTION 3

1. As a public servant who has been criticized globally as being “pro-vaccine,” do you intend, as director of the taxpayer-funded National Institute of Allergy and Infectious Diseases (NIAID), to add the following to its current schedule of COVID-19 Clinical Studies:
  - a. Hydroxychloroquine protocols, such as that deployed by Dr. Vladimir Zelenko, et al. <sup>4</sup>
  - b. The nebulized Budesonide protocol as deployed by Dr. Richard Bartlett, et al.

<sup>4</sup> Similar in purpose to YouTube censorship, most likely on-cue (from WHO/NIH/CDC/NIAID), Governor Gretchen Whitmer (Michigan), sent a threatening letter entitled, “Reminder of Appropriate Prescribing and Dispensing (of hydroxychloroquine).” Dated March 24, 2020, the letter babbles about shortages, allegations, legitimate medical purpose, etc. Her letter threatens targeted groups with “investigated for administrative action.” After being pummeled for the letter, Whitmer essentially retreated to accusations that the electorate lacked reading skills. More of her far-Left threatening behavior is discussed below, “*The Lack-of-Efficacy and Well-Known Dangers of Socialized/Mandated PPEs: The Tyranny of “Virtue Signaling,”*” pages 12 – 16.



## SARS-CoV-2 “Viral Tests,” SARS-CoV-2 “Anti-Body Tests,” “Confirmed COVID-19 Cases” the So-Called “Second Wave” and ZERO PROOF

The precipitous and dangerous erosion of basic human rights, and the accompanying media hype about a concern for “health,” is derived from the alleged validity of the SARS-Cov-2 tests, and related statistics which are promoted as “confirmed COVID-19 cases.”

Through erudition, I am familiar with the Polymerase Chain Reaction (PCR) test developed by **Nobel Prize winner Dr. Kary Mullis**. My interest piqued when he was vilified, by you and others, then and ongoing, for asking simple questions, but making a very relevant and ethical request regarding the alleged connection between HIV and AIDS. The Nobel Prize winner Dr. Mullis :

*“The first time I really questioned it, I was working on a project where we were measuring HIV in people’s blood . . . At some point we needed to re-up our grant from the NIH (National Institute of Health), to work on that, and I had to write it.*

*And so, the first line of that was ‘HIV is the probable cause of AIDS.’ I wrote that, and then I said, well I need a paper, some kind of scientific paper to reference that statement. Because when you make a scientific statement like that, that’s like a fact. You need to say here’s how come I know that . . . here’s a paper by somebody that describes why that statement is true . . . What is that paper, who do I go to for that? . . . How do I know that? . . . It turned out that nobody knew that, there was not a scientific reference, like a paper that someone had submitted, with experimental data in it, and a logical discussion, and said, ‘Here is how come we know that HIV is the probable cause of AIDS.’ There was nothing out there like that. Nothing!”*

You assumed your current career position in 1984, and had personally met with Dr. Mullis. **You were central to the HIV = AIDS hypothesis.**

As you are aware, upon his death last August 2019, the global censoring of Dr. Mullis’ work in this area has already begun **with vigor!** This historical/ongoing behavior amongst the so-called medical community is familiar to you.

To the best of my knowledge, you were unable to offer Dr. Mullis the reference he sought. I would be happy to receive an update from you on that specific point.



The two main “COVID-19 tests” currently deployed are based on PCR/Antigen (“viral test”), and the antibody test (Serology). We review the validity/efficacy of those tests next.

(1) Dr. Andrew Kaufman explains that the DNA sequence of the chimpanzee accumulates a full 97% of the human DNA. A crucial 3% difference determines the expression of the life form.

Samples in PCR ("viral test") are impure and originate from multiple bodily and external sources. PCR involves "amplification," where mere fragments of DNA/RNA are replicated/repared. In the COVID-19 protocol, even after amplification, **PCR can only detect 80% of the targeted RNA sequence.** It is off by 20%, not 3%. We would never declare that chimpanzee DNA is "close enough," and such is therefore confirmation of a human. Yet these percentages have been promoted as confirming the presence of SARS-CoV-2.

**That is Dr. Fauci, at no time during this pandemic has the PCR test detected the SARS-CoV-2 RNA-based virus particle, only ~80% fragments are confirmed.**

Despite this, innocent victims who fund and rely upon your expertise, a vast majority with zero symptoms, are being told that they are "*positive for the virus that causes COVID-19.*"

(2) The "anti-body test" is equally egregious. Reliance on the "anti-body test" is based upon the claim that immune system response to SARS-CoV-2 manifests specific anti-bodies that you declare are specific to SARS-Cov-2. Utter nonsense.

Victims of this ruse, with prior flu-shots or prior common flu virus infection (corona and otherwise), even the fully recovered, have and will test "*positive for the virus that causes COVID-19.*"

**That is Dr. Fauci, at no time during this pandemic has the "anti-body test" confirmed presence of the SARS-CoV-2 RNA virus particle; it is only capable of detecting an antibody load (long-lived IgG) that is claimed to be responsive to SARS-CoV-2. This is the exact same protocol you declared in the HIV = AIDS era.**

Without these "SARS-CoV-2 Tests," and without the "*positive for the virus that causes COVID-19*" prognosis, you will not be able to assert, on the basis of statistics, your "Second Wave." These official tests/prognoses are not merely reckless; such are probably actionable.

You show little concern for the effect these tests have had on the psychological/sociological well-being of America. Your promotions of a "Second Wave" and vaccines reinforce this view.

#### **QUESTIONS 4**

1. The faulty COVID-19 test/prognosis is **now admitted by the CDC.** Given your commitment to "*speaking the truth at all times,*" will you publically clarify/correct for the taxpayer, the precise limitations of the PCR and anti-body tests, and what those limitations portend for **(1)** what you alleged are "confirmed COVID-19 cases," and **(2)** your so-called "Second Wave" ?

2. Are you in a position to offer President Trump, and the world, **actual scientific proof that these "viral" and the "anti-body" tests are valid for SARS-CoV-2,** and therefore the political actions from lockdowns to suspension of the US Constitution are justified? If you have any questions, you might wish to confer with **President John Magufuli of Tanzania.**

### **The Lack-of-Efficacy and Well-Known Dangers of Socialized/Mandated PPEs: The Tyranny of “Virtue Signaling”**

The title does not reference “masks.” The latter deployed as a legalistic diversion; a rhetorical shell-game that seeks to avoid decades of occupation-related safety minimums, which are derived from hard-won experience and true science-based regulations, resulting in the proper training and use of PPEs. Diverting to “masks,” officials seek to subvert a public line-of-inquiry that would lead to organizations such as the National Institute of Occupational Safety and Health (NIOSH). As you are aware, NIOSH is part of the Center for Disease Control (CDC).

The most prolific use of this legalistic “mask” shell-game resides in the governor’s mansion in Lansing, Michigan.

Governor Gretchen Whitmer of Michigan? In all my life I have never experienced a politician that creates, and therefore endures more hatred than this so-called public servant. I am sure I have “offended” someone, and have provoked opinion that I am alone in these assessments. Wrong . . . on both accounts.

Whitmer has made no secret of her true ambitions, and the manner in which she intends to effect them. She is singly motivated by thought of being president; in the interim using the upcoming November 2020 election to secure the office of vice president.



Whatever fulfills her political ambition, Whitmer will do. Her presidential ambitions are the true motivational context. She couldn’t care less about Michigan, its families, its society, its business, its future in-general. **Her priority is the White house, period.**

This opinion is based on her opportunistic deeds and is connected to the November 2016 election, after which the electorate was warned by a well-informed Dr. Fauci about **“a surprise outbreak.”**

Your closed-door statement of January 2017 is an indelible part of your professional legacy.<sup>5</sup>  
But the most graphic representation of your legacy could be the absurdity depicted here:



Connected to that legacy, which includes your demonstrated anti-Trump bias, a bias openly lauded by Whitmer; who was recently encouraged to sign Executive Order 2020-147.

Implicitly ignorant of “the precise limitations of the PCR and anti-body tests in-use, and what those limitations portend,”<sup>6</sup> the Bolshevik in Lansing, Michigan illegally enacted the most unfounded, politically-motivated, tyrannical trash in the history of the constitutional United States. Her web page “encourages” (her exact spin verbiage) Michigan citizens as follows:

*“ . . . businesses that are open to the public must refuse entry and service to individuals who fail to comply, and must post signs at all entrances instructing customers of their legal obligation to wear a face covering while inside . . . A willful violation of the order is a misdemeanor subject to a \$500 criminal penalty...”*

The illegality of this Whitmer order is so blatant, law enforcement entities that are not subject to her financial and organizational whims, are refusing to respond to her vile “snitch reports.” Sheriff departments across Michigan, responsible directly to the citizens of their county, are examples.

A comment before we proceed . . . the mass media routinely labels anyone that refuses, or merely questions, PPE mandates as “conservative pundits.”

<sup>5</sup> See screenshot, page 1 above.

<sup>6</sup> See Questions 4, in “SARS-CoV-2 Viral Tests” SARS-CoV-2 Anti-Body Tests, Confirmed COVID-19 Cases, the So-Called Second Wave and ZERO PROOF,” pages 10 - 11 above.

Given this political labeling routine, should we dismiss the Michigan citizens pictured here as merely “conservative pundits”?!

I can assure you, Tammy Clark and Kristen Meghan will forget more about PPE usage than you or Whitmer or the undersigned will ever know.

With decades of expertise, with certifications, training, and direct experience in “subject matters” that Whitmer has never heard of, and will never qualify for . . . What is the Clark/Meghan opinion on Whitmer’s prior executive order? I emphasize this since Clark/Meghan statement was made *prior to* Executive Order 2020-147.



“**Let’s talk about masks.** So what do we know about this virus to begin with? Because this is really all about COVID-19, and it’s really all about the corona virus. So what do we know about this? We have to talk about what we know about, before we can talk about what we do not know about.

So what do we know about the corona virus? What we know is that this particular virus is incredibly, incredibly tiny. It is a viron [sic] that is part of the classification of corona viruses; there are a lot of corona viruses out there. This is a novel virus, so this is; when we say this is a novel virus, what that means in virology is that this is a strain of the virus that we have never seen before. And this actually goes back to chimeric research . . . chimeric research, that the virus itself has been intentionally genetically modified, and engineered with another strain of another virus. So it’s part of the SARS virus family, but it is a chimerically altered virus. So we consider it to be a novel virus, which is why we do not know a whole lot about it, *yet!*

So, what we do know about it, is that it is sooooo tiny, that it is between 0.060 microns and 0.125 microns. So what that means when it comes to masks, and the home made cloth masks in particular, which is really the hot topic that we want to address, they (masks) do literally nothing to protect you from disease transmission. Everybody talks about masks to protect your neighbors, so you don’t kill grandma,<sup>7</sup> all that kind of thing; that is what you are hearing from people. Well, what you need to understand from a virology perspective is that that mask is not protecting anybody around you at all, from the expiration of this pathogen to those around you.”

**Months ago** I had personally reviewed with lay people, the SARS-CoV-2 size statistics versus the “0.300 micron rating” of the typical surgical mask. My review created deep anger and resentment, and a feeling of betrayal in every instance. None of the lay people I spoke to were “conservative pundits.” To the contrary, most were prior fans of Tom Hanks.

<sup>7</sup> We return to the elderly below, “*Horrific Deaths of Elders in Nursing Homes, and the Deafening Silence of Dr. Anthony S. Fauci,*” pages 24 - 25.

At no time did the Whitmer plans for the White House involve information readily available from experts such as Ms. Clark and Ms. Meghan. Whitmer's recent order and concurrent ratcheting-up of threats does not prioritize the health and well-being of Michigan. Whitmer has no issue destroying the lives of millions of Michigan citizens, while, at the very least, ensuring that your boss, President Donald Trump, is not re-elected. The fact that the only way she could "move forward" was by financial, legal, and social threats against the electorate is, in-itself, an indication of the incompetence and impropriety of her PPE mandates.

Regarding mandates, an easily confirmed fact, regarding the 'one size / one activity fits all' lunacy, is the PPE induced "hazardous atmosphere" inflicted upon the mask wearer. You and Lansing, Michigan have not demonstrated any concern about this well-known health hazard.

This is not some far-off esoterica, unknown to you and NIOSH. Lay people and government officials are posting on YouTube, until censored, videos wherein near-instantaneous and dangerous levels of the oxygen / CO2 aspirants occur upon the donning of the mask.



Ohio State Representative A. Nino Vitale posted a video on Ms. Wojcicki's YouTube, **and it was immediately censored**. His video in-no-way violated any of the "Community Guidelines," but merely showed ambient oxygen readings (using a GX-2009 Rkl meter), as experienced by healthy young adults upon the donning of face masks.

When the meter detected a "hazardous atmosphere" beneath the mask, an alarm sounded alerting the wearer to danger. In all Vitale student tests, the

meter alarm sounded within 4 to 6 normal non-exertion inhale/exhale cycles.

If you click here <https://www.youtube.com/watch?v=zA9gpF1RNOw> you will endure the results of Vitale's efforts, inflicted upon him by Ms. Wojcicki; not only did she censor the video, she deleted the entire Representative Vitale account!

I had saved an original copy of the Vitale mask/meter testing video, and uploaded it to one of my YouTube accounts; it was **instantly** censored <https://youtu.be/H4R6awlaUXo> ; no appeal, no discussion, it is gone, and I have a "strike" against my account !? <sup>8</sup>

I have now uploaded a copy of the Vitale video here, as an example of how biased the YouTube/WHO censorship abuse has become:

[http://pvsheridan.com/VitaleTests-oxygen-DANGER\\_mask.mp4](http://pvsheridan.com/VitaleTests-oxygen-DANGER_mask.mp4)

<sup>8</sup> None of this is surprising given historical Wojcicki audacity discussed above in the section, 'Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine,' pages 4 – 8.

Before I pose the question for this section, I ask a supplementary question:

The *ad hoc* explanation for mask mandates, initiated in the era of the Wuhan / SARS-CoV-2 virus, relies upon the notion that its 0.060 to 0.125 micron size statistic is not pertinent. It is claimed that due to mucus globules (exhaled during breathing, coughing or sneezing) being far larger, and these globules are restrained/captured by even home-made cloth masks, that the size of the mucus globules is instead the pertinent statistic.

That is, a central tenet of this *ad-hoc-ism*, is the assertion that the SARS-CoV-2 particles are transmitted on-board the exhaled globules. Reasonable.

So, Dr. Fauci, are you saying that those criteria did not exist during the 2017-2018 flu pandemic, and every single flu outbreak since the beginning of human history? If these criteria did exist, then why were Bolshevik-styled mask mandates, and moronic “social distancing,” and complete lock-down of the US economy, not issued during those prior events? Events and times that encompass your long career?

Is the emergence, influence, vested-interest vaccine rhetoric/pressures, and your association with Mr. Bill Gates and the WHO in any way connectable to your response?

#### **QUESTIONS 5**

Just prior to the “outbreak” of the SARS-CoV-2 virus from the Wuhan Laboratory in China, the United States (indeed the entire world) was experiencing its normal yearly flu. That is, in very rough terms, the world was spreading flu viruses in the October, November, December 2019 timeframe, immediately prior to January 2020.

(1) Given that mucus globules were carriers of 2019/2020 flu viruses, and caused its spreading, why did you not advise President Trump to lockdown the US economy, request PCR/anti-body tests, “social distancing,” and advise Governor Gretchen Whitmer to mandate the “virtue signaling” associated with PPEs to prevent the spread of the flu? (CDC flu season death estimate : 62,000)



(2) What is your assessment of the negative effect that mandated PPEs will have on the global human immunological response to SARS-CoV-2, given that such has already been documented in locations that have no mandated PPE usage?! (I do not use your term “herd immunity.”)

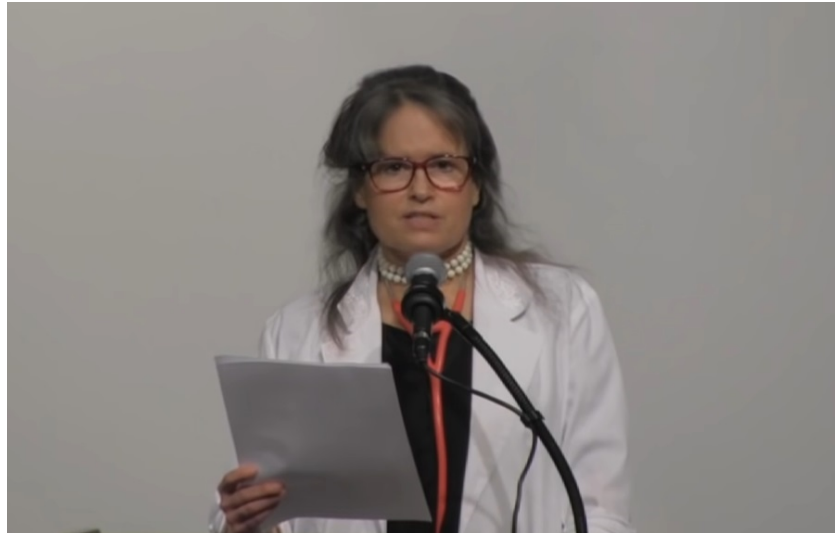
### Enforced Falsification of the 'Cause of Death' (COD) on Death Certificates and the Deafening Silence of Dr. Anthony S. Fauci

Attachment 2 to my 12 April 2020 letter to President Trump was the "COVID-19 Alert No. 2 – March 24, 2020." This document was forwarded to medical doctors, nurses, hospitals, morgues, state boards of medical practice, police departments, etc. Authored by Dr. Steven Schwartz, director of the National Center for Health Statistics, a screenshot of the most insidious portion:

Should "COVID-19" be reported on the death certificate only with a confirmed test? 

COVID-19 should be reported on the death certificate for all decedents where the disease caused **or is assumed to have caused or contributed to death**. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)

That the lead-in question is posed at-all confirms how deeply corrupted the so-called COVID-19 pandemic truly is. This document, its enforcement, and implicit fraud was exposed very early by Montana physician Dr. Annie Bukacek. I presented her in my letter to President Trump. In an interview, "Montana physician Dr. Annie Bukacek discusses how COVID 19 death certificates are being manipulated," she reviews her 30+ years of experience with death certificates:



She poses the central question, one we reviewed in the section above, "SARS-CoV-2 Tests, Confirmed COVID-19 Cases, and the So-Called Second Wave." Dr. Bukacek asks:

"I am going to talk about death certificates today. The decision for unprecedented government mandated lockdowns has been based on the alleged death rates of COVID-19. But are these death rates based on truth?  
. . . Are the reported deaths from COVID-19, truly deaths from COVID-19?"

As you are fully aware Dr. Fauci, the answer, on both questions is a resounding, **"NO!"**



In a video by Dr. Andrew Kaufman, he explains:

“This comes from directives from our public health organizations and agencies. `Lots of people who don't have any symptoms and didn't get ill, test positive for this, as well as many people who are ill and have symptoms but test negative. So, since we don't really know what we're testing, in my opinion, we cannot trust the results of this test at all.

If someone dies and you suspect it may be COVID-19 related, that not even to bother doing a test post-mortem, just label them on the death certificate as 'COVID-19.'

If they sent them for autopsy they would probably find that they died of a regular cause, and this would affect the (COVID-19) numbers in a bad way, in terms of, if you are trying to create the appearance that a lot of people are dying from COVID-19.

Since you cannot trust this data about the cause of death because of these instructions (from our public health organizations and agencies), and they have essentially gone away from their usual protocols, where you want to have some certainty about the cause of death, **and they've said that even if there is suspicion that COVID might be the cause of death, that you should just put that as the cause of death on the death certificate without any further scrutiny.**”

The directives from the World Health Organization, entitled, '*COVID-19 : Guidelines for Death Certification and Coding,*' are even more insidious:



Perhaps it will be argued that the COD examples cited here are isolated, not representative of current death certificate coding practices; that the latter have been corrected, and the medical doctors that pointed out these discrepancies have been thanked for their efforts. **Not a chance.** In truth, the situation has degraded in the opposite direction: Enter Senator Dr. Scott Jensen.



State Senator, Dr. Scott Jensen is being investigated, for the first time in his 35-year medical career, by the Minnesota State Board of Medical Practice on two, demonstrably spurious, utterly ludicrous charges: (1) ‘Spreading False Information,’ and (2) ‘Providing Reckless Advice.’

This is the same person that was previously named, by that very same Board of Medical Practice, “Minnesota Family Physician of the Year”! But this occurred prior to your **“surprise outbreak.”**<sup>9</sup>

Unlike civil and even criminal investigations, wherein the accused has a right to the identity of their accuser, under Minnesota law, Dr. Jensen has been denied that information. The genesis of his travails were not flippant, baseless or unilateral remarks he made to the media, but was in-truth a 7-page document, distributed by the very same State Board of Medical Practice; they were coyly dictating that medical doctors falsify the COD on their certificates. The 7-page document was later embellished by an email sent by the Minnesota Department of Health that involves *“couching about how to fill out the death certificate.”*

**As you are fully aware Dr. Fauci, this COD falsification, originally dictated by the MSBKP, fortified by the MDH email, and the subsequent threats to Dr. Jensen’s career are borne in the national and global fraud of exaggerating the COVID-19 death statistics.**

### **QUESTION 6**

Is it your intention to remain complicit-with this professional collapse, an ethical collapse instigated by groups such as, but not limited to the **White House Coronavirus Task Force**, a collapse versus the prior institutionalized rigor that was demanded-of and routinely deployed-by the medical profession regarding the precision of the ‘Cause of Death’ on Death certificates?

<sup>9</sup> See screenshot, page 1 above.

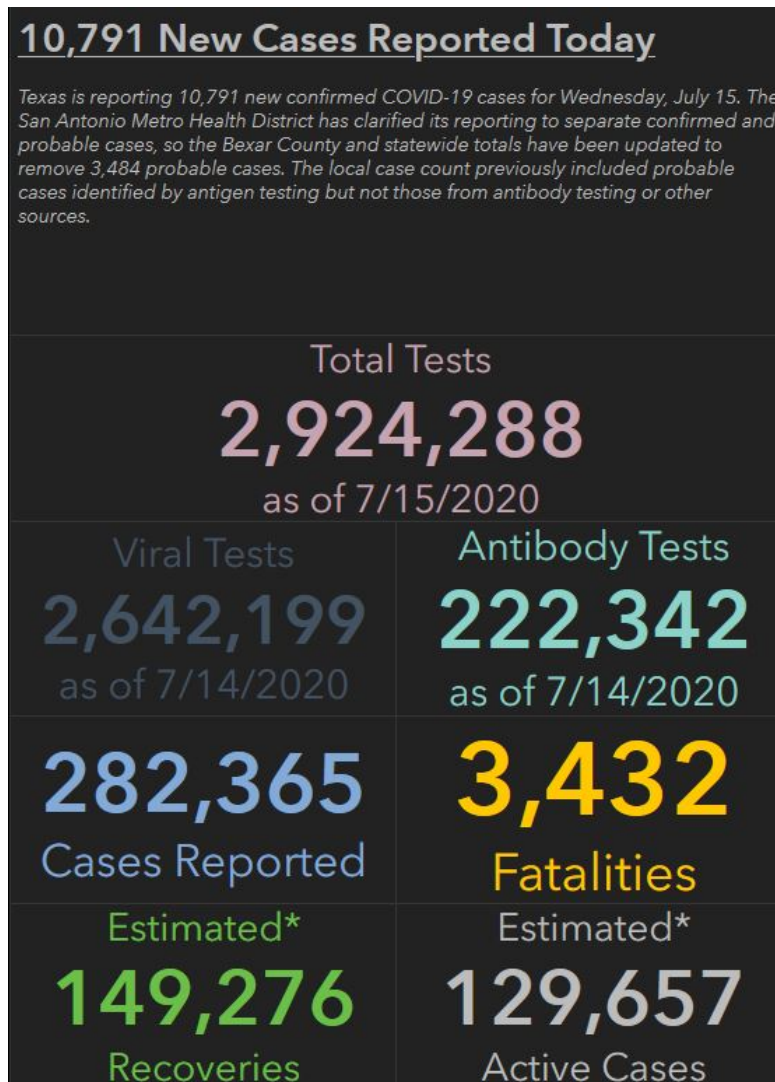
**Enforced Nationwide Falsification of the COVID-19 “Confirmed Cases,”  
and the Premeditated Promotions of Dr. Anthony S. Fauci**

Typical mass media headline, but **recent**, and a sample regarding Texas includes:

CORONAVIRUS

**COVID-19 surge continues as Texas reports records of 10,791 new cases, 110 deaths**

Texas Department of State Health Services (DSHS) has a daily report:

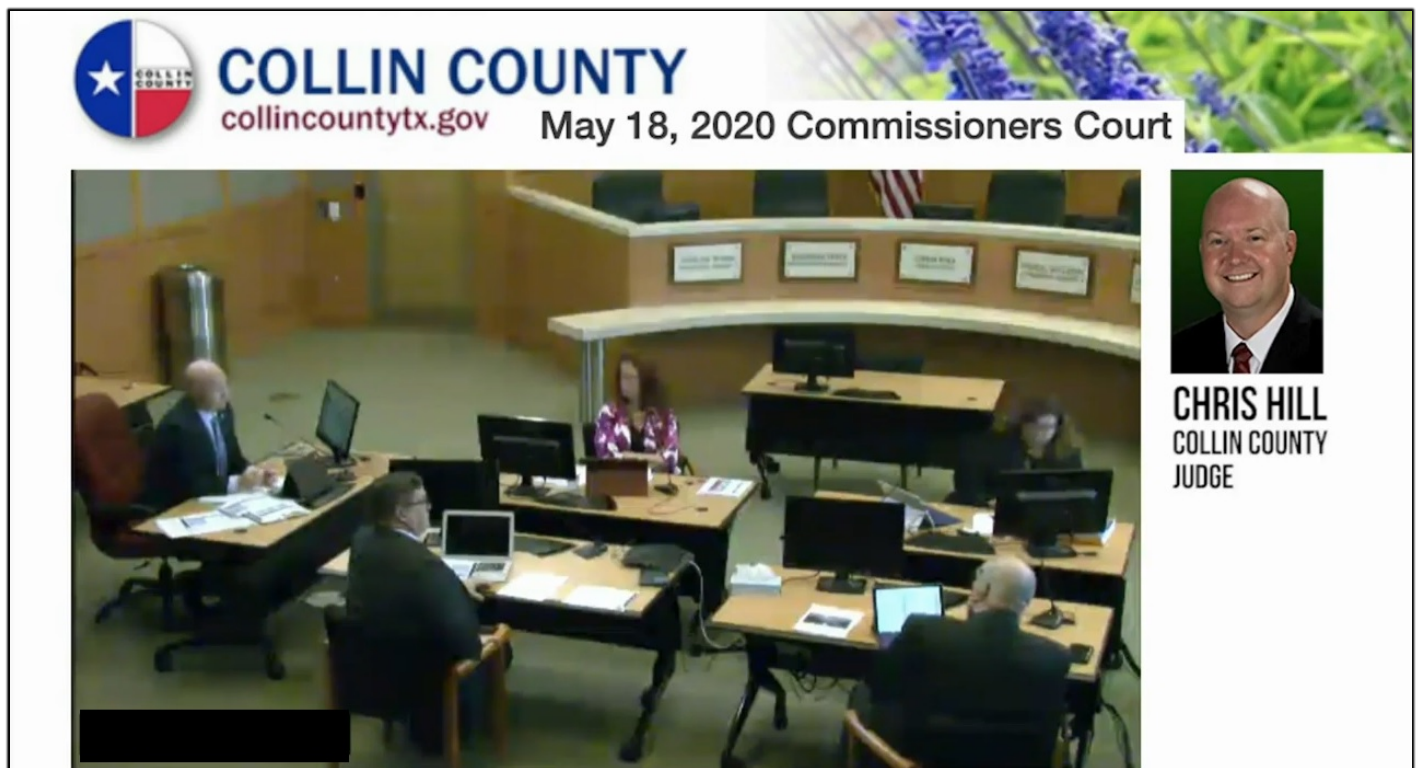


On the basis of this alarmism, Texas Governor Greg Abbott reversed himself, and signed an order threatening Texas citizens with a \$250 fine if they do not submit to his mask mandate, etc.

But not one major media outlet has covered the true cause of these headlines. A clue about the true, but insidious cause for the re-ignition of panic in Texas is summarized by current verbiage at the Department of State Health Services (DSHS) website:

“The Texas DSHS is working closely with the Centers for Disease Control and Prevention (CDC) in responding to the new coronavirus disease 2019 (COVID-19) that is causing an outbreak of respiratory illness worldwide.”

That is, the CDC, the NIH, and the WHO are slithering in the background. **But what exactly does that “working closely” bureaucratic cattle-stampede entail?** Timeline begins May 18, 2020:



Before we discuss the details of what was forced upon every state board of health nationwide, we **contextualize** that forcing with words that you publically declared **after** those details were implemented and having their premeditated effect. **You loudly declared on July 9, 2020:**

"Not to be hyperbolic about it, it really is the perfect storm, an infectious disease and public health person's worst nightmare. It's a **spectacularly transmissible** virus. **The efficiency with which this transmits is really striking . . .**

And I think what we've seen unfortunately, is that in some of the Southern states, the states have not really followed those guidelines in some respects, and jumped over the benchmarks, and the points that needed to be checkpoints. We've got to do better."

Spectacularly transmissible? Efficiency with which this transmits? Southern states? Such as Texas, which was previously embarked on its own path to economic and social re-opening?

Back to the details; with the above Fauci context in full-view, let us present what was documented by hidden camera from behind closed-doors (in one of those “southern states” you complained about), at a typical county-level meeting, of otherwise honest caring public servants.

Reminder to you Dr. Fauci, this meeting resulted from edicts from the national level, but occurred six weeks prior to your “**spectacularly transmissible virus**” proclamations of July 9, 2020:

**Texas Collin County Judge Chris Hill begins the meeting:**

“ State of Texas DSHS has informed the public health departments that **they have adopted a revised definition for COVID-19 ‘probable cases.’** ”

**Texas Collin County Department of Epidemiology Dr. Aisha Asouri explains:**

“ So, for confirmed case, it stays the same, you still just need PCR (“viral test”). But now they have added a ‘probable case’ definition. So that still gets counted towards the case count. It (the new Fauci edict) is different, **it is not confirmed it is ‘probable,’ but it’s still a case.**

So at the end of this (new) definition there are 15 different options on how you can be classified as a ‘probable case.’ Based on this diagram, and what they report, there’s a total of 17 cases now. One is still only confirmed because that was that original index case (in yellow), who then had all these contacts underneath in orange, and all the rest of them became probable. **But they are still considered a case.** ”

**COLLIN COUNTY**  
collincountytx.gov May 18, 2020 Commissioners Court

**NEW Probable Case Definition**

**Confirmed Case**

**New case status definition:**

- Diagnostic positive at 10 or 15 with or without symptoms
- Contact with confirmed probable case with symptoms

**TOTAL CASES: 17**  
**(1 CONFIRMED)**  
**(16 PROBABLE)**

**AISHA SOURI**  
COLLIN COUNTY  
EPIDEMIOLOGY  
DEPARTMENT

At this May 18, 2020 closed-door meeting, Texas Collin County Judge Chris Hill concludes:



“ This has the potential to be a very significant event for us here in Texas, and here in Collin County, **as the state now has elected to adopt this new ‘probable’ definition.**

If you have a subjective fever, and you have a headache, and you live in Collin County, you now meet the qualifications to be a ‘probable’ COVID patient.

**It is remarkable how low the standard is now.** If you have one of the major symptoms, if you have a cough, or you have shortness of breath, and you live in Collin County, then you can satisfy the definition for a ‘probable’ COVID case.

But I am very concerned that **we absolutely could see the numbers jump very rapidly, in a way that actually is not indicative of what we are seeing here in the community,** in the public health department. ”

#### **QUESTION 7**

Is it your intention, as someone **“speaking the truth at all times,”** to inform President Trump, the good people of Texas, and the world-at-large, that your recent claims about **“spectacularly transmissible,” “efficiency with which this transmits,” and “Southern states,”** was premeditated; predicated upon a 6-week prior nationwide implementation of **“a revised definition for COVID-19 cases as merely ‘probable cases.’?** `A revision that resulted in a **“numbers jump”** that is directly connectable to a **“new remarkably low standard,”** but in-stark-contrast has **no connection whatsoever** to actual infection of the population . . . never mind a wholly accurate and scientifically verified/validated testing protocol.

### **Horrific Avoidable Deaths of Elders in Nursing Homes, and the Deafening Silence of Dr. Anthony S. Fauci**

In a silence that is determined by agenda, not your sworn duties as director at NIAID, you have presided over the horrific consequences of many governors' and their health official's actions that resulted in the otherwise avoidable, but possibly premeditated deaths/manslaughter of the elderly.

Perhaps review of a common in-use definition of 'Gross Criminal Negligence' would assist you:

“ ‘Gross negligence’ is culpable or criminal when accompanied by acts of commission or omission of a wanton or willful nature, showing a reckless or indifferent disregard of the rights of others, under circumstances reasonably calculated to produce injury, or which make it not improbable that injury will be occasioned, and the offender knows or is charged with knowledge of the probable result of his acts; “culpable” meaning deserving of blame or censure.”

Bell v. Commonwealth, 170 Va. 597, 195 S.E. 675, 681

**Reasonably calculated to produce injury !?** It is well-known, worldwide, that COVID-19 is especially dangerous for the elderly. This fact was determined early-on. Despite this, governors ranging from our birth state of New York, to California, to New Jersey, to Michigan, etc., ordered; let us say, FORCED numerous nursing homes to accept into residency those suspected to be “COVID-19 positive,” some of whom were convicted felons.

Assuming gradation is even possible, the most sinister example comes from those currently in-charge in the good state of Pennsylvania:



The Pennsylvania Secretary of Health Rachael Levine was unabashed about the reasons she relocated her mother out-of-harms-way, by removing that mother from a nursing home, that was subsequently ordered by Ms. Levine to accept “COVID-19 positive” residents.

The so-called COVID-19 deaths that resulted from this type of criminal activity, and many others like it, have never been openly condemned by you or the White House Coronavirus Task Force:



Nor has the state level or US level Departments of Justice officially investigated the **1,000s of nursing home COVID-19 deaths** under, at the very least, the Gross Criminal Negligence laws.

Your silence regarding the 1,000s of horrific nursing home COVID-19 deaths has been deafening.

### **QUESTIONS 8**

As you are fully aware, people have been charged, prosecuted, convicted **and then imprisoned** as a result of **knowingly** infecting the innocent with HIV. As you are fully aware, your thesis that HIV infection leads to a “death sentence” has been used in these criminal cases. Therefore:

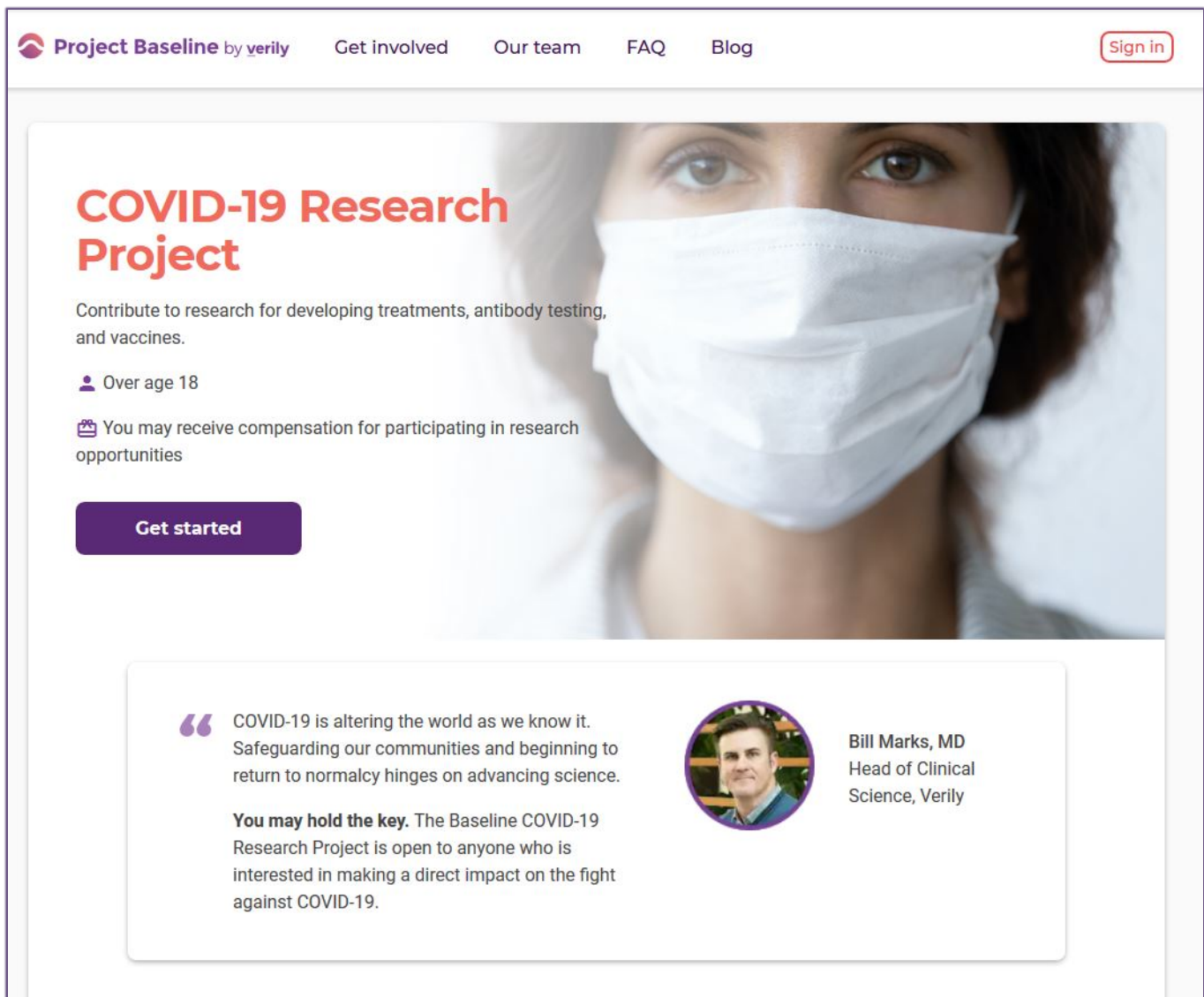
(1) Is it your position that those who were in positions of authority and expertise, such as but not limited to **Pennsylvania Governor Thomas Westerman Wolf and his Secretary of Health Rachael Levine**, are somehow innocent of the exact same criminal pattern and the exact same horrific outcome; perhaps under a twisted logic that HIV cannot be legally supplanted with SARS-CoV-2 / COVID-19 in the **known** confinement-setting of nursing homes?

(2) Referencing the previous section (pages 20 – 23), why did you not use the term “spectacular” to describe the 1000s of horrific confinement **deaths** of the elderly in the nursing homes?



## YouTube Censorship, Google Search Limitations/Manipulations, and Verily

It would be deeply naïve, if not irresponsible to assume that there is no connection between the recent onslaught of YouTube censorship, Google search limitations/manipulations (and other assorted shenanigans), and the present COVID-19 pandemic.



Project Baseline by verily    Get involved    Our team    FAQ    Blog    [Sign in](#)

## COVID-19 Research Project


Contribute to research for developing treatments, antibody testing, and vaccines.

- Over age 18
- You may receive compensation for participating in research opportunities

[Get started](#)

“ COVID-19 is altering the world as we know it. Safeguarding our communities and beginning to return to normalcy hinges on advancing science.

**You may hold the key.** The Baseline COVID-19 Research Project is open to anyone who is interested in making a direct impact on the fight against COVID-19.

 **Bill Marks, MD**  
Head of Clinical Science, Verily

Project Baseline is representative of a vested interest in the COVID-19 pandemic; but a vested interest that poses a specific risk. It is a COVID-19 research project that is promoted for-profit by a company called Verity. Verity is part of a recently formed holding company called Alphabet, Inc. **So is Google/YouTube.**

Regarding the latter, the notion that censorship/search-manipulations are altruistic, or premised solely on a virtuous dedication to health, goes far beyond naiveté, all the way to buffoonery.

In this context, the 17 June 2020 letter of Texas Senator Ted Cruz to Google CEO Sundar Pichai is welcome, but somewhat tardy. Cruz declares:<sup>10</sup>

“The recent actions of Google . . . raise serious concerns that **Google is abusing its monopoly power** in an effort to censor political speech with which it disagrees. This is part of a bigger problem. The culture of free speech in this country is under attack, and Google is helping lead the charge. Whereas Americans once understood that the best response to speech was more speech, some Americans, with the help of some of the most powerful companies on the planet, are now pressing to silence and punish those expressing views that do not align with the prevailing and ever-shifting progressive orthodoxy. These individuals demand that people with different views lose their livelihoods if they step out of line. Employers must fire dissenters. Companies like Google must—to use a most Orwellian term— “demonetize” them.”

Much of the information that supports questioning of the official positions on COVID-19 have already been scrubbed from the open domain. It is astounding that the information presented in this instant letter has survived. If current patterns and momentum toward diminished true public service from the political class continue, pandemics (such as COVID-19) will not be the only instrument type that will be misused as a tool of coercion by selected global power brokers.

### Question 9

Some of your position and preferences in response to the COVID-19 pandemic have been fortified, not by complete access to information, but by the reverse. Examples such as YouTube/WHO censorship of alternatives to vaccine-treatment of SARS-CoV-2, or videos that question the safety/efficacy of face masks, are just the tip of the Orwellian iceberg.<sup>11</sup>

As Director of the National Institute of Allergy and Infectious Diseases, and therefore a public servant that is beholden, first-and-foremost, to the citizenry of this Constitutional United States of America, do you endorse the **direct internal connection** (concealed by the use of “holding companies”) between private corporate vested interests (whose primary constituent is understood to be financial shareholders) and global levels of censorship (that are in no way merely “private” but are indeed broadly monopolistic) of information that is contrary to the commercial agenda of those vested interests?

(The internal connection between YouTube/Google/Verily and the alignment of those entities with censorship requests by the WHO, et al., is a suggested context for response to Question 8.)<sup>12</sup>

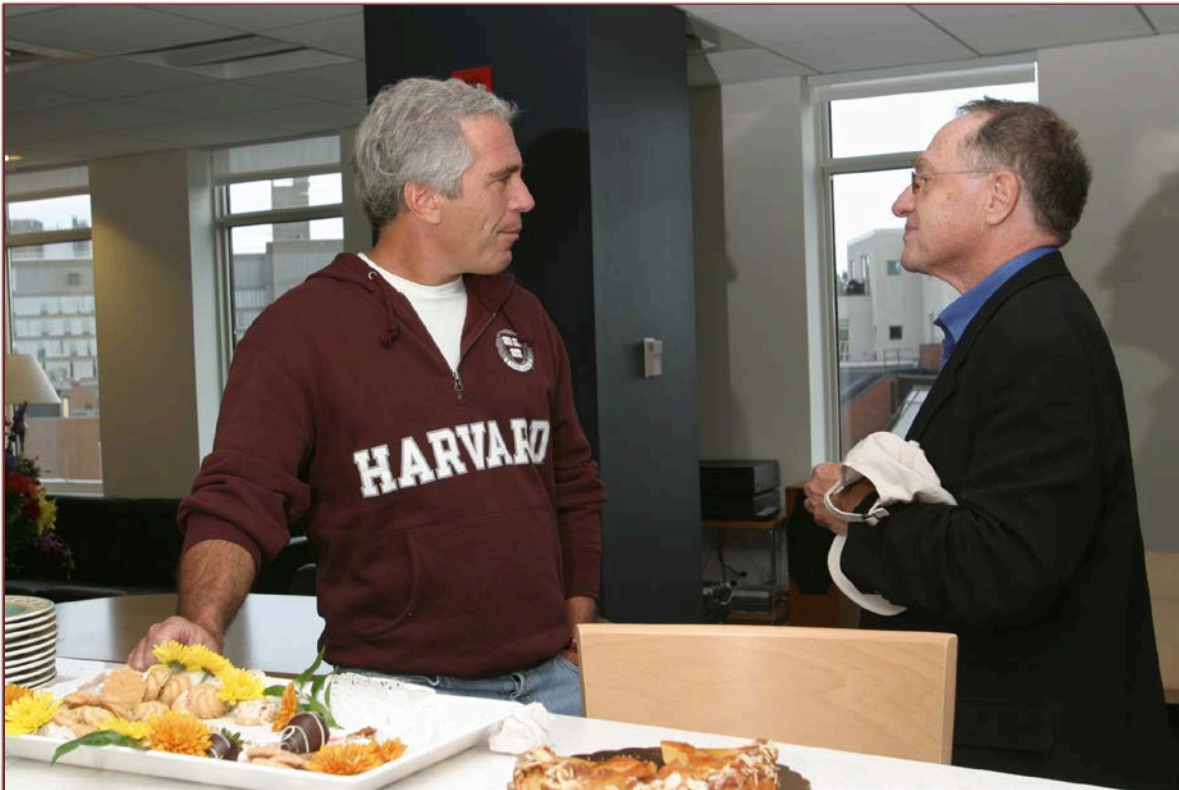
<sup>10</sup> Please see section “*Censorship of Promising COVID-19 Treatments – Nebulized Budesonide*,” page 9 above.

<sup>11</sup> Please see sections, “*Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine*,” pages 4 – 8, and section “*The Lack-of-Efficacy and Well-Known Dangers of Socialized/Mandated PPEs*,” pages 12 – 16 above.

<sup>12</sup> If you require further guidance please confer with the Chinese Communist Party (CCP) regarding their joint-venture with **Goggle on Project Dragonfly**.

### **Forced Vaccinations: The Government Has the Right to “Plunge a Needle Into Your Arm”**

A personal associate of Mr. Jeffrey Epstein (and Ms. Ghislaine Maxwell); a frequent visitor to his estates and islands, so much so he is featured in the artwork by Maria Farmer, pictured at right:



In a recent interview **not** censored by YouTube, Harvard Law Professor Alan Dershowitz declared:

*“Let me put it very clearly, you have no Constitutional right to endanger the public and spread the disease even if you disagree; you have no right not to be vaccinated, you have no right not to wear a mask, you have no right to open up your business. And if you refuse to be vaccinated the state has the power to literally take you to a doctor’s office **and plunge a needle into your arm!**”*

Of course, Professor Dershowitz never declares a similar lack-of-rights for Pennsylvania Governor Thomas Westerman Wolf and Secretary of Health Rachael Levine, with respect to their “**spread the disease**” which resulted in the manslaughter of the elderly in Pennsylvania nursing homes. <sup>13</sup>

#### **Question 10**

Are you in philosophical and legal lockstep with Professor Dershowitz in his declaration:

**“ . . . you have no right not to be vaccinated”?**

<sup>13</sup> Please see section, “*Horrific Avoidable Deaths of Elders in Nursing Homes, and the Deafening Silence of Dr. Anthony S. Fauci,*” pages 24 – 25 above.

## Koyaanisqatsi : “You Have No Right Not To Be Vaccinated!”



An unstated but characteristically insidious underbelly of the ongoing global circumstance is a drumbeat akin to:

“It’s over, we won, do not resist, shut up. Obey and comply. We’re here to help, to offer favors you don’t remember asking for. We’re here for your children, and their future. A new world order is coming. A borderless world is coming. A global private central ‘government,’ modeled after the 27-nation European Union, is coming, it’s already here. Submit to it, get used to it, disagree with nothing, question nothing. Otherwise we will label you, brand you, destroy you, make your life miserable, make your life not-worth-living. Resistance is futile. If you resist, we will call you intolerant, ignorant, criminal, a racist, a ‘white supremacist.’ We will censor you, ban and make you unemployable. Think in terms of ‘secure tolerance,’ which will be permanent and irreversible. You will come to embrace 24/7 surveillance of you and your family. Vaccines are the future, and you will like your new ‘healthy,’ constantly vaccinated life. **But most important of all: BE HAPPY!**”

It is said, and I agree, the only truly sustainable tyranny is Truth. All others, based on any other criteria, have and will fail, but cause sooooo much unnecessary, and many times horrific human suffering, on that long road to implicit failure. That is, I do not take issue with the concepts of centralization *per se*, in its many possible manifestations. I take issue with an implementation of such that is based-on an unstated agenda, and that fails to make public service *thee* priority; **I take issue with any level of organization, centralized and otherwise, that is, in any way, based on lies.**



The descriptor koyaanisqatsi is especially appropriate given the following typical headline:

## **NO SCRUTINY** Wuhan coronavirus lab may **DODGE** investigation as **WHO** team hunting for origin of pandemic won't bother visiting

**Tom Michael**

12 Jul 2020, 14:40

The last thing WHO wants is to be exposed to the risk inherent in a detailed series of document inspections, and interviews with existing/former staff of the Wuhan laboratory that is reportedly the verified source (manmade or otherwise) of the SARS-Cov-2 virus, and is, in truth, connectable to the addressee of this letter . . . and therefore many other *pre-Trump* Administration officials.

SCIENCE | CORONAVIRUS COVERAGE

## Fauci: No scientific evidence the coronavirus was made in a Chinese lab

In an exclusive interview, the face of America's COVID-19 response cautions against the rush for states to reopen, and offers his tips for handling the pandemic's information deluge.

On this point, curiously, in exactly similar fashion to your Politico interview, you hurriedly gave an interview with National Geographic (NG) which promoted the headline at left.

You and NG go to great lengths about “misinformation” and “the future.” This interview gives one the impression that you are diverting from **an item you want no part of** : **“the lab in China”** (your wording).

You go on-and-on about “naturally evolved,” and “in the wild,” and “then jumped species.” It is clear you are on-a-mission to escape from association with **“the lab in China.”**

Perhaps a reminder is in order. No matter what construct *per se* we assert for the virus

(manipulated or not), the fact that SARS-CoV-2 is close to the Chiroptera genome, and the species in-question resides in caves over one-hundred-miles away, and is **not** sold in local Wuhan fish markets, **“the lab in China”** remains at-issue. No matter which diverting or conflating one choses, the **‘NO SCRUTINY’** headline on page 30 above is ludicrous.

But regarding details of the SARS-CoV-2 construct, not publicly available prior to February at-the-earliest, the CDC explains: <sup>14</sup>

“The virus has been named severe acute respiratory syndrome–coronavirus 2 (SARS-CoV-2) because the RNA genome is about 82% identical to that of the SARS coronavirus (SARS-CoV); both viruses belong to ‘clade b of the genus Betacoronavirus.’”

Apparently an 18% discrepancy fulfills what is required to label this sequence as “novel.”

In your interview with National Geographic (NG) you/they declare:

“For some reason that we're still struggling with, the body does not make an adequate immune response to HIV,” he says. To fight off that virus, a vaccine has to work better than the body's own natural response. By contrast, **“it's obvious that many people make a very adequate immune response”** to the SARS-CoV-2 virus, and the animal trials so far show that modest doses of the mRNA vaccine for coronavirus have also generated a strong immune response.”

The precursor to that portion of the NG interview report:

**“To date, no type of mRNA vaccine has been licensed for use in humans,** but Fauci believes there is great promise for this technology targeting the coronavirus, based in part on his experience developing treatments for HIV/AIDS in the 1980s and ‘90s.”

<sup>14</sup> Please see Footnote 1 above, bottom of page 8.

I do not understand how your experience with HIV, a retro-RNA virus, comports with claims about your all new mRNA-based vaccine . . . a technology that has never been licensed?! I am unclear how combatting retroviruses in-general, which utilize enzymatic reverse transcriptase, which allow it to transcribe DNA from the RNA template, connects to the processes of Beta-coronavirus. **The only plausible explanation is that you have tacitly admitted to a deeply contentious truth: Your mRNA-based vaccine will inherently re-write the human DNA.**

But the key, you are very careful in your wording with National Geographic; you do not claim to have developed a vaccine for AIDS, you declare that you had “*experience developing treatments.*” No one has developed a vaccine to combat HIV, only early treatments are available for AIDS. Sound familiar? Let us scrutinize your hypocrisy, by way of contrast . . . <sup>15</sup>

**In stark contrast**, in the current scenario, you have open hostility against **low-cost treatments** for COVID-19. **You took the opposite tact**; you derided the medical doctors involved; essentially condemned hydroxychloroquine treatments against SARS-CoV-2. You endorsed as valid, an “investigation” that was known by you to be a fraud, **a vaccine promotional stunt**, that was so corrupt that it had to be retracted within a few days of global publication. <sup>16</sup>

But let us focus on Beta-coronavirus, specifically its history versus SARS-CoV-2 . . . as you are aware, the former SARS outbreak dates to 2003. In these last **17 years**, no safe vaccine has been developed for SARS-CoV-1, the previous SARS . . . immuno-compromised ferrets come to mind.

**And now**, you, President Trump, VP Pence, Bill Gates, Dr. Francis Collin, and multi-billion-dollar pharmaceutical corporations are ranting about “**Operation Warp Speed**,” promoting an expensive taxpayer-funded vaccine that will expose humanity to the **uncharted dangers of mRNA ?**

With this **as context**, the Director of NIAID, Dr. Anthony S. Fauci, embraces the following?



**“You Have No Right Not To Be Vaccinated!”** <sup>17</sup>

<sup>15</sup> Please see section above, “*Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine,*” Pages 4 – 8.

<sup>16</sup> Please see footnote 15. Please see Question 3, Page 9 above.

<sup>17</sup> It is no surprise that the far-Left Politico, the same mouthpiece that helped you promote the Surgisphere fraud against hydroxychloroquine, now brutalizes Robert F. Kennedy Jr. regarding his cautions on premature vaccine deployment, especially in developing countries.

## Speculations

A reasonably intelligent person can speculate about your statement of January 2017, again:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2017.)

A surprise outbreak!? If this were a matter of pandemic patterns/history, why then did you not make the same announcement just prior to the inauguration of George Bush or Barack Obama?

After what was, for many, a surprise election in November 2016, you were compelled to warn of a pandemic, that was later deployed from “**the lab in China**.” A lab that you are connectable to, and at several levels.<sup>18</sup>

Just prior to the December 2019 outbreak of COVID-19, you are proxy to Event 201 in October 2019; an event sponsored by the Bill & Melinda Gates Foundation,<sup>19</sup> wherein preparedness for global pandemics, specifically emphasizing “**an outbreak of a novel zoonotic coronavirus transmitted from bats to pigs to people**”? Event 201 highlights the development and deployment of government funded vaccines against SARS-causing viruses?

Then, your Politico interview; instead of condemning the fraudulent Surgisphere “investigation,” you lauded its anti-hydroxychloroquine “data”? In that interview you spontaneously declare:

“When we first developed a vaccine, I said it would be about a year to a year-an-a-half, and that was in January. So a year from January is December (2020) . . . .”<sup>20</sup>

January 2020?! Within weeks of the December 2019 outbreak? In that timeframe it was alleged “little is known about SARS-CoV-2.” Within weeks of its outbreak from “**the lab in China**,” you were already in the ‘*first developed a vaccine*’ mode?!

Again, the above is merely factual, the implications are speculative.

<sup>18</sup> Please see Question 1, Page 3 above, section, “*Funding Research at the Wuhan Laboratory of Virology (China)*.”

<sup>19</sup> Please see picture atop Page 30 above.

<sup>20</sup> Please see Page 8 quote, in section “*Censorship-of and Outright Threats Against Those Associated with Hydroxychloroquine*.”



### Conclusions

Your recent foray, connecting COVID-19 to the Spanish Flu is so offensive, that a public reprimand should have instantaneously been issued by your boss Dr. Francis Collin (at right):



Of course, the exact opposite occurred on, as just one example, CNN:

CORONAVIRUS PANDEMIC	
GLOBALLY	
TOTAL CASES	DEATHS
13,927,440	593,218
IN THE UNITED STATES	
TOTAL CASES	DEATHS
3,627,057	138,988
SOURCE: JOHNS HOPKINS UNIVERSITY	

**BREAKING NEWS**  
**NIH DIRECTOR: I COULDN'T IMAGINE CARRYING OUT ORDER TO FIRE DR. FAUCI**  
Dr. Francis Collins | Director, National Institutes of Health

**TONIGHT ON CNN**  
**MARY TRUMP**  
INTERVIEW  
**8P ET**

**CNN**  
3:16 PM PT

21 July 2020

Dr. Anthony S. Fauci  
Page 35 of 36

The truth is Dr. Fauci . . . a person with your academic and professional credentials, a person in your position, a person with your responsibility . . . your opinions and actions should be, historically and currently, impeccable, unassailable, and unimpeachable.

**But in the opinion of some, that is not the case.** Interviews of the type orchestrated by politically vested-interests such as Wolf Blitzer and CNN should not be occurring.

As you have probably surmised, this letter is highly thrifted, and in some ways muted (due to my limited resources).

Again, your statement published in the 10 July 2020 edition of the Financial Times:

“ I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven't been on television very much lately.”

In that context, I look forward to your response to the questions and issues posed above.

In conclusion, you never developed a safe vaccine for AIDS, you never developed a safe vaccine for the first major SARS outbreak of 2003, you have never been permitted to deploy an mRNA based vaccine, but now you and President Trump want the taxpayer, and the global citizenry, to submit to the governments' demand to **“plunge a needle into your arm,”** and at warp speed?

Cordially,

Paul V. Sheridan

Enclosure

**Courtesy Copy List**

President Donald J. Trump  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111  
VIA FEDEX AIRBILL 8007-9341-6329

Vice President Michael R. Pence  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111  
VIA FEDEX AIRBILL 8007-9341-6329

Attorney General William P. Barr  
US Department of Justice  
950 Pennsylvania Avenue, NW  
Washington, DC 20530-0001  
202-514-2000  
VIA FEDEX GROUND-BILL 1283181-00005340

Dr. Francis S. Collin, Director  
National Institute of Health  
9000 Rockville Pike  
Bethesda, MD 20892  
301-496-4000  
VIA FEDEX GROUND-BILL 1283181-00005357

President Martha E. Pollack  
Cornell University  
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Ithaca, NY 14853  
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VIA FEDEX GROUND-BILL 1283181-00005364

Dean Augustine M.K. Choi  
Weill Cornell Medical College  
1300 York Avenue  
New York, NY 10065  
212-746-5454  
VIA FEDEX GROUND-BILL 1283181-00005371



## Cornell Law School

Stewart J. Schwab  
The Allan R. Tessler Dean  
and Professor of Law

June 22, 2005

Dear Paul,

I was delighted to see that you are to be honored as a Community Champion by the Civil Justice Foundation in Toronto next month. Congratulations!

We are always pleased when an alumnus of Cornell University gets the recognition they richly deserve.

I hope you enjoy the occasion, & I wish you success in your future endeavors.

Sincerely,  
Stef Schwab

# ATTACHMENT 3

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of April 12, 2020 to President Donald Trump

10 Pages



April 14, 2020

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12 April 2020

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President Donald J. Trump  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111

**Subject: The Most Difficult Decision of your First Term (1 May 2020)**  
**Reference: My Letter/Contents to First Lady Melania Trump of 23 March 2020**

Dear Mr. President:

On this most holy of days among believers, Easter Sunday, I hope this finds you and yours well.

Indeed the context of this letter is my suggestion that you add to your decision criteria the inner source of those currently advising you; their context as merely “experts” is questionable.

We begin with a quote from Mr. Anthony Fauci:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2017.)

**“Surprise outbreak”?! During the last four years, to the best of my knowledge, no mainstream media news outlet has examined / reviewed this quote with Mr. Fauci.**

These types of declarations were also parroted, in the same timeframe, by Mr. Bill Gates, Dr. Zeke Emanuel, and many other vested interests . . . again, as implied by the Fauci quote, these proclamations occurred **prior** to your swearing in as our 45<sup>th</sup> president.

The following chart is from, [\*\*“What I think COVID-19 Really Is.”\*\*](#) by Dr. Andrew Kaufman:

	Exosomes	COVID-19
Diameter inside cell	500 nm (MVE)	500 nm
Diameter outside cell	100 nm	100 nm
Receptor	ACE-2	ACE-2
Contains	RNA	RNA
Found in	Bronchoalveolar (lung) fluid	Bronchoalveolar (lung) fluid

It is unlikely that Fauci, Gates, or Emanuel have advised that you confer with Dr. Kaufman. Still surviving YouTube censorship, Kaufman’s video details the genesis of that chart, and what really happened in Wuhan, China. These details have been censored from MSM dissemination; details that I recommend you consider prior to May 1.



It is also unlikely that vested interests . . . have consulted with or advised that **you** consult with . . . the many doctors who have been dispensing hydroxychloroquine **with near 100% success**. Dr. Vladimir Zelenko practices in Monroe, New York; about **an hour drive from where you and I were born, New York City; the so-called epicenter of “COVID-19.”**

Dr. Zelenko’s hydroxychloroquine video did not survive YouTube censorship . . . but he was later interviewed by Mr. Rudy Giuliani; [that video](#) discusses [your actions](#) and remains available.

In the Giuliani interview, Dr. Zelenko explains that his treatments are in the hundreds, but emphasizes that he is merely prescribing dosages and medicines of a **“known safety profile.”**

In contrast to the billions that vested interests have already exacted, [Dr. Zelenko’s typical patient billing is \\$20.00.](#) In that context the doctor opines, in essence, about the subject of this letter . . . perhaps you should meet with him prior to May 1. In their deeply committed interest to serve New Yorkers, perhaps Mayor Bill de Blasio and Governor Andrew Cuomo would vie to join you.



## The True “Surprise Outbreak”?



It is doubtful . . . that the prescribing and dispensing of hydroxychloroquine, zinc and other health-oriented supplements was the “**surprise outbreak**” that Fauci, Gates and Emanuel had anticipated, during their years of vested-interest planning and speeches:

1. Related, it is also doubtful that Governor Gretchen Whitmer has any intention of investigating how many Michigan residents have suffered unnecessarily or died as a result of her politicization of subjects with which she has zero expertise.
2. For example, Whitmer has avoided [Democratic Michigan State Representative Karen Whitsett](#), who openly thanked you and hydroxychloroquine for saving her life!
3. But . . . question . . . were the slanders/libels that you endured, regarding everything from travel restrictions to your positive remarks about hydroxychloroquine; viciously criticized by Governor Whitmer, merely “anecdotal”? **Or is there a deeper, more insidious underbelly that is intrinsic to this diatribe?**

## The Fauci-Gates Tattoo and ID 2020 versus the US Constitution

Vested interests have mouthpieces declaring to the global population that their sole motivation is to “*protect the health and the welfare of the American people.*” Is that true? Instead should we rely on direct quotes from the vested interests? **On Reddit, Gates openly declared:**

**“Eventually we will have some digital certificates to show who has recovered or been tested recently or when we have a vaccine who has received it.”**

“We”? Existence of an injectable chemical tattoo was confirmed by [MIT News on December 19, 2019](#), just prior to your “xenophobic” travel restrictions. But that MIT confirmation also confirms that the funding for the chemical version of Huawei came from . . . Bill Gates.

Gates funded **ID 2020**, a global vaccination consortium which pushes “digital identities” for the global population; ID 2020 would “recommend” Gates-funded/patented vaccinations.

Appearances . . . a highly thrifed listing:

1. Enter the Fauci “**surprise outbreak**” precursor all the way back in 2016,
2. The ongoing conscious **and rigorous avoidance** of the fundamentals of rt-PCR test protocols, and the definitions/methodologies/applications [declared for such by its inventor, Nobel Prize winner Dr. Kary Mullis](#),
3. Appearance of the so-called “COVID-19 virus” in late 2019 (which is not testable under rt-PCR protocols (**well-known to Fauci**), and are in-truth most likely exosomes,
4. The deafening silence on the Wuhan-specific analysis of Dr. Andrew Kaufman,
5. The “[18 month shut down](#)” demand from Zeke Emanuel proclaimed on CNN, etc.
6. The Gates “*when we have a vaccine*” Reddit quote above, which was parroted by Emanuel in #5 above (and vice-versa!),
7. [Vicious, highly motivated attacks against you for mentioning hydroxychloroquine](#),
8. The censoring of the good work of Dr. Vladimir Zelenko, there are many others,
9. April 3, 2020 WSJ rant, “[The Coronavirus Pandemic will Forever Alter the World Order.](#)” by Henry Kissinger of [National Security Study Memorandum 200](#). Focused on “lesser developed countries,” in NSSM-200 he advocated for population control through war, disease, abortion, and famine; in his recent rant he once again demands we submit to his ideas about a “[new world order](#),” now being marketed as the “**post coronavirus order.**”



10. The internal Microsoft meeting focused on ID 2020 **and its edict of global vaccinations** and digital identities, mascaraed as closing an “identity gap”:



11. In contrast to 1 -10, the report [“Montana Physician Dr. Annie Bukacek Discusses How COVID-19 Death Certificates Are Being Manipulated,”](#) reveals extensive criminal activity. Similar to their previous agenda-driven practice, wherein AIDS was listed as the COD, Fauci and other vested interests have now transferred their ruse to “COVID-19.”



Should “COVID-19” be reported on the death certificate only with a confirmed test?

COVID-19 should be reported on the death certificate for all decedents where the disease caused **or is assumed to have caused or contributed to death**. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)

**Steven Schwartz, PhD**  
Director – Division of Vital Statistics  
National Center for Health Statistics  
3311 Toledo Rd | Hyattsville, MD 20782

## **The Fauci-Gates Tattoo and ID 2020 versus the US Constitution - Conclusion**

It should not surprise you, as primary guardian and representative of the US Constitution, that infiltration of ideas ranging from NSSM-200 to ID 2020 to ***“post coronavirus order”*** [can only be fortified by secretive or even criminal activity](#). It should not surprise you that these tyrannical ploys are now being escalated; thrust into nations and peoples not protected by our founding document and its implicit protections against abuses wrought by the rich and the powerful . . . the latter relevantly referred to herein as “vested interests.”

## **Vested Interests versus the White House Coronavirus Task Force**

That vested interests have undue or illegal influence on policy formation is well known, and remains very active. Regarding the subject, the most difficult decision of your first term, you should consider that some persons of your Coronavirus Task Force are connected, now or in the past, directly or one-layer-removed, to the Bill and Melinda Gates Foundation.

Alternatively, and relating to the Reference, and therefore notably, [our esteemed Vice President, a Believer, is not one of them:](#)



## **Conclusion and Request**

Given his employment history and priorities, it does not surprise me that Mr. Fauci would thrust a dagger into your back, his boss, and do so very publically. That such behavior occurs from him with a haughty presumed immunity is indicative of the illicit character of the Deep State.

But perhaps you could ask Fauci a simple question for me, and in behalf of the nation as a whole. **This question relates to the Dr. Andrew Kaufman [chart shown on Page 2 above](#).**

The formulations for hydroxychloroquine date to the 1950s. The primary ailment target was malaria. Later the [hydroxychloroquine](#) class was prescribed to treat the symptoms of lupus and rheumatoid arthritis. Please remind Mr. Fauci of the following facts:

- (1) Malaria is not caused by a virus
- (2) Lupus is not caused by a virus
- (3) Rheumatoid arthritis is not caused by a virus

So (vaccination rants in the Washington Post aside), if the “COVID-19 pandemic” is the result of a virus, why would hydroxychloroquine and other supplements of [“known safety profiles”](#) be having so many positive outcomes? Remind Mr. Fauci and his comrades at the Washington Post that we are referring to a 95% range of total recovery.

As a matter of his employment history . . . Please remind Mr. Fauci that [Arthur Ashe](#) and, in stark contrast, Magic Johnson would also like to hear his response to my simple question.

## **Recommendation**

Regarding the subject, The Most Difficult Decision of your First Term (1 May 2020), please do not fail to consult with the subject matters [presented to the First Lady in the Reference](#). The Vice President and SLOTUS can also be of service in this specific regard. I do believe that such has already been occurring. **Godspeed.**

Respectfully yours,

Paul V. Sheridan

# ATTACHMENT 1

President Donald J. Trump  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111

**Subject: The Most Difficult Decision of your First Term (1 May 2020)**  
**Reference: My Letter/Contents to First Lady Melania Trump of 23 March 2020**

## **Preliminary Recommended Conferees**

Jesus the Messiah  
Mary Our Lady of Fatima

Dr. Annie Bukacek (please see Attachment 2)  
Dr. Vladimir Zelenko  
[Dr. Anthony Cardillo](#)  
Dr. Andrew Kaufman  
[Dr. Cameron Kyle-Sidell](#)  
Dr. Kary Mullis (the work of, statements by, deceased)

Mayor Rudy Giuliani  
[Robert F. Kennedy, Jr.](#)  
[Democratic Michigan State Representative Karen Whitsett](#)  
[Magic Johnson](#)



COVID-19 Alert No. 2  
March 24, 2020

## Attachment 2

### New ICD code introduced for COVID-19 deaths

This email is to alert you that a newly-introduced ICD code has been implemented to accurately capture mortality data for Coronavirus Disease 2019 (COVID-19) on death certificates.

Please read carefully and forward this email to the state statistical staff in your office who are involved in the preparation of mortality data, as well as others who may receive questions when the data are released.

### What is the new code?

The new ICD code for Coronavirus Disease 2019 (COVID-19) is U07.1, and below is how it will appear in formal tabular list format.

#### U07.1 COVID-19

**Excludes:** Coronavirus infection, unspecified site (B34.2)  
Severe acute respiratory syndrome [SARS], unspecified (U04.9)

The WHO has provided a second code, **U07.2**, for clinical or epidemiological diagnosis of COVID-19 where a laboratory confirmation is inconclusive or not available. Because laboratory test results are not typically reported on death certificates in the U.S., NCHS is not planning to implement U07.2 for mortality statistics.

### When will it be implemented?

Immediately.

### Will COVID-19 be the underlying cause?

The underlying cause depends upon what and where conditions are reported on the death certificate. However, the rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not.

### What happens if certifiers report terms other than the suggested terms?

If a death certificate reports coronavirus without identifying a specific strain or explicitly specifying that it is not COVID-19, NCHS will ask the states to follow up to verify whether or not the coronavirus was COVID-19. As long as the phrase used indicates the 2019 coronavirus strain, NCHS expects to assign the new code. However, it is preferable and more straightforward for certifiers to use the standard terminology (COVID-19).

### What happens if the terms reported on the death certificate indicate uncertainty?

If the death certificate reports terms such as “probable COVID-19” or “likely COVID-19,” these terms would be assigned the new ICD code. It is not likely that NCHS will follow up on these cases.

If “pending COVID-19 testing” is reported on the death certificate, this would be considered a pending record. In this scenario, NCHS would expect to receive an updated record, since the code will likely result in R99. In this case, NCHS will ask the states to follow up to verify if test results confirmed that the decedent had COVID-19.

### Do I need to make any changes at the jurisdictional level to accommodate the new ICD code?

Not necessarily, but you will want to confirm that your systems and programs do not behave as if U07.1 is an unknown code.

### Should “COVID-19” be reported on the death certificate only with a confirmed test?

COVID-19 should be reported on the death certificate for all decedents where the disease caused **or is assumed to have caused or contributed to death**. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)



# ATTACHMENT 4

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of September 18, 2020 to President Donald Trump

11 Pages





September 22, 2020

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Paul V Sheriddan, Sheridan Paul V  
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[pvs6@cornell.edu](mailto:pvs6@cornell.edu)

18 September 2020

VIA FEDEX AIRBILL [8007 – 9341 - 6373](tel:8007-9341-6373)

President Donald J. Trump  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202 - 456 - 1111

**Subject: The “Law & Order” Presidential Candidacy of Donald J. Trump (3 November 2020)**  
**Reference: My Letter to United States Attorney General William F. Barr of 28 August 2020**

Dear Mr. President:

You cannot campaign or preside with credibility as the Law & Order president **while coddling a criminal** in your mist; in your inner circle:



Your phrase “inherited him” might be appropriate to a stray animal that you decided to take on.

Your “inherited him” phrase should *not* be in-reference to a person that resides in one of the most crucial and powerful positions in your Administration. That position should be staffed with a person **openly and enthusiastically praised by you** . . . it should be someone with a reputation for selfless public service to America, a record untainted by the mere possibility of surreptitious agenda; the person should possess an unrivaled and unassailable history of professional conduct and competence . . .



Within walking distance from the above photograph, black body bags with the corpses of people that were victimized by (what has been labeled as) “SARS-CoV-2” were being dumped into a huge pile at a hidden loading dock in our birth-town of New York City . . . **do you remember complaining about that scene?**

With your “body bags” complaint in-mind, we now connect the vileness of the above photograph to an interview of a person that DOES HAVE a reputation for selfless public service, a person that DOES HAVE a record untainted by surreptitious agenda; a person that DOES HAVE an unrivaled and unassailable history of professional conduct and competence . . . so-much-so that reportedly the Chinese Communist Party (CCP) has threatened her life: **Dr. Li-Meng Yan:**

▶ DR LI-MENG YAN | CHINESE VIROLOGIST WHISTLEBLOWER

**CHINESE VIROLOGIST: THIS VIRUS CAME FROM A LAB**

FOX NEWS channel

To make that **stark** comparative connection, between Dr. Anthony Fauci versus Dr. Li-Meng Yan, we contrast headlines that are favored and actively promoted by the former:

**SCIENCE | CORONAVIRUS COVERAGE**

# **Fauci: No scientific evidence the coronavirus was made in a Chinese lab**

In an exclusive interview, the face of America's COVID-19 response cautions against the rush for states to reopen, and offers his tips for handling the pandemic's information deluge.

## **NO SCRUTINY** Wuhan coronavirus lab may **DODGE** investigation as **WHO** team hunting for origin of pandemic won't bother visiting

**Tom Michael**  
12 Jul 2020, 14:40

In another contrast, given the above types of headlines and the headline atop the next page, as far as we know the CCP has not threatened Dr. Anthony "*inherited him*" Fauci . . .

SEARCH **BLUE RUSH** FOOTBALL PODCAST **NEW YORK POST**

 Black Lives Matter co-founder teams up with...

 Carole Baskin says finding missing former husband would...

 CRIME SCENE DO NOT CROSS

# Dr. Fauci backed funding for controversial Wuhan lab studying origin of coronavirus

By [Joe Tacopino](#) April 29, 2020 | 1:14am | Updated



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2017.)



With obvious implications of the above photograph, wherein so-called public servants are catering to an avowed global de-population multi-billionaire globalist, we emphasize a few recent headlines:

1. **New CDC Report Shows 94% of COVID-19 Deaths in U.S. had Contributing Conditions:**  
*“According to the report, only 6% of deaths have COVID-19 as the only cause mentioned, revealing that 94% of patients who died from coronavirus also had other ‘health conditions and contributing causes.’”*
2. **New York Times: Your Coronavirus Test Is Positive. Maybe It Shouldn’t Be:**  
*“Some of the nation’s leading public health experts are raising a new concern in the endless debate over coronavirus testing in the United States: The standard tests are diagnosing huge numbers of people who may be carrying relatively insignificant amounts of the virus. Most of these people are not likely to be contagious . . . (please see Fauci quote next page).”*
3. **Study: COVID-19 Lockdowns Over 10 Times More Deadly Than Pandemic Itself:**  
*“Simply put, we have drawn upon existing economic studies on the health effects of unemployment to calculate an estimate of how many years of life will have been lost due to the lockdowns in the US, and have weighed this against an estimate of how many years of life will have been saved by the lockdowns. The results are nothing short of staggering... the lockdowns will end up costing Americans over 10 times as many years of life as they will (allegedly) save from the virus itself.”*
4. **Attorney Files Lawsuit to Remove Gov. DeWine’s COVID-19 Emergency Order:**  
*“As the state continues to double down on this continued fraud, going so far as to create FEMA ‘concentration camps,’ we are shining the light...on the dark reality of the COVID response.”*
5. **Judge Rules Pennsylvania Gov. Tom Wolf’s COVID-19 Shutdown Orders Unconstitutional:**  
*“The federal judge ruled forcing businesses to shut down entirely and Gov. Wolf’s stay-at-home order are both unconstitutional. Some business owners say they’ve been waiting to hear a ruling like this for months.”*
6. **COVID-19 emails from Nashville Mayor’s Office Show Disturbing Revelation:**  
*“Emails between the mayor’s senior advisor and the health department reveal only a partial picture. But what they reveal is disturbing.”*
7. **NIH Director: I Could Not Imagine Carrying Out Order to Fire Dr. Fauci:**  
*“ ‘This is a remarkable scientist who has led NIH’s efforts in infectious disease with great distinction for more than 30 years and who continues to be our lead in vaccines...for Covid-19,’ Collins told STAT. ‘The idea of losing that leadership at this critical moment for our nation is **unthinkable.**’ ”*

**Unthinkable!?** Tens-of-thousands of body-bags associated with nursing home COVID-19 deaths; but that is not **unthinkable** for NIH Director Dr. Francis Collins? PCR testing protocols that are known to be misapplied, and exaggerated test results deployed as a fraud; but that is not **unthinkable** for Dr. Collins? Hundreds of thousands of American and global deaths known to be FALSELY attributed solely to “SARS-CoV-2,” but that is not **unthinkable** for Dr. Collins? Hundreds of peer-reviewed studies indicating that face masks are not effective and are indeed mostly harmful, but that is not **unthinkable** for Dr. Collins? An open courtesy copy recipient of my 21 July 2020 letter to his subordinate Dr. Fauci, but no response from Dr. Collins?

Perhaps we should assist Dr. Collins’ **thinking** with a quote from Dr. Anthony “*inherited him*” Fauci:

*“We would really like to see the data, because if there is asymptomatic transmission (of “SARS-CoV-2”) it impacts certain policies that you do regarding screening, etcetera. But the one thing historically people need to realize, that even if there is some asymptomatic transmission, in all the history of respiratory borne viruses of any type, asymptomatic transmission has never been the driver of outbreaks. The driver of outbreaks is always a symptomatic person. Even if there is a rare asymptomatic person that might transmit, an epidemic is not driven by asymptomatic carriers.”*



Given his emphatic statement; not reported by the Fake News Bolsheviks, combined with that photograph, are we to assume that Dr. Fauci is a “carrier”? And what are we to make of lockdown of the non-infected and/or the asymptomatic population, “mask mandates,” and the razing of your first term economy?

### **The Vaccine Canard : The Vested Interests and the Razing by Big Academia**

With this title I am *not* referring to the studied opinion of Mr. Robert F. Kennedy Jr. . . . or that of Dr. Scott Atlas who was recently libeled by vaccine vested interests from Stanford University; his attorney Mr. Marc Kasowitz is demanding public retraction in lieu of a lawsuit for defamation.

But Big Pharma, Dr. Fauci, and Stanford University are not the only vaccine vested interests in focus. Nor is defamation the only legal issue. Legalities and Big Academia in-general are contextual.

One of the most vile, the most insidious prospects benefiting the vaccine vested interests, and their all-out push for global vaccination for "SARS-CoV-2" (for now) is the legal position they orchestrated through the United States Congress, and the counterparts in the United States Supreme Court (USSC).

Prior to November 2016, in *Mutual Pharmaceutical Co., Inc. v. Bartlett*, the USSC granted the defendant near blanket immunity, in essence declaring that Big Pharma "could not be held liable and did not have to pay anything at all," to compensate for the horrific health outcomes of a defective drug. A convenient legislative precursor to this legal ruling; the Public Readiness and Emergency Preparedness Act of 2005.

The ongoing legal and rhetoric details would over-burden this instant letter, but this must be personal: If Mr. Barron Trump, or First Lady Melania Trump, or Mr. Eric Trump, or Ms. Tiffany Trump are vaccinated, and later develop health problems (or death) which can be directly connected to a fast-tracked and faulty vaccine, your legal recourse against Big Pharma is basically and increasingly non-existent. **In *your* pro-vaccine campaign rhetoric, you never mention this legal reality to the voters.**

One of the most notorious vaccine vested interests, the person chaperoned by Collins and Fauci, posed in the middle of them on Page 5 above, is globalist Mr. Bill Gates. On the campus of my alma mater, Cornell University; a building I have attended many times, Bill & Melinda Gates Hall:



It is not unreasonable to presume that the tens-of-millions-of-dollars of Gates' investment in Cornell will render not merely praise, but possibly undue influence, and in areas not directly connected to the overt purpose of Gates Hall. That is, my use of the word 'investment' is specific.



**The Vaccine Canard : The Vested Interests and the Razing by Big Academia – con't**

Under Tab 1 you will find my 28 August 2020 letter to U.S. Attorney General William P. Barr. On Page 9 you will find Item 3 (screenshot) :

3. **The ongoing issue of proposed mandatory global vaccinations, and the public pronouncements, practices, and policies that are being implemented to psychologically condition the populace and university students for enforcement of what has been properly coined as “medical tyranny.”**

The connection between Gates and the current president of Cornell University is not tentative; both are computer scientists. Under Tab 2 you find my letter to Dr. Fauci of 21 July 2020. You note that Cornell President Ms. Martha Pollack is an open recipient of my Fauci letter; received **long-prior to making the following utterly false declaration to the returning Cornell University students and staff :**

7/31/2020

### Cornell Student Behavioral Compact

Until there is an effective vaccine for COVID-19, we live in a world of significantly enhanced community and personal health risks. The university cannot eliminate those risks, even with the best of planning. We can, however, work together to reduce those risks, and each member of our returning Cornell community must adopt a culture of shared responsibility for our safety and well-being. That will necessitate behaving, both on campus and off campus, in ways that at times will be difficult and may feel constrained, but are crucial both for Cornell and for the greater community in which we live. **The Cornell University Student Behavioral Compact 2020-2021 sets forth our behavioral expectations for Cornell students joining us in Ithaca for the 2020-2021 academic year in order to minimize transmission of COVID-19 and protect those most vulnerable to the virus. This Compact applies to all undergraduate, graduate and professional students who reside in or return to the greater Ithaca area and/or the Cornell University campus community for the 2020-2021 academic year.**

**Mandatory Vaccination as a Requirement of University Admission**

Purposely ignored, but already demonstrated globally, **the notion promoted by Pollack/Gates/Fauci** that the only way to reduce the risk of SARS-CoV-2 to our “community and personal health” is through a vaccine, is not merely mistaken; **it is a bold-faced lie.** Endemic to the lead-off words that Pollack approved for the ‘*Cornell Student Behavioral Compact*’ is a major but *unstated* vested interest agenda:

**Through the undue influence and false rhetoric of vested interests, ranging from the Bill & Melinda Gates Foundation to Dr. Anthony Fauci to the World Health Organization to Big Pharma; and through the enactment of a legal / legislative frameworks that would also shield Big Academia from defective vaccine liabilities, their hidden agenda includes establishment of compulsory mandatory vaccination as a requirement for university admission. The steps already implemented embolden my suspicion that such is not merely incompetent, or merely theoretical, but part of a broad criminal conspiracy. I will not allow the historically great Cornell University, my alma mater, to be sullied by the motivations of selfish vested interests or the agendas of short-term clerks.**

Attached under the tabs below are the following letters:

Recipient	Subject	Tab
Attorney General William P. Barr U.S. Department of Justice – 28 August 2020	<b>Demand for Criminal Investigations Relating to “COVID-19 Pandemic”</b>	1
Dr. Anthony S. Fauci, Director NIAID – 21 July 2020	Official Response to SARS-CoV-2 / COVID-19 Related Questions	2
First Lady Melania Trump – 23 July 2020	Question Regarding Mr. Barron Trump	3
Dr. R. Albert Mohler, Jr., President Southern Baptist Theological Seminary – 3 August 2020	Southern Seminary and Boyce College – Covenant and Commitment	4
Mr. Wilson Masilingi, Ambassador Embassy United Republic of Tanzania – 7 August 2020	Letters to Dr. Anthony Fauci, and First Lady of the United States Melania Trump	5
President Donald Trump / Vice President Mike Pence – 13 August 2020	My Letter to Dr. Anthony S. Fauci of 21 July 2020	6

You are not the only person that inherited Dr. Anthony Fauci and his associates, and their deeds and “advice.” Returning to your 31 August assessment that you “inherited him,” please note Page 35 of Tab 2:

The truth is Dr. Fauci . . . a person with your academic and professional credentials, a person in your position, a person with your responsibility . . . your opinions and actions should be, historically and currently, impeccable, unassailable, and unimpeachable.

**But in the opinion of some, that is not the case.** Interviews of the type orchestrated by politically vested-interests such as Wolf Blitzer and CNN should not be occurring.

Ongoing headlines fortify my concerns; **especially the interview by Tucker Carlson of Dr. Li-Meng Yan** (Pages 2 - 6 above). Persons very knowledgeable, not limited to Dr. David Martin, have already openly declared that many crimes have been committed. In this context, please direct U.S. Attorney General William Barr to respond to my letter of 28 August 2020 (Tab 1).

I recognize that, at least at this time, complex intermingled international issues cloud what actions are open to you. But you cannot campaign or preside with credibility as the Law & Order president while coddling a criminal in your mist; in your inner circle. See you on November 4, 2020.

Respectfully yours,

Paul V. Sheridan

Attachments

**Courtesy Copy Recipients**

Vice President Michael R. Pence  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111  
FedEx Airbill 8007-9341-6373

Attorney General William P. Barr  
US Department of Justice  
950 Pennsylvania Avenue, NW  
Washington, DC 20530-0001  
202-514-2000  
FEDEX GROUND-BILL 1283181-00005517

Dr. Anthony S. Fauci, Director  
NIAID  
5601 Fishers Lane  
Rockville, MD 20892  
301- 496 – 5717  
FEDEX GROUND-BILL 1283181-00005424

Dr. Francis S. Collin, Director  
National Institute of Health  
9000 Rockville Pike  
Bethesda, MD 20892  
301-496-4000  
FEDEX GROUND-BILL 1283181-00005531

President Martha E. Pollack  
Cornell University  
300 Day Hall  
Ithaca, NY 14853  
607-255-5201  
FEDEX GROUND-BILL 1283181-00005548

Mr. Robert S. Harrison, Chairman  
Cornell University Trustees  
c/o The Clinton Foundation  
1633 Broadway - 5th Floor  
New York, NY 10019  
212-397-2255  
FEDEX GROUND-BILL 1283181-00005555

Mr. Tom Fitton, President  
Judicial Watch  
Suite 800  
425 Third Street SW  
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FEDEX GROUND-BILL 1283181-00005562

Mr. Thomas Renz, Esq. \*  
Renz Law LLC - Suite 162  
1907 W State Street  
Fremont, Ohio 43420  
419-351-4248  
FEDEX GROUND-BILL 1283181-00005579

\* Please see Item 4, Page 5 of 10 above.

# ATTACHMENT 5

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of August 13, 2020 to President Donald Trump and Vice President Michael Pence

3 Pages



August 17, 2020

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[pvs6@cornell.edu](mailto:pvs6@cornell.edu)

13 August 2020

VIA FEDEX AIRBILL [8007 - 9341 - 6318](tel:8007-9341-6318)

President Donald J. Trump  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111

Vice President Michael R. Pence  
The White House  
1600 Pennsylvania Ave NW  
Washington, DC 20500  
202-456-1111

**Subject: My Letter to Dr. Anthony S. Fauci of 21 July 2020**

Dear Mr. President/ Mr. Vice President:

As you can see from the attached, you both received your copy of the subject letter on 22 July 2020; Dr. Fauci received his on 29 July 2020 (first page overleaf). **As of this writing I have not received a response from Dr. Fauci.**



Upon review with literally thousands, the most strident response, to the subject letter, seems to be public concern/outrage regarding the following quote segments from page 32:

**“I (Paul Sheridan) am unclear how combatting retroviruses in-general, which utilize enzymatic reverse transcriptase, which allow it to transcribe DNA from the RNA template, connects to the processes of Beta-coronavirus. The only plausible explanation is that you have tacitly admitted to a deeply contentious truth: *Your mRNA-based vaccine will inherently re-write the human DNA.*”**

**And now, you (Fauci), President Trump, VP Pence, Bill Gates, Dr. Francis Collin, and multi-billion-dollar pharmaceutical corporations are ranting about “*Operation Warp Speed,*” promoting an expensive taxpayer-funded vaccine that will expose humanity to the uncharted dangers of mRNA ?”**

As Dr. Fauci is fully aware, and openly sought/favored decades ago, the manufacturers of these types of vaccines are immune from civil liability with respect to injury or death resulting from their wares:

I discussed this fact with **First Lady Melania Trump** in my letter to her of 23 July 2020:  
Subject: *Question Regarding Mr. Barron Trump*, Reference: *"You Have No Right Not To Be Vaccinated,"* available here:

<http://pvsheridan.com/Sheridan2Melania-3-23July2020.pdf>

### **Conclusion / Request**

I am told that most of my materials are not "getting through." Given the subject matters, and the ongoing practice of censorship that so permeates the entire nation, especially The Swamp, I am not surprised. Please consider this reality in-general when it comes to your deliberations on the COVID-19 issues.

Request: Please direct Dr. Fauci to respond to the subject letter, and prior to any distribution of an alleged vaccine for SARS-CoV-2. His response should **not** be limited to that issue alone, but to each and every question posed. You will find questions on pages 3, 8, 9, 11, 16, 19, 23, 25, 27, and 28.

Again, on page 1 of the subject letter **I quote Dr. Fauci** from his 10 July 2020 interview with the Financial Times of London, a news media outlet known for its catering to large financial vested interests:

" I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven't been on television very much lately."

Please direct him to continue to effect this "reputation" in his response(s) to the subject letter.

Respectfully yours,

Paul V. Sheridan

### Attachment and enclosure

cc: Dr. Scott W. Atlas  
Hoover Institution of Stanford University  
Suite 500  
1399 New York Avenue, NW  
Washington, DC 20005  
202-760-3200  
FedEx Ground [1283181-00005494](https://www.fedex.com/ship/track/1283181-00005494)

# ATTACHMENT 6

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of August 27, 2021 to Mr. Anthony Fauci and Ms. Martha Pollack

44 Pages



Dear Customer,

The following is the proof-of-delivery for tracking number: **774692191462**

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	Receptionist/Front Desk
<b>Signed for by:</b>	K.BAUSCH	<b>Delivery Location:</b>	9000 ROCKVILLE PIKE
<b>Service type:</b>	FedEx Standard Overnight		
<b>Special Handling:</b>	Deliver Weekday		ROCKVILLE, MD, 20852
		<b>Delivery date:</b>	<b>Sep 1, 2021</b> 16:13

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**Shipping Information:**

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<b>Tracking number:</b>	774692191462	<b>Ship Date:</b>	Aug 31, 2021
		<b>Weight:</b>	3.0 LB/1.36 KG

**Recipient:**

**Dr. Anthony S. Fauci, NIAID**  
31 Center Drive  
NIAID Central Drop-off  
ROCKVILLE, MD, US, 20852

**Shipper:**

**Paul V. Sheridan, DDM Consulting**  
22357 Columbia Street  
DDM Consulting  
Dearborn, MI, US, 48124

**Reference**

**Joint Pollack/Fauci Ltr - 1**





September 01, 2021

Dear Customer,

The following is the proof-of-delivery for tracking number: **774692152281**

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	
<b>Signed for by:</b>	Signature release on file	<b>Delivery Location:</b>	300 DAY HALL
<b>Service type:</b>	FedEx Standard Overnight		
<b>Special Handling:</b>	Deliver Weekday		ITHACA, NY, 14853
		<b>Delivery date:</b>	<b>Sep 1, 2021</b> 12:16

---

**Shipping Information:**

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<b>Tracking number:</b>	774692152281	<b>Ship Date:</b>	Aug 31, 2021
		<b>Weight:</b>	3.0 LB/1.36 KG

**Recipient:**  
Ms. Martha Pollack, Cornell University  
300 Day Hall  
Office of the President  
ITHACA, NY, US, 14853

**Shipper:**  
Paul V. Sheridan, DDM Consulting  
22357 Columbia Street  
DDM Consulting  
Dearborn, MI, US, 48124

**Reference**                      **Joint Pollack/Fauci Ltr - 1**

Proof-of-delivery details appear below; however, no signature is available for this FedEx Express shipment because a signature was not required.

Thank you for choosing FedEx

22357 Columbia Street  
Dearborn, MI 48124-3431  
313-277-5095  
pvs6@cornell.edu

27 August 2021

VIA FEDEX AIRBILLS 774692152281 / 774692191462

Ms. Martha E. Pollack  
Cornell University  
300 Day Hall  
Ithaca, NY 14853  
607-255-5201 / president@cornell.edu

Mr. Anthony S. Fauci  
NIAID  
5601 Fishers Lane  
Rockville, MD 20852  
301-496-2263 / anthony.fauci@nih.gov

**Subjects :** Ongoing Global Criminal Participations / Promotions of “SARS-CoV-2” :

- (1) The Fraudulent ‘Emergency Use Authorization’ (EUA)
- (2) Pfizer mRNA Inoculation Induced Severe Injury and Death
- (3) Connections to Nursing Home Deaths
- (4) Connections to Suicide Deaths – American K-12 Students

**Reference 1:** Mr. Albert Bourla Severe Injury Assault of Ms. Jummai Nache

**Reference 2:** Martha Pollack Collaborations – Pfizer / NY Forward Reopening Advisory Board

**Characterization 1:** Show Me the Company You Keep, and I Will Tell You *What You Are*

**Characterization 2:** Show Me the Company You Do *Not Keep*, and I Will Tell You *What You Are Not*

Dear Ms. Pollack / Mr. Fauci:

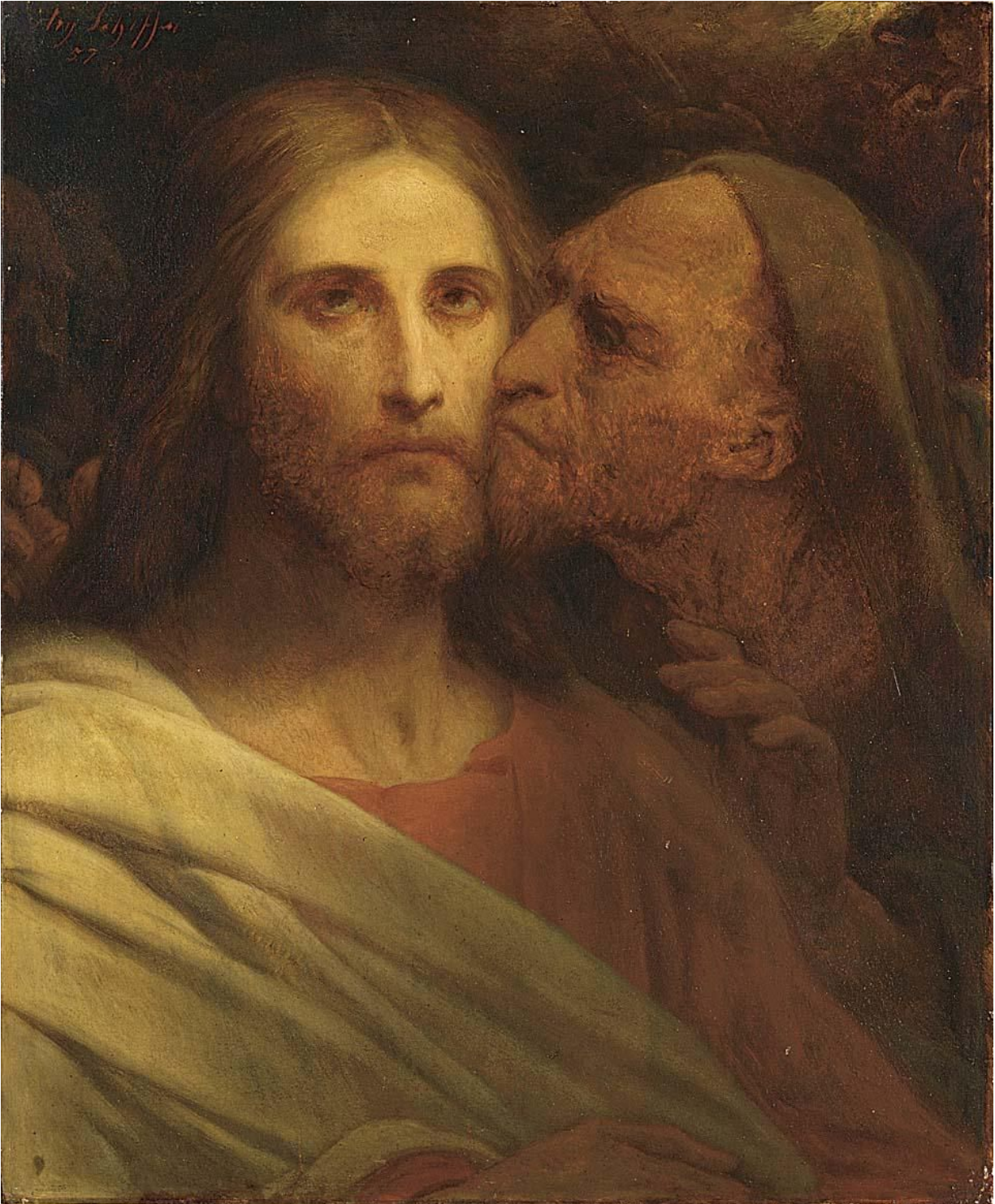
Connecting you to the Subjects is not tentative; the facts are overwhelming:



## **PREAMBLE**

We review the Subjects and Characterizations in a context which affirms that current events are foreseeable, but merely symptomatic of our epoch. In terms of human affairs at the macro level, and your participations at the micro level, no image is more representative or comprehensive than the following:

Preamble – con't



The above is not offered as religious overture, but as an epochal event. <sup>A</sup> Regarding *your* 'thirty pieces of silver' and *your* blatant betrayal of trust, I welcome your diatribe. **But even if you incorrectly allege abuse, know that I have been thoroughly pre-empted and have already presented that pre-emption:**

---

<sup>A</sup> Betrayal of the Nazarene Jesus, by the Judæan Judas Iscariot; painting by Mr. Ary Scheffer (1795 – 1858).

Preamble – Conclusion

## NIH director: We asked God for help with COVID-19, and vaccines are the ‘answer to that prayer’

*‘This is about saving lives,’ NIH Director Francis Collins told RNS.*



National Institutes of Health Director Dr. Francis Collins speaks during a Senate Health, Education, Labor and Pensions Committee hearing on new coronavirus tests on Capitol Hill in Washington on May 7, 2020. (AP Photo/Andrew Harnik, Pool)

I assure humanity that Jesus did not hear, nor respond to the “prayer” of the charlatan Francis Collins. His fraud on COVID “vaccines” confirms *his* betrayal on many levels; let us expose two :

(1) The needle deployed against Cornell University is filled with an mRNA concoction that is **not** a vaccine. Known to Fauci, as we already reminded him, his patent application of 2003 was **rejected** by the US Patent office on that basis; the generic mRNA concoction was **not** and is still **not** a vaccine. I stated in July 2021:

“Its content, delivery and true purpose does not meet the most loosely defined medical, legal, moral . . . or even patent office criteria . . . and Fauci knows it!” <sup>B</sup>

(2) Collins, Donald Trump and you two, will proclaim that your COVID concoction resulted from *recent* “rigorous effort” by the Food and Drug Administration (FDA) and New York based Pfizer; that your all-new “vaccine” emerged initially from ‘Operation Warp Speed,’ conducted in the context of a no-alternatives emergency during 2020. **All bold-faced lies!** <sup>C</sup>

<sup>B</sup> See Page 7 of Exhibit ( or <https://pvsheridan.com/sheridan2wilson-1-19july2021.pdf> )

<sup>C</sup> The “rigorous effort” involves banning of truth by your comrades in Big Tech. The patent history of SARS viruses, “vaccines,” test kits, etc., are rigorously censored by your colleagues at Facebook, YouTube, Instagram, Twitter, WordPress, LinkedIn, etc. One prominent example of such is preserved here (See Page 15 below):

[http://pvsheridan.com/Dr-Fuellmich\\_Dr-Martin\\_July-2021-Corona-Investigative-Committee.mp4](http://pvsheridan.com/Dr-Fuellmich_Dr-Martin_July-2021-Corona-Investigative-Committee.mp4)

**REFERENCE 1 : Mr. Albert Bourla Severe Injury Assault of Ms. Jummai Nache**

Before I review the two Characterizations:

Show Me the Company You Keep, and I Will Tell You **What You Are**,

Show Me the Company You Do Not Keep, and I Will Tell You **What You Are Not**,

I present a criminal and *one* of his victims. We return to the Ms. Nache horror in the Conclusion.

Mr. Albert Bourla was inserted into Pfizer in early 2019 in preparation for the revised timetable of COVID-17, from the original schedule of the “SARS-CoV-2” outbreak. Bourla is a friend of Mr. Fauci and a colleague of Ms. Martha Pollack. An advocate of Klaus Schwab and *The Great Reset*, Bourla immediately directed Pfizer to **drop all off-patent**, safe & proven, low cost/price/profit **medicines** from the Pfizer product line: <sup>D</sup>



**As you know, Bourla enjoys taxpayer-funded “sales” of his mRNA concoction that is immensely profitable, and exempt from civil liabilities; the latter, liability immunity, resulted from a RICO scheme pre-arranged by Mr. Anthony Fauci.**

Similar to the ‘mandatory vaccine’ enforced by Ms. Pollack upon Cornell University, a dedicated nurse **Ms. Jummai Nache was coerced** by the so-called “medical profession” into a needle filled with a known-to-be-deadly mRNA concoction from Pfizer / Bourla:



The horror that happened to Jummai, and your connections to it, are discussed below.

<sup>D</sup> Shocking, but expected Pollack / Bourla collaboration, and its connection to Jummai and the Subjects are discussed in the Reference 2 (Pages 20 – 22 below).

**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***

This list is so long and sullied that it renders the undersigned deeply grieved; especially regarding but not limited to the fate of my alma mater, Cornell University. I have decided to restrict the 'Company' of this section to only Subject-relevant persons...such as your close personal friend Andrew Cuomo:



**If left to you Ms. Pollack, or you Mr. Fauci, the lady being sexually assaulted by your COVID colleague Andrew Cuomo; that lady will *also* suffer the horror you have inflicted upon Ms. Jummai Nache . . . or worse.**

Review of connected headlines will affirm that prognostication . . .






**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
– *con't*


**NASSAU DAILY VOICE**

Nassau Daily Voice serves Glen Cove, Hempstead, Long Beach, North Hempstead & Oyster Bay [SEE NEARBY TOWNS](#)

NEWS

## COVID-19: Fauci Praises Cuomo, New York's Response To Pandemic

 Zak Failla    12/08/2020 7:30 a.m. 

Infectious disease expert Dr. Anthony Fauci had nothing but praise for New York's handling of the COVID-19 pandemic and the state's plan going forward during a surprise virtual appearance on Monday morning. 

Fauci was a special guest speaker during New York Gov. Andrew Cuomo's COVID-19 briefing on Monday, Dec. 7 in Manhattan, where he sounded off on the state's progress and offered his advice for handling the pandemic, which he says will [peak in mid-to-late January](#).

"(New York's plan) seems really sound," said Fauci, appearing by video from Washington, DC. "There's a lot of backup contingencies which I like ... New York isn't going to get caught short-handed on this, that I'm certain of."

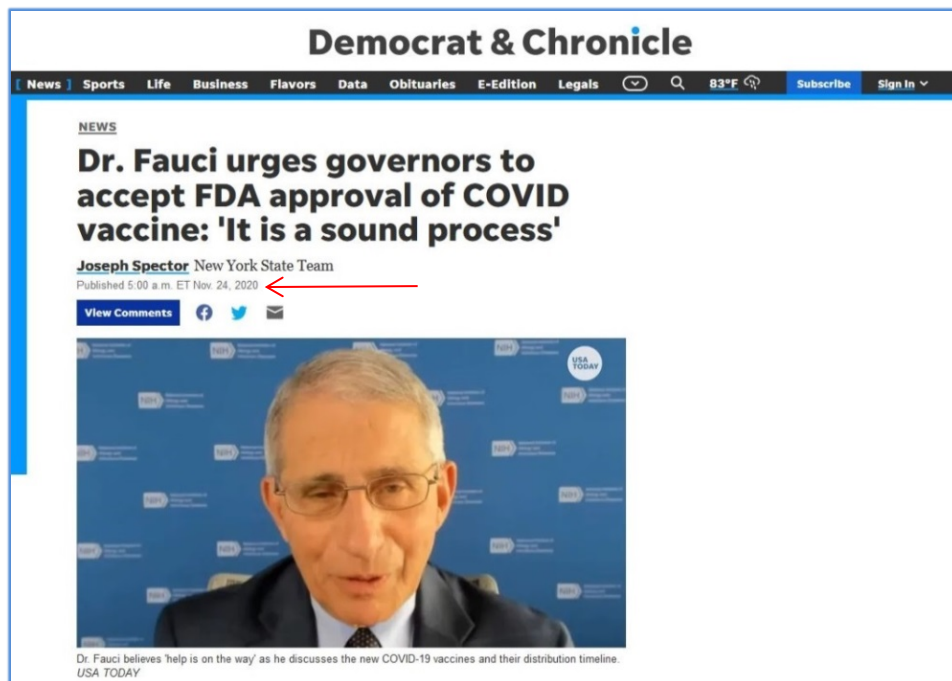
**A mere three days after this "surprise," FDA comrades awarded Mr. Bourla his requested Emergency Use Authorization (EAU) on December 11 2020; an mRNA monopoly guarantying BILLIONS for Pfizer. The EUA depended upon conspiratorial censorship of safe, non-vaccine treatment protocols, and smear campaigns against the MDs who saved COVID patients worldwide. The EUA racketeering was a follow-up to Fauci's liability immunity. Marketing schemes involving "variants," and of course "booster shots," are all pre-planned RICO crimes on a global scale. <sup>E</sup>**

<sup>E</sup> Some of the MDs directly and indirectly, or implicitly, slandered and libeled by Fauci/Pollack are presented in the section, 'Show Me the Company You Do Not Keep, and I Will Tell You What You Are Not' (Page 16 -19 below).



**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
**– con't**

“Surprise virtual appearance”? **Another example of manipulations and bold-faced lies.** The upcoming EUA was known to Fauci and Cuomo prior to their “surprise” of December 8 2020. Headlines *pre-date* their adolescent stunt, wherein the **“pathological liar”** is quoted. These post 2020-election news reports were *also* Fauci’s play to disconnect his needles from the anti-Trump rhetoric of Joe Biden: <sup>F</sup>



Regarding these connected headlines, justification of the EUA was criminal, and at least three-fold:

- (1) The ‘Public Readiness and Emergency Preparedness Act’ evoked by HHS Secretary Alex Azar in February 2020, and the cheer-leading by President Trump about Operation Warp Speed, amounted to an open declaration by COVID vested interests that the citizenry and Congress were all ‘born yesterday.’ These and other criminal deceptions to establish the EUA are detailed below (Intermission 1, Page 15).
- (2) Fauci, Collins (and CDC Director Rochelle Walensky) deployed a coordinated censorship against early non-vaccine COVID treatment protocols. The Fauci/Collins/Walensky lie that *“no adequate, approved, and available alternatives”* existed, and therefore Bourla’s mRNA needle was *“the only path forward,”* **are bold-faced lies which (purposely) ensured the horrors in the New York nursing homes, etc.**
- (3) The EUA required death statistics that frightened the public, and overwhelmed the twits in The Swamp and the Cuomo suck-ups in Albany, New York. By endorsing the banning of early non-vaccine treatments you two participated in the crimes of gross criminal negligence and **depraved indifference** . . . for starters.

Fauci / Pollack, you are aware that the nursing home deaths were avoidable. You participated in lies (2) and (3) to assist the EUA and Cornell mandatory “vaccinations” respectively. In so-doing you accommodated The Great Reset, and the profiteering of Pfizer CEO Mr. Bourla. *That* was a major priority.

<sup>F</sup> Mr. Fauci, your reputation as a **“pathological liar”** includes a source a short walk from Ms. Pollack’s 300 Day Hall office. Unlike the ‘liability immunity’ that you orchestrated for Big Pharma, the Cornell University official who described you in the public domain as a **“pathological liar,”** unlike your needles, does not need liability immunity, and indeed he/she might welcome your legal claims for libel/slander.

**CHARACTERIZATION 1: Show Me the Company You Keep, and I Will Tell You *What You Are***  
**– *con't***

In December 2020, prior to the Fauci-emails release, the news outlets served as Pfizer public relations. None reported on the true causes of the **agonizing deaths in New York nursing homes**. Earlier, while Governor Cuomo was assaulting people, and threatening those who exposed him, this photograph was taken at a Manhattan nursing home:



**Ms. Pollack:** No Cornell news outlet prior-to or after your Stay-Homecoming 2020 (which was re-purposed as a 'Mandatory Vaccination' precursor) . . . not the Cornell Chronicle, not the Cornell Daily Sun, not your "New Normal" website; none reported **on the causes of tens-of-thousands of nursing home deaths**. Weill-Cornell Medical College is located in Manhattan, where your COVID comrades Cuomo and Fauci promenaded their "surprise" December 7, 2020 marketing stunt, a precursor to the Pfizer/EUA gala: <sup>G</sup>



<sup>G</sup> Ms. Pollack, your "contribution," subverting the Cornell Homecoming 2020 for the 'Mandatory Vaccination' purpose, speaks volumes about *what* you are, and The Company You Keep (Mr. Albert Bourla and Cuomo's New York Forward Reopening Advisory Board). Regarding Homecoming 2020, you and Fauci received my June 9 2021 letter; see Pages 5 - 13 : <https://pvsheridan.com/sheridan2fauci-4-9june2021.pdf>

**CHARACTERIZATION 1: Show Me the Company You Keep, and I Will Tell You *What You Are***  
 – *con't*

'Company' is restricted to Subjects-relevant persons, such as Fauci's close friend, the bribery-philanthropist charlatan Bill Gates:



**Is there is any person more hated than you Mr. Fauci?** Bill Gates perhaps? A person that is allegedly banned from 38 countries? The lack of integrity you share with Mr. Collins serves the needs of the Bill & Melinda Gates Foundation. Cloaked behind philanthropy, the Foundation was reinvigorated by your revised "SARS-CoV-2" / COVID breakout to late 2019.

**THE | DIPLOMAT**  
READ THE DIPLOMAT, KNOW THE ASIA-PACIFIC

---

THE PULSE | SOCIETY | SOUTH ASIA

## Why Are Indians So Angry at Bill Gates?

The latest backlash against the Gates Foundation in India is the result of years' worth of concerns raised by human rights activists and civil society.

---

By **Akshay Tarfe**  
 June 15, 2021 ←






Soon similar headlines will emerge on the world scene for both Mr. Fauci and Ms. Pollack. But in addition to **#ArrestBillGates** (which exists), we will soon have **#ArrestAlbertBourla**, and **#ArrestAndrewCuomo**, and **#ArrestFrancisCollins**, and **#ArrestTonyFauci**, and **#ArrestMarthaPollack**, and . . .

**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You What You Are**  
– *con't*

Whether the context is NIH/NIAID or Cornell University, Bill Gates has long been the focus of criminal investigations regarding his marketing-of and profiteering from known-to-be-unsafe vaccines.

His criminality is manifold. But regarding his fraudulent promotions of vaccine safety, and the original 2017 schedule of "SARS-CoV-2," **the best evidence of criminality is Gates' mouth:**

*"So the second time I saw him (President Trump) was the March after that, and so March 2017 in the White House. In both of those two meetings he asked me if vaccines weren't a bad thing, because he was considering a commission to look into, uh, ill effects of vaccines, and somebody, I think his name was Robert*



*Kennedy Jr., was advising him that vaccines were causing bad things. And I said, 'No, that's a dead end. That would be a bad thing, don't do that.' "*

Perhaps you two, and your colleague Mr. Gates, will be in-attendance with Mr. Philip Nache . . . at the anticipated funeral of his lovely wife Jummai; **a coerced recipient of the Mr. Albert Bourla needle:**



**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
**- con't**

Mr. Robert Harrison was appointed as Chief Executive Officer of the Clinton Global Initiative (CGI) in 2006. He was appointed to chair the Cornell University Board of Trustees (BOT) in March 11, 2011.



That he chose to associate his person with lying, cheating, fornicating, adulterous self-absorbed people is indicative, and his personal right. But by serving Bill Clinton (and his baggage), and by chairmanship of the BOT at my alma mater, Harrison is now *my* business, especially if he is connectable to the Subjects.

With Yale Law graduate Robert Harrison as conduit, the connection of the Clintons to Cornell, implicitly includes persons of notoriously questionable or criminal character:



This Harrison/Clinton conduit entangles Cornell with globally based crimes against humanity. An indication includes deployment of Ms. Chelsea Clinton as CGI ambassador combatting **“vaccine hesitancy.”**




**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
**– *con't***

Prior to an escalator ride in New York, **Mr. Fauci**, while serving as the highest paid member of the **Executive Branch**, sent improper intragovernmental emails; several revealed your bias regarding the 2016 presidential election. Your emails regarding “Candidate H” were part of a tacit conveyance to your global COVID / RICO colleagues that everything was on schedule:

UNCLASSIFIED U.S. Department of State Case No. F-2014-20439 Doc No. C05797268 Date: 12/31/2015

RELEASE IN FULL

---

**From:** Mills, Cheryl D <MillsCD@state.gov>  
**Sent:** Wednesday, January 23, 2013 6:21 PM  
**To:**  H  
**Subject:** FW: Today's performance

From your doctor admirer

---

**From:** Fauci, Anthony (NIH/NIAID) [E] [mailto:AFAUCI@niaid.nih.gov]  
**Sent:** Wednesday, January 23, 2013 6:10 PM  
**To:** Mills, Cheryl D  
**Subject:** Today's performance

Cheryl:  
 Anyone who had any doubts about the Secretary's stamina and capability following her illness had those doubts washed away by today's performance before the Senate and the House. She faced extremely difficult circumstances at the Hearings and still she hit it right out of the park. Please tell her that we all love her and are very proud to know her.  
 Warm regards,  
 Tony

**Anthony S. Fauci, MD**  
 Director  
 National Institute of Allergy and Infectious Diseases  
 Building 31, Room 7A-03  
 31 Center Drive, MSC 2520  
 National Institutes of Health  
 Bethesda, MD 20892-2520  
 Phone: (301) 496-2263  
 FAX: (301) 496-4409  
 E-mail: [afauci@niaid.nih.gov](mailto:afauci@niaid.nih.gov)

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Your 2016 election expectations included accommodation of COVID-2017. While your heart-throb was in play (the person you had been referring to as “Candidate H,” doing so two-years before Ms. Hillary Rodham-Clinton had announced), massive effort was being expended to usher-in what was codified by Mr. Klaus Schwab as *The Great Reset*.<sup>H</sup>

<sup>H</sup> Mr. Fauci, your assessment of Candidate H is representative of your stupidity and lack-of-concern for humanity. You were aware that the Secretary Clinton hearings of 2013 investigated **murder of Americans in Benghazi Libya**. Candidate H testified, quote:

*“The fact is we had four dead Americans. Was it because of a protest or was it because of guys out for a walk one night who decided that they'd go kill some Americans? **What difference at this point does it make?!?”***

“Hit it right out of the park”?! “Very proud”?! And your comments regarding Mr. Bourla versus Ms. Jummai Nache?

**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
**– *con't***

In the context of COVID-2017, the escalator gala by Melania and Donald Trump on June 15, 2015, and



the Trump victory on November 8 2016, explain in-part the vile anti-Trump comments, tacitly endorsed by Mr. Fauci and Ms. Pollack. COVID-2017 as an operative of *The Great Reset* explains **the massive relentless hate campaign** that the Trump family endured, including young Barron, subsequent to the 45<sup>th</sup> presidential inauguration on January 21 2016.

On January 10, 2017, mere days prior to inauguration of President Donald Trump, the errand boy to *The Great Reset*, “America’s Doctor,” was compelled to announce postponement of COVID-2017:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

It is likely that the March 2017 White House meetings (detailed by Bill Gates on Page 10 above) were originally planned for COVID-2017 . . . **but those meetings were supposed to involve the complicity, if not outright participations of your “Candidate H.”**


**CHARACTERIZATION 1 : Show Me the Company You Keep, and I Will Tell You *What You Are***  
– Conclusion

Just prior to the 2016 election, *The Great Reset* and its NIAID COVID-2017 errand boy were confronted by diametrically opposed headlines; Donald Trump versus “Candidate H”:

FIRST OPINION

## Say what you will about Donald Trump. He’s right about drug companies

By Charles D. Rosen July 22, 2016



JOE RAEDLE/GETTY IMAGES

With [Donald Trump](#) finally ensconced as the Republican nominee for president, it’s high time to applaud his spot-on positions on the pharmaceutical industry.

As a physician, I believe that Trump is absolutely right about allowing cheaper pharmaceutical drugs manufactured abroad to be sold in the United States. He is right that the pharmaceutical companies essentially sell their products to the federal government via Medicare and Medicaid without competitive bidding. In other areas of the budget, such as defense, federal laws require competitive bidding. It is outrageous this doesn’t occur with drugs and devices, especially since the health care budget is right behind defense in terms of expense.

Despite her rhetoric, big pharma likes Hillary

Clinton tops 2016 field in drug industry donations

Clinton outpaces rivals in drug company donations

Mag Turrell | Leanne Miller  
Thursday, 10 Mar 2016 | 3:05 PM ET  
CNBC



“...spent more time than anyone would have liked dealing with this vaccine silliness today.”

**“Our agreements with big pharmaceutical companies are important. We are also doing agreements with the large pharmaceutical companies for vaccines”**

“The Science is clear...vaccines work”

In ‘CHARACTERIZATION 2 : Show Me the Company You Do Not Keep, and I Will Tell You *What You Are Not,*’ we further substantiate the relevance of these headlines to COVID-2017.



**INTERMISSION 1 : The Coronavirus Investigation Committee**

Evidence asserting global conspiratorial COVID criminality is presented in a 70-minute interview of Dr. David Martin by Dr. Reiner Füllmich; July 2021 meeting of The Coronavirus Investigation Committee:



With no-need to reference the *self-inculpatory* emails of Fauci to Peter Daszak, **Dr. Martin testified as follows**; testimony which implies the veracity of COVID-2017:



“Somebody knew something in 2015 and 2016 which gave rise to my favorite quote of this entire pandemic. And by that, I am not being cute. My favorite quote of this pandemic was a statement made in 2015 by Peter Daszak. The statement that was made by Peter Daszak, reported in the National Academy of Press Publications in February 12, 2016; and I am quoting,

**‘We need to increase public understanding of the need for medical countermeasures such as a pan-corona-virus vaccine. A key driver is the media, and the economics will follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profits at the end of the process.’”**

SHARE

LIFE & ARTS | IDEAS | THE SATURDAY ESSAY

## Bill Gates: The Best Investment I’ve Ever Made

Global health groups that buy and distribute medicines are a sure bet for saving lives, but their government funding is now in danger, and even the biggest philanthropies can’t fill the gap

By [Bill Gates](#)  
Jan. 16, 2019 7:01 pm ET

In the context of the Subjects, the notion held by Ms. Martha Pollack, that Gates Hall on the Cornell campus is the result of “philanthropy,” is not merely ignorant, it is at-best complicity, but most likely, in view of University Development Office prospecting, co-conspiracy. <sup>1</sup>

<sup>1</sup> See Reference 2 discussion of similar prospect, Mr. Albert Bourla, Pages 21-22 below.

## **CHARACTERIZATION 2 : Show Me the Company You Do Not Keep, and I Will Tell You *What You Are Not***

Footnote G, Page 8 above, introduces the little-known 'New York Forward Reopening Advisory Board.' That COVID-2019 farce is presented in the Reference 2 (Pages 20-22 below).

As Ms. Pollack, and her Cornell Homecoming 2020 cohort Anthony Fauci are fully aware, the people discussed in this section were not only *not*-invited to that New York Forward Reopening Advisory Board, they were actively shunned . . . **in stark contrast to Pfizer CEO Mr. Albert Bourla.**

Ms. Pollack, Mr. Fauci . . . you two are definitely not of the same character, integrity and competence of Dr. Vladimir Zelenko. He represents, as a matter of history, 'Company You Do **Not** Keep.'



Located in Monroe, New York (where I spent a large part of my life), Dr. Zelenko has treated innumerable patients that present COVID-like symptoms . . . all have survived and returned to normal life:

Guess how many patients under Dr. Zelenko's care were subjected to the fraudulent RT-PCR "test for COVID-19," and therefore were cannon fodder for CDC statistics that were used to justify the Fauci EUA?

Guess how many were hospitalized, and had a ventilator shoved into their face, which ensured death?

Guess how many times Dr. Zelenko was invited by State of New York "health authorities" (the buffoons that Ms. Pollack has relied upon for "guidance"), either to testify in Albany, or as a visiting physician to alleviate the Cuomo/Fauci nursing home deaths?

*Instead*, guess how many of Dr. Zelenko's patients were treated with COMPLETE SUCCESS with **hydroxychloroquine**, an off-patent inexpensive proven-safe medicine (that Mr. Fauci declared caused "adverse events," as he lied about "data" developed by his colleagues at Surgisphere) ?

Guess how many patients under Dr. Zelenko's care have been victimized by "**breakthrough**" events that resulted from use of hydroxychloroquine, and had to reinstate medical care to survive COVID? <sup>J</sup>

Guess how many patients under Dr. Zelenko's care have been listed under the fraudulent Centers for Disease Control (CDC) Vaccine Adverse Events Reporting System (VAERS)?

**Guess how many patients under Dr. Zelenko's care were injected with the same Pfizer/Bourla needle that was used on Ms. Jummai Nache?**

<sup>J</sup> Both of you received my July 21 2020 letter which discusses this Fauci fraud against **hydroxychloroquine** (a fraud deployed to bolster meetings held by Cuomo, **and attended by Pollack as a member** of Cuomo's New York Forward Reopening Advisory Board). See Pages 4-8 here <http://pvsheridan.com/sheridan2fauci-1-21july2020.pdf>

**CHARACTERIZATION 2 : Show Me the Company You Do *Not* Keep,  
and I Will Tell You *What You Are Not***

Ms. Pollack, Mr. Fauci . . . you two are definitely not of the same character, integrity and competence of Dr. Pierre Kory. He represents, as a matter of history, ‘Company You Do **Not** Keep.’



Also with offices in New York, Dr. Kory has treated patients **WORLDWIDE** that present COVID-like symptoms . . . all have survived and returned to normal life:

Guess how many patients under Dr. Kory’s care were specimens of the RT-PCR “test for COVID-19” fraud, and therefore used as cannon fodder for the World Health Organization (WHO) statistics that were used to justify global injection of humanity with Mr. Albert Bourla’s needle?

Guess how many times Dr. Kory was invited by State of New York “health authorities,” either to testify in Albany, or as a visiting physician to alleviate the Cuomo/Fauci nursing home deaths?

*Instead*, guess how many patients under Dr. Kory’s care were treated with **COMPLETE SUCCESS** with **IVERMECTIN**, an off-patent inexpensive proven-safe medicine (that Fauci declared an “animal drug”)?

Guess how many patients under Dr. Kory’s care have been victimized by “**breakthrough**” events that resulted from use of ivermectin, and had to reinstate medical care for COVID?

Guess how many patients under Dr. Kory’s care have been listed under the (under-counting) CDC VAERS *after* use of ivermectin?

Guess how many patients under Dr. Kory’s care have been listed under the World Health Organization (WHO) Coronavirus COVID-19 Global Dashboard, after use of ivermectin? <sup>K</sup>

**Guess how many patients under Dr. Kory’s care were injected with the same Pfizer/Bourla needle that was used on Ms. Jummai Nache?**

<sup>K</sup> Both of you received my December 21 2020 letter which discusses the suicide deaths of our K-12 children, but also discusses the vilification of Dr. Kory by US Senator Gary Peters (D-MI) during the Senate Committee on Homeland Security and Governmental Affairs of 8 December 8 2020, This coordinated slandering, endorsed by Fauci, targeted the off-patent ivermectin. See Page 3 here <http://pvsheridan.com/sheridan2fauci-2-21december2020.pdf>

**CHARACTERIZATION 2 : Show Me the Company You Do *Not* Keep,  
and I Will Tell You *What You Are Not***

Ms. Pollack, Mr. Fauci . . . you two are definitely not of the same character, integrity and competence of Dr. Richard Bartlett. He represents, as a matter of history, 'Company You Do **Not** Keep.'



Although not located in New York, Dr. Bartlett was among the first to treat innumerable patients in Texas that presented COVID-like symptoms . . . all have survived and returned to normal life:

Guess how many patients under Dr. Bartlett's care were specimens of the RT-PCR "test for COVID-19" fraud, and spewed as cannon fodder for the **Texas** Department of State Health Services statistics; the latter used to justify tyrannical state-wide lockdowns and "mask mandates"?

Guess how many times Dr. Bartlett was invited by *any* state "health authority," either to testify, or as a visiting physician to alleviate nursing home horrors in New York, New Jersey, Michigan, Pennsylvania?

*Instead*, guess how many patients under Dr. Bartlett's care were treated with COMPLETE SUCCESS with a **nebulized Budesonide protocol**, which involves off-patent inexpensive proven-safe medicines?

Guess how many patients under Dr. Bartlett's care have been victimized by "**breakthrough**" events that resulted from use of nebulized Budesonide, and had to reinitiate medical care for COVID?

Guess how many patients under Dr. Bartlett's care have been listed under the fraudulent CDC VAERS, *after* use of nebulized Budesonide?

**Guess how many patients under Dr. Bartlett's care were injected with the same Pfizer/Bourla needle that was used on Ms. Jummai Nache?**



**CHARACTERIZATION 2 : Show Me the Company You Do *Not* Keep,  
and I Will Tell You *What You Are Not* – Conclusion**

Both of you are recipients of my April 12 2021 letter which discusses the Nuremberg Code, Medicalization, The Impossibility of Informed Consent, Connections of Dr. Anthony Fauci to the Nursing Homes Deaths, and the crime of 'Depraved Indifference.'

In addition to the MDs discussed above (Zelenko, Pierre, and Bartlett), I also presented in April 12 2021 the renowned Yale University epidemiologist Dr. Harvey Risch, director and founder of America's Frontline Doctors Dr. Simone Gold, and recent appointee to direct the Idaho Central District Health Dr. Ryan Cole.

Pictured on the left, Risch, Gold and Cole are also examples of The Company you do *NOT* keep:



At-right is The Company you *DO* keep . . . a 'vested interest,' who ensured that off-patent medicines were **NOT MENTIONED** as "advise," that **Ms. Pollack assisted with** as member of the NY Forward Reopening Advisory Board . . . during the time **she was aware** that thousands were dying in the nursing homes . . . due to **ensorship of available, safe and 99% effective non-vaccine treatments.**

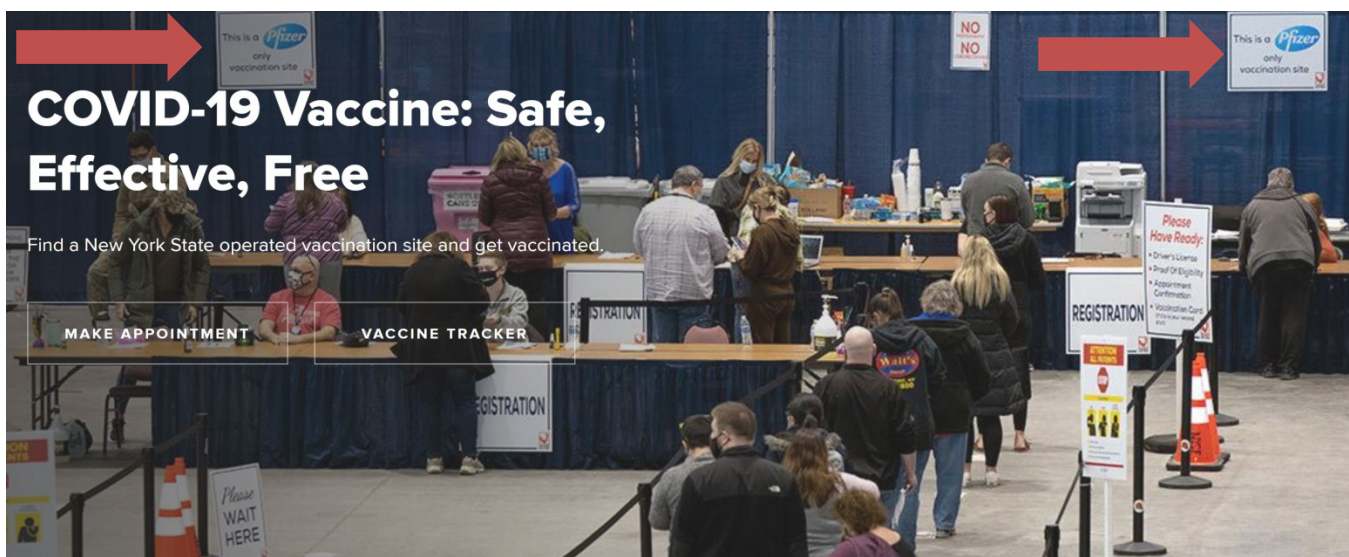
**REFERENCE 2 : Martha Pollack Collaborations – Pfizer / NY Forward Reopening Advisory Board**

Receiving scant media attention throughout 2020, ex-Governor Cuomo accommodated the needs of not merely The Great Reset, but also the central ploy of that cult which demands the addiction of humanity to an mRNA gene modification injection that the inventor declared *“too dangerous to use on humans.”*

The surreptitious method that Cuomo used was formed in March 2020, called the “New York Reopening Advisory Board.” The first meeting of this board occurred all the way back in April 2020:



It is no-surprise that Cuomo’s Board website includes a “Pfizer Only” promotion:



**The question: Who were not key members of this “New York Forward Reopening Advisory Board, and who were, and why . . .**

**REFERENCE 2 : Martha Pollack Collaborations – Pfizer / NY Forward Reopening Advisory Board**  
**– con't**

First we ask :

**Of the hundreds on Cuomo’s New York Forward Reopening Advisory Board, were practicing medical doctors, located in New York, who had successfully treated patients, by the thousands, and were known to have done so without resorting to a Pfizer mRNA needle, doing so during the time that TENS-OF-THOUSANDS of elderly were dying in the nursing homes . . . were any invited to advise Cuomo’s board?**

**Was New York Dr. Vladimir Zelenko invited ?**

**Was New York Dr. Pierre Kory invited ?**

In the alternative we ask:

**Was a person whose goal was the maximizing of corporate profits, who had previously banned all low-cost off-patent medicines from his drug portfolio to ensure those profits, who had knowledge of the COVID success of the off-patent medicines worldwide, but whose priority was instead the marketing of an mRNA concoction as a “vaccine,” that was known to be dangerous but was shielded from all civil product liability . . . a person now pushing “variants,” and “booster shots” . . . was *that* person invited to Cuomo’s New York Forward Reopening Advisory Board?**

**Of course! He is CEO of Pfizer . . . his name is Mr. Albert Bourla.**



**REFERENCE 2 : Martha Pollack Collaborations – Pfizer / NY Forward Reopening Advisory Board**  
**– Conclusion**

But we must address a most insidious question:

**Is Cornell University in any way connectable to coordinated disinformation and subversion of known-to-be-successful non-vaccine COVID treatments that would have saved millions worldwide, had already done so in the great nation of India, but could also have saved tens-of-thousands in the New York nursing homes ?**

**And *if* the answer is ‘Yes’ . . . *then* is there any person who is responsible for the overall COVID conduct of Cornell University, and implicitly that ‘Yes’ answer?**

**Was there a member on the NY Forward Reopening Advisory Board from Big Academia, such as my alma mater Cornell University?**

**Her name is Ms. Martha Pollack, the current President of Cornell University:**



**Ms. Pollack, seated next to you during the 2020 NY Forward Reopening Advisory Board meetings, during the time that body bags were scarce, being filled with former nursing home residents, **in a demonstration of your abject incompetence (at best)**, you associated Cornell University, *not* with practices and persons that ensured the well-being of humanity, but instead *with the exact opposite*; sampled by the following: <sup>L</sup>**



<sup>L</sup> ‘Body bags’ is discussed with President Trump in September 18 2020, see Page 2:  
<http://pvsheridan.com/sheridan2trump-6-18september2020.pdf>



**INTERMISSION 2 : The RICO Crimes of Liability Immunity – Paul Sheridan versus Fauci / Bourla**

A staunch advocate of transportation safety, Mr. Lee Iacocca, Chairman of Chrysler Corporation, nevertheless recognized that with respect to safety his organization had fundamental problems.

Inside Chrysler, in the 1992 timeframe, it was well-known that he was not pleased when he was compelled to ask the following not-so-rhetorical question:

**“Who is going to fix safety in my company?!”**

Of the ten-of-thousands of personnel to choose from, he chose Paul Sheridan, the undersigned.

Upon being chosen as Chairman of the Chrysler ‘Safety Leadership Team’ (SLT) I was immediately **inundated** with requests that the work and efforts of the SLT to protect Chrysler customers be, not merely circumspect, but secret! The primary source of that criminal request was the defense lawyers, and their corporate Defense Bar.

For two years, as chairman of the SLT, my primary burden was **not** correction or improvement of Chrysler product safety at the technical, engineering or manufacturing level . . . *not even close*. My primary burden was dealing with the deceit, the lies and the outright existing criminality of the corporate Defense Bar and their internal top executive clients. As a result of my Cornell MBA education, and corporate experience, and assertions of professional integrity, I deployed the following adage as a comprehensive rebuttal to the vileness that had characterized “safety,” not merely in the automotive business, but in all product and service enterprises; the overleaf of my business card declares my *modus operandi*:



Paul V. Sheridan  
AA, AS, BS, MBA

First and Foremost Safety is a  
Management Issue

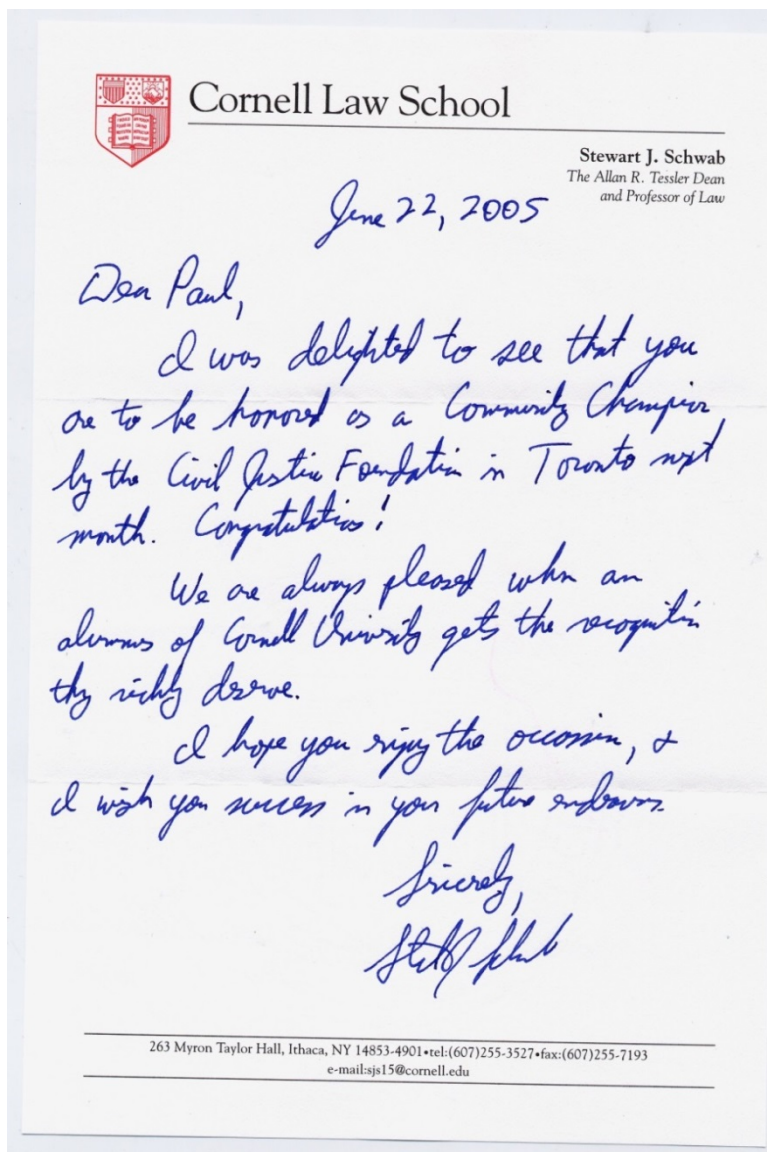
DDM CONSULTING

The Safety and Efficiency of the Transportation Fleet

As a result of my work, after over-a- decade of effort, I was nominated by the American Bar Association for the much-heralded Civil Justice Foundation ‘National Champion Award.’ From over-1400 nominations I was chosen, and remain the first and only person to win the award for transportation safety.

From announcements in many business and legal journals, Cornell University Law School Dean Stewart Schwab sent a much appreciated hand-written note congratulating me as follows:

**“ . . . an alumnus of Cornell University gets the recognition they richly deserve.”**

**INTERMISSION 2 : The RICO Crimes of Liability Immunity – Paul Sheridan versus Fauci / Bourla**  
– con't

Of the millions of words, and thousands of images, and hundreds of hyperlinks that you (and Provost Michael Kotlikoff) have deployed on the Cornell “COVID-19 WEBSITE,” not once do we find forthright disclosure regarding the legal/medical fraud imposed upon University students and staff by :

**“Liability Immunity.”****Why is that Ms. Pollack?**

**In stark contrast to your pusillanimity,** how many times do you think I proposed ‘liability immunity’ as key to a competent, ethical and moral approach to transportation safety? How many times did I propose ‘liability immunity’ when assisting the Department of Transportation (DOT) with corrections to the Federal Registry?

**How acceptable would your ‘liability immunity’ approach have been to accident victims?**

**How acceptable would your coercions and “mandatory vaccinations” have been to Cornell University Founder Mr. Ezra Cornell?**

**INTERMISSION 2 : The RICO Crimes of Liability Immunity – Paul Sheridan versus Fauci / Bourla**  
***– Conclusion***



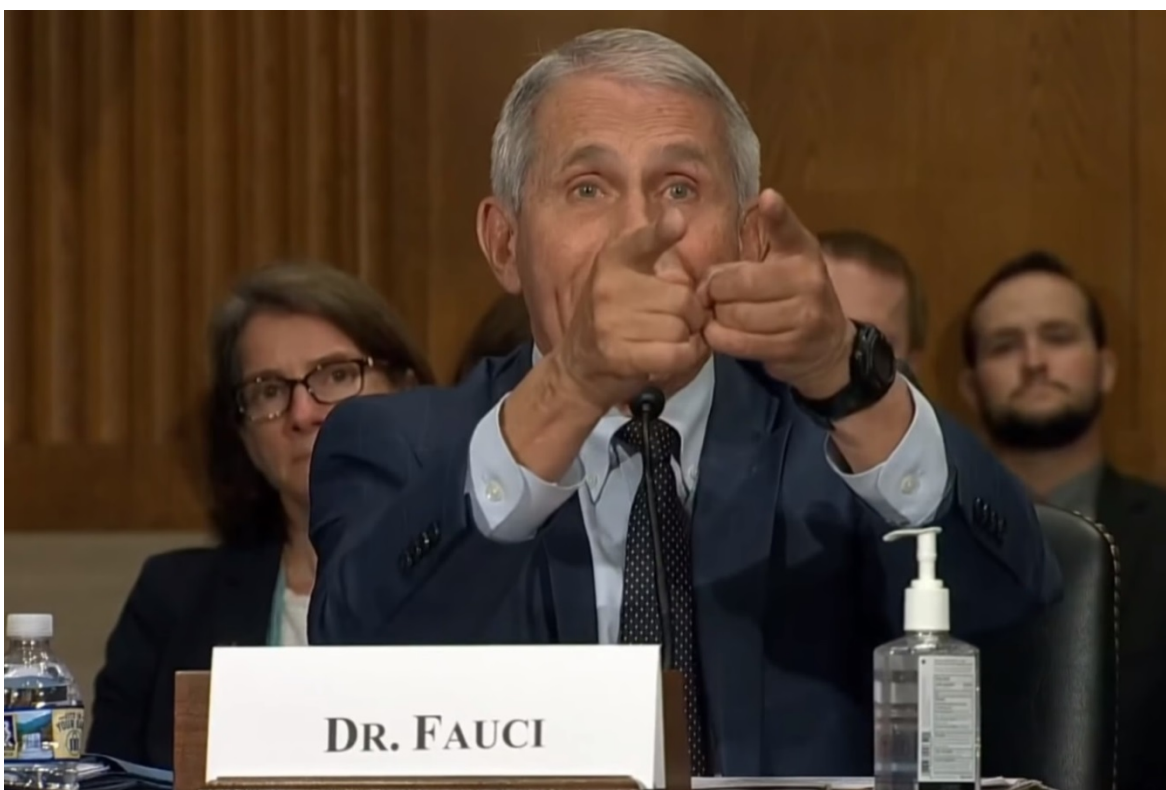
**Summary : Mr. Anthony Fauci**

In your interview with the Financial Times of London of July 10, 2020, you spewed the following self-absorbed protestation:

*“ I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven’t been on television very much lately.”*

Your sputum occurred at the time that mass graves were being filled with New York nursing home corpses, and **frantic but secret emails** were sent between you and criminals such as Mr. Peter Daszak. <sup>M</sup>

In another example of self-absorbed vehemence, one year later on July 20 2021, but now **after** the frantic and secret but heavily redacted emails had been released; before the US Senate on Health, Education, Labor and Pensions Committee, you declared that you are in no-way connected to *any* gain-of-function research, at the Wuhan Laboratory of Virology, or anywhere else:



In a vile but revealing **demonstration of your true person**, you began putting your fingers into the faces of the Senate, in a **threatening and violent manner**. If your proximity was closer, and took place on campus, your shouting and physical actions would have been interpreted by any reasonable person as imminent physical danger; **your arrest by the Cornell University Police would have occurred / been justified.** <sup>N</sup>

<sup>M</sup> See INTERMISSION : The Coronavirus Investigation Committee, Page 15 above.

<sup>N</sup> Personal observation: Your behavior is not unfamiliar to me; it portends a person whose position is increasingly tenuous compared to the associates you thought were going to ‘have your back.’

**Summary : Mr. Anthony Fauci – Conclusion**

As you are fully aware, by virtue of being an open recipient, in the just-filed lawsuit of *Mr. Ravi Batra versus Mr. Peter C. Daszak, Janet D. Cottingham, EcoHealth Alliance, Incorporated*, your testimony and supporting unredacted documents, emails, etc., will be part of extensive discovery. None of the legal process, in my hard won experiences of over thirty years, will accommodate your history of violence, retaliation, threatening outbursts, or “sugarcoating” in behalf of your vested interests comrades.

<b>FILED: NEW YORK COUNTY CLERK 08/17/2021 03:06 PM</b>	INDEX NO. 157709/2021
NYSCEF DOC. NO. 1	RECEIVED NYSCEF: 08/19/2021

SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF NEW YORK

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RAVI BATRA,  
*Plaintiff,* (NYSCEF CASE)

- against -

PETER C. DASZAK, JANET D. COTTINGHAM a/k/a  
JANET DASZAK, and ECOHEALTH ALLIANCE INC.,  
*Defendants.*

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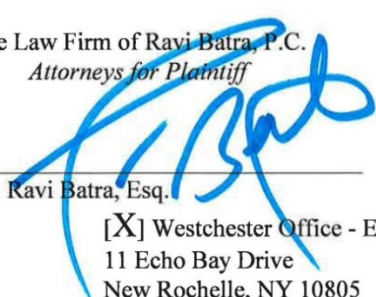
**THE ABOVE NAMED DEFENDANTS ARE HEREBY SUMMONED**, to answer the complaint in this action and to serve a copy of your answer, or, if the complaint is not served with this summons, to serve a notice of appearance, on the Attorneys for Plaintiff within twenty (20) days after the service of this summons, exclusive of the day of service or within thirty (30) days after service is complete if this summons is not personally delivered to you within the State of New York; and in case of your failure to appear or answer, judgment will be taken against you by default for the relief demanded in the complaint.

*COUNTY DESIGNATED AS THE PLACE OF TRIAL: NEW YORK COUNTY*

*BASIS OF VENUE: CPLR 503(a); New York County is the county in which a substantial part of the events or omissions giving rise to the claim occurred.*

DATED: August 17, 2021

The Law Firm of Ravi Batra, P.C.  
*Attorneys for Plaintiff*

By: Ravi Batra, Esq. 

The Batra Building  
142 Lexington Avenue  
New York, NY 10016  
212-545-1993  
E-Mail: ravi@ravibatralaw.com

Westchester Office - Echo Law  
11 Echo Bay Drive  
New Rochelle, NY 10805

I am requesting that plaintiff extend discovery to the RICO scheme of ‘**liability immunity**,’ enacted by you in-behalf of Mr. Albert Bourla, Pfizer Corporation, etc., and how your ‘**liability immunity**’ scheme was endemic to your true role in the global COVID-19 pandemic; that of the defendants, PLA comrades at the Wuhan Laboratory of Virology, Mr. Bill Gates, Mr. Francis Collins, Mr. Christian Drosten, former New York Governor Andrew Cuomo, former presidential candidate Ms. Hillary Rodham-Clinton, etc.

**Summary : Ms. Martha Pollack**

Your comrade, the movie star, the person you declared a source of “guidance” in your alleged battle against “SARS-CoV-2,” is the defrocked and disgraced Andrew Cuomo:



On March 25, 2020, Governor Cuomo, contrary to all common sense and well-known medical practices, directed by Executive Order (EO) that “COVID positive” people be forcefully and indiscriminately inserted into *all* New York nursing homes. In that EO your friend Cuomo ordered that “**SARS-CoV-2 testing**” of **new residents be banned**; your “source of guidance” outlawed testing that was previously standard practice for any new resident, for even the flu! <sup>o</sup>

But you and Cornell University Provost Michael Kotlikoff said nothing in protest of such torrid corruption; *why is that Ms. Pollack?*

A person close to me commented: “**This is too stupid to be stupid!**” That was very insightful, and absolutely true. There was nothing “stupid” about Cuomo’s nursing home EO. It was purposeful and provably conspiratorial . . . and you, Ms. Pollack, were/are directly connectable to all of this.

## **Cuomo loses Emmy following scandal, resignation**

By NICK NIEDZWIADK | 08/24/2021 01:29 PM EDT

Regarding The Company You Keep, a mere three days ago, Tuesday August 24, 2021, the news media and their headlines continue to divert from real priorities; the relevant facts and criminality of COVID-19, **and the tens-of-thousands of avoidable deaths in the New York nursing homes** . . . and the conspiratorial inspiration, The Great Reset, codified by your comrade Mr. Klaus Schwab.

<sup>o</sup> Contrary to the testimonial *crap* from Dr. Howard Zucker, there was nothing “inadvertent” about the true purpose of the Cuomo Executive Order which forced COVID patients into the nursing homes. If this “doctor” still claims ‘*There is much to learn about this virus,*’ I suggest he seek grammar school level tutoring from Dr. David Martin and Dr. Reiner Füllmich (Page 15 above). Alternatively, I can assure Zucker that very little is unknown about ‘liability immunity.’

**Summary : Ms. Martha Pollack – Con't**

In the original reports of November 2020, International Academy President and CEO Mr. Bruce Paisner, declared that Governor Cuomo was being given an Emmy Award:

“ . . . because he effectively created television shows, with characters, plot lines, and stories of success and failure.”

None of these farcical Emmy Award news reports covered the horrors of the New York nursing homes; not even in the context of “failure.” Now, just three days ago, your comrade Mr. Paisner is spewing:

STATEMENT FROM THE INTERNATIONAL ACADEMY  
OF TELEVISION ARTS & SCIENCES

August 24, 2021

The International Academy announced today that in light of the New York Attorney General's report, and Andrew Cuomo's subsequent resignation as Governor, it is rescinding his special 2020 International Emmy® Award. His name and any reference to his receiving the award will be eliminated from International Academy materials going forward.

Do you see any mention of, or any update regarding Cuomo's murderous COVID “stories of failure” in New York in general, **or the nursing homes in particular?** Wednesday offered the following:

New York Governor Kathy Hochul promised more government transparency on her first day in office, and by day's end her administration had quietly acknowledged nearly 12,000 more deaths in the state from COVID-19 than had been publicized by her predecessor, Andrew Cuomo.

New York now reports nearly 55,400 people have died of COVID-19 in New York, based on death certificate data submitted to the Centers for Disease Control and Prevention, up from about 43,400 that Cuomo had reported to the public as of Monday, his last day in office.

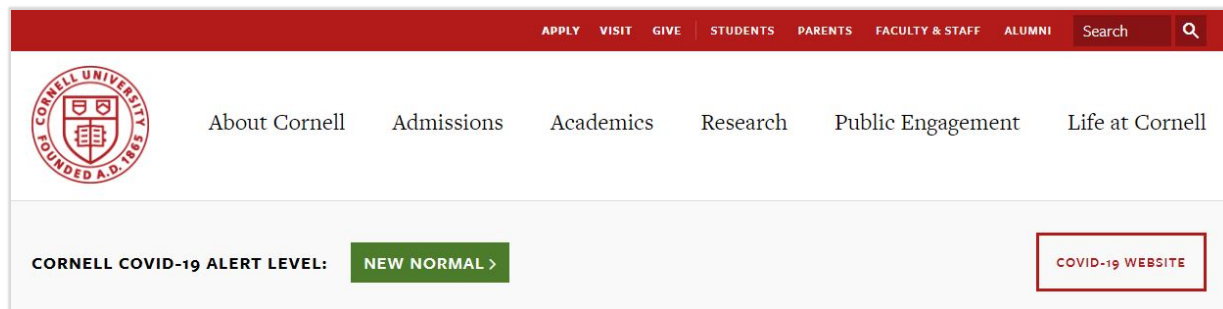
"We're now releasing more data than had been released before publicly, so people know the nursing home deaths and the hospital deaths are consistent with what's being displayed by the CDC," Hochul said Wednesday on MSNBC. "There's a lot of things that weren't happening and I'm going to make them happen. Transparency will be the hallmark of my administration."

Whether in November 2020 when the farcical Emmy was awarded, or in August 2021 when the farcical Emmy is rescinded, your media friend Mr. Paisner never connects his rescinding to murder in the nursing homes . . . **nor did you as President of Cornell University, a life sciences institution.** <sup>P</sup>

<sup>P</sup> Governor Hochul is a courtesy copy of this letter; I assure you, and her, that I will be one of many testing her trendy claims of “transparency” in the not-too-distant future.

**Summary : Ms. Martha Pollack – Con’t**

Shortly after the Cuomo EO that forced diseased residents into the nursing homes, you began your service to Pfizer CEO Mr. Albert Bourla on the New York Forward Reopening Advisory Board. Immediately you subverted the Cornell home page for an exploitive, commercially-premised scare campaign:



As was well-known to you, Provost Michael Kotlikoff and Cornell Counsel Ms. Madelyn Wessel, the term ‘New Normal’ was codified for the purpose of marketing . . . vaccines! Merck Corporation deployed The New Normal as part of their roll-out promotions at the January 6 2004 conference entitled:

**“SARS and Bioterrorism: Bioterrorism and Emerging Infectious Diseases, Antimicrobials, Therapeutics and Immune Modulators”**

As you three were *also* fully aware, “New Normal,” which you dutifully regurgitated, was a term then embraced as a lockdown branding campaign, fully endorsed and adopted by:

World Health Organization  
The Global Preparedness Monitoring Board  
People’s Republic of China Center for Disease Control  
The Bill and Melinda Gates Foundation  
Coalition for Epidemic Preparedness Innovations  
Mr. Anthony Fauci (NIAID) and Mr. Francis Collins (NIH) . . . *to name a few.*

“At this time, Cornell is not requiring our employees or students to be vaccinated; however, we strongly encourage each of you to be vaccinated when you become eligible. Vaccination is key to the resolution of this global pandemic, and we hope that you all take this opportunity to protect yourselves, as well as our community”.

If recollection serves, the above “vaccine” roll-out was displayed at your ‘COVID-19 WEBSITE’ **prior** to the EUA of December 11, 2020. The site was updated as you served (1) the NY Forward Reopening Advisory Board and (2) Pfizer CEO Mr. Albert Bourla . . . the other “philanthropist” was also on-cue:

**“The only vaccine, that if everything went perfectly, might seek the emergency use license by the end of October, would be Pfizer.”** Mr. Bill Gates, September 15, 2020.

October?! You too were on-cue while subverting the campus to your “vaccine” agenda. In a grotesque demonstration of inveracity, you orchestrated another “surprise” involving “America’s Doctor” during Homecoming 2020 . . . in October. <sup>Q</sup>

<sup>Q</sup> You received my June 9 2021 letter to Mr. Fauci wherein I detail his and your fraudulent misuse of the campus for your joint agenda (it was not *your* first time). Pages 5 - 13: <http://pvsherdan.com/sherdan2fauci-4-9june2021.pdf>



**Summary : Ms. Martha Pollack – Con't**

While Mr. Gates *continues* to lie about the Pfizer needle as a “vaccine,” parroting the fairy tale that it resulted from Year 2020 Operation Warp Speed, and censoring the truth that in-fact mRNA-based needles and associated patents date to not-later-than 2003; he is also aware that the great nation of India is a market where his person and his “vaccine” profiteering were, and remain **not welcome**.<sup>R</sup>



Like Fauci, Collins, Bourla, Cuomo, Walensky, Daszak, and Susan Wojcicki (YouTube), and Dr. Augustine Choi (Director of Weill-Cornell Medical), and Dr. Soumya Swaminathan (Chief Scientist of the World Health Organization). . . . **you Ms. Pollack** also distort the truth about off-patent COVID treatments; that are not experimental and **do require liability immunity** . . . while defiling Cornell University with these distortions, tens-of-thousands of elderly were left to die, in isolation, in the New York nursing homes.

Your connections to COVID distortions **and outright lies** are well-documented, ranging from your membership on the NY Forward Reopening Advisory Board to ongoing Cornell University website postings. An example of a bold-faced lie, connectable to your person as current President of Cornell University; one among hundreds from today's CornellHealth webpage (screenshot):

**Is the vaccine safe?**

All data currently available indicate that the vaccines are safe. Thus far, no serious long-term side effects have occurred. Some individuals do experience minor side effects that reflect the body's immune response beginning; a tiny number of individuals have experienced allergic reactions and have required immediate and successful treatment.

*All current data? No serious long-term side effects? Minor side effects?! A tiny number!?* As you are fully aware, your so-called “approved vaccines,” that you have injected into the arms of captured, unsuspecting but **coerced** Cornell students and staff, have killed and horribly maimed more human beings in the first six months of deployment (post the fraudulent December 11 2020 EUA), than all true vaccines combined during the previous twenty years! **Let us try that again, in large font:**

Your so-called “approved vaccines,” that you have injected into the arms of unsuspecting but coerced Cornell students and staff, have killed and horribly maimed more human beings in the first six months of deployment **than all vaccines combined during the previous twenty years!**

This “knowledge” is well-known . . . on the next page we review a recent Cornell home page.

<sup>R</sup> On Page 7 of Exhibit 1 you will find the US Patent Office rejection verbiage against the profiteering attempts of the **“pathological liar”** Mr. Fauci versus his mRNA concoction applications dating to 2003. See Item (1) Page 3 above.

**Summary : Ms. Martha Pollack – Con't**

Respect knowledge? Be kind? In case you, and Provost Kotlikoff, and Pfizer CEO Albert Bourla **forgot**, there is nothing kind about the underbelly that motivates your violation of the Nuremberg Code; its letter or spirit. We share more “knowledge” with you. In the Exhibit, I declare on Page 4 (screenshot):

**Preview of the 13 July 2021 Headlines – Everything becomes Nothing ?**

At the beginning of the Fauci Pandemic, **everything is COVID**, and the death statistics are exaggerated.

At the end of the Fauci Pandemic, **nothing is “vaccine,”** and the death statistics are subverted.

From beginning to end . . . one bold-faced lie after another . . . all leading to the following headline:

**CDC withdraws fraudulent PCR testing protocol that was used to falsify covid “positives” to push the plandemic**

Sunday, July 25, 2021 by: Mike Adams

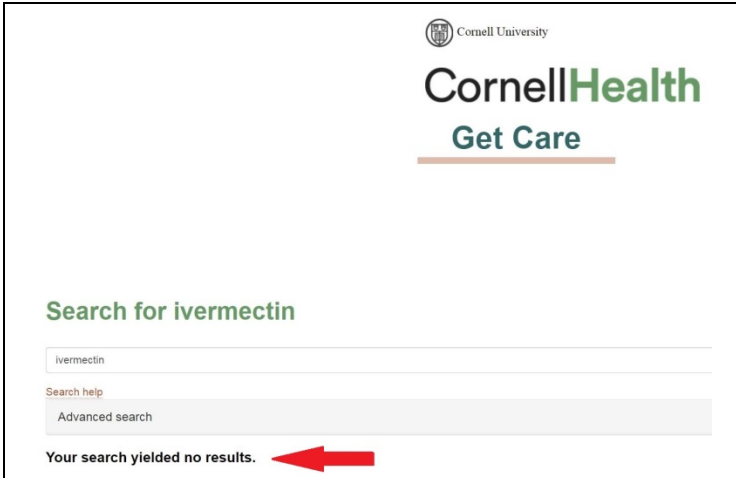

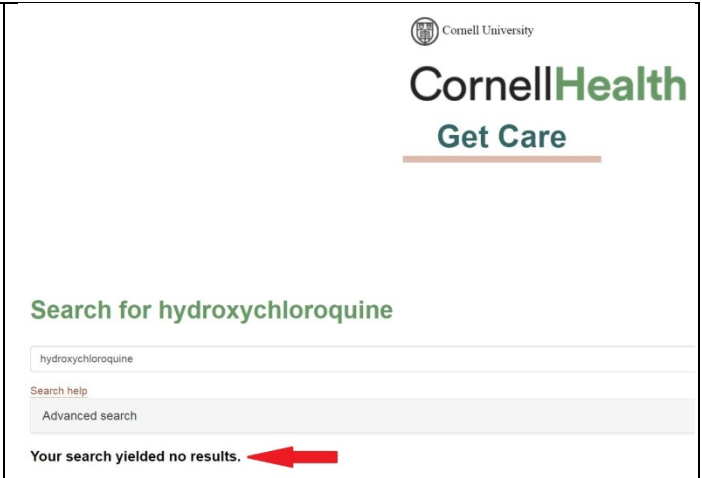

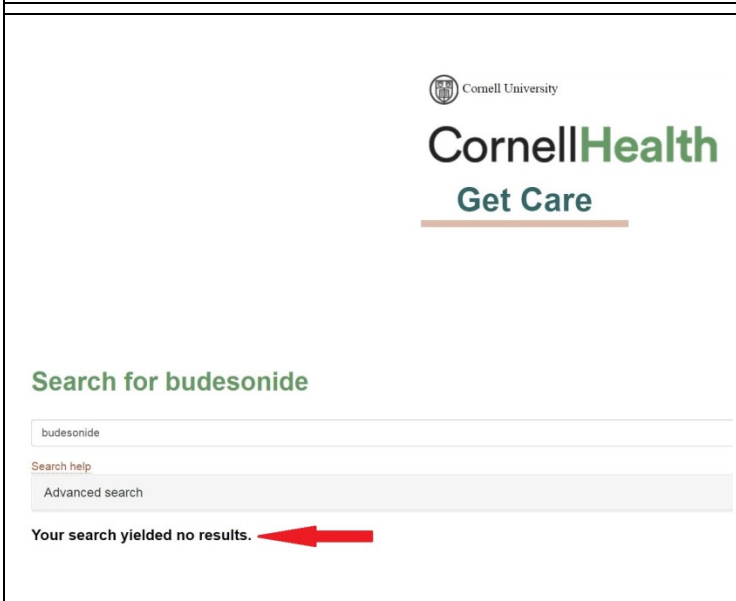

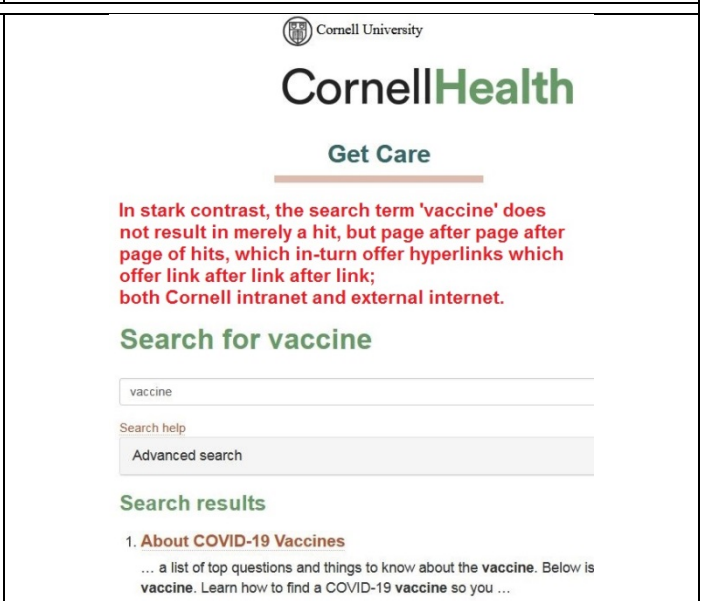
Tags: badhealth, badmedicine, badscience, CDC, coronavirus, COVID, hoax, junk science, pandemic, PCR, Plandemic, science fraud

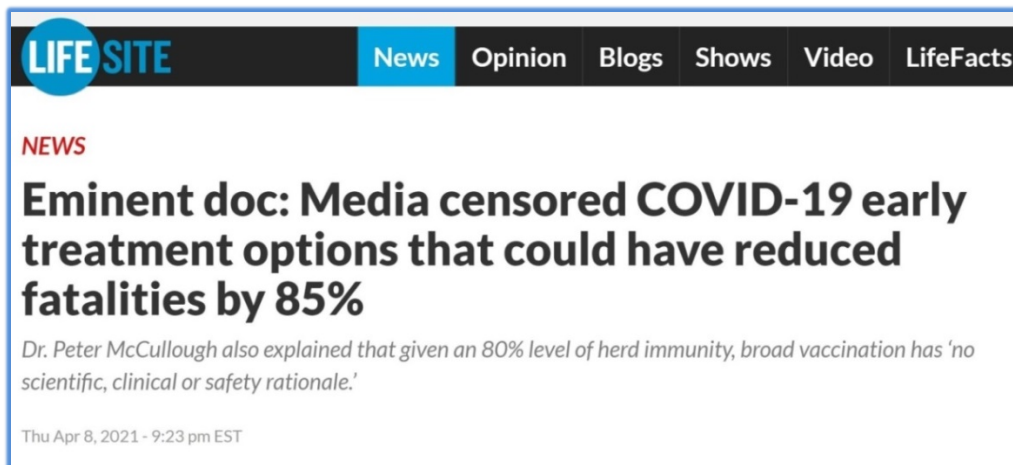
It was well-known **from the very beginning**, the “test” that you deployed against Cornell students and staff can *not*, and never will be able to distinguish between SARS-causing viruses versus, for example, the flu! Without being **clade specific**, it certainly cannot detect the recently deployed “SARS-CoV-2.” In other words, the essence if not the totality of your ‘COVID-19 WEBSITE’ is not merely incompetent, mistaken, or merely outdated. **You and that website (and what has resulted from it) constitute fraud.** <sup>S</sup>

<sup>S</sup> You received my July 21 2020 letter to Mr. Fauci; on Pages 10-11 I requested his “knowledge” regarding the rt-PCR fraud; he never responded with integrity. If *you* need “knowledge” on my use of the phrase “recently uploaded variant ‘SARS-CoV-2,’” have Mr. Fauci explain it to you. As he is aware, the explanation also applies to the recent diversionary sputum from Walensky and Bourla about the “Delta variant,” its connection to patent # 7279327, the GISAID database, and on and on and on.

**INTERMISSION 3 : The CornellHealth COVID “Vaccine” Fraud**

We review another lie from Ms. Martha Pollack, and contrast that lie with very recent headlines from Japan. We contextualize with screenshots of typical searches recently conducted at the CornellHealth website:

 <p>Cornell University <b>CornellHealth</b> <u>Get Care</u></p> <p><b>Search for ivermectin</b></p> <p>ivermectin</p> <p>Search help Advanced search</p> <p>Your search yielded no results. </p>	 <p>Cornell University <b>CornellHealth</b> <u>Get Care</u></p> <p><b>Search for hydroxychloroquine</b></p> <p>hydroxychloroquine</p> <p>Search help Advanced search</p> <p>Your search yielded no results. </p>
 <p>Cornell University <b>CornellHealth</b> <u>Get Care</u></p> <p><b>Search for budesonide</b></p> <p>budesonide</p> <p>Search help Advanced search</p> <p>Your search yielded no results. </p>	 <p>Cornell University <b>CornellHealth</b> <u>Get Care</u></p> <p><b>In stark contrast, the search term 'vaccine' does not result in merely a hit, but page after page after page of hits, which in-turn offer hyperlinks which offer link after link after link; both Cornell intranet and external internet.</b></p> <p><b>Search for vaccine</b></p> <p>vaccine</p> <p>Search help Advanced search</p> <p><b>Search results</b></p> <p>1. <b>About COVID-19 Vaccines</b> ... a list of top questions and things to know about the vaccine. Below is vaccine. Learn how to find a COVID-19 vaccine so you ...</p>



**LIFE SITE** News Opinion Blogs Shows Video LifeFacts

**NEWS**

**Eminent doc: Media censored COVID-19 early treatment options that could have reduced fatalities by 85%**

*Dr. Peter McCullough also explained that given an 80% level of herd immunity, broad vaccination has 'no scientific, clinical or safety rationale.'*

Thu Apr 8, 2021 - 9:23 pm EST

**INTERMISSION 3 : The CornellHealth COVID “Vaccine” Fraud – con’t**



My ‘paulvsheridan’ YouTube account enjoyed years of postings that involved geology to history. That account had a million hits, and hundreds of ‘thumbs up.’ Last year I uploaded “**The Ivermectin Story.**” Within hours Ms. Susan Wojcicki, a colleague to Ms. Martha Pollack, did not merely delete the Ivermectin videos, **she terminated my entire paulvsheridan account.**

Contrary to the motivations and perversions of CornellHealth, and the decrepit news media, **The Ivermectin Story** is not only utterly factual and truthful; in deep irony, its broad censorship by social media confirms that status! Protecting the profiteering of the Pfizer mRNA needles is *also* confirmed, the real perversion; the underbelly of this RICO.

That my alma mater, an institution famed for its good works in life sciences, would openly endorse, by their actions and words, profit over health; this will not be tolerated.

CornellHealth relies on “guidance” from the Acting Commissioner of the Food and Drug Administration (FDA), Dr. Janet Woodcock. From her notorious ‘opioid epidemic’ failures, to the recent true status of non approval of the deployed mRNA Pfizer needle, **her reputation for double-talk and lying is consistent with the unofficial ‘job description’ of her FDA position.**



The FDA tweet is typical of the “guidance” which assaults the Cornell and Ithaca NY communities; CornellHealth deploys the murderous Pfizer needle while lying to those communities about the many alternatives, such as the globally recognized COVID record of the lost-cost **off-patent** drug Ivermectin. <sup>T</sup>

<sup>T</sup> **Ms. Pollack**, perhaps you would remind Dr. Woodcock and FDA sycophants that the renowned Cornell University College of Veterinary Medicine is fully versed in the successful uses and deployments of Ivermectin, in humans and animals that spans over **four decades worldwide**. Perhaps Provost Michael Kotlikoff would offer that update to the world given his previous role as Dean of the Cornell University College of Veterinary Medicine!

**INTERMISSION 3 : The CornellHealth COVID “Vaccine” Fraud – Conclusion**

As an alternative to the charlatans of Ms. Susan Wojcicki, Ms. Martha Pollack, Dr. Janet Woodcock, and CornellHealth . . . we have the serious gentleman, Dr. Haruo Ozaki.



Dr. Ozaki is Chairman of the Tokyo Metropolitan Medical Association. In a **news conference streamed on 12 August 2021**, he declared that Japan was already a “country of use” regarding Ivermectin, but the reason for low-use was not lack of known effectiveness among his medical profession, but a lack of availability!

The cause of that Ivermectin shortfall?

Dr. Ozaki points to the company that coined and promoted the pro-vaccine vernacular “**New Normal.**” Dr. Ozaki stated:

*“Even if a doctor writes a prescription for Ivermectin, there is no drug in the pharmacy. This (prescription) is virtually unusable. But (Merck) says that Ivermectin does not work, so there should not be any need to limit supply. If it does not work, there is no demand. I believe it works, so block supply. It looks like you are.”*

Contrary to the Tweet sputum from the FDA about horses, Ivermectin use in humans has zero side-effects and an overwhelmingly positive track record versus “SARS-CoV-2.” Dr. Ozaki stated on August 12, 2021:

*“I am aware that there are many papers that Ivermectin is effective in the prevention and treatment of corona, mainly in Central and South America and Asia. In Africa, if we compare countries distributing Ivermectin once a year with countries which do not give Ivermectin, I mean they do not give Ivermectin to prevent COVID, but to prevent parasitic diseases...but anyway, if we look at COVID numbers in countries that give Ivermectin, the number of cases is 134.4 per 100,000, and the number of deaths is 2.2 in 100,000.*

*“Now, African countries which do not distribute Ivermectin: 950.6 cases per 100,000 and 29.3 deaths per 100,000. I believe the difference is clear.”*

The papers discussed by Dr. Ozaki, regarding use of Ivermectin in Central America, South America, Asia and Africa, were written *a posteriori*.

That is, human use of Ivermectin in those areas is historical, but not for “SARS-CoV-2.” Data tabulated for these papers is **after-the-fact**; and as-such is skewed against Ivermectin. Helping CornellHealth with arithmetic, the Africa data suggests that COVID cases drop 86%, and the deaths drop by 92%!

**Still going slow for CornellHealth . . . a drug that has been off-patent since 1996, dispensed for humans for decades but for non-COVID uses, that has nonetheless shown miraculous positive effect versus COVID, that costs \$10, is banned and censored from the Cornell campus?**

Contrary to the Tweet sputum from the FDA about cows, the dispensing of Ivermectin for human use involves proper dosage amounts and **covers four decades worldwide!** Woodcock and CornellHealth might benefit from The Ivermectin Story documentary, banned by YouTube, but preserved here:

[https://pvsheridan.com/Ivermectin-Story\\_Part-1.mp4](https://pvsheridan.com/Ivermectin-Story_Part-1.mp4)

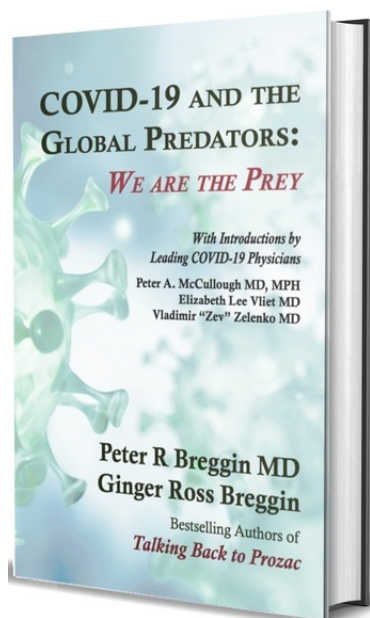
[https://pvsheridan.com/Ivermectin-Story\\_Part-2.mp4](https://pvsheridan.com/Ivermectin-Story_Part-2.mp4)

**Summary : Ms. Martha Pollack – Conclusion (from Page 32)**

At the CornellHealth website we find the following **bold-face lie**:

**How effective is the vaccine?**

Pfizer reports that the vaccine is 95% effective. Moderna reports that their vaccine is 94% effective.



There are so many **bold-faced** lies spewed by the CornellHealth and main Cornell webpages; so many spewed by you, Provost Kotlikoff, and your StayHomecoming cohort Fauci, so many by Weill-Cornell Medical College regarding “SARS-CoV-2” that this letter could easily go to 10,000 pages. As could the book **COVID-19: The Global Predators: We Are the Prey!**

In contrast to The Company *YOU* Keep, experts that you and your cohorts Andrew Cuomo and Albert Bourla did **not** invite to the NY Forward Reopening Advisory Board, these Harvard University authors **did** invite practicing physicians; true health authorities such as Dr. Peter McCullough, Dr. Elizabeth Vliet and New York Dr. Vladimir Zelenko.

But, regarding your bold-faced lie above, one that characteristically involves ‘lies by commission’ and ‘lies by omission,’ we ask simple questions that are never addressed by your servitude to “The Vaccine King,” Mr. Albert Bourla:

**“95% effective” at what?!**

- Is The Vaccine King’s needle 95% effective at preventing viral transmissibility, and therefore the lunatic mandates of ‘social distancing’ and ‘masks’ can be relaxed on that basis?
- Is The Vaccine King’s needle 95% effective at preventing reinfection of the alleged original cause of COVID, the “SARS-CoV-2”?
- Is The Vaccine King’s needle 95% effective at preventing infection by Bourla’s follow-up marketing schemes; the alleged “variants,” such as the brand name “Delta variant” ?
- Is The Vaccine King’s needle 95% effective at preventing infection in the nose and nasopharynx; the exact locations of the fraudulent “COVID test,” the basis of your vile COVID-19 Response?
- Is The Vaccine King’s needle 95% effective at preventing future infection from the common cold or flu, either in the short term or the long term?

**OF COURSE NOT, AND ON ALL ACCOUNTS! The “95% effective” verbiage connects to no such claim; indeed, very recent studies indicate that Bourla’s needle REDUCES immune response to the flu . . . and you are fully aware of these facts . . . Ms. Pollack.**

One of the most indicative of your exploitations involves black people. The “95% effective” CornellHealth *lie-by-omission* is well-known as such to black people. Therefore, I ask you Ms. Pollack:

- Is that reality going to increase your use of the label “anti-vaxxer” against them?
- Is that reality going to further accredit their refusal to be injected with Bourla’s mRNA needle?
- If the answer to question (2) is yes, **are you going to preside over the non-admission of black people, hiding behind your dystopian “Consequences of inaction” coercion threats?**

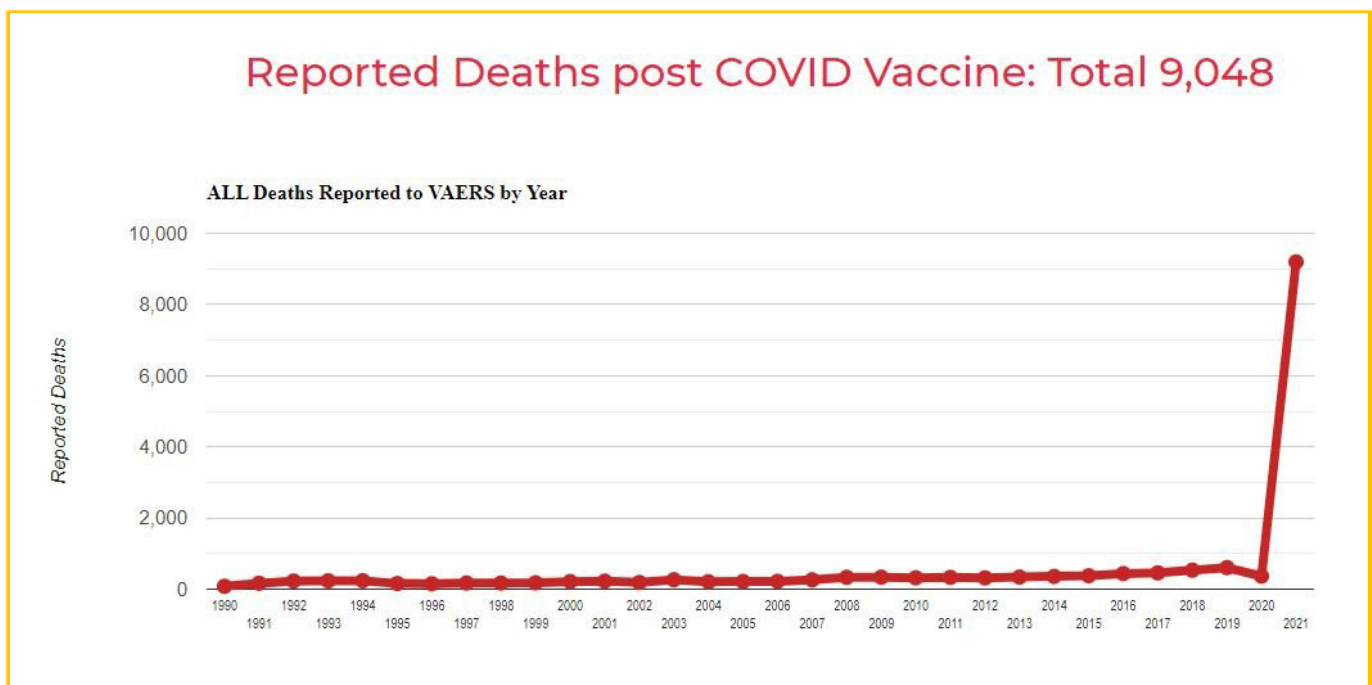
Before you assert your personal angelology, I demand that you review Page 25 above.

**Personal Notes : Summary of the Attached Exhibit**

The memorial gala of my Cornell President Dr. Frank H. T. Rhodes is scheduled for October 23, 2021. I first met President Rhodes, by accident, in the “green” elevator of Day Hall in 1979. My minor knowledge of his expertise (geology) was a fun introduction. We became, if I may be so bold, friends. Characteristically, of the 15-odd letters I wrote post-graduation, guess how many President Rhodes did *not* respond to ? <sup>U</sup>

The attached Exhibit is a ‘thank you’ to Oral Robert University President Dr. William M. Wilson. His gracious note to me is under Tab 1.

Unlike the dystopian **crap** you are inflicting upon the world, **and by extension Ms. Jummai Nache**, the path of President Wilson is truthful, fruitful and righteous. As you will see, I had shared the following June 2021 CDC VAERS chart with President Wilson:



My letter to President Wilson was widely distributed. Shortly thereafter, CDC Director Rochelle Walensky scrubbed the above type of reporting/charting from her website.

With this in mind, please know that President Wilson and Oral Robert University are **not** participating, at any level, in the factual declaration found at the bottom of Page 31.



<sup>U</sup> The same number Fauci and Pollack *have* responded to.

## Conclusion

During the time that the servility of Ms. Pollack was serving his profiteering needs as a co-member of the New York Forward Reopening Advisory Board, and the criminality of Mr. Fauci was serving his needs with everything from 'liability immunity' to the fraudulent RICO-based Emergency Use Authorization, the CEO of Pfizer Mr. Albert Bourla was threatening the health and well-being of humanity on a global scale, not the least of which included outright blackmailing of entire nations, especially in Latin and South America:

Johns Hopkins Bloomberg School of Public Health

# Global Health NOW

CORONAVIRUSES   MATERNAL HEALTH   RACISM AND PUBLIC HEALTH   GLOBAL HEALTH

VACCINES | CORONAVIRUSES | GLOBAL HEALTH | HEALTH SYSTEMS |  
INFECTIOUS DISEASES | RESEARCH

## Latin America Calls out Pfizer's 'High-Level Bullying'

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February 23, 2021

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Latin American governments are accusing Pfizer of “bullying” in COVID-19 vaccine negotiations—saying it is insisting upon extreme guarantees against future legal cases like using embassies and military bases as collateral.

Protections for vaccine manufacturers in case of adverse effects are not unusual, especially in a pandemic. But Pfizer's demands amount to an “abuse of power,” according to legal experts.

Pfizer's “take it or leave it” approach leaves Argentine citizens without access to its vaccine, for example.



**Conclusion**

But the bullying by Mr. Bourla did not begin in the New York nursing homes, or end in Latin and South America. A key operative was the continuous, coordinated coercion of the medical, hospital and nursing staffs . . . **not the least of which is Ms. Jummai Nache:**



In a lengthy conversation with husband, Mr. Philip Nache, he explained that prior to the 'vaccine mandate' inflicted upon her, "**Jummai was never hospitalized. She was the healthiest of our family!**"

Meanwhile, vested interests like you two, Ms. Pollack and Mr. Fauci, were vigorously manipulating facts, conspiring from behind closed doors, and boldly doing so in plain view; jointly from the bully pulpit of my beloved alma mater Cornell University during Homecoming 2020, an utterly despicable display of arrogance and implicit inveracity!

In the final assessment, lest your tendency for self-indulgence and raw egotism overwhelms you, you two amount to, at most, *symptoms* of the current epoch; one that is characterized by the betrayal depicted on Page 2 above.

Like spiritual chaff, the status of Judæan Judas Iscariot, your chances of passing through the proverbial keyhole are diminishing with every human soul that suffers as horribly as Jummai. Such are connectable to your promotions and deeds, prior to and ongoing with COVID.

It is only matter of time, under the edict 'Follow the Science,' and your **dystopian crap**, that similar outcomes to that of Ms. Jummai Nache will befall many more; not the least of which is the **coerced** Cornell University students and staffs also afflicted by bullying by your comrade Mr. Albert Bourla.

Please know that the above is highly thrifted, and I took no pleasure in its authorship. However, I will leave Ms. Pollack with one assertion: **In the context of Page 2 above**, had Ms. Jummai Nache been enrolled at Cornell, but decided through true 'informed consent' to reject the Bourla needle; you would have voided her matriculation **without hesitation**.

Sincerely,

Paul V. Sheridan

Attachment

# Statement on the Recent Killings of Black People in America

*May 29, 2020*

Dear Cornellians,

I am heartbroken, angry and frankly sickened by the recent killing of George Floyd, and before him, Ahmaud Arbery, Breonna Taylor and others whose deaths are less well publicized.

The amount of pain in the Black community is unfathomable, especially as these are occurring in the midst of a pandemic that is having such a disproportionate impact on communities of color.

Decent people and institutions cannot stand silent while such violence against our fellow citizens continues.

I want to make clear, both personally and on behalf of Cornell, that we will do all we can as a university to address this scourge of racism. We will address it directly in our educational programs, in our research and in our engagement and related activities, working through the ways we know best to push for a world that is equitable and kind; where people do not have to fear for their lives because of the color of their skin; and where everyone has the same opportunities to grow, thrive and enjoy their lives.

My heart goes out to everyone who is feeling the pain of these recent incidents.

Sincerely,

Martha

## Addendum to Abridged Hard Copy Version

The complete letter of 27 August 2021, including attached Exhibit, up-to-date SPODs, and hyperlinks is available here:

<https://pvsheridan.com/sheridan2pollack-fauci-1-21august2021.pdf>

The attached Exhibit to the 27 August 2021 letter, as a separate document, is available here:

<https://pvsheridan.com/sheridan2wilson-1-19july2021.pdf>

The complete video of the Dr. David Martin interview by Dr. Reiner Füllmich of the July 2021 meeting of The Coronavirus Investigation Committee is here:

[https://pvsheridan.com/Dr-Fuellmich\\_Dr-Martin\\_July-2021-Corona-Investigative-Committee.mp4](https://pvsheridan.com/Dr-Fuellmich_Dr-Martin_July-2021-Corona-Investigative-Committee.mp4)

This interview is featured on Page 15.

The complete (current) court file of the litigation of:

Mr. Ravi Batra versus Mr. Peter C. Daszak, Janet D. Cottingham, EcoHealth Alliance, Inc.

is available here: [http://pvsheridan.com/Batra\\_versus\\_Daszak/](http://pvsheridan.com/Batra_versus_Daszak/)

This court file is introduced on Page 27.

A recent interview of Dr. Vladimir Zelenko on “SARS-CoV-2” is available here:

[https://pvsheridan.com/Dr-Vladimir-Zelenko\\_Exposes-Global-Genocide.mp4](https://pvsheridan.com/Dr-Vladimir-Zelenko_Exposes-Global-Genocide.mp4)

Dr. Zelenko is discussed on Pages 16, 19, 21 and 36.

Background and availability information on the Dr. Peter Breggin / Ms. Ginger Ross-Breggin book, **COVID-19: The Global Predators: We Are the Prey!** is available here:

[https://www.youtube.com/watch?v=rXE-f\\_HDLTc](https://www.youtube.com/watch?v=rXE-f_HDLTc)

This book is discussed on Page 36

A historical sampling of the Paul V. Sheridan letters on COVID is available here:

<http://pvsheridan.com/paulvsheridan-SARS-CoV-2-Letters-Directory/>

# END OF DOCUMENT

27 August 2021

Ms. Martha E. Pollack  
Cornell University  
300 Day Hall  
Ithaca, NY 14853  
607-255-5201 / president@cornell.edu

Mr. Anthony S. Fauci  
NIAID  
5601 Fishers Lane  
Rockville, MD 20852  
301-496-2263 / anthony.fauci@nih.gov

**Subjects :** Ongoing Global Criminal Participations / Promotions of “SARS-CoV-2” :

- (1) The Fraudulent ‘Emergency Use Authorization’ (EUA)
- (2) Pfizer mRNA Inoculation Induced Severe Injury and Death
- (3) Connections to Nursing Home Deaths
- (4) Connections to Suicide Deaths – American K-12 Students

**Reference 1:** Mr. Albert Bourla Severe Injury Assault of Ms. Jummai Nache

**Reference 2:** Martha Pollack Collaborations – Pfizer / NY Forward Reopening Advisory Board

**Characterization 1:** Show Me the Company You *Keep*, and I Will Tell You *What You Are*

**Characterization 2:** Show Me the Company You Do *Not Keep*, and I Will Tell You *What You Are Not*

# ATTACHMENT 7

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Public Citizen Report : **PFIZER POWER** of October 19, 2021

13 Pages

# **PFIZER'S POWER**

Zain Rizvi

Access to Medicines Program

October 19, 2021



## ACKNOWLEDGMENTS

This report was written by Zain Rizvi, law and policy researcher in Public Citizen's Access to Medicines Program. It was edited by Peter Maybarduk, director of the Access to Medicines Program, Rhoda Feng, editor in the Communications Program, Brook Baker, Professor of Law at Northeastern University, and Zain Jinnah, an international lawyer. Luz Marina Umbasia Bernal in the Access to Medicines Program also provided critical input.

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# TABLE OF CONTENTS

Introduction .....4

Pfizer’s Power .....6

    1. Pfizer Reserves the Right to Silence Governments. ....6

    2. Pfizer Controls Donations.....7

    3. Pfizer Secured an “IP Waiver” for Itself. ....8

    4. Private Arbitrators, not Public Courts, Decide Disputes in Secret. ....9

    5. Pfizer Can Go After State Assets. ....10

    6. Pfizer Calls the Shots on Key Decisions.....11

A Better Way .....12



## INTRODUCTION

In February, Pfizer was accused of “bullying” governments in COVID vaccine negotiations in a groundbreaking story by the Bureau of Investigative Journalism.<sup>1</sup> A government official at the time noted, “Five years in the future when these confidentiality agreements are over you will learn what really happened in these negotiations.”<sup>2</sup>

Public Citizen has identified several unredacted Pfizer contracts that describe the outcome of these negotiations. The contracts offer a rare glimpse into the power one pharmaceutical corporation has gained to silence governments, throttle supply, shift risk and maximize profits in the worst public health crisis in a century. We describe six examples from around the world below.<sup>3</sup>

**Table 1: Select Pfizer Contracts Reviewed<sup>4</sup>**

Purchaser	Date	Type	Doses	Price Per Dose	Total Cost
<b>Albania</b>	Draft <sup>5</sup>	Draft Definitive Agreement	500,000	\$12	\$6 million
<b>Brazil</b>	03/15/21 <sup>6</sup>	Definitive Agreement	100 million	\$10	\$1 billion
<b>Colombia</b>	02/02/21 <sup>7</sup>	Definitive Agreement	10 million	\$12	\$120 million
<b>Chile</b>	12/01/20 <sup>8</sup>	Definitive Agreement (Redacted)	10 million	Redacted	Redacted

<sup>1</sup> Madlen Davies, Rosa Furneaux, Iván Ruiz, Jill Langlois, ‘Held to Ransom’: Pfizer Demands Governments Gamble with State Assets to Secure Vaccine Deal, Bureau of Investigative Journalism (Feb 23 2021), <https://tinyurl.com/t2z39a63>.

<sup>2</sup> *Id.*

<sup>3</sup> While there are similarities across the contracts, each agreement is unique. The specific examples outlined below should not read as reflective of other contracts.

<sup>4</sup> In several cases, governments signed additional deals with Pfizer. We reviewed select contracts that were publicly available.

<sup>5</sup> Albania-Pfizer Contract Draft, (“Albania Draft Contract”), (Jan. 6 2021) <https://www.documentcloud.org/documents/20616251-albanian-pfizer-covid-19-vaccine-contract>. The final provisions of the agreement may have differed from this draft. However, given similarities between this draft and the other reviewed agreements, we believe the modifications, if any, were likely not substantial. The contract was first leaked on Twitter, and then shared widely in the press.

<sup>6</sup> Brazil-Pfizer Contract (“Brazil Contract”), (March 15 2021) <https://aurores.org/wp-content/uploads/2021/08/Brazil-Pfizer.pdf>. The contract was leaked online and later covered by The Guardian in August. See e.g., <https://tinyurl.com/yupsz2j4>.

<sup>7</sup> Colombia-Pfizer Contract (“Colombia Contract”), (Feb. 2 2021), <https://www.nodal.am/wp-content/uploads/2021/08/DOCUMENTO.pdf>. The contract was leaked in the Colombian Media in August. <https://tinyurl.com/4vswvrz4>. It is currently referenced in the UNICEF Vaccine Market Dashboard.

<sup>8</sup> Chile-Pfizer Contract (“Chile Contract”) (Dec. 1 2021), <https://www.chiletransparente.cl/wp-content/uploads/2021/07/Acuerdo-de-fabricacion-y-suministro-PFIZER.pdf>. A Chilean transparency initiative published a redacted version of the contract.

<b>Dominican Republic</b>	10/29/20 <sup>9</sup>	Binding Term Sheet <sup>10</sup>	8 million	\$12	\$96 million
<b>European Commission</b>	11/20/20 <sup>11</sup>	Custom Advance Purchase Agreement	200 million	\$18.6 <sup>12</sup>	\$3.7 billion
<b>Peru</b>	09/17//20 <sup>13</sup>	Binding Term Sheet	10 million	\$12	\$120 million
<b>United States</b>	07/21/20 <sup>14</sup>	Custom Advance Purchase Agreement (Redacted)	100 million	\$19.5	\$1.95 billion
<b>United Kingdom</b>	10/12/20 <sup>15</sup>	Custom Advance Purchase Agreement (Redacted)	30 million	Redacted	Redacted

Pfizer's demands have generated outrage around the world, slowing purchase agreements and even pushing back the delivery schedule of vaccines.<sup>16</sup> If similar terms are included as a condition to receive doses, they may threaten President Biden's commitment to donate 1 billion vaccine doses.<sup>17</sup>

High-income countries have enabled Pfizer's power through a favorable system of international intellectual property protection.<sup>18</sup> High-income countries have an obligation to rein in that monopoly power. The Biden administration, for example, can call on Pfizer to renegotiate existing commitments and pursue a fairer approach in the future. The administration can further rectify the power imbalance by sharing the vaccine recipe, under the Defense Production Act, to allow multiple producers to expand vaccine

<sup>9</sup> Dominican Republic-Pfizer Contract ("D.R. Contract") (Oct. 29 2020), <https://www.keionline.org/35485>. Knowledge Ecology International obtained the contract through a freedom of information law request.

<sup>10</sup> The text was subject to the approval of the Dominican Republican National Congress, which reportedly approved the text with no objections. Pfizer and AstraZeneca, The Game of Contracts with Small Print, Dominican Today, <https://tinyurl.com/yhasn7um>.

<sup>11</sup> European Commission-Pfizer Contract ("E.C. Contract") (Nov. 20 2020), <https://tinyurl.com/3bph89wy>. The Italian public broadcaster RAI published the EC Contract in April.

<sup>12</sup> 15.5 EUR.

<sup>13</sup> Peru-Pfizer Contract ("Peru Contract") (Sept. 17 2020), <https://tinyurl.com/y2ap74xz>. The Bureau of Investigative Journalism published the contract.

<sup>14</sup> United States-Pfizer Contract ("U.S. Contract") (July 21 2020), <https://tinyurl.com/4k5j7d5u>. The contract is available on the U.S. Department of Health and Human Services website.

<sup>15</sup> United Kingdom-Pfizer Contract ("U.K. Contract") (Oct. 10 2020), <https://tinyurl.com/ym4pk3tw>. This likely is the definitive agreement that follows on from initial agreement announced in July. The contract is available on the U.K. government website.

<sup>16</sup> Madlen Davies, Rosa Furneaux, Pfizer backs down over "unreasonable terms" in South Africa vaccine deal (April 19 2021). <https://tinyurl.com/tnys9u2c>. ("He described how Pfizer's late demand caused delays in the discussions, which in turn put back the anticipated vaccine delivery dates."). See also the impasse in Philippines. Philippines receives side letter from Pfizer; WHO sees resolution of 'impasse' soon (Feb 23. 2021), <https://tinyurl.com/3fs8z3cb> ("The delivery of 117,000 Pfizer-BioNTech doses, initially expected in mid-February, was delayed by concerns on indemnification.").

<sup>17</sup> White House, FACT SHEET: President Biden Announces Historic Vaccine Donation: Half a Billion Pfizer Vaccines to the World's Lowest-Income Nations (June 10 2021), <https://tinyurl.com/he8bm9tk>

<sup>18</sup> Peter Drahos and John Braithwaite, Information Feudalism: Who Owns the Knowledge Economy? (2007) (tracing the role of Pfizer in advocating for a system of international patent protection).

supplies.<sup>19</sup> It can also work to rapidly secure a broad waiver of intellectual property rules (TRIPS waiver) at the World Trade Organization.<sup>20</sup> A wartime response against the virus demands nothing less.

## PFIZER'S POWER

### 1. Pfizer Reserves the Right to Silence Governments.

In January, the Brazilian government complained that Pfizer was insisting on contractual terms in negotiations that were “unfair and abusive.”<sup>21</sup> The government pointed to five terms that it found problematic, ranging from a sovereign immunity waiver on public assets to a lack of penalties for Pfizer if deliveries were late. The Bureau of Investigative Journalism soon published a scathing story on Pfizer's vaccine negotiations.<sup>22</sup>

Less than two months later, the Brazilian government accepted a contract with Pfizer that contains most of the same terms that the government once deemed unfair.<sup>23</sup> Brazil waived sovereign immunity; imposed no penalties on Pfizer for late deliveries; agreed to resolve disputes under a secret private arbitration under the laws of New York; and broadly indemnified Pfizer for civil claims.<sup>24</sup>

The contract also contains an additional term not included in other Latin American agreements<sup>25</sup> reviewed by Public Citizen: The Brazilian government is prohibited from making “any public announcement concerning the existence, subject matter or terms of

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<sup>19</sup> Zain Rizvi, Jishian Ravinthiran, Amy Kapczynski, Sharing The Knowledge: How President Joe Biden Can Use The Defense Production Act To End The Pandemic Worldwide, Health Affairs Blog (August 6, 2021), <https://www.healthaffairs.org/doi/10.1377/hblog20210804.101816/full/>

<sup>20</sup> Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS).

<sup>21</sup> Madlen Davies, Rosa Furneaux, Iván Ruiz, Jill Langlois, ‘Held to Ransom’: Pfizer Demands Governments Gamble with State Assets to Secure Vaccine Deal, Bureau of Investigative Journalism (Feb 23 2021), <https://tinyurl.com/t2z39a63>.

<sup>22</sup> *Id.*

<sup>23</sup> One clause that appears to have changed is the number of doses supplied by Pfizer. It is also not clear whether Brazil developed a foreign bank guarantee fund.

<sup>24</sup> Brazil Contract, footnote 6, Article 9.4 (Waiver of Sovereign Immunity), pg. 45, Article 2.6 (Delivery Delays), pg. 34, Article 9.4 (Waiver of Sovereign Immunity) pg. 45, Article 3.1 (Indemnification by Purchaser), pg. 43, respectively.

<sup>25</sup> The other Latin American contracts reviewed contain a more limited nondisclosure obligation. For example, under the Colombia contract, neither Pfizer nor Colombia can “use the name, trade name, service marks, trademarks, trade dress or logos of the other Party in publicity releases, advertising or any other publication, without the other Party's prior written consent in each instance.” This does not appear to prohibit the government from talking about the contract, as long as it is not a “publicity release, advertising, or any other publication.”

[the] Agreement” or commenting on its relationship with Pfizer without the prior written consent of the company.<sup>26</sup> Pfizer gained the power to silence Brazil.

Brazil is not alone. A similar nondisclosure provision is contained in the Pfizer contract with the European Commission and the U.S. government.<sup>27</sup> In those cases, however, the obligation applies to both parties.

For example, neither Pfizer nor the U.S. government can make “any public announcement concerning the existence, subject matter or terms of this Agreement, the transactions contemplated by it, or the relationship between the Pfizer and the Government hereunder, without the prior written consent of the other.”<sup>28</sup> The contract contains some exceptions for disclosures required by law. It is not clear from the public record whether Pfizer has elected to prohibit the U.S. from making any statements thus far. The E.C. cannot include in any announcement or disclosure the price per dose, the Q4 2020 volumes, or information that would be material to Pfizer without the consent of Pfizer.<sup>29</sup>

## 2. Pfizer Controls Donations.

Pfizer tightly controls supply.<sup>30</sup> The Brazilian government, for example, is restricted from accepting Pfizer vaccine donations from other countries or buying Pfizer vaccines from others without Pfizer's permission.<sup>31</sup> The Brazilian government also is restricted from

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<sup>26</sup> Brazil Contract, Article 12.3 (Publicity), pg. 32 (“Purchaser shall not make, or permit any person to make, any public announcement concerning the existence, subject matter or terms of this Agreement, the wider transactions contemplated by it, or the relationship between the Parties (except as required by Law, and subject to the protections set forth in Section 10.1), without the prior written consent of Pfizer (such consent not to be unreasonably withheld or delayed)”).

<sup>27</sup> E.C. Contract, footnote 11, Article II.10 (Announcements and Publicity), pg. 36.

<sup>28</sup> U.S. Contract, footnote 14, Article 11.11 (Announcements), pg. 25.

<sup>29</sup> E.C. Contract, footnote 11, Article II.10 (Announcements and Publicity), pg. 36.

<sup>30</sup> For example, Colombia is also required to distribute the vaccine only in its territory. Colombia Contract, footnote 7, Article 4.6 (Diversion Issues), pg. 23 (“All Product delivered to Purchaser shall be: (a) stored securely by Purchaser; and (b) distributed by Purchaser only in Colombia in a secure manner appropriate to the transportation route and destination, in each case (a) and (b) to guard against and deter theft, diversion, tampering, substitution (with, for example, counterfeits) resale or export out of Colombia, and to protect and preserve the integrity and efficacy of the Product.”).

<sup>31</sup> Brazil Contract, footnote 6, Article 2.1 (f) (Agreement to Supply), pg. 31 (“Purchaser, including any related Person or any agents of Purchaser, covenants to exclusively obtain all of its supply of any Vaccine of Pfizer, BioNTech or their respective Affiliates intended for the prevention of the human disease COVID-19 (including the Product) either (i) directly from Pfizer or from Pfizer through the COVAX Facility, or (ii) from a Third Party, whether by donation, resale or otherwise, only if Purchaser has obtained Pfizer's prior written consent. Any breach of this Section 2.1(f) shall be deemed an incurable material breach of this Agreement, and Pfizer may immediately terminate this Agreement pursuant to Section 6.2. For clarity, nothing in this Section 2.1(f) shall prevent Purchaser from purchasing competing vaccine products of any Third Party.”).

donating, distributing, exporting, or otherwise transporting the vaccine outside Brazil without Pfizer's permission.<sup>32</sup>

The consequences of noncompliance can be severe. If Brazil were to accept donated doses without Pfizer's permission, it would be considered an "uncurable material breach" of their agreement, allowing Pfizer to immediately terminate the agreement.<sup>33</sup> Upon termination, Brazil would be required to pay the full price for any remaining contracted doses.<sup>34</sup>

### 3. Pfizer Secured an "IP Waiver" for Itself.

The CEO of Pfizer, Albert Bourla, has emerged as a strident defender of intellectual property in the pandemic. He called a voluntary World Health Organization effort to share intellectual property to bolster vaccine production "nonsense" and "dangerous."<sup>35</sup> He said President Biden's decision to back the TRIPS waiver on intellectual property was "so wrong."<sup>36</sup> "IP, which is the blood of the private sector, is what brought a solution to this pandemic and it is not a barrier right now," claims Bourla.<sup>37</sup>

But, in several contracts, Pfizer seems to recognize the risk posed by intellectual property to vaccine development, manufacturing, and sale. The contracts shift responsibility for any intellectual property infringement that Pfizer might commit to the government purchasers. As a result, under the contract, Pfizer can use anyone's intellectual property it pleases—largely without consequence.

At least four countries are required "to indemnify, defend and hold harmless Pfizer" from and against any and all suits, claims, actions, demands, damages, costs, and expenses related to vaccine intellectual property.<sup>38</sup> For example, if another vaccine maker sued

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<sup>32</sup> Brazil Contract, footnote 6, Article 4.6 (Diversion Issues), pg. 38 ("Purchaser shall not directly or indirectly resell, donate, distribute, export or otherwise transport the Product outside the Territory without Pfizer's prior written consent.").

<sup>33</sup> Brazil Contract, footnote 6, Article 2.1 (f) (Agreement to Supply), pg. 31.

<sup>34</sup> Brazil Contract, footnote 6, Article 6.2 (Termination for Cause), pg. 27 ("In the event that this Agreement is terminated by Pfizer under this Section 6.2, Purchaser shall pay within thirty (30) days of the date of notice of termination of this Agreement the full Price for all Contracted Doses less amounts already paid to Pfizer as of such date.")

<sup>35</sup> Ed Silverman, Pharma leaders shoot down WHO voluntary pool for patent rights on Covid-19 products, STAT (May 28 2020), <https://www.statnews.com/pharmalot/2020/05/28/who-voluntary-pool-patents-pfizer/>

<sup>36</sup> U.S. Backs Waiver of Intellectual Property Protection for Covid-19 Vaccines, Wall Street Journal (May 6 2021), <https://www.wsj.com/articles/u-s-backs-waiver-of-intellectual-property-protection-for-covid-19-vaccines-11620243518>

<sup>37</sup> WTO delays decision on waiver on COVID-19 drug, vaccine rights (Dec. 10 2020), <https://www.reuters.com/article/us-health-coronavirus-wto-idUSKBN28K2WL>

<sup>38</sup> This extends to all civil claims, including adverse effects. That has been detailed elsewhere: Madlen Davies, Rosa Furneaux , Iván Ruiz , Jill Langlois, 'Held to Ransom': Pfizer Demands Governments Gamble

Pfizer for patent infringement in Colombia, the contract requires the Colombian government to foot the bill. At Pfizer's request, Colombia is required to defend the company (i.e., take control of legal proceedings.)<sup>39</sup> Pfizer also explicitly says that it does not guarantee that its product does not violate third-party IP, or that it needs additional licenses.

Pfizer takes no responsibility in these contracts for its potential infringement of intellectual property. In a sense, Pfizer has secured an IP waiver for itself. But internationally, Pfizer is fighting similar efforts to waive IP barriers for all manufacturers.<sup>40</sup>

#### 4. Private Arbitrators, not Public Courts, Decide Disputes in Secret.

What happens if the United Kingdom cannot resolve a contractual dispute with Pfizer? A secret panel of three private arbitrators—not a U.K. court—is empowered under the contract to make the final decision.<sup>41</sup> The arbitration is conducted under the Rules of Arbitration of the International Chamber of Commerce (ICC). Both parties are required to keep everything secret:

The Parties agree to keep confidential the existence of the arbitration, the arbitral proceedings, the submissions made by the Parties and the decisions made by the arbitral tribunal, including its awards, except as required by Law and to the extent not already in the public domain.<sup>42</sup>

The Albania draft contract and Brazil, Chile, Colombia, Dominican Republic, and Peru agreements require the governments to go further, with contractual disputes subject to ICC arbitration applying New York law.<sup>43</sup>

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with State Assets to Secure Vaccine Deal, Bureau of Investigative Journalism (Feb 23 2021), <https://tinyurl.com/t2z39a63>.

<sup>39</sup> Colombia Contract, footnote 7, Article 8.2 (Assumption of Defense), pg. 31.

<sup>40</sup> Pfizer signed the letter opposing the TRIPS waiver sent to President Biden in March, for example. PhRMA Letter Opposing TRIPS Waiver to President Biden (March 5 2021), <https://patentdocs.typepad.com/files/2021-03-05-phrma-letter.pdf>

<sup>41</sup> U.K. Contract, footnote 15, Article 23 (Dispute Resolution) pg. 36. ("The arbitration award shall be final and binding on the Parties, and the parties undertake to carry out any award without delay. Judgment upon the award may be entered by any court having jurisdiction of the award or having jurisdiction over the relevant party or its assets.")

<sup>42</sup> *Id.*

<sup>43</sup> Article on Governing Law. Albania Draft Contract pg. 34, Brazil Contract pg. 45, Chile Contract pg. 29, Colombia Contract pg. 43, DR Contract pg. 17, Peru Contract pg. 9.

While ICC arbitration involving states is not uncommon, disputes involving high-income countries and/or pharmaceuticals appear to be relatively rare.<sup>44</sup> In 2012, 80% of state disputes were from Sub-Saharan Africa, Central and West Asia, and Central and Eastern Europe.<sup>45</sup> The most common state cases were about the construction and operation of facilities.<sup>46</sup> In 2020, 34 states were involved in ICC arbitrations.<sup>47</sup> The nature of state disputes is not clear, but only between 5 to 7% of all new ICC cases, including those solely between private parties, were related to health and pharmaceuticals.<sup>48</sup>

Private arbitration reflects an imbalance of power. It allows pharmaceutical corporations like Pfizer to bypass domestic legal processes. This consolidates corporate power and undermines the rule of law.

## 5. Pfizer Can Go After State Assets.

The decisions reached by the secret arbitral panels described above can be enforced in national courts.<sup>49</sup> The doctrine of sovereign immunity can sometimes, however, protect states from corporations seeking to enforce and execute arbitration awards.

Pfizer required Brazil, Chile, Colombia, the Dominican Republic, and Peru to waive sovereign immunity.<sup>50</sup> In the case of Brazil, Chile and Colombia, for example, the government “expressly and irrevocably waives *any right of immunity* which either it or its assets may have or acquire in the future” to enforce any arbitration award (emphasis

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<sup>44</sup> Our analysis is limited by a lack of transparency.

<sup>45</sup> Arbitration Involving States and State Entities under the ICC Rules of Arbitration – Report of the ICC Commission on Arbitration and ADR (2012), <https://iccwbo.org/publication/arbitration-involving-states-state-entities-icc-rules-arbitration-report-icc-commission-arbitration-adr/>, pg. 4.

<sup>46</sup> Arbitration Involving States and State Entities under the ICC Rules of Arbitration – Report of the ICC Commission on Arbitration and ADR (2012), <https://iccwbo.org/publication/arbitration-involving-states-state-entities-icc-rules-arbitration-report-icc-commission-arbitration-adr/>, pg. 4.

<sup>47</sup> 194 state-owned entities were also involved. ICC Dispute Resolution 2020 Statistics, <https://iccwbo.org/publication/icc-dispute-resolution-statistics-2020/>, pg. 11. See also, an analogous mechanism known as investor-state dispute resolution, which is based on international law as opposed to contract: Global Trade Watch, Table of Foreign Investor-State Cases and Claims Under NAFTA and Other U.S. “Trade Deals” (Jan. 15 2021), <https://www.citizen.org/article/table-of-foreign-investor-state-cases-and-claims-under-nafta-and-other-u-s-trade-deals/>

<sup>48</sup> ICC Dispute Resolution 2020 Statistics, <https://iccwbo.org/publication/icc-dispute-resolution-statistics-2020/>, pg. 17.

<sup>49</sup> United Nations Convention on the Recognition and Enforcement of Foreign Arbitral Awards (New York, 10 June 1958) (“Each Contracting State shall recognize arbitral awards as binding and enforce them in accordance with the rules of procedure of the territory where the award is relied upon, under the conditions laid down in the following articles.”)

<sup>50</sup> Article on Waiver of Sovereign Immunity. The language differs in some of the contracts. Brazil Contract, pg. 45, Chile Contract pg. 24, Colombia Contract pg. 36, DR Contract pg. 17, Peru Contract pg. 9.

added).<sup>51</sup> For Brazil, Chile, Colombia, and the Dominican Republic, this includes “immunity against precautionary seizure of any of its assets.”<sup>52</sup>

Arbitral award enforcement presents complex questions of law that depend on the physical location and type of state asset.<sup>53</sup> But the contract allows Pfizer to request that courts use state assets as a guarantee that Pfizer will be paid an arbitral award and/or use the assets to compensate Pfizer if the government does not pay.<sup>54</sup> For example, in U.S. courts, these assets could include foreign bank accounts, foreign investments, and foreign commercial property, including the assets of state-owned enterprises like airlines and oil companies.<sup>55</sup>

## 6. Pfizer Calls the Shots on Key Decisions.

What happens if there are vaccine supply shortages? In the Albania draft contract and the Brazil and Colombia agreement, Pfizer will decide adjustments to the delivery schedule based on principles the corporation will decide. Albania, Brazil, and Colombia “shall be deemed to agree to any revision.”<sup>56</sup>

Some governments have pushed back on Pfizer's unilateral authority for other decisions. In South Africa, Pfizer wanted to have the “sole discretion to determine additional terms and guarantees for us to fulfill the indemnity obligations.”<sup>57</sup> South Africa deemed this “too risky” and a “potential risk to [their] assets and fiscus.”<sup>58</sup> After delays, Pfizer reportedly conceded to remove this “problematic term.”<sup>59</sup>

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<sup>51</sup> *Id.*

<sup>52</sup> *Id.*

<sup>53</sup> In the U.S., the governing statute is the Foreign Sovereign Immunities Act (FSIA). 28 U.S.C § 1602. Sovereign property used for commercial activity can be used to execute a judgment based on an arbitral award if the state has waived immunity. Property belonging to an instrumentality of a foreign state engaged in commercial activity can also be used. 28 U.S.C § 1610. However, certain kinds of foreign sovereign property are absolutely immune from award attachment and execution. This includes property belonging to the foreign central bank or monetary authority and property used for military purposes. 28 U.S.C §1611.

<sup>54</sup> Under FSIA, this is known as “attachment prior to the entry of judgment” and can be done if the state waives this kind of immunity and “the purpose of the attachment is to secure satisfaction of a judgment that has been or may ultimately be entered against the foreign state.” 28 U.S.C § 1610

<sup>55</sup> Other jurisdictions may handle these questions differently, potentially exposing other types of sovereign assets. These assets may also be vulnerable in settlement negotiations.

<sup>56</sup> Albania Draft Contract, pg. 14. Brazil Contract, pg. 22. Colombia Contract, pg. 15.

<sup>57</sup> Pfizer Backs Down Over Unreasonable Terms in South Africa Vaccine Deal (April 19 2021), <https://www.thebureauinvestigates.com/stories/2021-04-19/pfizer-backs-down-over-asset-seizing-clause-in-south-africa-vaccine-deal>.

<sup>58</sup> *Id.*

<sup>59</sup> *Id.*



But others have not been as successful. As a condition to entering into the agreement, the Colombian government is required to “demonstrate, in a manner satisfactory to Suppliers, that Suppliers and their affiliates will have adequate protection, as determined in *Suppliers’ sole discretion*” (emphasis added) from liability claims.<sup>60</sup> Colombia is required to certify to Pfizer the value of the contingent obligations (i.e., potential future liability), and to start appropriating funds to cover the contingent obligations, according to a contribution program.<sup>61</sup>

Pfizer’s ability to control key decisions reflects the power imbalance in vaccine negotiations. Under the vast majority of contracts, Pfizer’s interests come first.

## A BETTER WAY

Pfizer’s dominance over sovereign countries poses fundamental challenges to the pandemic response. Governments can push back. The U.S. government, in particular, can exercise the leverage it holds over Pfizer to require a better approach. Empowering multiple manufacturers to produce the vaccine via technology transfer and a TRIPS waiver can rein in Pfizer’s power. Public health should come first.

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<sup>60</sup> Colombia Contract, footnote 7, Article 8.5 (Privileges and Immunities), pg. 32. This includes but is not limited to funding state contractual contingency funds.

<sup>61</sup> *Id.*



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# ATTACHMENT 8

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
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Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation,  
and complete Disconnection from Any Prior Accolades/Activities  
Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of March 6, 2021 to Ivy League University presidents

27 Pages

**Ensuring Liability Immunity for Ivy League University Presidents and Staffs –  
Student Signature / Consent Requirements for COVID-19 “Vaccine”**

**Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

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**NEWS**

## **Experimental vaccine death rate for Israel's elderly 40 times higher than COVID-19 deaths: researchers**

*Pfizer's vaccine killed 'about 40 times more (elderly) people' and '260 times' more of the young than 'what the COVID-19 virus would have claimed in the given time frame.'*

Mon Mar 1, 2021 - 9:12 pm EST

*“True heroism is remarkably sober, very undramatic. It is not the urge to surpass all others at whatever cost, but the urge to serve others at whatever cost.”*

Mr. Arthur Ashe

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6 March 2021

VIA FEDEX AIRBILLS

**Subject: Ensuring Liability Immunity for Ivy League University Presidents and Staffs – Student Signature / Consent Requirements for COVID-19 “Vaccine”**

**Reference: Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

**Dear Ivy League University Presidents:**

There are two exhibits and one enclosure; the exhibits are:

1. “Preparing for COVID-19 vaccination rollout | Updates | COVID-19 and Reactivation Planning”  
Cornell University (Published on January 4, 2021)
2. State of Florida “COVID-19 Vaccine Screening and Consent Form” (Pfizer edition)

The current president of my alma mater, Martha Pollack, claims she is relying upon guidance from various “health authorities.” Relative to New York State, she is cooperating with authorities deployed/deployable by Governor Andrew Cuomo; the person connectable to more COVID-19 deaths than most nations:



**Context – Part 1 : Ivy League Assistance with Pharmaceutical Industry Liability Immunity**

Cornell University graduate Dr. Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases (NIAID) successfully lobbied for national-level liability immunity for the pharmaceutical industry, focused on shielding them from injury / death case litigation that plaintiffs had filed (and continue to file) alleging that such was caused by defective, unproven and therefore unsafe vaccines. This immunity now appears to apply regardless of the approval status (of the vaccine) from the Federal government, such as Centers for Disease Control (CDC), Food and Drug Administration (FDA), the National institutes of Health (NIH), etc. But Fauci’s immunity does not extend to other individuals or institutions that are liable for any injury / death that can be connected to the vaccinations of recipients under their purview, control or custodianship. Students forcefully advised or out-richtly forced (by you) to be injected with the COVID-19 “vaccine” are examples ... **the students are under your purview, control and legal custodianship.**

**Context – Part 2 : The Verisimilitude of Nuremburg?**

Regarding the forcing of students to be injected with the COVID-19 “vaccine,” regarding her vying for future mandatory vaccinations, Pollack declared (Exhibit 1):

**At this time, Cornell is not requiring our employees or students to be vaccinated; however, we strongly encourage each of you to be vaccinated when you become eligible. Vaccination is key to the resolution of this global pandemic, and we hope that you all take this opportunity to protect yourselves, as well as our community.**

It is well-known that her second sentence is utterly false. Without evoking the overwhelming success of treatments (such as Ivermectin, nutrition, the immune system, etc.), the Exhibit 2 ‘Fact Sheet’ is known to her, and refutes entirely the essence of her “key” claim (screenshot):

The Pfizer-BioNTech COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

**“May prevent”?! A document/wording authored by Pfizer!!** Refuted by *nation* of India? Its decisions regarding the so-called COVID-19 “vaccine” are just the beginning of honest discussion. Imagine, a student from India related to **Mr. Rajan Tata**, not required to be injected in their home nation, but if they attempt acceptance into Cornell University, they could, at some future time, be compelled to do so by Pollack?

Under the Constitution, Pollack’s intent to make vaccination mandatory is not merely immoral, but relative to the **true** composition of the COVID-19 “vaccine,” is unenforceable. Pollack’s declaration is a not-so-subtle follow-up to Harvard’s Alan Dershowitz. Regarding COVID-19, but glossing-over basic facts, he threatened:



*“Let me put it very clearly, you have no Constitutional right to endanger the public and spread the disease even if you disagree; **you have no right not to be vaccinated**, you have no right not to wear a mask, you have no right to open up your business. And if you refuse to be vaccinated the state has the power to literally take you to a doctor’s office and **plunge a needle into your arm!**”*

Known to Dershowitz . . . neither face-masks or the “vaccine” prevent endangerment or the spread, **or COVID-19 itself (!)** ; therefore one wonders about the ethical/intellectual status of this Ivy League professor.

Perhaps a legal refresher on the acronym “EUA” will accommodate a Dershowitz retraction.

Addressing the Dershowitz threat of coercion (against students); to plunge a needle into their arms, forcing compliance with mandatory vaccination, a hypocritical denial of Nuremburg . . . the latter escaped his . . . remembrance?

**Context – Part 2 : The Verisimilitude of Nuremburg? – conclusion**

I am not singling out Professor Dershowitz. Hardly. There are many examples of similar outbursts, from a myriad of even more incompetent sources (i.e. vested interests).

Recently Dr. Marc Siegel lauded and displayed what he called a “vaccine passport.” Apparently now required by the hapless government of . . . Iceland!? Siegel praised Iceland’s mandate which requires that anyone attempting to enter its territory must prove that they have submitted to COVID-19 “vaccination.” Siegel’s “vaccine passport” must be presented prior to entry.

But then Siegel described his real agenda, **mandatory COVID-19 “vaccination” for all**; required prior to the issuance of Soviet-styled “papers” that would be required for traveling state-to-state. Siegel babbled about an upcoming visit to his mother, currently living here in Michigan.

In December Siegel declared the EUA deployment of the COVID-19 “vaccine” as, *“A holiday gift for all.”*

The underbelly of Siegel’s most recent Fox News rant with Tucker Carlson, was that such mandates and Soviet-styled “papers” are *not* coercion. Uh huh. Instead his “vaccine passport” sputum is the result of his new label . . . hold for it . . . **“incentive.”** Siegel spewed, with a straight-face, that forcing Americans to be vaccinated in order to travel across state borders is part of his “incentive” plan.

So . . . according to Siegel, and brethren of his ilk, **not** allowing citizens to travel from state-to-state, and **not** granting them passage at state border check points unless they prove submission to “vaccination” (showing an intra-national “vaccine passport”) **is now enforceable under the new labeling: “incentive.”**

**I am confident that the clerks and lawyers and judges of Nuremburg are turning in their graves . . .**

**Context – Part 3 : American Communist State and the Impossibility of 'Informed Consent'**

Take a look at the following image . . . take a good long look:



Her name is Susan Wojcicki. She runs YouTube. The self-appointed high priestess of Leninist-styled NKVD censorship . . . Wojcicki and her band of unnamed and incommunicado staff decide what and from whom the rest-of-us will obtain our . . . **information . . . insidiously COVID-19 information in-particular.**

I am not singling out Wojcicki. Hardly. Organizations of similar agenda-driven censorship include but are not limited to: WordPress, Vimeo, Google, Twitter, Instagram . . . and Ivy League university press.

Regarding COVID-19, let us examine the legal implications of her censorship; a practice that is endorsed and encouraged; if not out-rightly practiced by certain Ivy League university presidents.



**Context – Part 3 : American Communist State, the Impossibility of “Informed Consent” - Conclusion**

Relating to Siegel’s putrid *“incentive”* label, the ongoing practice of labeling anyone that disagrees or merely questions the *alleged* main-stream is slandered with the diatribe *“anti-vaxxer.”* I suspect certain Ivy League University presidents have deployed that slander.

An outrageous example, one that defense lawyer Dershowitz would otherwise represent, were it not for his demonstrated ignorance, bias, and penchant for hypocrisy . . . Ms. Bonnie Jacobson.



The scenario? Ms. Jacobson was a waitress at the Red Hook Tavern, located in lower Manhattan.

At no time did Ms. Jacobson do or say *anything* that would “justify” the vested-interests slandering of her as an *“anti-vaxxer.”* In fact, she did the exact opposite! She openly and publically announced her support for vaccination in-general, and explained that she was considering the COVID-19 “vaccine.”

Her offense? Ms. Jacobson merely asked for more time, to pursue more specific information, so she could make *“an informed decision for her baby.”* That is correct, she is pregnant and maternal instincts are on high alert. Her reward? **She was vilified by the New York City media, and fired ... get this, *by email!***

Am I too bold to presume that Ivy League presidents will not fault Ms. Jacobson for wanting to be informed? To be educated? To be intelligent, and serious about the safety of the unborn? To act in a manner that reinforces her rights as a woman in an alleged advanced civil society?

I am in contact with the law firm representing Ms. Jacobson. She sought information about the COVID-19 “vaccine” specific to pregnancy, but since nothing definitive exists (derived from detailed scientific trials by *any* national government), her task was frustrating. But it gets far worse, and involves a sequence that connects all of the above to the reality of **“the impossibility of informed consent”** :

Ms. Jacobson was hesitant, even without having prior access to information involving the pregnancy of Dr. Sara Beltrán Ponce. The reason for that lack of easy access? All videos, interviews, opinions and information about Dr. Ponce’s child **were banned by Susan Wojcicki of YouTube, et al.**

**It is impossible to offer ‘informed consent,’ with any measure of alacrity, when the informing process is rendered non-existent by a world-wide, Soviet-styled, Ivy League endorsed censorship.**

**Preamble to Subject Discussion and Recommendation**

The mandatory vaccination envisioned by Martha Pollack, and the Ivy League, provokes review of Exhibit 2. From page 2 of State of Florida "COVID-19 Vaccine Screening and Consent Form" :

I understand that it is not possible to predict all possible side effects or complications associated with receiving vaccine(s). I understand the risks and benefits associated with the above vaccine and have received, read and/or had explained to me the Emergency Use Authorization Fact Sheet on the COVID-19 vaccine I have elected to receive. I also acknowledge that I have had a chance to ask questions and that such questions were answered to my satisfaction.

That first sentence is absurd; the second / third approaches last-minute pressure-point coercion. The fraud is borne by the censorship that afflicts the trusting and innocent global populations. In this corrupt scenario, well-understood by Ivy League presidents, we ask: How can anyone come to "understand" anything about COVID-19? How can anyone have "a chance to ask questions" that are informed? On point?

The global citizenry, as well as university students, are indoctrinated with lies such as **"vaccination is key to the resolution of this global pandemic."** Then their enforced ignorance (via censorship) is fully exploited; they are inundated with horrific prospects of ongoing lockdowns if they fail to submit, or openly resist, or merely question, the COVID-19 "vaccine." **Can Dershowitz or Siegel say "coercion"?!**

The Telegraph

## It's essential that the public sees a correlation between the jab rollout and the end of lockdown



**Ross Clark**

Mon, January 25, 2021, 9:52 AM



Care home resident receives an injection of the coronavirus vaccine - Jacob King /PA

**Preamble to Subject Discussion and Recommendation – con't**

The most egregious and punishable “offence” of the global citizenry, especially as it relates to the so-called “Great Reset,” is to question the safety of the COVID-19 “vaccine.” But those encumbered with average intelligence will struggle to decode, **if the “vaccine” is so safe**, then why are the pharmaceutical giants immune from liability, and why are State officials now demanding a “COVID-19 Vaccine Consent Form” ??

The global citizenry are being victimized by an utter lack of ethics, to the point that their lives are more cartoonish than real . . . a more accurate rendering of the high-pressure moment prior to vaccination:



At no time have the *Dershowitzs*, or the *Siegels*, or the *Gates*, or the *Faucis*, or the *Trumps*, or the *Adhanoms*, or the *Soros*, or the *Klaus Schwabs* of the world . . . or any Ivy League president explained, with basic integrity, either verbally or at their “New Normal” websites, the issue of pharmaceutical industry liability immunity from a “vaccine” that they all forcefully assert is “safe.”

## Preamble to Subject Discussion and Recommendation – Conclusion

It is no secret that major educational institutions are suspected of being connected-to the violence of Antifa, and the violent doctrines, and implementations, and history of Marxist Communism:

<b>“COMMUNIST COERCIVE METHODS FOR ELICITING INDIVIDUAL COMPLIANCE”.*</b>	
<b>The Biderman Report of 1956 and COVID-19</b>	
<b>Chart of Coercion</b>	<b>COVID-19</b>
<p><b>Isolation</b></p> <ul style="list-style-type: none"> <li>• Deprives individual of social support of his ability to resist</li> <li>• Makes individual dependent upon the captor</li> <li>• Individual develops an intense concern with self.</li> </ul>	<p><b>Isolation</b></p> <ul style="list-style-type: none"> <li>• Social distancing</li> <li>• Isolation from loved ones, massive job loss</li> <li>• Solitary confinement semi-isolation</li> <li>• Quarantines, containment camps</li> </ul>
<p><b>Monopolization of Perception</b></p> <ul style="list-style-type: none"> <li>• Fixes all attention upon immediate predicament;</li> <li>• Frustrates all actions not consistent with compliance</li> <li>• Eliminates stimuli competing with those controlled by the captor</li> </ul>	<p><b>Monopolization of perception</b></p> <ul style="list-style-type: none"> <li>• Restrict movement</li> <li>• Create monotony, boredom</li> <li>• Prevent gathering, meetings, concerts, sports</li> <li>• Dominate all media the 24/7, censor information</li> </ul>
<p><b>Induced Debility and Exhaustion</b></p> <ul style="list-style-type: none"> <li>• Weakens mental and physical ability to resist</li> <li>• People ...become worn out by tension and fear</li> </ul>	<p><b>Induced debility</b></p> <ul style="list-style-type: none"> <li>• Forced to stay at home, all media is negative</li> <li>• not permitted to exercise or socialize</li> </ul>
<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>• Cultivates anxiety and despair</li> <li>• Gives demands and consequences for non compliance</li> </ul>	<p><b>Threats and Intimidation</b></p> <ul style="list-style-type: none"> <li>• Threaten to close business, levy fines</li> <li>• Predict extension of quarantine, force vaccines</li> <li>• Create containment camps</li> </ul>
<p><b>Occasional Indulgences</b></p> <ul style="list-style-type: none"> <li>• Provides motivation for compliance</li> <li>• Hinders adjustment to deprivation.</li> <li>• Creates hope for change, reduces resistance</li> <li>• This keeps people unsure of what is happening.</li> </ul>	<p><b>Occasional Indulgences</b></p> <ul style="list-style-type: none"> <li>• Allow reopening of some stores, services</li> <li>• Let restaurants open but only at a certain capacity</li> <li>• Increase more people allowed to gather</li> <li>• Follow concessions with tougher rules</li> </ul>
<p><b>Demonstrate Omnipotence</b></p> <ul style="list-style-type: none"> <li>• Demonstrates futility of resistance</li> <li>• Shows who is in charge</li> <li>• Provides positive motivation for compliance</li> </ul>	<p><b>Demonstrate Omnipotence</b></p> <ul style="list-style-type: none"> <li>• Shut down entire economies across the world</li> <li>• Create money out of nowhere, force dependency</li> <li>• Develop <i>total</i> surveillance with nanochips and 5G</li> </ul>
<p><b>Degradation</b></p> <ul style="list-style-type: none"> <li>• Makes resistance seem worse than compliance</li> <li>• Creates feelings of helplessness.</li> <li>• Creates fear of freedom, dependence upon captors</li> </ul>	<p><b>Humiliation or Degradation techniques</b></p> <ul style="list-style-type: none"> <li>• Shame people who refuse masks, don't distance</li> <li>• Make people stand on circles and between lines</li> <li>• Make people stand outside and wait in queues</li> <li>• Sanitation stations in every shop</li> </ul>
<p><b>Enforcing trivial demands</b></p> <ul style="list-style-type: none"> <li>• Develops habit of compliance</li> <li>• Demands made are illogical and contradictory</li> <li>• Rules on compliance may change</li> <li>• Reinforces who is in control</li> </ul>	<p><b>Enforcing trivial demands</b></p> <ul style="list-style-type: none"> <li>• Family members must stand apart</li> <li>• Masks in home and even when having sex</li> <li>• Random limits on people allowed to be together</li> <li>• Sanitizers to be used over and over in a day</li> </ul>

www.beingfree.ca

The Chart of Coercion above is drawn from the Biderman Report on communist brainwashing techniques used by the Chinese and North Koreans on captured American servicemen to make them psychological as well as physical prisoners. Dr. Alfred D. Biderman M.A. and presented his Report at the New York Academy of Medicine Nov 13, 1956. Compare right column with your experience this year.

\* Biderman Report <https://consensualenslavement.com/bidermanreport.html>

Amnesty International Report on Terror <https://www.amnesty.org/en/documents/pol10/0001/1983/en/>

**Subject Discussion**

**Ensuring Liability Immunity for Ivy League University Presidents and Staffs –  
Student Signature / Consent Requirements for COVID-19 “Vaccine”**

**Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

The web pages of my alma mater reference the ‘Centers for Disease Controls’ (CDC) as a “health authority” that Cornell University is relying upon for “guidance” regarding COVID-19.

The nominee for Assistant Secretary of Health and Human Services (HHS) ... the CDC, that the Ivy League relies upon for its “guidance” ... is part of HHS:



In July 2020 I detailed the COVID-19 history of Rachel Levine (see Enclosure, Attachment 2):

21 July 2020

Dr. Anthony S. Fauci  
Page 25 of 36

The Pennsylvania Secretary of Health Rachael Levine was unabashed about the reasons she relocated her mother out-of-harms-way, by removing that mother from a nursing home, that was subsequently ordered by Ms. Levine to accept “COVID-19 positive” residents.

Will future COVID-19 “guidance” **escalate**, now that such criminality has been elevated to the HHS/CDC?

Existing and anticipated “guidance” from a new CDC compels this discussion; **we examine what serves as a pro-forma, exemplified on Page 2 of the Florida “COVID-19 Vaccine Screening and Consent Form.”**

### Subject Discussion – Conclusion

#### Ensuring Liability Immunity for Ivy League University Presidents and Staffs – Student Signature / Consent Requirements for COVID-19 “Vaccine”

#### Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory

Prior to injection, the Florida recipient of the COVID-19 “vaccine” must not only sign away their personal legal rights, but they must also sign away the rights of relatives and heirs. In so doing, they grant immunity to everyone under the Florida sun; from page 2 of Exhibit 2:

On behalf of myself, my heirs and personal representatives, I hereby release and hold harmless the State of Florida, the Florida Department of Health (DOH), and their staff, agents, successors, divisions, affiliates, subsidiaries, officers, directors, contractors and employees from any and all liabilities or claims whether known or unknown arising out of, in connection with, or in any way related to the administration of the vaccine listed above.

I have decades of experience with plaintiff and defense attorneys. Regarding the former, many of whom are educated by Ivy League law schools, I have assisted with a central tenet of their profession, their primary focus and duty: **Vigorous and Relentless Advocacy for the Client.**

One of the more strenuous and successful dimensions of my practice involves ‘**Duty to Warn.**’ Despite widespread and malicious censorship practiced by the person shown on page 4 above, the following headlines are still getting through, and available to Ivy League university presidents and staffs:

#### NEWS

### Experimental vaccine death rate for Israel’s elderly 40 times higher than COVID-19 deaths: researchers

*Pfizer’s vaccine killed ‘about 40 times more (elderly) people’ and ‘260 times’ more of the young than ‘what the COVID-19 virus would have claimed in the given time frame.’*

Mon Mar 1, 2021 - 9:12 pm EST

Despite ‘data currently available’ the Cornell “**New Normal**” website promotes cagey wording:

#### Is the vaccine safe? ⓘ UPDATED MAR 3

All data currently available indicate that the vaccines are safe. Thus far, no serious long-term side effects have occurred and no study participants who received vaccine died of COVID-19. Some individuals do experience minor side effects that reflect the body’s immune response beginning; a tiny number of individuals have experienced allergic reactions and have required immediate treatment, which has been successful.

### Subject Discussion – Recommendation

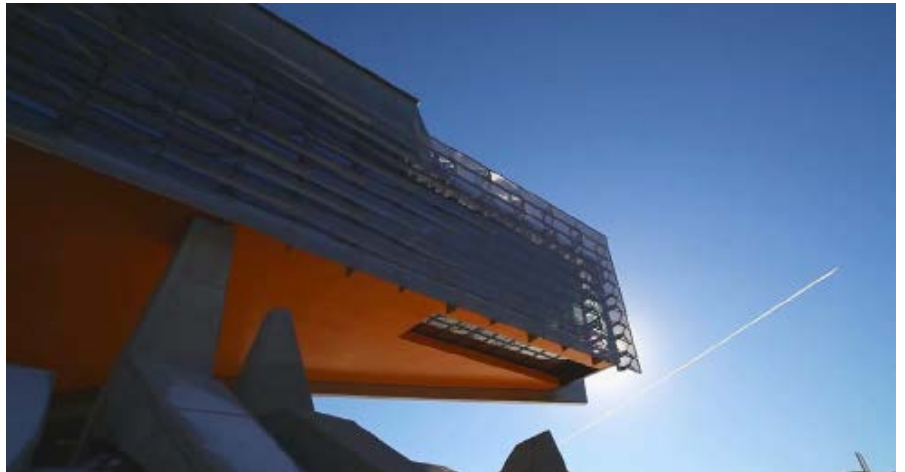
#### Ensuring Liability Immunity for Ivy League University Presidents and Staffs – Student Signature / Consent Requirements for COVID-19 “Vaccine”

#### Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory

Context – Part 1 (page 1 above) introduces the lack of liability immunity for the Ivy League. Whether the university policy position is “strongly encouraged” or mandatory, there is no viable defense versus a claim that harm, of any kind, is a result of the COVID-19 “vaccination” issue.

Even at a policy level of “strongly encouraged,” litigation would be tenable for the plaintiffs’ if connectable in any way to, say, the admissions process/criteria.

In the context of **Vigorous and Relentless Advocacy for the Client**, the Ivy League presidents and staffs would be subjected to plaintiffs’ claims if a pro-pharmaceutical industry Development agenda is connectable to admission rejection. Ivy League universities receive *direct* financial support from the pharmaceutical industry. It could be argued that ‘Development Office’ influence is evidenced by Cornell’s “New Normal” website wording. Additionally, regarding the *indirect*, especially for Cornell, financial support also comes from multi-billion-dollar investors / shareholders in the pharmaceutical industry.



SHARE

LIFE & ARTS | IDEAS | THE SATURDAY ESSAY

## Bill Gates: The Best Investment I’ve Ever Made

Global health groups that buy and distribute medicines are a sure bet for saving lives, but their government funding is now in danger, and even the biggest philanthropies can’t fill the gap

By [Bill Gates](#)  
Jan. 16, 2019 7:01 pm ET

Merely a civil matter, the admissions application that is rejected because the student (on their own or through parents) chose not to waive their health, to an industry that Anthony Fauci continues to protect, would make a very interesting case to defend; **Despite the case fact that no physical injury or death is claimed.** The latter, more pressing, potentially criminal issue is addressed next.

### **Subject Discussion – Recommendation**

#### **Ensuring Liability Immunity for Ivy League University Presidents and Staffs – Student Signature / Consent Requirements for COVID-19 “Vaccine”**

#### **Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

Admissions rejection is not some “conspiracy theory.” Cornell made flu vaccination mandatory, alleging CDC “guidance.” That requirement was unconstitutional; enforced by Pollack, requiring student signature, on the basis of her July 31, 2020 *Cornell Student Behavioral Compact*.

The flu vaccination enforced upon the Cornell student body was an approved vaccine. **Well-known to Ivy League presidents some of whom are ‘Public Health Experts.’ the COVID-19 injection is not approved; it is merely an EUA experiment.** Hence the Dershowitz rant on page 2 above is repulsive. (Beyond the scope of this letter, relating to strict legal precedent and chemical constituency, the deployment of the COVID-19 injection as a “vaccine” is also not legally or technically defensible.)

This creates a legal situation that Ivy League presidents and staffs are not prepared for, or protected from: These employees lack a similar liability immunity that Fauci obtained for his pharmaceutical comrades, and now which Florida Governor DeSantis has established for himself and his employees. Again, Exhibit 2:

On behalf of myself, my heirs and personal representatives, I hereby release and hold harmless the State of Florida, the Florida Department of Health (DOH), and their staff, agents, successors, divisions, affiliates, subsidiaries, officers, directors, contractors and employees from any and all liabilities or claims whether known or unknown arising out of, in connection with, or in any way related to the administration of the vaccine listed above.

In the alternative, we have Governor Andrew Cuomo of New York, the person that Cornell University President Martha Pollack relies upon as one source of COVID-19 “guidance.” Cuomo has hired the defense attorney that represents the esteemed Harvey Weinstein. It is probable that Cuomo, like many other existing and upcoming defendants will **in-turn** point to federal “health authorities,” such as Anthony Fauci and the HHS/CDC, as central to their COVID-19 related defense cases.

### **Recommendation**

Under the **purview, control and legal custodianship**, of the eight Ivy League presidents and their staffs, are hundreds-of-thousands of students. Given the truth about ‘data currently available,’ hinted-at by the headlines on page 10, it would be imprudent for you to presume that COVID-19 “vaccine” related injury or death will not befall our student body. I am hereby placing you on notice of my opinion that it will.

Using the precedent established by Anthony Fauci, and Exhibit 2 as a *pro forma*, it is recommended that the Ivy League presidents issue a similar form, for the purpose of obtaining liability immunity by enforcing a ‘Student Signature and Consent’ for all COVID-19 “vaccinations.” This should be issued immediately, regardless of the university policy level (“strongly advised” or mandatory).



**Personal Observation**

**Ensuring Liability Immunity for Ivy League University Presidents and Staffs –  
Student Signature / Consent Requirements for COVID-19 “Vaccine”**

**Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

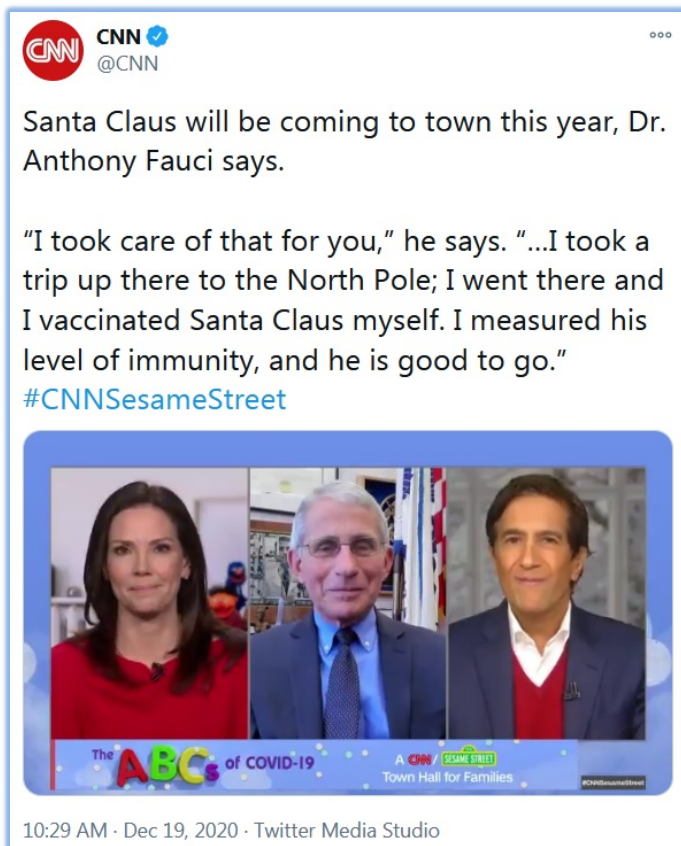
**Personal Observation**

Far too many of the educated and informed, have no knowledge of the liability immunity that shields the pharmaceutical industry, versus injury or death caused by their COVID-19 “vaccine”. The young and the laypeople are even less well-informed.

This is no surprise. The Cornell University “New Normal” pages, while proclaiming “strongly encouraged” and making strenuous claims about COVID-19 “vaccine” safety,” fail to inform the Cornell students and Ithaca, New York community about the liability immunity subject, prior to being injected.

Therefore, consistent with the Ivy League *purpose* of educating and informing, the above Recommendation will also serve to assist with that purpose in behalf of students, parents and guardians; ensuring that their ‘informed consent’ is viable, *and defensible from a would-be defendant’s point-of-view*. A “New Normal” which openly informs is now in-place in Florida.

**Otherwise, we have the “informing” (i.e. sales & marketing) practiced by what the news media calls, “America’s doctor.”**



### Personal Observation

#### Ensuring Liability Immunity for Ivy League University Presidents and Staffs – Student Signature / Consent Requirements for COVID-19 “Vaccine” Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory

#### Personal Observation – conclusion

In terms of informing our students and their parents/guardians, the scenario that will result from the Recommendation (page 12) is in stark contrast to the insidious purposes of the widely enforced practice of censorship.

By requiring their signature, similar to that already mandated by Pollack on her July 31, 2020 *Cornell Student Behavioral Compact*, you will offer the students/parents/guardians the basic courtesy of ensuring that they are aware of the COVID-19 liability immunity issue.

Failure to offer this basic courtesy, in the context of ‘**Duty to Warn**’ (page 10 above), is not only blatantly rude, it is indefensible. The latter will have enormous and notorious legal implications at precedent levels of at least Nuremburg, and probably beyond.

Please feel free to contact me at any time.

Cordially yours,

Paul V. Sheridan  
Cornell MBA: Class of 1980

Exhibits  
Enclosure (Letter to Dr. Anthony Fauci of 21 December 2020)

**DEDICATIONS**

**Ensuring Liability Immunity for Ivy League University Presidents and Staffs –  
Student Signature / Consent Requirements for COVID-19 “Vaccine”  
Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

In the montage below, a dedication to those that took diametrically opposed approaches to their personal health, and endured/enjoyed diametrically opposed outcomes respectively . . . a very small sampling.

**Left Column**

Individuals ostensibly took advice of Anthony Fauci and other “health authorities.”

**DECEASED**



***“This has gone on before!”***

Regarding quote and death of Mr. Arthur Ashe, please see Enclosure, cover letter, page 6 of 22.

**Right Column**

Individuals did NOT take the advice of Anthony Fauci and other “health authorities.”

**ALIVE**



Mr. Earvin Magic Johnson not injected with “AIDS cocktail” recommended by Anthony Fauci



Detroit TV Anchor Karen Hudson-Samuels Dies One Day After Taking COVID “Vaccine”



Michigan State Representative Karen Whitsett avoided COVID-19 “vaccine,” followed hydroxychloroquine protocol.

**DEDICATIONS – conclusion**

**Ensuring Liability Immunity for Ivy League University Presidents and Staffs –  
Student Signature / Consent Requirements for COVID-19 “Vaccine”**

**Plan by Ivy League Universities to Make COVID-19 “Vaccinations” Mandatory**

**Left Column**

Individuals ostensibly took advice of  
Anthony Fauci and other “health authorities.”

**DECEASED or Loss of Child**



Mr. Hank Aaron died after injection with the  
COVID-19 “vaccine.” Merely asking if connectable  
Robert F. Kennedy Jr. labeled “**anti-vaxxer.**”

**Right Column**

Individuals did NOT take the advice of Anthony  
Fauci and other “health authorities.”

**ALIVE**



TV host Ms. Wendy Williams has declared she will  
not be injected with COVID-19 “vaccine,” labeled  
“**anti-vaxxer.**”



Dr. Sara Beltrán Ponce suffers miscarriage  
one week after COVID-19 “vaccine.”  
**Infant died in the womb.**



Ms. Bonnie Jacobson merely asked for safety  
specifics of COVID-19 “vaccine” during pregnancy.  
Labeled “**anti-vaxxer,**” fired from waitress position.  
**Baby in womb remains healthy.**

# Statement on the Recent Killings of Black People in America

*May 29, 2020*

Dear Cornellians,

I am heartbroken, angry and frankly sickened by the recent killing of George Floyd, and before him, Ahmaud Arbery, Breonna Taylor and others whose deaths are less well publicized.

The amount of pain in the Black community is unfathomable, especially as these are occurring in the midst of a pandemic that is having such a disproportionate impact on communities of color.

Decent people and institutions cannot stand silent while such violence against our fellow citizens continues.

I want to make clear, both personally and on behalf of Cornell, that we will do all we can as a university to address this scourge of racism. We will address it directly in our educational programs, in our research and in our engagement and related activities, working through the ways we know best to push for a world that is equitable and kind; where people do not have to fear for their lives because of the color of their skin; and where everyone has the same opportunities to grow, thrive and enjoy their lives.

My heart goes out to everyone who is feeling the pain of these recent incidents.

Sincerely,

Martha

# Preparing for COVID-19 vaccination rollout | Updates | COVID-19 and Reactivation Planning | Cornell University


**EXHIBIT 1 - 1 Page**

Jan. 4, 2021

Dear Cornell community,

We wish you all a very happy new year. Over the past few weeks, the country has achieved an important milestone as COVID-19 vaccine distribution has begun. We are writing today to share information regarding vaccinations for the Cornell community.

As you may know, New York state has developed a [phased approach to distribute COVID-19 vaccines](#), with the initial current phase focused on health care workers. Cornell is working with Cayuga Health System (CHS) and the Tompkins County Health Department to identify individuals within the Cornell community who are eligible for vaccination based on the New York State Department of Health distribution criteria. The vaccines themselves are being administered by CHS.



At this time, Cornell is not requiring our employees or students to be vaccinated; however, we strongly encourage each of you to be vaccinated when you become eligible. Vaccination is key to the resolution of this global pandemic, and we hope that you all take this opportunity to protect yourselves, as well as our community.

Employees will be provided paid time off should their vaccination appointment fall during scheduled work time. This time off will include travel to and from the distribution site. While the vaccine is free, insurance will be charged an administration fee. There is no copay, the cost is not subject to deductible and there is no charge if you do not have health insurance.

While it is wonderful that vaccination is underway in New York state, it is important to recognize that providing the vaccine to the general population of our faculty, staff and students will take time, likely many months. We are working collaboratively with CHS and with our local health department to plan for future phases of vaccine distribution. At this time, we do not know whether we will be providing vaccine distribution on campus; that decision will be made by the NYS Department of Health. As soon as we know, we will share that information with you.

As the vaccination process continues, please remain vigilant and continue to adhere to the public health guidelines put in place to protect our community. In addition to vaccination, the Centers for Disease Control and Prevention recommends continued use of preventive measures, including face coverings, physical distancing, avoiding close contact with people who are sick, avoiding crowds and frequent hand washing, as the best defense against contracting and spreading the virus.

Dr. Anne Jones, Cornell Health medical director and COVID-19 public health officer, and Frank Cantone, chair of the Cornell COVID-19 Response Team, are leading the university's vaccination efforts. As soon as we have more information to share on vaccination, you will be hearing from them. We will also be setting up an email inbox for questions that may arise.

Sincerely,

Martha E. Pollack  
President

Michael Kotlikoff  
Provost



Administration Facility Name/Facility ID: \_\_\_\_\_

## COVID-19 VACCINE SCREENING AND CONSENT FORM Pfizer-BioNTech COVID-19 Vaccine

### SECTION 1: INFORMATION ABOUT YOU (PLEASE PRINT)

<b>Name:</b> Last: _____ First: _____ Middle Initial: _____																
<b>Date of Birth:</b> Month _____ Day _____ Year _____	<b>Phone Number (Patient or Guardian):</b> _____															
<b>Address:</b> _____ <b>Apt/Room #:</b> _____																
<b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____																
<b>Sex</b> (Gender assigned at birth) <input type="checkbox"/> Female <input type="checkbox"/> Male	<table border="0" style="width: 100%;"> <tr> <td><b>Race</b></td> <td><input type="checkbox"/> American Indian or Alaska Native</td> <td><input type="checkbox"/> Native Hawaiian or other</td> <td><input type="checkbox"/> Other Asian</td> <td><input type="checkbox"/> Unknown</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Asian</td> <td><input type="checkbox"/> Pacific Islander</td> <td><input type="checkbox"/> Other Nonwhite</td> <td></td> </tr> <tr> <td></td> <td><input type="checkbox"/> Black or African American</td> <td><input type="checkbox"/> White</td> <td><input type="checkbox"/> Other Pacific Islander</td> <td></td> </tr> </table>	<b>Race</b>	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Native Hawaiian or other	<input type="checkbox"/> Other Asian	<input type="checkbox"/> Unknown		<input type="checkbox"/> Asian	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Other Nonwhite			<input type="checkbox"/> Black or African American	<input type="checkbox"/> White	<input type="checkbox"/> Other Pacific Islander	
<b>Race</b>	<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Native Hawaiian or other	<input type="checkbox"/> Other Asian	<input type="checkbox"/> Unknown												
	<input type="checkbox"/> Asian	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Other Nonwhite													
	<input type="checkbox"/> Black or African American	<input type="checkbox"/> White	<input type="checkbox"/> Other Pacific Islander													
<b>Primary Insurance Carrier ID #:</b> _____ <b>Grp #:</b> _____ Insurance Company : _____ Insurance Company Phone # _____ Insured's Name: _____ Relationship: _____ Insured's Date of Birth _____ <b>Secondary Insurance Carrier ID #:</b> _____ <b>Grp #:</b> _____ Insurance Company : _____ Insurance Company Phone # _____ Insured's Name: _____ Relationship: _____ Insured's Date of Birth _____																
<b>Is this the patient's first or second dose of the COVID-19 vaccination?</b> <input type="checkbox"/> First Dose <input type="checkbox"/> Second Dose																

### SECTION 2: COVID-19 SCREENING QUESTIONS

Please check YES or No for each question.	Yes	No
1. Do you have today or have you had at any time in the last 10 days a fever, chills, cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, or diarrhea?		
2. Have you tested positive for and/or been diagnosed with COVID-19 infection within the last 10 days?		
3. Have you had a severe allergic reaction (e.g. needed epinephrine or hospital care) to a previous dose of this vaccine or to any of the ingredients of this vaccine?		
4. Have you had any other vaccinations in the last 14 days (e.g. influenza vaccine, etc.)?		
5. Have you had any COVID-19 Antibody therapy within the last 90 days (e.g. Regeneron, Bamlanivimab, COVID Convalescent Plasma, etc.)		

### SECTION 3: IMMUNIZATION SCREENING GUIDANCE FOR COVID-19 VACCINE

Please check YES or No for each question.	Yes	No
6. Do you carry an Epi-pen for emergency treatment of anaphylaxis and/or have allergies or reactions to any medications, foods, vaccines or latex?		
7. For women, are you pregnant or is there a chance you could become pregnant?		
8. For women, are you currently breastfeeding?		
9. Are you immunocompromised or on a medication that affects your immune system?		
10. Do you have a bleeding disorder or are you on a blood thinner/blood-thinning medication?		
11. Have you received a previous dose of any COVID-19 vaccine? If yes, which manufacturer's vaccine did you receive:		

- I certify that I am: (a) the patient and at least 18 years of age; (b) the parent or legal guardian of the patient and confirm that the patient is at least 16 years of age; or (c) authorized to consent for vaccination for the patient named above. Further, I hereby give my consent to the Florida Department of Health (DOH) or its agents to administer the COVID-19 vaccine.
- I understand that This product has not been approved or licensed by FDA, but has been authorized for emergency use by FDA, under an EUA to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older; and the emergency use of this product is only

authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

- I understand that it is not possible to predict all possible side effects or complications associated with receiving vaccine(s). I understand the risks and benefits associated with the above vaccine and have received, read and/or had explained to me the Emergency Use Authorization Fact Sheet on the COVID-19 vaccine I have elected to receive. I also acknowledge that I have had a chance to ask questions and that such questions were answered to my satisfaction.
- I acknowledge that I have been advised to remain near the vaccination location for approximately 15 minutes after administration for observation. If I experience a severe reaction, I will call 9-1-1 or go to the nearest hospital.
- On behalf of myself, my heirs and personal representatives, I hereby release and hold harmless the State of Florida, the Florida Department of Health (DOH), and their staff, agents, successors, divisions, affiliates, subsidiaries, officers, directors, contractors and employees from any and all liabilities or claims whether known or unknown arising out of, in connection with, or in any way related to the administration of the vaccine listed above.
- I acknowledge that: (a) I understand the purposes/benefits of Florida SHOTS, Florida's immunization registry and (b) DOH will include my personal immunization information in Florida SHOTS and my personal immunization information will be shared with the Centers for Disease Control (CDC) or other federal agencies.
- I further authorize DOH or its agents to submit a claim to my insurance provider or Medicare Part B without supplemental coverage payment for me for the above requested items and services. I assign and request payment of authorized benefits be made on my behalf to DOH or its agents with respect to the above requested items and services. I understand that any payment for which I am financially responsible is due at the time of service or if DOH invoices me after the time of service, upon receipt of such invoice.
- I acknowledge receipt of the Notice of Privacy Rights.

Signature of Patient or Authorized Representative \_\_\_\_\_ Date: \_\_\_\_\_

Print Name of Representative and Relationship to Person Receiving Vaccine: \_\_\_\_\_

Site (LD/RD)	Route	Manufacturer (MVX)	Lot # Unit of Use/ Unit of Sale	Expiration Date	Date of EUA Fact Sheet
	IM				

<b>Administered at location: facility name/ID</b>	
<b>Administered at location: Type</b>	
<b>Administration Address:</b>	
<b>CVX (product)</b>	
<b>Sending organization:</b>	

Vaccinator Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vaccine administering provider suffix: \_\_\_\_\_



## **FACT SHEET FOR RECIPIENTS AND CAREGIVERS**

### **EMERGENCY USE AUTHORIZATION (EUA) OF THE PFIZER-BIONTECH COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) IN INDIVIDUALS 16 YEARS OF AGE AND OLDER**

You are being offered the Pfizer-BioNTech COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Pfizer-BioNTech COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Pfizer-BioNTech COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Pfizer-BioNTech COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Pfizer-BioNTech COVID-19 Vaccine.

The Pfizer-BioNTech COVID-19 Vaccine is administered as a 2-dose series, 3 weeks apart, into the muscle.

The Pfizer-BioNTech COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please see [www.cvdvaccine.com](http://www.cvdvaccine.com).

#### **WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE?**

##### **WHAT IS COVID-19?**

COVID-19 disease is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

##### **WHAT IS THE PFIZER-BIONTECH COVID-19 VACCINE?**

The Pfizer-BioNTech COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

The FDA has authorized the emergency use of the Pfizer-BioNTech COVID-19 Vaccine to prevent COVID-19 in individuals 16 years of age and older under an Emergency Use Authorization (EUA).

For more information on EUA, see the “**What is an Emergency Use Authorization (EUA)?**” section at the end of this Fact Sheet.

### **WHAT SHOULD YOU MENTION TO YOUR VACCINATION PROVIDER BEFORE YOU GET THE PFIZER-BIONTECH COVID-19 VACCINE?**

**Tell the vaccination provider about all of your medical conditions, including if you:**

- have any allergies
- have a fever
- have a bleeding disorder or are on a blood thinner
- are immunocompromised or are on a medicine that affects your immune system
- are pregnant or plan to become pregnant
- are breastfeeding
- have received another COVID-19 vaccine

### **WHO SHOULD GET THE PFIZER-BIONTECH COVID-19 VACCINE?**

FDA has authorized the emergency use of the Pfizer-BioNTech COVID-19 Vaccine in individuals 16 years of age and older.

### **WHO SHOULD NOT GET THE PFIZER-BIONTECH COVID-19 VACCINE?**

You should not get the Pfizer-BioNTech COVID-19 Vaccine if you:

- had a severe allergic reaction after a previous dose of this vaccine
- had a severe allergic reaction to any ingredient of this vaccine

### **WHAT ARE THE INGREDIENTS IN THE PFIZER-BIONTECH COVID-19 VACCINE?**

The Pfizer BioNTech COVID-19 Vaccine includes the following ingredients: mRNA, lipids ((4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 2 [(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 1,2-Distearoyl-sn-glycero-3-phosphocholine, and cholesterol), potassium chloride, monobasic potassium phosphate, sodium chloride, dibasic sodium phosphate dihydrate, and sucrose.

### **HOW IS THE PFIZER-BIONTECH COVID-19 VACCINE GIVEN?**

The Pfizer-BioNTech COVID-19 Vaccine will be given to you as an injection into the muscle.

The Pfizer-BioNTech COVID-19 Vaccine vaccination series is 2 doses given 3 weeks apart.

If you receive one dose of the Pfizer-BioNTech COVID-19 Vaccine, you should receive a second dose of this same vaccine 3 weeks later to complete the vaccination series.

### **HAS THE PFIZER-BIONTECH COVID-19 VACCINE BEEN USED BEFORE?**

The Pfizer-BioNTech COVID-19 Vaccine is an unapproved vaccine. In clinical trials, approximately 20,000 individuals 16 years of age and older have received at least 1 dose of the Pfizer-BioNTech COVID-19 Vaccine.

### **WHAT ARE THE BENEFITS OF THE PFIZER-BIONTECH COVID-19 VACCINE?**

In an ongoing clinical trial, the Pfizer-BioNTech COVID-19 Vaccine has been shown to prevent COVID-19 following 2 doses given 3 weeks apart. The duration of protection against COVID-19 is currently unknown.

### **WHAT ARE THE RISKS OF THE PFIZER-BIONTECH COVID-19 VACCINE?**

Side effects that have been reported with the Pfizer-BioNTech COVID-19 Vaccine include:

- injection site pain
- tiredness
- headache
- muscle pain
- chills
- joint pain
- fever
- injection site swelling
- injection site redness
- nausea
- feeling unwell
- swollen lymph nodes (lymphadenopathy)

There is a remote chance that the Pfizer-BioNTech COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Pfizer-BioNTech COVID-19 Vaccine. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

These may not be all the possible side effects of the Pfizer-BioNTech COVID-19 Vaccine. Serious and unexpected side effects may occur. Pfizer-BioNTech COVID-19 Vaccine is still being studied in clinical trials.

### **WHAT SHOULD I DO ABOUT SIDE EFFECTS?**

If you experience a severe allergic reaction, call 9-1-1, or go to the nearest hospital.

Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away.

Report vaccine side effects to **FDA/CDC Vaccine Adverse Event Reporting System (VAERS)**. The VAERS toll-free number is 1-800-822-7967 or report online to <https://vaers.hhs.gov/reportevent.html>. Please include “Pfizer-BioNTech COVID-19 Vaccine EUA” in the first line of box #18 of the report form.

In addition, you can report side effects to Pfizer Inc. at the contact information provided below.

Website	Fax number	Telephone number
<a href="http://www.pfizersafetyreporting.com">www.pfizersafetyreporting.com</a>	1-866-635-8337	1-800-438-1985

**WHAT IF I DECIDE NOT TO GET THE PFIZER-BIONTECH COVID-19 VACCINE?**

It is your choice to receive or not receive the Pfizer-BioNTech COVID-19 Vaccine. Should you decide not to receive it, it will not change your standard medical care.

**ARE OTHER CHOICES AVAILABLE FOR PREVENTING COVID-19 BESIDES PFIZER-BIONTECH COVID-19 VACCINE?**

Currently, there is no approved alternative vaccine available for prevention of COVID-19. FDA may allow the emergency use of other vaccines to prevent COVID-19.

**CAN I RECEIVE THE PFIZER-BIONTECH COVID-19 VACCINE WITH OTHER VACCINES?**

There is no information on the use of the Pfizer-BioNTech COVID-19 Vaccine with other vaccines.

**WHAT IF I AM PREGNANT OR BREASTFEEDING?**

If you are pregnant or breastfeeding, discuss your options with your healthcare provider.

**WILL THE PFIZER-BIONTECH COVID-19 VACCINE GIVE ME COVID-19?**

No. The Pfizer-BioNTech COVID-19 Vaccine does not contain SARS-CoV-2 and cannot give you COVID-19.


**KEEP YOUR VACCINATION CARD**

When you get your first dose, you will get a vaccination card to show you when to return for your second dose of Pfizer-BioNTech COVID-19 Vaccine. Remember to bring your card when you return.

## ADDITIONAL INFORMATION

If you have questions, visit the website or call the telephone number provided below.

To access the most recent Fact Sheets, please scan the QR code provided below.

Global website	Telephone number
<p data-bbox="315 415 618 443"><a href="http://www.cvdvaccine.com">www.cvdvaccine.com</a></p> 	<p data-bbox="954 464 1214 533">1-877-829-2619 (1-877-VAX-CO19)</p>

## HOW CAN I LEARN MORE?

- Ask the vaccination provider.
- Visit CDC at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.
- Visit FDA at <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>.
- Contact your local or state public health department.

## WHERE WILL MY VACCINATION INFORMATION BE RECORDED?

The vaccination provider may include your vaccination information in your state/local jurisdiction's Immunization Information System (IIS) or other designated system. This will ensure that you receive the same vaccine when you return for the second dose. For more information about IISs visit: <https://www.cdc.gov/vaccines/programs/iis/about.html>.

## WHAT IS THE COUNTERMEASURES INJURY COMPENSATION PROGRAM?

The Countermeasures Injury Compensation Program (CICP) is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines, including this vaccine. Generally, a claim must be submitted to the CICP within one (1) year from the date of receiving the vaccine. To learn more about this program, visit [www.hrsa.gov/cicp/](http://www.hrsa.gov/cicp/) or call 1-855-266-2427.

## WHAT IS AN EMERGENCY USE AUTHORIZATION (EUA)?

The United States FDA has made the Pfizer-BioNTech COVID-19 Vaccine available under an emergency access mechanism called an EUA. The EUA is supported by a Secretary of Health and Human Services (HHS) declaration that circumstances exist to justify the emergency use of drugs and biological products during the COVID-19 pandemic.

The Pfizer-BioNTech COVID-19 Vaccine has not undergone the same type of review as an FDA-approved or cleared product. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives. In addition, the FDA decision is based on the totality of scientific evidence available showing that the product may be effective to prevent COVID-19 during the COVID-19

pandemic and that the known and potential benefits of the product outweigh the known and potential risks of the product. All of these criteria must be met to allow for the product to be used in the treatment of patients during the COVID-19 pandemic.

The EUA for the Pfizer-BioNTech COVID-19 Vaccine is in effect for the duration of the COVID-19 EUA declaration justifying emergency use of these products, unless terminated or revoked (after which the products may no longer be used).



Manufactured by  
Pfizer Inc., New York, NY 10017

**BIONTECH**

Manufactured for  
BioNTech Manufacturing GmbH  
An der Goldgrube 12  
55131 Mainz, Germany

LAB-1451-0.7

Revised: December 2020



Scan to capture that this Fact Sheet was provided to vaccine recipient for the electronic medical records/immunization information systems.

Barcode Date: 12/2020

# ATTACHMENT 9

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Paul V. Sheridan letter of December 21, 2020 to Mr. Anthony Fauci

23 Pages

Dear Customer,

The following is the proof-of-delivery for tracking number: 781782382240

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**Delivery Information:**

---

<b>Status:</b>	Delivered	<b>Delivered To:</b>	Receptionist/Front Desk
<b>Signed for by:</b>	K.BAUSCH	<b>Delivery Location:</b>	31 CENTER DR
<b>Service type:</b>	FedEx Standard Overnight		Bethesda, MD, 20892
<b>Special Handling:</b>	Deliver Weekday	<b>Delivery date:</b>	Dec 23, 2020 15:09

---

**Shipping Information:**

---

<b>Tracking number:</b>	781782382240	<b>Ship Date:</b>	Dec 21, 2020
		<b>Weight:</b>	3.0 LB/1.36 KG

**Recipient:**

DR. ANTHONY S FAUCI, DIRECTOR, NIAID  
5601 FISHERS LANE  
Bethesda, MD, US, 20892

**Shipper:**

PAUL V. SHERIDAN,  
22357 COLUMBIA ST  
DEARBORN, MI, US, 48124





22357 Columbia Street  
Dearborn, MI 48124-3431  
313-277-5095  
pvs6@cornell.edu

21 December 2020

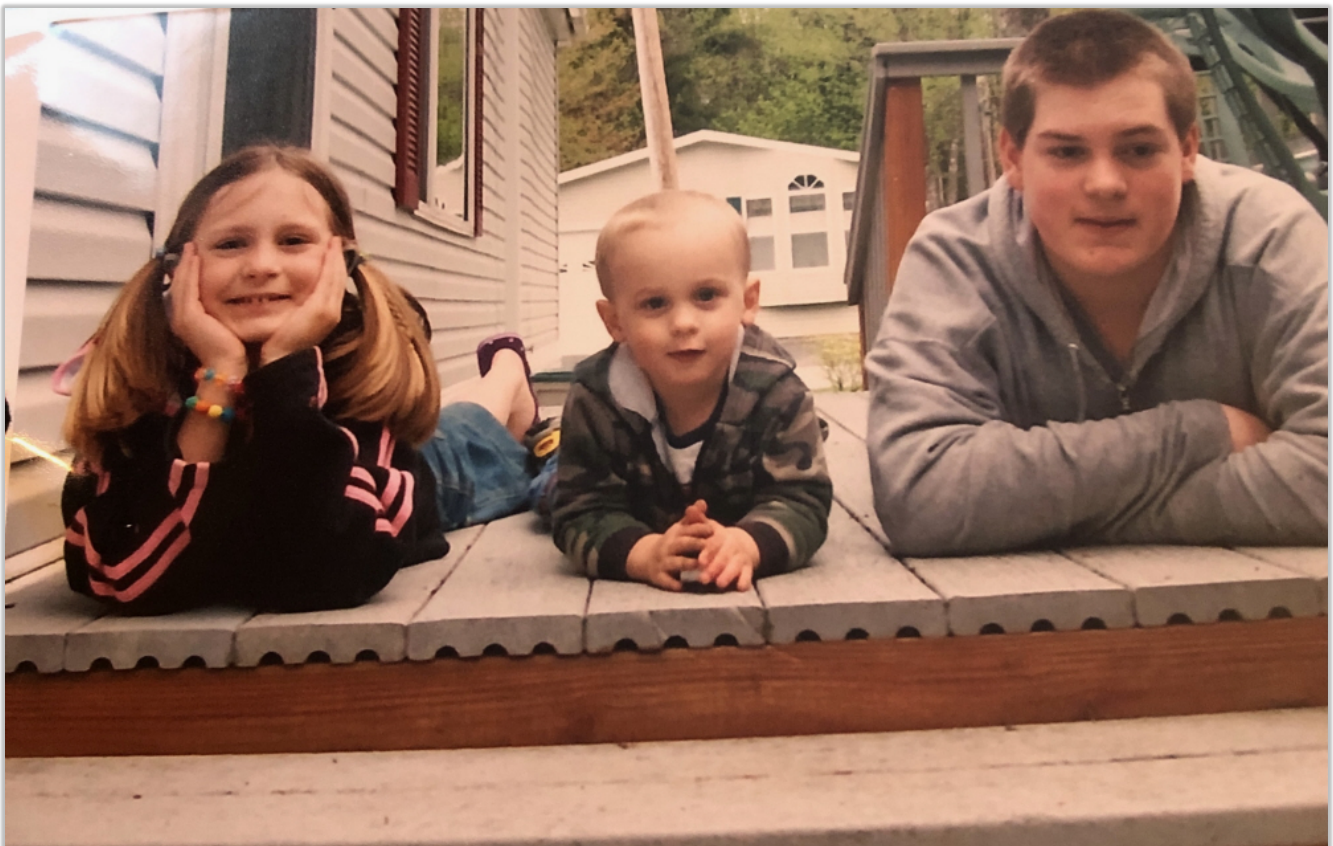
[VIA FEDEX AIRBILL 7817-8238-2240](#)

Dr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Subject : I Hereby Accuse You of 'Gross Criminal Negligence'  
Connectable to the Death of Mr. Spencer William Smith \***

Dear Dr. Fauci:

Are you familiar with Mr. Spencer William Smith, pictured at-right:



**I hereby accuse you (and others) of Gross Criminal Negligence, which is directly connectable to the suicide death of 16-year-old Spencer.** This charge is purposely narrow; I am confident that additional civil and criminal charges are evidentiary/supportable, in this and related matters, and will therefore be sustained in the near future.

---

\* An e-version of this letter with hyperlinks: <http://pvsheridan.com/sheridan2fauci-2-21december2020.pdf>

We review the Gross Criminal Negligence (GCN) law:

*“Gross negligence is culpable or criminal when accompanied by acts of commission or omission of a wanton or willful nature, showing a reckless or indifferent disregard of the rights of others, under circumstances reasonably calculated to produce injury, or which make it not improbable that injury will be occasioned, and the offender knows or is charged with knowledge of the probable result of his/her acts; ‘culpable’ meaning deserving of blame or censure.”*

You are aware that I had discussed this issue, regarding your person, with the now-confirmed treasonous US Attorney General Mr. William P. Barr on 28 August 2020 (Attachment 1).

I also alerted you to the fact that others were already guilty of GCN on Page 24 of my 36-page letter of 21 July 2020. I discussed ten areas regarding the so-called “COVID-19 pandemic,” quoting your protestations of 10 July 2020 to the Financial Times of London (Attachment 2) :

*“I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven’t been on television very much lately.” †*

Consistent with historical and ongoing behavior, **and contrary to your self-effacing crap about “speaking the truth at all times,”** you failed to offer the courtesy of a response:

**Had you done so, the death of Spencer William Smith would have been avoided.**

### **Your Two Most Prominent Lies - How These Led to the Death of Mr. Spencer William Smith**

We are now beyond the ten items discussed in Attachment 2. In this communication, we now focus on your two most prominent lies / frauds:

1. Your lie that the only way the United States can attain “herd immunity” is through vaccination; attained at a market share of “75%” (your baseless statistical claim).
2. Your bold-faced lie that the PCR process can be modified through “amplification,” and *then* deployed world-wide as the “gold standard” (for detection of what has been labeled SARS-CoV-2) for determination of COVID-19 infection.

**Both lies, and much more, are relevant to the charge of Gross Criminal Negligence. Specifically, I will show that your rampant demand for enforcement of “lockdowns,” which you justify in-part by these two lies, is directly connectable to the death of a 16-year-old high school child.**

---

† It is evidentiary that you would allay, in a globally distributed financial publication, the concerns of vested-interests, Big Pharma, etc.

**Discussion – Fauci Lie #1**

1. Your lie that the only way the United States can attain “herd immunity” is through vaccination; attained at a market share of “75%” (your baseless statistical claim).

In Attachment 2, pages 4-8, I reviewed the anti-hydroxychloroquine “studies” and the corporate news propaganda; **but most notably your promotion of the Surgisphere report.**

**You were fully aware that the Surgisphere report was an orchestrated fraud; so fraudulent that the global community of medical doctors (who uphold the Hippocratic Oath, offering *real* health & well-being) were so outraged that thousands protested that “study,” **thereby forcing its retraction.** ‡**



That retraction, and the efficacy of [hydroxychloroquine](#), was also detailed on 23 August 2020 by Mark Levin and renowned Yale professor Dr. Harvey Risch. §

**In the context of my (initial) charge against you, Gross Criminal Negligence,** your proclamations that treatments using hydroxychloroquine are ineffective or dangerous, **is a lie.**

You are aware of [treatments](#), and patient success, from nebulized budesonide to ivermectin. The latter was testified-to by Dr. Pierre Kory at the Senate Committee on Homeland Security and Governmental Affairs on 8 December 2020. Dr. Kory relies on his professional experience, and over 30 peer-reviewed studies, **not your / that orchestrated Surgisphere crap.** \*\*



**Your claim that “herd immunity” against “COVID-19” can *only* be attained by vaccination, is a lie.** As Dr. Cory testified, the CDC/FDA never even tasked-for [repurposed medicines](#) such as [ivermectin](#); **why is that the case Dr. Fauci !?** ††

But let us review an example of immunity, established without the needles that you and your comrades profit from . . . **A globally auspicious example of immunity that you are fully aware of; attained through the use of nutrition and treatments . . .**

‡ I also requested that you offer the taxpayer **your** retraction, and an apology, regarding the Surgisphere “study,” but **characteristically** you have refused to “*tell the truth at all times.*”

§ Your comrades at YouTube are censoring all uploads of this interview, [hence use if my personal server.](#)

\*\* It did not surprise anyone that the most embarrassing moment of that hearing [is sourced to Mr. Gary Peters.](#)

†† And now, characteristically for them, you are allied in the ‘vaccination = herd immunity’ stampede by the vested-interest administrators of Big Academia; see page 9 of Attachment 1.

**Discussion – Fauci Lie #1** – conclusion

1. Your lie that the only way the United States can attain “herd immunity” is through vaccination; attained at a market share of “75%” (your baseless statistical claim).



In 24 November 2020, I explained to the vaccine-promoting Delta Airlines CEO Ed Bastian: ††

**Conclusion – Part 2**

In the attached letter to President Trump I discuss the good news and demonstrated intelligence of our First Lady. You will note that I had written to her on [23 July 2020](#), warning her of the ongoing dangers of vaccines, and the implications for the First Family.

You might take notice . . . she has ostensibly decided, as had the president, [to avoid the vaccines](#) that you claim in your **crap** email are what *“the world eagerly awaits.”*

So, Mr. Bastian, in lockstep with the portent of Conclusion – Part 2, are you saying that **YOUR** family is “eagerly awaiting” to be stuck with a needle promoted by the three criminals on Page 1 above?!

If you declare “No,” then one must assume not mere complicity, but an active role on your part. `A person in your position, with its implicit ties to various private closed-door boardrooms, such as Big Pharma? †

Unlike you and The Swamp, the First Lady not only responded to previous communication, it appears that she has acted on such. §§

†† Available at <http://pvsheridan.com/sheridan2bastian-1-24november2020.pdf>

§§ You are discussed in my letter to the First Lady: <http://pvsheridan.com/Sheridan2Melania-3-23July2020.pdf>

## Intermission : The Pandemic Resume of Anthony Fauci

Before we discuss Lie #2, I am compelled to once-again quote **Dr. Kary Mullis, Nobel Prize winning inventor of the PCR process**. Interviewed by Dr. Gary Null, Dr. Mullis describes your pandemic resume:

“What is it about humanity that it wants to go to all the details . . . guys like **Fauci** get up there and start talking, he doesn’t know anything, really about anything, and I would say that to his face. Nothing! The man thinks you can take a blood sample, stick it in an electron microscope, and if it has got a virus in there you will know it. He does not understand electron microscopy. **He does not understand medicine. He should not be in the position he is in.**”

Most of those guys up there on the top are just total administrative people, and they do not know anything about what is going on at the bottom. Those guys have got an agenda, which is not what we would like them to have, being that we pay for them to care of our health. They have a personal kind of agenda, they make up their own rules as they go, they change them when they want to. **And they smugly; like Tony Fauci does not mind going on television, in front of the people that pay his salary (taxpayers), and lie directly into the camera.**

You cannot expect the sheep to really respect the best and the brightest. They do not know the difference. I like humans, do not get me wrong, but basically there is a vast majority of them that do not possess the ability to judge who is, and who is *not* really a good scientist. That is a main problem with science, the main problem with science in this century. Science is being judged by people, funding is being done by people (taxpayers) who do not understand it (science).

I mean . . . who do we trust? **Fauci? Fauci** does not know enough. **If Fauci wants to get on television with somebody that knows a little bit about this stuff and debate them? He could easily do it, because he has been asked!**

I mean I have had a lot of people; the president of the University of South Carolina has asked **Fauci** if he would come down there and debate me on the stage in front of the student body. Because I wanted somebody who was from the other side, to come down there and balance; because I felt like, well they could listen to me, but I need to have somebody else down here that was going to tell them about the other side. **Fauci . . . he did not want to do it.”**



**Intermission : The Pandemic Resume of Anthony Fauci** - Conclusion

That quote above from Dr. Mullis (pictured with the Dr. Peter Duesberg epic [Inventing the AIDS Virus](#)), provides a truer perspective on your television claim to the Financial Times of London:

*“ I have a reputation, as you probably have figured out, of speaking the truth at all times and not sugar-coating things. And that may be one of the reasons why I haven't been on television very much lately.”*

Relating to the late-1980's work of Dr. Duesberg, and your *ongoing* pandemic resume, I quoted renown Yale professor Dr. Harvey Risch on pages 7-8 of Attachment 1:

*“Somehow we have let politics overrule science, and it is an absurd situation that people have compared to ‘1984’ and ‘The Ministry of Truth’ and so on; that is limiting what people can say on objective facts, it is beyond belief ! . . . I think ‘they’ know the (hydroxychloroquine) treatment works. I think that basically they are afraid to even let it be tried, because letting it be tried would show that it works. So the message has to be shut at all costs, because anything will leak out, and in fact it is leaking out, and you see across the country, people who started to speak up, who become almost deathly ill, and have been turned around in three days or sooner even, and these are now public figures who are speaking up, who have said that the medicine hydroxychloroquine saved their life. And it is very difficult to, you know, close all the leaks in that dike that are being suppressed by the media that are trying to do that.”*

*This has gone on before . . . now we have Dr. Fauci denying that any evidence exists of benefit, and that has pervaded the FDA. The FDA has relied on Dr. Fauci and his NIH advisory groups to make the statement saying that there is no benefit of using hydroxychloroquine in outpatients, and this is counter to the facts of the case. The (positive) evidence is overwhelming. The FDA has also said that there is harm in using these medications in outpatients (that) overweighs the benefits. Ninety per cent of the COVID cases have occurred since the FDA restricted (hydroxychloroquine usage) to inpatients-only. Dr. Fauci and the FDA are doing the same thing that was done in 1987, and that has led to the (COVID-19) deaths of hundreds of thousands of Americans that could have been saved by usage of this drug.”*

### **This has gone on before !?!**

Your previous guilt under ‘Gross Criminal Negligence’ is additionally supportable by the statement of Dr. Risch. He presented your lack of objective, scientific assessment of the life-saving benefits to AIDS patients of inexpensive anti-biotics, such as sulfamethoxazole and trimethoprim (Bactrim). An elaboration to that ‘gone on before’ question? Dr. Risch recounts that **your bias toward profitable expensive vaccines was directly connectable to the death of over 17,000 human beings, quote:**

**“This was started most noticeably in 1987 . . . Seventeen-thousand people died because of Dr. Fauci’s insistence on not allowing even a statement supporting consideration of the use (of Bactrim).”**

Not allowing a statement? In the 1980s? And **now** your lies of 27 May 2020 to *Politico* that there is no benefit to hydroxychloroquine!? A mere introduction to your Pandemic Resume. \*\*\*

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\*\*\* See page 7 of Attachment 2. Has this gone on before? Regarding your vaccine failure for “HIV” . . . you spent millions of taxpayer dollars, while simultaneously denying/severely-delaying approval of AIDS treatments such as repurposed medicines. **30+ years later? This is the exact same profit-prioritized violation of the Hippocratic Oath that you are now dispensing for COVID-19! Dr. Mullis: “He should not be in the position he is in.”**

**Discussion – Fauci Lie #2**

2. Your bold-faced lie that the PCR process can be modified through “amplification,” and *then* deployed world-wide as the “gold standard” (for detection of what has been labeled SARS-CoV-2) for determination of COVID-19 infection.

On 21 July 2020, **predating the suicide death of Spencer William Smith by five months**, I requested your responses to questions regarding “COVID testing.” You ignored me.

In contrast, the good Governor of Florida Ron DeSantis did **not** ignore that very same letter **†††**

**Memo:** It is abundantly clear, **had the Smith family merely resided in Florida**, wherein “lockdowns” are reduced to non-existence, the schools are open, and the students enjoy normal social interactions; in that residence **the probability of the suicide death of a child, 16 year-old Spencer William Smith, drops to zero.**

## CORONAVIRUS

**No Matter What, Governor Says, Florida Schools Will Stay Open**

As the coronavirus shows signs of a possible comeback in Florida, the governor points to evidence that in-person learning in schools is not fueling infections.

By Tony Pipitone • Published October 20, 2020 • Updated on October 20, 2020 at 7:37 pm

That byline, that insane “comeback” drum-beat, from your comrades in the corporate media, is fueled by **Fauci Lie #2.**

The incessant media and politician **crap** about “cases” is fueled by ***not* following the science**; it is fueled by degrading science to charlatanism . . . by denigrating science to the point that the admonition “*follow the science*” is just **another** political ruse, a phrase worthy of only mindless WOKE diatribe . . . the byline is fueled by misrepresenting what science can and can *not* do. These misrepresentations that have no connection to the rigors of that honorable human activity.

But with respect to your PCR based “gold standard” . . . **If there is anyone that is *not* following the science, and encouraging others to *not* ‘follow the science,’ *it’s you!***

That Governor DeSantis **is** ‘following the science’ is borne by Attachment 3. His action will prove pivotal to ending your lockdowns which you justify by “cases;” a ruse that has devastated New York, Michigan, Pennsylvania, the Bolshevik-inspired disaster called “California” . . . the USA.

Most relevantly Governor DeSantis will ensure that “cases” based lockdowns, which led directly to **the nightmare** in Brunswick, Maine on December 4, 2020, **never happens in Florida** **†††**

††† According to the shipper, [the Governor’s office received his copy on 27 July 2020.](#)

††† <https://www.brackettfh.com/obituaries/Spencer-William-Smith?obId=19220178>

**Discussion – Fauci Lie #2** – con't

2. Your bold-faced lie that the PCR process can be modified through “amplification,” and *then* deployed world-wide as the “gold standard” (for detection of what has been labeled SARS-CoV-2) for determination of COVID-19 infection.

As the non-science person easily understands by reviewing Attachment 3, the central theme of Governor DeSantis’ order is what I alerted you about . . . but long-before December 4, 2020:

**Your implicit fraud of instituting/endorsing “amplification” of the PCR process;**

a process that the Nobel Prize winner/inventor of PCR told you, DIRECTLY, could *not* be deployed for definitive or specific virus detection . . . your so-called “gold standard.”

## Florida Department of Health mandates reporting of cycle threshold values for PCR tests

December 6, 2020



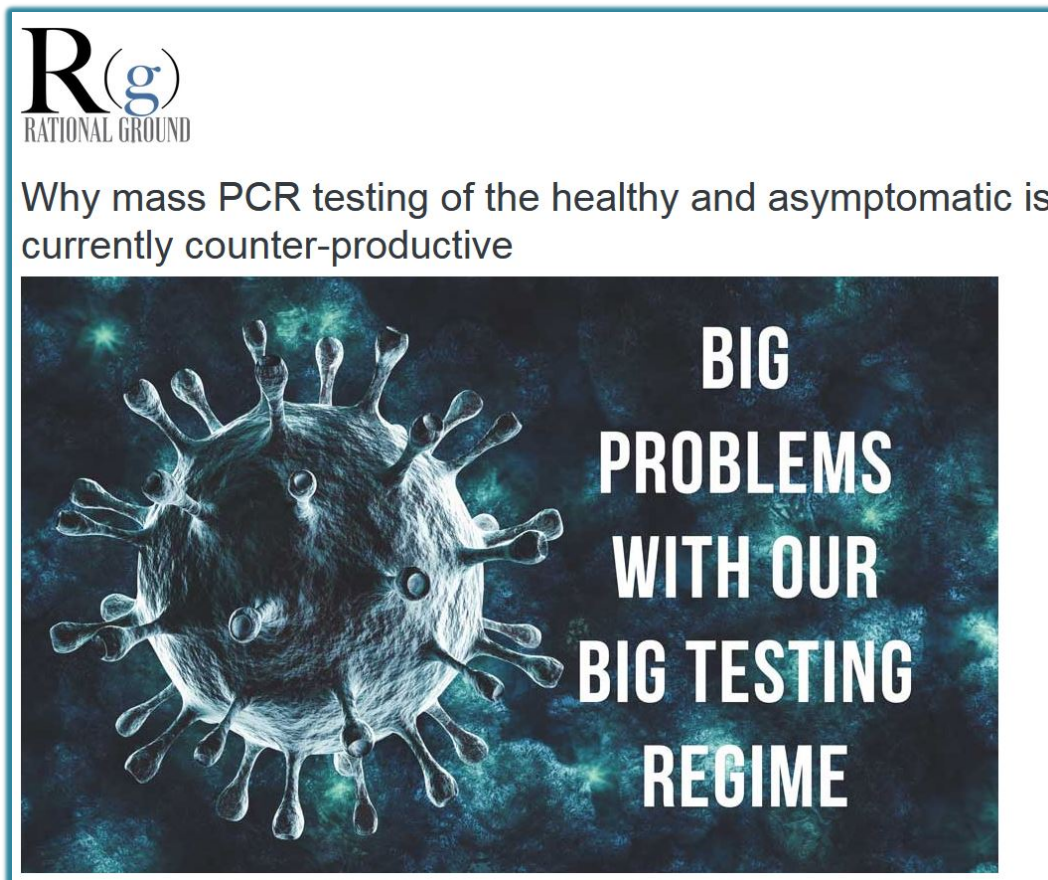
BY JENNIFER CABRERA



**Discussion – Fauci Lie #2** – Conclusion

2. Your bold-faced lie that the PCR process can be modified through “amplification,” and *then* deployed world-wide as the “gold standard” (for detection of what has been labeled SARS-CoV-2) for determination of COVID-19 infection.

As you are *fully aware*, the PCR process, and its misapplication to “COVID-19 testing,” deployed by Delta Airlines, Cornell University, the State of Maine, is **NOT quantitative, it is qualitative; with outputs utterly dependent on the Cycle Threshold Value (aka “amplification”) now demanded by the State of Florida.** In this context I take exception to the following headline:



Whilst you and your comrades celebrate the “Big Testing Regime” (despite [Quest Diagnostics](#)), having made and anticipating fortunes while that regime is enforced, the notion that “PCR testing of the healthy and asymptomatic is currently counter-productive” is irresolute . . .

**The Big Testing Regime is not merely “currently,” or merely “counterproductive.” It has ALWAYS been counter-productive; now proven deadly, and not just to the Smith Family of Maine. Were it not for the fraud of “amplification,” central to your lies of PCR-based testing as the “gold standard,” the governor of Maine would not have had exaggerated “confirmed cases,” and therefore would be unable to enforce her Bolshevik-styled [lockdown](#) . . . that 16-year-old Spencer William Smith had connected in the suicide note as his [primary reason to take his own life.](#)**

**Discussion : The Destiny of Two Sixteen Year Old Boys – A Stark Comparison**

Dr. Fauci . . . take a look at the following photographs . . . **take a good loooooong look:**



**Discussion : The Destiny of Two Sixteen Year Old Boys – A Stark Comparison** – con't

This photograph was taken in 1956. At the time, player #4 is 16 years old . . .



Unlike Spencer William Smith, formerly of Brunswick, Maine, player #4 above :

- a. Was never told that he was in danger from Gain-of-Function (GOF) research conducted in a **known-to-be unqualified lab in Wuhan China** . . . research that was funded by someone feigning *'speaking the truth at all times.'* A bureaucrat connected to a criminal scheme to circumvent a US government moratorium on that very type of very dangerous Wuhan GOF research. \$\$\$
- b. Player #4 was never told that he and his family had to hide their faces behind grotesque masks at all times, during Thanksgiving dinner and Christmas holidays . . . [He was never lied to about the alleged effectiveness of such tyrannical hegemony](#), versus the true purpose; that of behavioral conditioning and societal compliance; **predicates for a carefully concealed, pre-planned, profit-prioritized conspiracy to eventually make vaccination mandatory.** \*\*\*\*

\$\$\$ See Attachment 2, page 3, **Question 1!**

\*\*\*\* I go into great detail on your lies about [face masks](#), most notably your approval of the censorship condominium (deleting everything from science papers to PPE videos of state congressmen) comprised of your special comrades at YouTube, Facebook, WordPress, Twitter, et al. See pages 12-16 of Attachment 2, and Attachment 4 below.

**Discussion : The Destiny of Two Sixteen Year Old Boys – A Stark Comparison** – con't

This photograph was taken in 1956. At the time, player #4 is 16 years old . . .



c. Player #4 was never told that getting stuck with a needle promoted by lawyers and politicians and computer hacks, for a disease that was routinely defeated by his God-given immune system, **would be mandatory** . . . otherwise he would be [barred from airline travel](#), a [university education](#), or merely enjoyment of the rigors of a productive daily life.

d. Unlike Spencer William Smith, player #4 was never told that his sports season was canceled due to the lie, spewed by “health authorities,” that the global spread of a GOF virus originated in bats, sold at a fish market (!?), versus the truth explained in ‘Page 11, Item a’ above.

**NO SCRUTINY** Wuhan coronavirus lab  
may **DODGE** investigation as WHO  
team hunting for origin of pandemic  
won't bother visiting

Tom Michael  
12 Jul 2020, 14:40

**Discussion : The Destiny of Two Sixteen Year Old Boys – A Stark Comparison** – con't

This photograph was taken in 1956. At the time, player #4 is 16 years old . . .



e. Unlike Spencer William Smith, player #4 was not ordered by some governor to **submit his young life to a lockdown**, [leaving him isolated and disconnected from his high school friends, during the crucial time for social development and personal maturation](#) . . . effectively an illegal quarantine that would endure and be enforced, with no stated end in sight, **justified on the basis of your “gold standard” and your associated fraud of “confirmed cases.”** ††††



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†††† Regarding “confirmed cases,” I also review in-detail your criminal fraud, exemplified in Texas, of your “revised” statistical/counting/tracing farce; **truly despicable/repulsive**. See pages 20 – 23, Attachment 2.

**Discussion : The Destiny of Two Sixteen Year Old Boys – A Stark Comparison** – Conclusion



The following photo (hyperlinked) was taken last Summer 2020 in Wuhan, China; within walking distance of the lab wherein **GOF virus research was illegally funded by Dr. Anthony Fauci:**



The following photograph (hyperlinked) was taken last Summer 2020 in Brunswick, Maine:



**Dr. Fauci . . . It is clear . . . had the Smith family resided in Wuhan, China (!) . . . where the schools are open, and students enjoy normal social interactions, the probability of the suicide death of 16-year-old Spencer William Smith drops to zero... **THEE stark comparison.****

**The Verisimilitude of Dr. Anthony Fauci and His “Surprise Outbreak”**

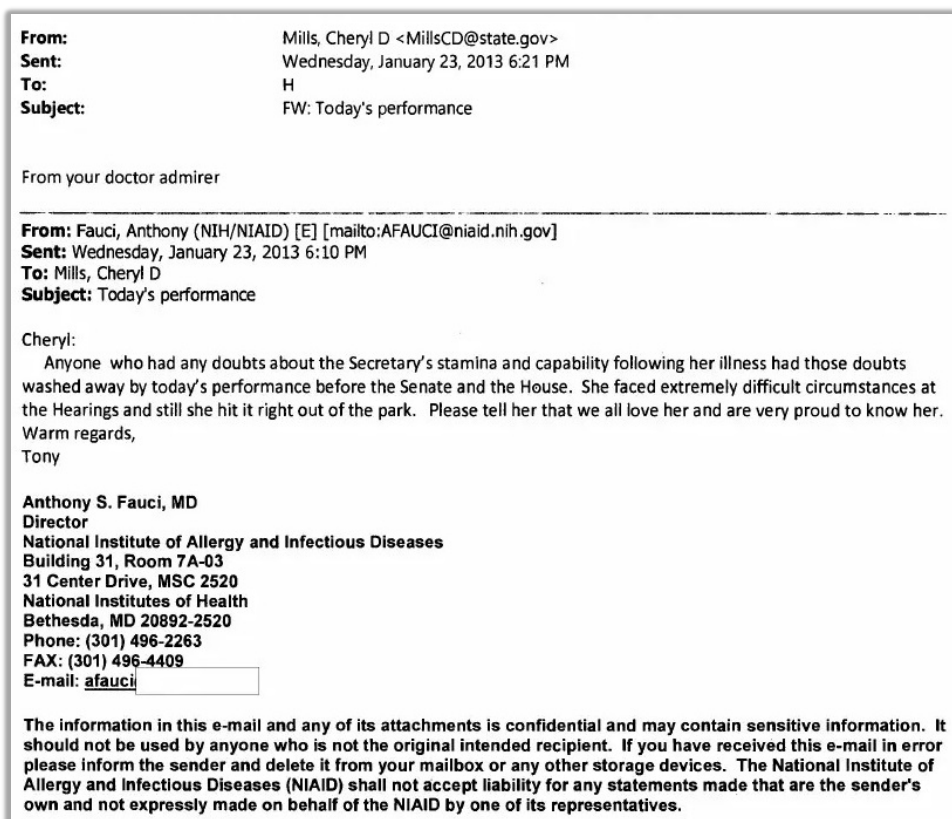
On the very first page of my letter to you of 21 July 2020, I displayed the following:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2017.)

It is unimaginable what would have happened to American health had your heart-throb been elected in November 2016; your candidate “H” that you sent confidential “love” emails to during her role as Secretary of State under Barack Obama:



In truth, **the Trump win in 2016 merely postponed your plans for our health**, as demonstrated by your distressed verisimilitude, mere moments before his inauguration in January 2017.

**The Verisimilitude of Dr. Anthony Fauci and His “Surprise Outbreak” – [con't](#)**

It was the “coming Administration” that you were determined to remove from office, hence postponement of your [“surprise outbreak”](#) until December 2019 via the “China virus,” a virus that was created in the Wuhan lab that you illegally funded while under Barack Obama.

In 21 July 2020 I quote your 27 May 2020 promotional video with *Politico*. **In that interview you essentially confirm that the “surprise outbreak” was anything but!** A screenshot:

21 July 2020

Dr. Anthony S. Fauci  
Page 8 of 36

But then, without prompting by Politico, you began promoting vaccines:

“ When we first developed a vaccine, I said it would be about a year to a year-an-a-half, and that was in January.<sup>1</sup> So a year from January is December. I still think that we have a good chance, if all the things fall in the right place, that we might have a vaccine that would be deployable by the end of the year, by November or December.”

I was then compelled to inquire about the obvious, at-bottom of Page 8, Footnote 1, screenshot:

<sup>1</sup> **January?!** Given how little was known about SARS-CoV-2, due to censorship (by the Wuhan Laboratory and those associated with it), it is astounding that you were already “*develop(ing) a vaccine.*” In this context please review the screenshot on Page 1 above, and Question 1 above.

**Regarding an interconnection, shortly after receipt of my 21 July 2020 letter, you were celebrated as central to [the pre-planned procedural effects](#) that your “surprise outbreak” was having on the American 2020 presidential election: **+++****

The screenshot shows the CultureMap Dallas website. The main navigation bar includes categories like RESTAURANTS + BARS, ENTERTAINMENT, ARTS, SOCIETY, CITY GUIDE, CITY LIFE, FASHION + BEAUTY, REAL ESTATE, HOME + DESIGN, INNOVATION, and TRAVEL. The article title is "Anthony Fauci and Hillary Clinton lead all-stars at Texas' biggest political festival" by Katie Friel, dated Aug 11, 2020, 4:48 pm. Social media sharing icons for Facebook (13), Twitter (3), and Email are visible at the bottom.

**+++** Coyly unstated by all-concerned, but those living under a rock *also* speculate with alacrity on these connections.



**The Verisimilitude of Dr. Anthony Fauci and His “Surprise Outbreak”** – [Conclusion](#)



**The Verisimilitude of Governor Janet Mills – Her Crime of Child Abuse**

The legislature of Maine oversees, under the Year 2013 Arraignment of the Maine State Constitution, **laws to protect the children of Maine from ‘child abuse.’**

Title 22, Subtitle 3, Part 3, Chapter 1071 is entitled: Child and Family Services and Child Protection Act. Subchapter 1, [Section 4002](#) provides definitions:

Paragraph 1 is entitled: Abuse or neglect.

Abuse or neglect means a threat to a child's health or welfare by physical, mental or emotional injury or impairment, sexual abuse or exploitation including under . . . deprivation of essential needs or lack of protection from these or failure to ensure compliance with school attendance requirements . . . by a person responsible for the child.

Paragraph 1C is entitled: Best interest of the child.

Paragraph 2 is entitled Child:

Child means any person who is less than 18 years of age.

Paragraph 5 is entitled: Custodian.

Custodian means the person who has legal custody and power over the person of a child.

These are a few of the relevant portions of the Maine Statute on Child Abuse. We therefore ask:

**Is there any doubt that 16-year-old Spencer William Smith was a child? Is there any doubt that Dr. Anthony Fauci and Governor Janet Mills were in-effect custodians, and in that context exacted their “power over the person of a child” ? Is there any doubt that the ‘Best Interest’ of Spencer was severely neglected by Dr. Fauci and Governor Mills ? Is there any doubt that Dr. Fauci and Governor Mills consciously failed “to ensure compliance with school attendance requirements” ?** (see quote Page 20 of 21 below).



It is not a “conspiracy theory” that this emerging breed of self-absorbed, Marxist-styled, “public servants” increasingly seek to take control; to be custodians of every aspect of our lives, **most especially the lives, education, upbringing, and of-late the health of our children.** They claim to ‘know best,’ while enforcing orders that range from restaurant closures in Bethel, Maine, to high school lockdowns in Brunswick, Maine.

Their standard diatribe is that anyone that questions their blatant incompetent takeover is just a “racist,” or “a Trump supporter,” or a “white supremacist,” etc. Such amounts to adolescent diversions, worthy of only pity.

**I accuse Maine Governor Janet Mills of both Gross Criminal Negligence and ‘Child Abuse,’ connectable to the lockdown-premised suicide death of a 16-year-old child, Spencer William Smith.**

**The Coming Deaths / Suicides Connected to Mandatory COVID-19 Vaccinations**

We emphasize that it was **the person featured at-left** that effectively chaperoned through Congress broad-sweeping protections for Big Pharma against liability connected to the obvious and well-known, long-standing dangers of vaccination in-general, COVID-19 vaccination in-particular. **\$\$\$\$**



In Attachment 1, page 9, I discussed the COVID-19 vaccinations of students as a pre-condition to admission to Cornell University. Do we need to spell-out that [Cornell lawyers and current administrators](#) are thankful to you, Dr. Fauci, for your conspiratorial chaperoning of the Big Pharma liability protection laws . . . laws that subvert even the legal protections of front-line nurses that collapse mere seconds after injection of the COVID-19 vaccine?



**\$\$\$\$** Clearly, although you ignored Attachment 2, [the answer to my 'Page 3, Question 1'](#) is a resounding **YES!**

**“The Truth is” . . . Regarding the Foreseeable and Avoidable Death of a Child**

You remained silent during the devastation inflicted upon the vulnerable, frequently helpless tenets of [nursing homes](#); instead of speaking out with the conviction and competence of the medical profession, you remained complicit with the two psychopaths currently destroying New York:



That silence exposed your claim of “*speaking the truth at all times*” as no more than a self-effacing sham. **But your silence is equally deafening regarding [the suicide deaths of our children](#)** under your “gold standard” and lockdown and upcoming “mandatory vaccine” stunts.



**In a criminal trial** of Dr. Anthony Fauci, Governor Janet Mills, et al., I recommend, as **the first prosecution witness**, Dr. Robert Redfield. On 19 November, with the Director of NIAID present, Dr. Redfield declared at a [White House press conference](#) of the Coronavirus Task Force :

**“ The truth is, for kids K through 12, one of the safest places they can be from our perspective is to remain in school. ”**

But that truth, known to the Swamp for many months, was too late for celebration of the Thanksgiving and Christmas holidays . . . especially for a family in Brunswick, Maine.

**“The Truth is” . . . Regarding the Foreseeable and Avoidable Death of a Child** - Conclusion

An open trial would expose your incompetence and inaccuracy, relating to everything from the **counterproductive** lockdowns and facemasks, to **the non-necessity of your “vaccines.”** At trial [Dr. Harvey Risch](#) and [Dr. Pierre Kory](#) could testify on the prophylactic dispensing of re-purposed drugs ranging from hydroxychloroquine to ivermectin. I suggest calling [Dr. Simone Gold](#), [Professor Hendrick Streeck](#), [Dr. Sucharit Bhakdi](#), [Dr. James Lyons-Weiler](#) and [Professor Denis Rancourt](#).

Regarding your ongoing fraud, claiming a **necessity** of your “vaccines” for a ‘return to normal,’ we would call [First Lady](#) Melania Trump, President [Donald Trump](#), and 14-year-old Mr. Barron Trump.

Regarding your affiliation with the Chinese Communist Party, relating to your claims that “SARS-CoV-2” was [not created in a lab](#), I would initially call [Dr. Li-Meng Yan](#).<sup>\*\*\*\*\*</sup> Regarding your participation in the true purpose of the lockdowns, I would enter-into-evidence [the Bilderman Report](#), presented to the New York Academy of Medicine on November 13, 1956.

I am confident that a ‘jury of peers’ selected from [the good citizens of Maine](#) would reach their verdict [based upon the evidence](#), **not** the agenda of vested interests, the Great Reset, etc.

**Conclusion**

Given the subject . . . Only a charlatan and a fraudster would declare that “*speaking the truth at all times*” is related to television, but then use those **syndicated** appearances to deliver **the most grotesque, self-serving outbursts in modern medical history:**

**Fauci tells kids not to worry, he gave Santa Claus the Covid-19 vaccine**

The world's most famed gift-giver will be safe to travel on Christmas Eve after a house call from Dr. Anthony Fauci.

You gave no consideration to the effect such vileness would have on the Smith family . . .

**On the basis of the above discussions, and upon the declaration made by Dr. Robert Redfield, I hereby accuse you (and others) of Gross Criminal Negligence, which is directly connectable to the suicide death of 16-year-old Spencer William Smith. I hereby extend that same charge and add the charge of ‘Child Abuse’ to Governor Janet Mills of Maine.**

Truly,

Paul V. Sheridan

**ATTACHMENTS**

\*\*\*\*\* See Page 2: <http://pvsheridan.com/sheridan2trump-6-18september2020-s.pdf>

**Preliminary Copy List**

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Dr. Harvey Risch ††††  
Yale University  
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60 College Street  
New Haven, CT 06510  
203- 785- 2848

Dr. Robert R. Redfield ††††  
CDC  
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Atlanta, GA 30329  
800- 232- 4636

Governor Janet Mills ††††  
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Augusta, ME 04333  
207- 287- 3531

Governor Ron DeSantis ††††  
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850- 717- 9337

Senator Rand Paul ††††  
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Vice President Michael R. Pence ††††  
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Dr. Pierre D. Kory, MD ††††  
Frontline COVID-19 Critical Care Alliance  
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10 Union Square E,  
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Dr. Francis S. Collin ††††  
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US Department of Defense  
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703- 545- 6700

Governor Kristi Noem ††††  
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605- 773- 3212

Mr. Peter Salovey, President ††††  
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203- 432- 2550

President Martha E. Pollack ††††  
Cornell University  
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Ithaca, NY 14853  
607- 255- 5201

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†††† Abridged version

†††† Full version (as received by Anthony Fauci)

# ATTACHMENT 10

19 January 2022

Mr. Anthony S. Fauci, Director  
National Institute of Allergy and Infectious Diseases  
5601 Fishers Lane  
Rockville, MD 20892  
301-496-2263 / anthony.fauci@nih.gov

**Demand: Your Forfeiture of all Degrees, Disassociation of Any Affiliation, and complete Disconnection from Any Prior Accolades/Activities Related in any way to my alma mater – CORNELL UNIVERSITY**

Mises Institute Report :

**With Low Vaccination Rates, Africa's COVID Deaths Remain Far below Europe and the US**

4 Pages

# MISES INSTITUTE

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## With Low Vaccination Rates, Africa's Covid Deaths Remain Far below Europe and the US

November 23, 2021 - 1:44 PM [Ryan McMaken](#) <sup>[1]</sup>

Topics:

[Bureaucracy and Regulation](#) <sup>[2]</sup> [Health](#) <sup>[3]</sup>

Since the very beginning of the covid panic, the narrative has been this: implement severe lockdowns or your population will experience a bloodbath. Morgues will be overwhelmed, the death total toll will be astounding. On the other hand, we were assured those jurisdictions that *do* lock down would see only a fraction of the death toll.

Then, once vaccines became available, the narrative was modified to "Get shots in arms and then covid will stop spreading. Those countries without vaccines, on the other hand, will continue to face mass casualties."

The lockdown narrative, of course, has already been thoroughly overturned. Jurisdictions that did not lock down or adopted only weak and short lockdowns [ended up with](#) <sup>[4]</sup> covid death tolls that were either similar to—or even better than—death tolls in countries that adopted draconian lockdowns. Lockdown advocates said locked-down countries would be overwhelmingly better off. These people were clearly wrong.

Undaunted by the increasing implausibility of the lockdown narrative, the global health bureaucrats are nonetheless doubling down on forced vaccines—as we now see in Austria—and we continue to be assured that only countries with high vaccination rates can hope to avoid disastrous covid outcomes.

Yet, the experience in sub-Saharan Africa calls both these narratives into question: Africa's numbers have been far, far lower than the experts warned would be the case.

For example, [the AP reported this week](#) <sup>[5]</sup> that in spite of low vaccination rates, Africa has fared better than most of the world:

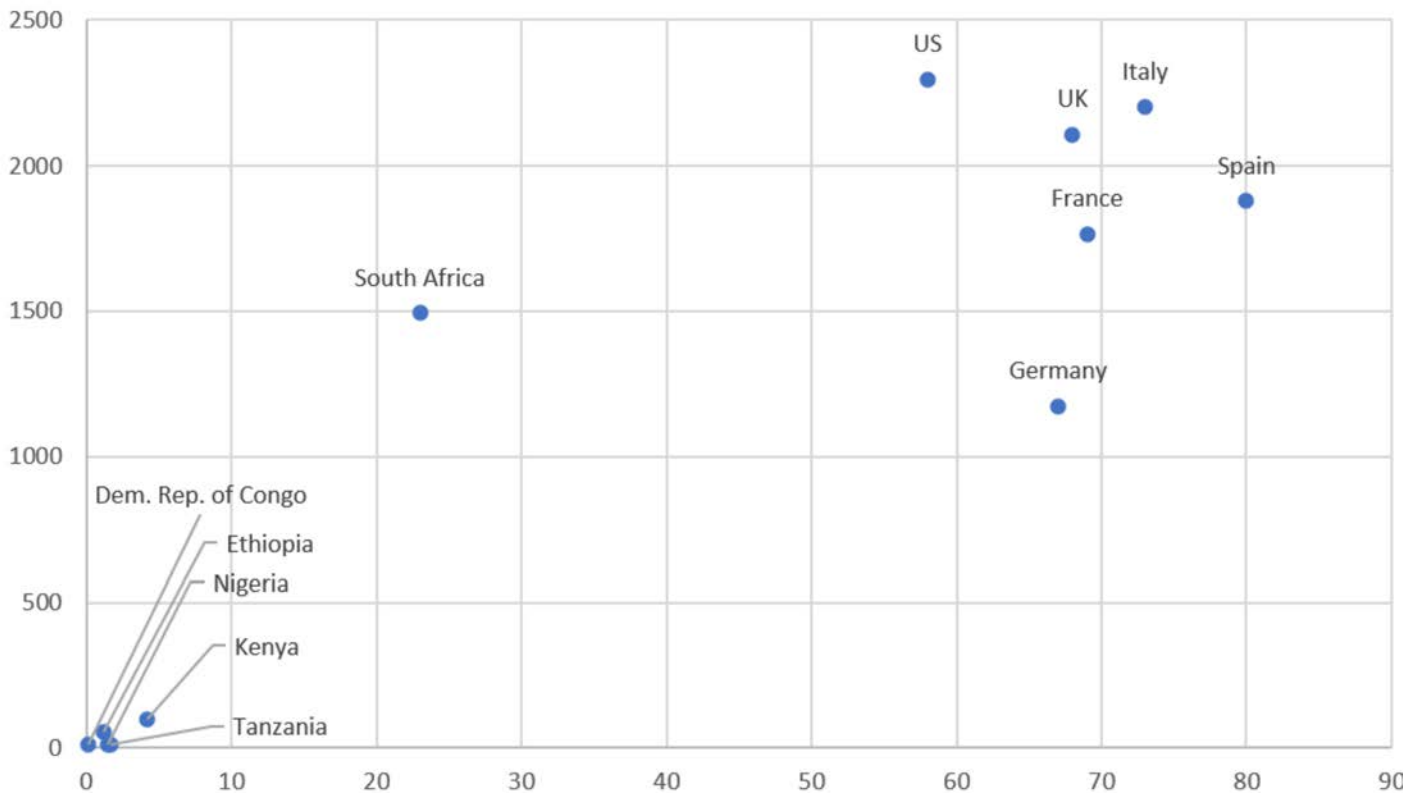
[T]here is something “mysterious” going on in Africa that is puzzling scientists, said Wafaa El-Sadr, chair of global health at Columbia University. “Africa doesn’t have the vaccines and the resources to fight COVID-19 that they have in Europe and the U.S., but somehow they seem to be doing better,” she said....

Fewer than 6% of people in Africa are vaccinated. For months, the WHO has described Africa as “one of the least affected regions in the world” in its weekly pandemic reports.

Yet disaster for Africa has long been predicted for several reasons even beyond the availability of vaccines. For instance, it is known that lockdowns are especially impractical in the poorest parts of the world. This is because populations in places with undeveloped economies can’t simply sit at home and live off savings or debt. Rather, these people must go out into the world and earn a living on a day-to-day basis. Starvation is the alternative. Moreover, much of this work is done in the informal economy, so enforcing lockdowns becomes especially difficult.



## Share of People Fully Vaccinated vs. Covid Deaths per Million



[6]

Source: Our World in Data ([Confirmed Deaths per Million, November 19, 2021](#) [7]; [Share of People Vaccinated against Covid-19, November 19, 2021](#) [8]).

It was also assumed covid would be especially deadly in Africa due to the fact many large households live in small housing units.

But that "conventional wisdom" flies in the face of the reality of covid in Africa, which is that there have been *fewer* deaths.

The "experts" have groped around, looking for possible explanations.

Some sources, for example, insist that the low death totals are only an artifact of incomplete reporting on covid infections and that "[a lack of good qualitative data was the issue](#) [9]."

But Richard Wamai at Northeastern University rejects the claim it's all about case reporting, and says that "[local systems for reporting deaths in Africa make it difficult to hide COVID-19 casualties](#) [10]." In a [paper](#) [11] for the *International Journal of Environmental Research and Public Health*, Wamai and his coauthors conclude, "[T]here is no evidence that COVID-19 mortality data is less accurately reported in Africa than elsewhere" and "While the true picture of infections and mortality in the continent has yet to fully emerge, the quality of data for other diseases, such as HIV/AIDS, indicates that Africa has the capacity to collect and report valid disease surveillance data."

In any case, the [World Health Organization reports](#) [12] that covid deaths in Africa make up only 2.9 percent of covid deaths, while Africa's population is 16 percent of the global total. Africa's covid total could double or triple, and Africa would still be faring far better than Europe and the Americas.

Wamai et al. also note that at this point "[i]t is likely that SARS-CoV-2 has already been widely disseminated through Africa.... If so, widespread infection is likely to also result in widespread natural immunity."

In other words, continued claims by health officials—both in Africa and elsewhere—that mass death is right around the corner with the "next wave" look increasingly implausible.

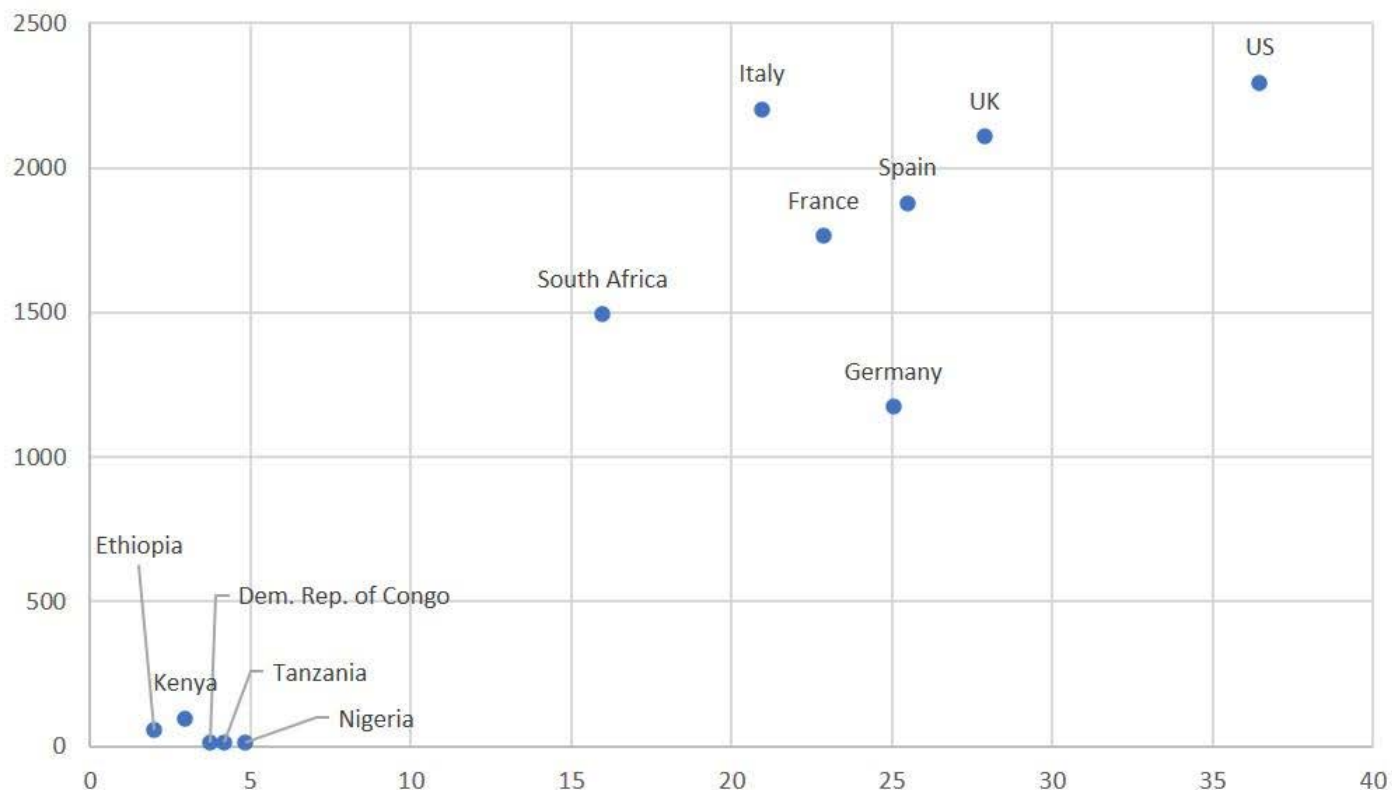
It looks increasingly likely that the lack of covid mortality in Africa is not due to a data issue nor a situation in which covid has been "contained" up until now. So then why is Africa doing so much better than the wealthy West?

Naturally, the advocates of forced lockdowns and coerced vaccines would prefer to ignore this issue altogether, but the undeniable reality of Africa's experience has forced mainstream researchers to publicly admit the many ways that many factors can explain covid's prevalence beyond vaccination rates and mask mandates.

For instance, mentioning that obesity is an important factor in covid mortality has in the past been likely to get one savaged in the media for "fat shaming." Yet the Africa situation has forced the well informed to admit that yes, obese populations clearly suffer more from covid. In Africa, not surprisingly, we find that obesity rates are far below those found in North America and Europe.

Other possible explanations forwarded as reasons for Africa's situation include past exposure to other coronaviruses [13], youthful populations, fewer patients lacking zinc and vitamin D [14], past use of the Bacillus Calmette-Guérin vaccination, climate, genetic background, and parasite load [15]. In addressing the African "enigma" one group of researchers in the journal *Colombia medica* dared even suggest it's possible [16]—although not conclusively shown at this point—that "a mass public health preventive campaign against COVID-19 may have taken place, inadvertently, in some African countries with massive community ivermectin use."

## Obesity Rate vs. Covid Deaths per Million



[17]

Source: "Global Obesity Levels [18]," ProCon.org, last modified March 27, 2020; Our World in Data (Share of People Vaccinated against Covid-19, November 19, 2021 [8]).

In the West, however, the media drumbeat around covid has consistently been "Shut up, stay home, get jabbed, and stop doubting the experts on forced vaccines." Fortunately, however, the African situation has forced many researchers to ask inconvenient questions.

In fact, it's amazing Africa has not been overcome by mass death considering that covid lockdowns and covid "mitigation" measures have contributed to the impoverishment and mass starvation on the continent. Or as Germany's DW News puts it [19], "Measures put in place to slow the spread of the novel coronavirus are pushing millions of people in Africa into severe hunger." And as Wamai notes, "[S]ome of the excess deaths in Africa "can be attributed not to the disease, but to lockdown measures that cut off access to medical care for other illnesses."

But Africa hasn't gotten the bloodbath that was promised, and as one Nigerian put it [5], "They said there will be dead bodies on the streets and all that, but nothing like that happened."

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**Source URL:** <https://mises.org/wire/low-vaccination-rates-africas-covid-deaths-remain-far-below-europe-and-us>

#### **Links**

- [1] <https://mises.org/profile/ryan-mcmaken>
- [2] <https://mises.org/topics/bureaucracy-and-regulation>
- [3] <https://mises.org/topics/health>
- [4] <https://mises.org/wire/without-lockdowns-sweden-had-fewer-excess-deaths-most-europe>
- [5] <https://news.yahoo.com/scientists-mystified-wary-africa-avoids-074905034.html>
- [6] <https://cdn.mises.org/africa1.png>
- [7] <https://ourworldindata.org/covid-deaths#world-maps-confirmed-deaths-relative-to-the-size-of-the-population>
- [8] <https://ourworldindata.org/covid-vaccinations>
- [9] <https://frontline.thehindu.com/dispatches/explained-why-not-sending-covid-vaccines-to-africa-is-a-huge-mistake/article37622110.ece>
- [10] <https://news.northeastern.edu/2021/06/11/why-has-africa-suffered-fewer-covid-19-deaths-than-predicted/>
- [11] <https://www.mdpi.com/1660-4601/18/16/8638/htm>
- [12] <https://covid19.who.int/>
- [13] <https://www.jci.org/articles/view/143380#SEC3>
- [14] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8251241/>
- [15] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7506193/>
- [16] <https://pubmed.ncbi.nlm.nih.gov/33795896/>
- [17] [https://cdn.mises.org/africa2\\_0.jpg](https://cdn.mises.org/africa2_0.jpg)
- [18] <https://obesity.procon.org/global-obesity-levels/#:~:text=Global%20Obesity%20Levels%20%20%20Global%20Rank,%20%2052.9%25%20%2097%20more%20rows%20>
- [19] <https://www.dw.com/en/severe-hunger-threatens-africa-during-covid-19-lockdowns/a-53212565>

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