Special Feature

# CONNECT

# This Is Farcical Beyond Belief!

3185 XB

Another debate by MPs shows us just how inadequate the system is

A while ago I wrote an expose about a debate held in parliament. The debate would not have been held without it being prompted by more than 100,000 constituents who *begged* for it to be conducted.

There has been another debate prompted by more than 156,000 signatures appended to a petition. This debate concerned the UK parliament sanctioning the giving of rights to the WHO. If sanctioned, those rights would enable the WHO to dictate policy - and actions - to the UK's parliament. The first debate was a shock in many ways. This latest version was just as bad!



The debate – prompted ONLY by the will of 156,000 citizens - was titled:

Pandemic Prevention, Preparedness and Response: International Agreement

The debate began with these opening remarks by Nick Fletcher.

[Embolding is mine]

Petitioners ask that the Government commit to **NOT** signing any international treaty on pandemic prevention and preparedness established by the World Health Organisation unless it is approved through a public referendum.

In their response to the petitioners, back in May 2022, the Government stated:

"To protect lives, the economy and future generations from future pandemics, the UK government supports a new legally-binding

instrument to strengthen pandemic prevention, preparedness and response."

They finished their response with,

"This process of ratification allows scrutiny by elected representatives of both the treaty and any appropriate domestic legislation in accordance with the UK's constitutional arrangements. The Government does not consider a referendum is necessary, appropriate or in keeping with precedent for such an agreement."

This is more than interesting and more than alarming. What we see here is that the *State* appears prepared to assign rights to a foreign body – the WHO – to dictate policy and actions to the sovereign people of the UK. In one word, this contravenes Constitutional Law. No parliament is empowered to assign rights over The People of the UK.

# 3 Continuing:

#### Nick Fletcher:

Through the treaty, it is now proposed that the WHO would be able to police its powers to motivate a country into doing what its officials believe is necessary. Some countries do not want this to happen, and the petitioners do not want the UK to agree to it without a referendum. Why is that the case? The petitioners believe that those sorts of powers should be sovereign. They do not like the fact that WHO officials are unelected. They do not like the fact that some members pay in more money than others, and could therefore have more influence on decisions. They also feel the same about philanthropists and pharmaceutical companies that make contributions.

#### Andrew Bridgen:

The hon. Gentleman is right that he is elected by his constituents to speak on their behalf. But when it comes to the matter of sovereignty, surely it lies with the people? Like me, the hon. Gentleman is only a custodian of that sovereignty for a brief period of time, after which it must be returned intact to the people who elected him so that they can elect someone else if necessary. When it comes to giving sovereignty away, that has to go back to the people and it requires a referendum. The people will decide whether they wish to give their sovereignty away.

It is believed that Andrew Bridgen is entirely right in his assessment.

A little further on, **John Spellar** argued that there are times when governments need to move at speed.

Andrew Bridgen responded:

The right hon. Gentleman says there is a need to move at speed. Does he agree that Pfizer moved at the speed of science, to the effect that it never even tested whether the vaccine actually stopped transmission or contraction of the virus? This House mandated people to lose their jobs for not taking a vaccine that was unproven and unsafe, and that was actually never going to stop them transmitting the virus.

Andrew Bridgen is quoting the remarks made by a Pfizer executive to the EU parliament.

Rob Roos MEP asked the question of J Small.

John Spellar responded with remarks which clearly shows his limited knowledge and awareness – the truth of which couldn't be any more worrying – given he and others like him – are representatives of The People, in place solely to look after their interests.

#### **NOTE**

At **15min** – in the 2hr15min debate – John Spellar made damning remarks about **Dr Andrew Wakefield** in connection with the **1990s** MMR scandal. It is assumed John Spellar has not viewed the documentary film on the subject VAXXED – or the follow up version VAXXED II.

The MP speaks about a subject he knows little about. He also casts his ill-informed opinion on the waters of his argument against Referendums and Conspiracy Theories – another topic he shows he has little understanding of.

It is worrying – but this MP shows all too clearly the total inadequacies of the parliamentary system as it is currently. The task of running the country is far too large and complex to be left to just 650 representatives.

Perhaps the way forward will include **People's Councils** [*my term*] – comprised of citizens with special knowledge, experience and qualification. Such People's Councils – involving as many citizens as possible – could be organised in pyramid fashion – feeding considered judgements UP the line to the overriding body representing ALL citizens. Such a body might replace the House of Lords. The replacement being elected **Overlords** [*my term*]. The topic is explored a little deeper in another **CONNECT** article. We Can Imagine Our Future: M-3185XA

To conclude on this note, Andrew Bridgen made reference - in his interview with Dr John Campbell - that MPs have access to a wealth of documents and papers, normally within just 24hrs. Would it not be a good thing, if such a library was available to ALL citizens? We could then all be singing the same tune perhaps.

#### 4 Continuing:

# Danny Kruger:

What we now see is the World Health Organisation setting itself up as responsible not just for identifying pandemics but, crucially, for the worldwide responses to those pandemics. The proposed amendments recognise the WHO as the guiding and co-ordinating authority of international responses to public health emergencies of international concern. Of course, we know the WHO's unaccountable nature: the director general is appointed through an opaque, non-democratic process, and international pharmaceutical companies have too much power.

The regulations propose the creation of a vast public health surveillance mechanism at public expense; if the WHO itself is anything to go by, that

would be substantially funded by the pharmaceutical industry. Crucially, as my hon. Friend the Member for Don Valley said, the regulations propose that the WHO's existing powers to make recommendations about what countries should do be upgraded from non-binding to binding. That amounts to a vast transfer of power to the WHO.

What would the new regulations enable? They would enable legally binding obligations on countries to mandate financial contributions to fund pandemic-response activities. They could require the surrender of intellectual property in technologies. They could mandate the manufacture and international sharing of vaccines. They could override national safety approval processes for vaccines, gene-based therapies, medical devices and diagnostics.

# Continuing:

My final concern about the proposals is that they set the WHO up as the single source of truth on pandemics and responses to pandemics. There is a legitimate and understandable need to challenge misinformation and disinformation—there is a real danger there—but surely Members should recognise that there is an opposite danger as well, whereby a single supranational agency becomes the sole source of information on what is true. These are the people who said that covid-19 definitely did not come from a lab leak at the Wuhan institute, as now seems likely. These are the people who said that lockdowns would only be short and temporary, rather than lasting the best part of two years, and who said that vaccines stopped transmission, rather than having next to no impact on transmission. They said that vaccines would only be for the vulnerable, rather than everyone—including little babies. They said the vaccines would be voluntary, rather than mandated as they were in many countries, including, very nearly, our own. I do not have confidence in the WHO and its satellites to be the single source of truth on either the science or the response.

# Continuing:

# John Redwood responding to Justin Madders:

I am glad the hon. Gentleman agrees that we needed better parliamentary scrutiny and more options for the handling of the pandemic but, given that that is the case, how on earth does it make sense to give away powers to an international quango, which will then instruct future Ministers to do these things, with Parliament being told that it has no right to talk about it or to vote on it?

# 5 Continuing:

## Andrew Bridgen:

The pandemic treaty must be viewed in conjunction with the proposed amendments to the international health regulations. As George Santayana said, those who fail to learn the lessons of history are doomed to repeat them. I have some severe worries that the lessons of the last pandemic have not been learned by the WHO itself, and that we are in danger of giving it more powers to enable it to overreach itself and repeat those catastrophic mistakes.

I will start by talking about the WHO itself. As my hon. Friend the Member for Don Valley (Nick Fletcher) pointed out, it was founded in 1948 as a specialised agency of the United Nations responsible for international public health. It consists of 194 member states—basically the whole of the UN membership excluding Lichtenstein and the Holy See. It was based originally on a WHO constitution that is still there today, but that will be fundamentally changed by the two instruments that are in the pipeline following the covid-19 pandemic.

The WHO is domiciled in Geneva and so has special status. Its employees are exempt from tax and they and their families all have diplomatic immunity. It is indeed a supranational body, unelected and unaccountable. I think my constituents would fear that.

How is the WHO set up? Well, it has something called the World Health Assembly, which meets yearly in Geneva. The WHA is the legislative and supreme decision-making body of the WHO. It elects the secretary general and the executive board and votes on the policy of the WHO. The current chairperson of the World Health Assembly of the WHO is a gentleman by the name of Harsh Vardhan. In 2021, the Indian Medical Association—the Indian version of the BMA, and the largest association of doctors in India—issued a statement objecting to Vardhan, who was endorsing Coronil, a product that was being made in India. The IMA questioned the ethics of the Health Minister—Dr Vardhan was the Health Minister of India at that time—in the release of a fabricated and unscientific product on to the people of India. He has since gone on to become chairperson of the WHA, which will preside over this new treaty, which will sit before every Government in the world. Given that he resigned from the Cabinet in India over that controversy, whyever has he been trusted with greater responsibility? It seems that he has failed upwards, like many at the WHO and the WHA.

The original ideals of the WHO were completely laudable. The WHO is to serve the health of the people, governed by its member states, which will implement health policy in the interests of their people. Under article 3 of the international health regulations—before they are amended—state sovereignty and the rule of law will be respected. People's self-determination will be fully respected. All human rights, conventions and other Acts that countries have joined up to will be respected. That is protected under article 54 of the original regulations on human rights.

Who is funding the WHO now? It is funded like many of our regulators in the UK: the Medicines and Healthcare Products Regulatory Agency is 86% funded by industry sources, and the Joint Committee on Vaccination and Immunisation, in its members' personal declarations, declared more than £1 billion of interests in big pharma, the thing it was set up to regulate. That undermines public confidence. The WHO is no longer anything like majority-funded by its member states—the ones it is seeking to control. It is 86% funded by external sources.

The WHO is promoting the influence of private-public partnerships. It promotes that on its websites to the point where it is pay to play. Anyone can buy influence at the WHO; it will just cost them money. When it comes to consulting, the WHO's own internal report—its survey evaluation in its final report on 23 May 2022—said that the various interest groups have more input to WHO policy than the member states. The WHO's own figures say that the member states only participation was 40% of the input, whereas 60% came from non-member states and 276 stakeholders.

It is clear that there is a strong external influence on the policy of the WHO, an entity whose amendments to the International Health Regulations and the pandemic treaty will come to pass by May 2024 if this House does nothing and does not vote. Doing nothing is not an option: it will not go away.

The WHO's intermediate study says that the WHO is an international organisation created as a sub-agency of the United Nations for the objective of obtaining the "highest possible level of health" for all people, but at what cost? What cost democracy? What cost to individual freedoms? It is now 80% funded by non-member states, and it is heavily influenced. During the pandemic, it took extra powers, such as the fact that it could define information. It took on a position—and this will be enacted in law, and binding, in those two new instruments —that the WHO has the ability to say what is disinformation.

When anybody says that the science is settled on any issue, I suggest that this House would smell a rat straight away. The science is never settled: it is always open for modification and for new things to be discovered and theses to be refined. The WHO is saying that it will be the arbiter of what the science is, and that cannot be right. It is a bit like someone saying that the market has changed—well, in my experience it never has. That is a huge grab of power. The two instruments—the pandemic treaty and the amendments to the international health regulations—are progressing in parallel.

I am really worried whether colleagues have actually read the treaty, because clearly when we take out the words "not binding" through an amendment, it becomes binding. These are binding treaties: if we do nothing, they are binding—legally binding across all the nations. They bring in an idea called "One Health", which extends the ability of the director-general of the WHO to call a public health emergency of international concern—which, incidentally, is abbreviated to FAKE. It says that he can bring in these powers on the suspicion or risk of an international incident. It does not even have to be a pathogen affecting humans; it can affect animals. It could be because of the environment or an increase in the levels of carbon dioxide.

I suggest that right hon. and hon. Members read the treaty. It is a massive extension of powers. At the drop of a hat, one man—Mr Tedros—can call for massive powers for the WHO. Not only will he call for them; when he

takes the powers, he will decide when the pandemic or emergency is over and when he will give the powers back to this House, where elected representatives are supposed to be representing the interests of our constituents. All that will be suspended.

While we are talking about Mr Tedros, I remind the House that this gentleman will be deciding the fate of the world, because it will be in his gift to declare emergencies. Look at the conduct of the WHO during the recent Ebola outbreak in the Democratic Republic of the Congo, where 83 individuals who were working for the WHO sexually abused local women, including the sexual assault of a 13-year-old girl. It was all covered up. There was a leaked document from the WHO, which would have been in front of Mr Tedros's committee. A confidential UN report submitted to the WHO last month concluded that the managers' handling of a case did not violate WHO sexual exploitation policies because the woman concerned was not a beneficiary of WHO aid, as she did not receive any humanitarian support. That is completely unacceptable, if those are the rules of an organisation that will be deciding whether my constituents are locked down for six months or three months, and whether they can go and see their grannies. I do not think it is acceptable.

The proposed new treaties would compress the mandatory reporting time for Governments to report a possible risk to public health to the WHO to 72 hours, and Mr Tedros will make a decision. That is far too little time for any meaningful research to be done on what the real risk is, and it would potentially lead to lots of false alarms and unnecessary disruption. The two proposed instruments seek to take huge powers away from this Parliament and every other Parliament around the world. and they need to be considered very carefully. Sticking our heads in the sand will not do it, and it will not do for my constituents. If we have learned anything from the vote that we had in 2016, it is that people in this country do not want to be ruled by unelected, unaccountable bureaucrats, and there is no one more unaccountable and unelected than people in the WHO. They do not pay tax, and they and their families have immunity from prosecution because they have diplomatic immunity. They are also under the huge financial interests of whoever wishes to fund them.

Many experts are now saying that the two proposed instruments would fundamentally reset the relationship between citizens and sovereign states—not just in this country, but around the whole world. The WHO is an unelected, unaccountable and top-down supranational body, and the treaties would empower its director-general to impose sweeping, legally binding directions on member states. The WHO would have the power to force companies in this country or any other country to manufacture certain medical treatments and to export them to other countries. It would have the power to shut down any business in this country, regardless of what local people think or even what this Parliament thinks.

The proposed treaties would take away all the protections that being in a democracy offers, and they would take away article 3 of the original WHO constitution, which is about respect for human rights and dignity. That would be replaced by a bland statement saying that there will be equity, which means that everyone would be treated equally. It also means that there would be only one solution to any international problem around the world, which would lead to an all-or-nothing situation whereby if the WHO got it right—if I had time, I would go into everything it got wrong in the last pandemic—maybe we would be okay. But if the WHO got it wrong, the whole of humanity would get it wrong. There would be no competition. If there was only one car manufacturer and only one solution, I am not sure it would be the best car that we could ever have. Competition between nations for solutions is a good thing.

I have grave concerns about the two proposed instruments, and about who is running and controlling the WHO. It would be foolish not to see that pharmaceutical giants have huge influence over the direction of the WHO, with their lobbying power. Like many multinational corporations, their size and scale supersedes national Governments, with over 80% of the WHO budget now specified funding, and they have the ability to direct policy. I think it is fair to say that we are drifting away from the WHO's original and noble ethos of promoting a democratic, holistic approach and co-operation on public health.

The WHO let us down over covid in its response. In January 2020, as has been pointed out, it was still telling us that there was no person-to-person transmission of the virus. That was wrong. It then prescribed lockdowns and mass vaccination during the pandemic, which drove mutations. The pandemic response of the WHO and national Governments should be a cautionary tale about the impact on citizens of handing power to the state. It should certainly not be a template for going further and faster in signing away rights and liberties.

The pandemic response brutally illustrated that the profit-optimised version of the greater good pursued by the WHO often clashes with children's health. Before I spoke out on 13 December on the risks of the experimental mRNA vaccines, the MHRA was looking to authorise the vaccination of children down to the age of six months in this country. I am very grateful that the Government listened and that we did not do that. Indeed, it was pushed back to people over 50 and, after my speech on 17 March, I am delighted that the Government put it back to only those over 75. In a few months, that is a huge difference from trying to vaccinate everybody. If we were all under one rule, we would be doing exactly the opposite of what this country has individually decided to do.

While we are on the subject of opaque, undemocratic organisations, it is interesting to see what the EU is doing. The EU thinks that we need to strengthen all this. Not only will the WHO be allowed to have a department of misinformation, which will be the arbiter of what the truth is during an emergency, but the EU will adopt exactly the same policy

and have its own such department, so that in a pandemic there will be only one version of the truth. That is not very good for science, is it?

The One Health approach is a whole-society approach. The WHO will have the ability to mobilise every aspect of our society. Once it calls those emergencies, it will be able to keep them going. It will have control over absolutely every aspect of our citizens' lives. This is absolutely massive. There is no more important treaty. Of course, were we to give away such powers—I would never vote to do so—we should have a referendum, because sovereignty belongs to the people. It is not ours to give away; we know that from the referendum in 2016. I hope that the House listens very carefully and reads these documents.

Andrew Bridgen has proved himself to be the most prominent MP in parliament in terms of researching C19, the pandemic and the mRNA injections. Additionally, he is aware of and in contact with – via the support groups - the huge number of people with injuries caused to them, resulting from the C19 injections they were given. These are the injections which innocent and trusting people were erroneously told by our own government, were safe and effective. They clearly were NOT Safe and NOT Effective! The documentary film: Safe and Effective – A second opinion

He is also very clear about The People's sovereignty and that it lies with The People – NOT parliament – and certainly not with an offshore unelected body in the form of the World Health Organisation.

7 It is more than worrying to listen to and read the remarks by so many MPs that they expect another pandemic – and due to this, it is important that the whole world acts as one and in exactly the same way as the WHO wishes.

Firstly, why are these MPs so sure another pandemic will occur? Is it because **Bill Gates** has told us as much? Given that the last pandemic – and an untold number before – was apparently lab leaked – and that the C19 virus was lab made, our MPs and a host of others seem to be barking up the wrong tree. It would seem that the first thing to stem, is Gain of Function studies. These are basically defined as – taking something found in nature lor in a lab] known to be dangerous and making it even MORE dangerous. How stupid that practice is and it should be internationally outlawed. US president **Barack Obama** did in fact outlaw the practice when in office. It is not certain he wasn't aware, but – the practice was moved offshore. It went to... Wuhan!

These topics are explored in the documentary film: The Plan

Secondly, it is more than worrying that Big Pharma has been allowed to raise itself to the position it has without the necessary regulation. The UK's own regulator – funded by the very businesses it exists to regulate – is funded by those businesses to the extent of 86% - as **Andrew Bridgen** mentioned. An intelligent being from another world would find that fact to be wholly incomprehensible – as some intelligent earth beings already do. But there is a burning question which remains on the lips of those same intelligent earth beings - and it is this.

Is it possible, that Big Pharma – in a position to create deadly pathogens through *Gain of Function* research – has a financial incentive to release those pathogens, so to get contracted to produce and supply potentially deadly – UNsafe and INeffective – injections for the whole world to take in defence?

Now that would be a model based on – making people unwell and diseased – then selling them products to alleviate their symptoms. Cure would be something to avoid in such a model. Instead, the goal would be to create an everlasting demand for symptom-relieving medications. It could be worth us all just sitting with that thought.

Whilst the idea of such a model seems wild in nature, there are those that will testify strongly - that it is exactly what has happened in our world. Now that would be a definite worry if true!

Maybe the intelligent thing to do, would be to start an investigation based on that premise. It could reveal all kinds of things – and among them – the TRUTH.

The subject matter of this particular parliamentary debate in a committee room – attended by MPs who could barely have fielded a football team with the numbers in attendance – was a matter of serious concern. MPs have shown themselves to be ill-informed at best and wholly incompetent at worst. As already mentioned, **Andrew Bridgen** in the interview with **Dr John Campbell** confirmed that MPs have access to any relevant paper on any subject of interest within a space of 24hrs. The fact that so many MPs – 650 in total, less a few exceptions – have not availed themselves of that facility, is more than a concern. The very life of every citizen in the UK is dependent to a huge extent on the professionalism of these representatives. The very tangible fear is that their lack of performance in this regard alone will cause huge costs to be incurred – both financially and worst of all, in lives lost.

We surely need to find a new way to do business. The C19 pandemic has shown us all – by laying bare the inadequacies of the governmental systems in play which are both archaic and ineffective – that a revision of political processes is now well overdue and those processes must be overhauled.

This is a time for change – and that must be interpreted as radical change rather than a simple skin-deep massage of current procedures.

PS1 The full debate can be viewed in two forms: Video and Transcript.

Whilst it has been my prerogative to share in this article some of the main points covered – in what counted for a debate under parliamentary codes – I would urge all readers to review the debate in its entirety.

PS2 Speaking of debates.

**Dr Tess Lawrie** runs a medical consultancy in Bath, England and among her clients the NHS and the WHO were featured. Dr Lawrie became aware of and then included in, the debates among medical professionals concerning

alternative and effective treatments to combat C19. Her own research findings were based on a compilation of studies from around the globe which all proved the case for using different and readily available treatments.

In January 2021, Dr Lawrie communicated her findings to both the WHO and the UK government – specifically Matt Hancock – Heath Secretary and PM Boris Johnson. Dr Lawrie did not hear back from her client - the WHO. Neither did she hear back from the government ministers.

Additionally, the findings which were delivered to the highest office in the land, never made the light of day in the form of a Commons debate by the sitting 650 MPs. They're the same MPs in position for the good of citizens. Neither was there a debate on the findings in an offshoot committee room. That would only take place if triggered by more than 100,000 signatures appended to a petition pressing for such a debate. The only vote which takes place in such debates – held to hear petitioners' views – is one which confirms that a debate has been held – and nothing more. Extraordinary!

The findings were also communicated clearly to a senior MP in the government at a meeting in Westminster at No1 Birdcage Walk. The meeting was attended by high-ranking doctors and scientists – together with the UK's most outspoken funeral director John O'Looney. John O'Looney gave testimony about what he witnessed in hospitals, elderly care homes and in his own funeral home business over the 3yrs since the pandemic started in 2020. His testimony is truly shocking!

The testimony includes him being shown a special facility at his local hospital, already prepared for a major health event. He was shown the facility in **early December 2019** – 2mths before any of us knew about THAT health event called C19 and before even the government knew about it???

The MP – **Sir Graham Brady** – was informed at that meeting about the collection of cheap, tried, tested, safe and available treatments which had been proved to be effective in treating C19 patients.

The MP admitted he *knew what was going on*.

He also admitted that there was nothing he could do.

And there was nothing he did!

As a result – people died.

Others more fortunate have been harmed by the One-And-Only solution.

It appears that the government didn't want to muddy the waters in advance of the One-And-Only solution earmarked for C19 – being the *Safe* and *Effective* injection. It seems that talk of safe, cheap and available alternative treatments was not something they wanted others openly talking about.

It also seemed that the WHO had made up its mind what treatment it wanted 7billion of us to have - and nothing should get in the way of that happening. **Bill Gates** wanted that to happen and stated that *normality* will only return when ALL 7billion of us have had the injection.

Not so incidentally, the mRNA injections administered to millions in the UK, would never have been authorised for use by the MHRA – the UK's regulator of medical treatments, funded as it is to the tune of 86% by Big Pharma injection makers – if it was known that alternative safe treatments were available. On the basis that the safe and alternative treatments were NOT recognised by the government as available, despite the clear and proving evidence amassed by Dr Lawrie - along with thousands of other frontline doctors around the globe – the door to mass inoculation was opened.

Given the non-existent alternatives – as determined by the WHO and the UK government – the injection makers were awarded the important **EUA**. The Emergency Use Authorisation gave Big Pharma the green light to distribute their products to the NHS for administering to the population.

The basis for criminal legal action against members of the government sits right here. It will take a court of special nature to hear the case for the prosecution and for the government's defence.

An article on CONNECT reveals the story of those alternative treatments. Cheap Drugs – The Real truth: M-3145VB

As for the injection - a documentary called <u>Safe and Effective</u> reveals so much about the background story which led to the MHRA giving their Emergency Use Authorisation for the injection plus the damage the injection caused to people's health. It also reveals how the BBC were not interested to give a platform to alternative views. It was their policy to exclude them!

You can watch:

John O'Looney's interviews, and Dr Tess Lawrie in interview with Del Bigtree via the links below in **FURTHER READING** 

Also in Further Reading is a **CONNECT** article on another parliamentary debate – another called by 107,000 petitioners.

PS3 All the above quoted references are included in the CONNECT LIBRARY. The LIBRARY is our Records Repository where articles on this and other related subjects can be found. Also to be found are articles linked together in strings. The strings relate to particular threads – connecting articles across different subjects and topics.

## The CONNECT LIBRARY

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Some of the articles have been published by CONNECT but many have simply been catalogued for general reference and expanded research.

Further articles relative to the subjects covered in *this* magazine article can be read under their respective headings, in our different Reading Rooms.

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# **CONNECT'S Maxim and Oath**

Connect is only interested in finding and sharing the TRUTH. In search of that TRUTH, we only pose questions – we have no answers.

	By: David Charles	
	Contact/Source: CONNECT: Magazine	
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	<u>LINK</u>	The Highwire: Dr Tess Lawrie talks with Del Bigtree
	<u>LINK</u>	A Letter to Andrew Hill   Dr Tess Lawrie   Oracle Films
	<u>LINK</u>	The Highwire: A Second Opinion
	<u>LINK</u>	John O'Looney talks with Dr Sam White
	<u>LINK</u>	John O'Looney talks with Brian Gerrish > Birdcage Walk meeting
	<u>LINK</u>	Connect: And They Call This A Debate??? : M-2455MA
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