Please review all yellow (and then remove this highlighting as well as this entire banner) before sending to your MP. Please also cc on your email to jcvi@phe.gov.uk and MHRACustomerServices@mhra.gov.uk

Dear [Name of MP],

I note, with concern, that the Covid-19 vaccine has recently been added to the NHS Vaccine Schedule for five to fifteen year olds and for those sixteen years old and over:

https://www.nhs.uk/conditions/vaccinations/nhs-vaccinations-and-when-to-have-them/

Furthermore, although the Covid-19 vaccine is not listed on the Vaccine Schedule for pregnant women, they are routinely advised to get it.

In light of the changes to the NHS Vaccine Schedule, I would like to bring to your attention the information, recently made available, prompting concern that fraud has been committed by Pfizer in the development and continued distribution of their Covid-19 vaccine.

It is incumbent upon you to be fully informed about the "safety" and efficacy" of the Pfizer Covid-19 vaccine and the claims of fraud that call both "safety" and "efficacy" into question.

It is my understanding that if fraud or wilful misconduct is proven, the manufacturers and those involved in the distribution, mandating, or administering of the vaccines will lose immunity from liability granted to them by the UK government.

The new information consists of 1) Pfizer's biological product file (used to obtain U.S. Food and Drug Administration ("FDA") approval of Comirnaty in the USA) and 2) data from the insurance industry showing a significant rise in excess deaths in Millennial and Generation X populations concurrent with the implementation of vaccine approvals (and mandates).

Following is a summary overview of each category to date – including inserted hyperlinks to supporting information – however, additional information will become available as scientists, lawyers and investors continue to review the current and evolving data.

1) Pfizer Biological Product File

The Public Health and Medical Professionals for Transparency ("PHMPT") is a non-profit group of public health and medical professionals, scientists and journalists. The group exists solely to obtain and disseminate the data relied upon by the FDA to license Covid-19 vaccines.

Four (4) days after the Pfizer Covid-19 vaccine was approved for children over 16 in the U.S., PHMPT submitted a Freedom of Information Act request for all data within Pfizer's Covid-19 vaccine biological product file.

The FDA did not want the Pfizer data in the public domain and asked for a moratorium preventing the release of the data for seventy-five (*75)* years. PHMPT sued to obtain the data and won. As the result of a court order, beginning in March 2022, the public has access to Pfizer's clinical trial data, which is being released monthly in batches of between 10,000 and 80,000 pages on the first or second day of each month. You can access the "document-dump" releases to-date here.

Thousands of volunteers including scientists, statisticians, doctors, and lawyers continue to examine these downloads and publish their findings.

Below are a few of the findings of greatest concern that support a thesis of fraud:

- Pfizer failed the all-cause mortality endpoint in their unprecedentedly short twenty-eight day clinical trial. Please note, *more people died in the vaccinated group* than in the placebo group. This was known yet has still not been disclosed to the public - no mainstream media outlet has covered this fact;

- The government, MHRA and NHS statement that vaccines stopped transmission was not based on data, as this metric was *not* evaluated during Pfizer's clinical trials. Pfizer (and I believe the MHRA and the government) knew this yet did not disclose it to the public;

- Pfizer *knew* as early as November 2020 that their clinical trials showed vaccine failure and waning vaccine efficacy;

- It is thought that Pfizer (and the MHRA) would have *known* in May 2021 that the vaccines caused heart damage in teenagers based on a paper that was already in peer review at that time. (The MHRA approved the product for twelve to fifteen year olds in June 2021 with Dr June Raine, MHRA Chief Executive, stating: *"We have carefully reviewed clinical trial data in children aged 12 to 15 years old and have concluded that the Pfizer/BioNTech Covid-19 vaccine is safe and effective in this age group and that the benefits outweigh any risk."* In December 2021, the MHRA approved the product for five to eleven year olds. Dr June Raine made a similar statement*: "We have concluded that the Pfizer/BioNTech Covid-19 vaccine is safe and effective for 5 to 11 year-olds with no new safety concerns identified".)* The MHRA nor the NHS disclosed this risk factor to the public. Parents were not made aware of this known potential risk to their children. **Informed consent was therefore not given**. (https://brownstone.org/articles/pfizer-for-kids-dodgy-data-and-conflicts-of-interest/); and

- Brook Jackson, a regional director employed by Pfizer sub-contractor Ventavia Research Group, came forward in September 2020 with documented evidence that the company falsified data, unblinded patients and was slow to follow up on adverse events reported in Pfizer's pivotal Phase III trial conducted by Ventavia. Her findings call into question the integrity of not only Ventavia's results but of all results from Pfizer's other trial sites and the entire clinical trial (as detailed in *The British Medical Journal.*)

A baseline condition for granting a product a temporary authorisation for emergency use is that it must be "*safe"* and "*effective"*. The Pfizer clinical trial data showed that the Covid-19 vaccine is not "safe" and is not "effective". Yet, based on the MHRA approval, the government promoted the vaccine as such. From the initial roll-out in December 2020 for many months thereafter, the public health messaging was, that if you received the vaccine, you could not get infected and could not transmit the virus. *The Pfizer documents are proof that they, the MHRA and the government colluded to lie to the British people and the government, and the NHS created false public health narratives based on these lies.*

2) Excess Death Data and the Insurance Industry
In December 2021, Midwest insurer One America CEO Scott Davidson disclosed a forty percent increase in excess deaths over pre-pandemic levels in the working-age (18-64) population in the third quarter. Putting the number into context Davidson said, "*The data is consistent across every player in this business . . . Just to give you an idea of how bad that is, a three-sigma or a one-in-200-year catastrophe would be a 10 percent increase over pre-pandemic so 40 percent is just unheard of".*

Other major insurers have subsequently reported increases in death claims ranging from twenty-one percent to fifty-seven percent over expected levels. Most of these deaths are not Covid-19 deaths. Long-term disability claims are also seeing an increase.

These reports prompted a former institutional investor who was a #1 ranked Wall Street sell-side insurance analyst to confirm the numbers using CDC (Center for Disease Control) reported data. His findings, independently confirmed by others, show the spikes in excess deaths are related to the timing of vaccine approvals and mandates.

This data is prompting concern at insurance and reinsurance companies, who will bear the financial burden of this unexpected and unprecedented rise in mortality. The excess death data is also raising concerns in the investment community.

Two Pfizer documents of particular interest are detailed below.

Cumulative Analysis of Post-Authorization Adverse Event Reports of PF-07302048 (BNT162B2) Received Through 28 Feb 2021" which provides details of reports of adverse events to the Pfizer vaccine post vaccine roll-out.

https://phmpt.org/wp-content/uploads/2021/11/5.3.6-postmarketing-experience.pdf

Please note the report covers ONLY two (2) months of data and analysis up to the end of February 2021 begging the question - what would the data reveal up to June 2022?

Of note:

- "Appendix 1. List of Adverse Events of Special Interest" of which there are nine (9) pages; and
- "Table 6. Description of Missing Information" (page 12 under heading "Use in Pregnancy and lactation")

In spite of Pfizer's efforts to avoid pregnancy in the trial participants, pregnancies did in fact occur - two hundred and seventy (270) vaccinated women became pregnant. Whilst there was no feedback on two hundred and thirty-eight (238) of the pregnancies, of the remaining 32 pregnancies there was only one (1) live birth. *Surely the precautionary principle would dictate pregnant women should not be vaccinated pending further investigation.*

A Phase 1/2/3, Placebo-Controlled, Randomized, Observer-blind, Dose-finding Study to Evaluate the Safety, Tolerability, Immunogenicity, and Efficacy of SARS-CoV-2 RNA Vaccine Candidates Against Covid-19 in Healthy Individuals."

https://cdn.pfizer.com/pfizercom/2020-11/C4591001_Clinical_Protocol_Nov2020.pdf

You will note the reference to "Healthy Individuals" in the document title. To be included in the study one needed to be "healthy" (please refer to Clause 5 "Study Population" for details on both inclusion and exclusion criteria) yet no such discernment was made in the administration of the vaccine - it was pushed on everyone irrespective of their own health profile.

I trust that you will read the document in its entirety however, I would like to highlight some areas of particular concern:

Clause 5.2 "Exclusion Criteria": 11. "Women who are pregnant or breastfeeding";

10.4 Appendix 4: "Contraception Guidance": this illustrates that Pfizer wanted to ensure that no volunteers became pregnant during initial trials.

*If trials were not carried out on people other than those deemed "healthy" or on pregnant women, or on breastfeeding women how was the vaccine determined "safe" and "effective" for those group*s?

Additional Product Safety Concerns
Whilst I have chosen to focus on Pfizer trial data and documentation there are "safety and efficacy" concerns in relation to all Covid-19 vaccine manufacturers - AstraZeneca, Moderna and Johnson & Johnson. Consideration of the MHRA's Yellow Card Reporting System illustrates this - where fatalities and numerous serious adverse events are detailed. A year ago, in June 2021, the Evidence-Based Medicine Consultancy Ltd prepared the following report flagging to the MHRA safety concerns relating to the Covid-19 vaccines:

http://medisolve.org/yellowcard_urgentprelimreport.pdf

Finally, of great relevance is the nature and associated secrecy of the contracts that Pfizer forced upon governments across the world. A review of some of these contracts can be found here. Contractual terms included the waiving of sovereign immunity, countries assuming full liability in the event that *Pfizer* was shown to have used another entity's intellectual property, and that Pfizer be held harmless in the event of injury or death from the products.

Questions:

1. Please can you explain the contradiction that is the government campaign to push the Covid-19 jab to children aged five to eleven years old whilst the government's own website clearly states that the jabs are approved only for children twelve years and older (section headed "Children" in the document linked below): https://www.gov.uk/government/publications/regulatory-approval-of-pfizer-biontech-vaccine-for-covid-19/information-for-uk-recipients-on-pfizerbiontech-covid-19-vaccine

2. Considering the serious issues around "safety" and "efficacy' detailed in this letter why are the public still advised to take the Covid-19 vaccines?

3. Is the Pfizer vaccine being continued to be used solely as a face-saving exercise and to avoid huge media and public scrutiny of the Pfizer document?

4. How would the government, the MHRA, the JCVI and the NHS be impacted if the public came to understand that “safety” and “efficacy” concerns were known about ahead of the vaccine roll-outs?

5. Are the Covid-19 vaccines still authorised on a temporary use basis?

6. Why would a company require the contractual terms described above if it knew its conduct was exemplary and its products were “safe and effective”?

7. I understand a conviction of fraud negates immunity from liability for the vaccine manufacturers and those involved in the distribution, mandating or administering of the vaccines? Is this your understanding?

It is likely that neither Pfizer (nor the FDA nor the MHRA) anticipated the court-compelled release of their clinical trial and post-marketing surveillance data and the subsequent and ongoing public scrutiny of it. The documentation and data shared here represents a very small sample of the vast amount of concerning real world data now publicly available, which clearly calls into question the claim that the jabs are “safe and effective”. When the data is combined with the adverse events reported to the Yellow Card scheme and the ever-increasing anecdotal evidence from victims, bereaved families, medical professionals, pathologists, and funeral directors I would argue that the case for immediately halting all Covid-19 jabs is compelling.

In light of the above facts, I look forward to your response as a matter of urgency

Yours sincerely,

[Your name and full postal address]

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