THE OMEGA BRIEF

Irrefutable Facts Behind COVID

presented by

TEXAS RIGHT TO KNOW
More Unites Us Than Divides Us

The Omega Brief is a consolidation of evidence of criminal activity provided by national and international expert witnesses, revealing bad actors who are responsible for the coronavirus pandemic. Federal agencies established treatment guidelines, based on a chosen narrative to direct the actions of state medical boards, physician and hospital treatment options, and state and local Departments of State Health Services.

Evidence presented is from patents issued to Federal agencies, Federal employees, pharmaceutical companies, and based upon agency guidelines.

Includes recent activity of FDA recall of PCR testing, etc., VA study conclusion and relevance on Remdesivir, alleged under reporting of vaccine injuries.

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Texas State Elected Officials Received
Notice of Pandemic Criminal Conspiracy and Racketeering

08/19/21 - Texas Right to Know (TRTK), Brady, Texas: Beginning August, 9, 2021, Texas Right To Know delivered the Omega Brief to open offices of Texas Representatives, Texas Senators, Governor Greg Abbott, Lt. Governor Dan Patrick, Speaker Dade Phelan, Department of Public Safety Capitol office, and August 17, overnight delivery to Attorney General Ken Paxton and the State of Department Health and Human Services (DSHS).

Summarized from the July 11, 2021 interview of David Martin, PhD by Reiner Fuellmich, the Omega Brief suggests that the current pandemic is a criminal conspiracy and racketeering enterprise beginning in 1999. The brief includes Dr. Martin's Fauci/COVID-19 Dossier that outlines eight federal criminal charges from evidence contained in patent records. ***"****The Omega Brief is a consolidation of evidence of criminal activity provided by national and international expert witnesses revealing individuals who are responsible for the coronavirus pandemic. There is reasonable evidence that federal agencies under the direction of Anthony Fauci, established treatment guidelines mandating a chosen narrative to direct the actions of state medical boards, physicians, hospital and health provider administrators, and state and local DSHS, with premeditated intent to prevent early treatment to escalate fear and death totals,"* said Sheila Hemphill, CEO and author.

The following quotes are referenced by paragraph number (PN) of interview, ***"In 1999, Anthony Fauci funded research at the University of North Carolina, Chapel Hill*** ... ***Where the NIAID built, "an infectious replication defective coronavirus" that was specifically targeted for human lung epithelium. In other words, we made SARS and we patented it on April 19, 2002."*** (PN 12)

Per the statement made by Peter Daszak, Head of EcoHealth Alliance (recipient of NIH funding) reported in the National Academies of Press publication on February 12, 2016, ***"We need to increase public understanding of the need for medical countermeasures such as a pan coronavirus 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 profit at the end of the process."*** (PN 48)

Evidence establishes, that in-order to achieve world distribution of an annual or bi-annual, mandatory influenza and/or coronavirus vaccine, the following possible goals would be necessary.

GOAL #1: Create "*The New Normal campaign*" for the purpose of ***"getting people to accept universal pan influenza, pan coronavirus vaccine"*** as scripted by MERCK in 2004 and adopted by the World Health Organization in 2020. To achieve this goal, the following steps would be necessary: 1. Create simulations and exercises of a pandemic, 2. Create a "new" virus, ***"though***

it's really not new", 3. Leak the virus, ***"there wasn't a lab leak this was an intentional bioweaponization"***, 4. Declare national / state / county emergencies, 5. Create media fear and hysteria.

GOAL #2: "Warp Speed" Vaccine Development.
It was necessary for the CDC, which directs state medical boards and state departments of health services, and the National Institute of Health, which directs physicians and hospital policies, to develop guidelines that would effectively **insure there would be no "adequate, approved, or alternative treatment" available** in order to meet Emergency Use Authorization (EUA) criteria for COVID-19 vaccine development. These guidelines intentionally prohibited early, effective treatments that would have saved lives to protect COVID-19 vaccine development.

GOAL #3: COVID-19 vaccines manufacturers to conduct trials on children with intent to receive full FDA approval in order for the COVID-19 vaccines to be added the childhood vaccine schedule, so that all "covered persons" are shielded from liability with the National Childhood Vaccine Injury Act of 1986. With full FDA approval, vaccine manufacturers lose their liability immunity from the Public Readiness and Emergency Preparedness (PREP) Act.

GOAL #4: Implement world–wide mandates for vaccine compliance with bio-evidenced, identification mark and force vaccine compliance through bio-trackable "passports" to buy, sell, or travel.

"On behalf of Texans and humanity, we plead for Governor Greg Abbott and General Ken Paxton to defend us and enforce SCR 12 to immediately halt state agency and businesses adherence to CDC and NIH guidelines and command actions necessary to prosecute all perpetrators for racketeering and for 'Terror to Intimidate or Coerce a Civilian Population'," urged Sheila Hemphill.

SCR 12 was signed by Governor Abbott on June 16, 2021 – *"Claiming sovereignty under the Tenth Amendment to the U.S. Constitution over all powers not otherwise enumerated and granted to the federal government by the U.S. Constitution, serving notice to the federal government to halt and reverse certain mandates, and providing that certain federal legislation be prohibited or repealed."*

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Media Contact: Sheila Hemphill, CEO Texas Right To Know | info@theomegabrief.com

Each state elected official was served this notice by August 19, 2021. It is the responsibility of each person to hold their US, state, county, and local elected officials culpable to the content of this brief and hold them responsible for taking all actions necessary to prosecute the guilty perpetrators and to put a stop to these crimes against humanity.

They need to know, we know, they know.

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Evidence establishes, that in order to achieve world distribution of an annual or bi-annual, mandatory influenza and/or coronavirus vaccine, the following possible goals would be necessary.

GOAL #1: Create *"The New Normal campaign"* for the purpose of ***"getting people to accept universal pan influenza, pan coronavirus vaccine."***

1. Create simulations and exercises of a pandemic.
2. Create a "new" virus, though it is really not new.
3. Leak the virus – Martin/Fuellmich interview.
4. Declare national / state / county emergencies.
5. Create media fear and hysteria.

GOAL #2: "Warp Speed" Vaccine Development.

1. In order for vaccine manufacturers to have green light for development for EUA licensing,
2. In order to effectively obstruct treatment options, the following Federal agencies,
   i. CDC directs state medical boards and state departments of health services (DSHS).
   ii. National Institute of Health (NIH) COVID-19 Treatment Guidelines directs physicians and hospitals and insurance companies.

GOAL #3: COVID-19 vaccines to receive full FDA approval in order to be added to the childhood vaccine schedule, so that all "covered persons" are shielded from liability with the National Childhood Vaccine Injury Act of 1986.

GOAL #4: Implement world–wide mandates for vaccine compliance with bio-evidenced, identification mark and force vaccine compliance through bio-trackable "passports" to buy, sell, or travel.

PLEA: WHEREFORE, PREMISES CONSIDERED, we pray that the evidence contained in the following documents will result in the State of Texas pursuing criminal charges against all national and international bad actors who premeditated crimes against humanity by instigating the SARS-CoV-2 pandemic, which is responsible for loss of millions of lives and devastation to world economies. As evidenced, the coronavirus pandemic is a racketeering, criminal conspiracy managed by Anthony Fauci, Peter Daszak, and Ralph Baric outlined in the Fauci Dossier document.

On behalf of Texans and the people of the world, we plead for Governor Greg Abbott to immediately command actions necessary to file racketeering charges against all perpetrators, for "Terror to Intimidate or Coerce a Civilian Population" in violation of Section 802 of the USA Patriot Act and the other nine criminal activities outlined in the attached Fauci/COVID-19 Dossier.

List of Patents from M·CAM International LLC and WorldOMeter spreadsheets are available at www.TheOmegaBrief.com

The Omega Brief is comprised into four evidentiary sections of criminal activity involved in the coronavirus pandemic based upon:

I. CRIMINAL ACTIVITY BY EVIDENCE ATTAINED FROM PATENT FILINGS
   Illegally issued patents to government agencies and pharmaceutical companies through bribery, *"73 patents issued between 2008 and 2019, with elements that were allegedly novel to SARS CoV2, … it was patented for commercial exploitation - 73 times."*

II. FRAUDULENT IMPLEMENTATION OF EMERGENCY USE AUTHORIZATION FOR PCR TESTING FOR DETECTING SARS-COV-2 AND COVID-19 VACCINE LICENSING
   July 23, 2021, The FDA announced today that the CDC PCR test for COVID-19 has failed its full review… After December 31, 2021, CDC will withdraw the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel

III. CONSPIRACY TO DEFRAUD THE UNITED STATES BY EVIDENCE OF UNPRECENDENTED RECKLESS IMPLEMENTATION OF EMERGENCY USE AUTHORIZATION AND AGENCY RESTRICTIVE GUIDELINES
   Federal agency issuance of restrictive guidelines by the World Health Organization (WHO) directives to Center of Disease Control (CDC), National Institute of Health (NIH), the Food and Drug Administration (FDA), indicates collusion to protect Emergency Use Authorization licensing of the COVID-19 vaccine.

IV. CONSPIRACY TO DEFRAUD THE UNITED STATES AND ITS CITIZENS BY FAILING TO VET THE WHO, NIH, CDC, FDA, ET.AL. PANDEMIC SCIENCE, PROTOCOLS, AND REPORTING

Evidence establishes that the current pandemic has been a criminal conspiracy and racketeering enterprise beginning in 1999 with the ultimate goal of creating a ***"New Normal Campaign"*** for the purpose of ***"getting people to accept universal pan influenza, pan coronavirus vaccine"*** **as scripted by MERCK at the January 6, 2004, SARS and Bioterrorism Emerging Infectious Diseases, Antimicrobials Therapeutics, and Immune Modulators Conference.**

Supplemental documents for this brief are: The Omega Brief Detail, collated, transcribed video source with Paragraph Numbers (PN), tables, and external links, The Fauci/COVID-19 Dossier (FD). Visit www.theomegabrief.com for information and text updates, text "DEFEND" to 855-822-1010.

EXECUTIVE SUMMARY

This executive summary establishes a hub-and-spoke type conspiracy, the chain conspiracy and the enterprise (RICO) conspiracy. In a classic hub-and-spoke conspiracy a central core of conspirators recruits separate groups of co-conspirators to carry out the various functions of the illegal

enterprise. See Kotteakos v. United States, 328 U.S. 750, 755, 66 S.Ct. 1239, 90 L.Ed. 1557 (1946). In such a conspiracy the core conspirators are the hub and each group of co-conspirators form a spoke leading out from the center in different directions. Kotteakos, 328 U.S. at 755, 66 S.Ct. 1239. The core conspirators move from spoke to spoke directing the functions of the conspiracy.

Evidence establishes, that in order to achieve world distribution of an annual or bi-annual, mandatory influenza and/or coronavirus vaccine, the following possible goals would be necessary.

GOAL #1: Create *"The New Normal campaign"* for the purpose of ***"getting people to accept universal pan influenza, pan coronavirus vaccine."***

1. **Create simulations and exercises of a pandemic**.
   a. Published in 2017 by John Hopkins Center for Health Security, SPARS Pandemic 2025-2028 document conveys futuristic role playing of a fictitious viral pandemic in the years 2025-2028. SPARS reads more like your morning news headlines beginning in 2020,
   b. In October 2019, the NIH, CDC, and WHO planned, orchestrated, and conducted Event 201 with funding by the Gates Foundation, World Economic Forum, et. al. to provide exercises in the event of a pandemic that was predicted by Anthony Fauci in 2017.

2. **Create a "new" virus, though it is really not new**.
   a. 1990 – Pfizer patent - vaccine for S-spike protein on coronavirus, abandoned in 2010, (FD 20)
   b. 1999 – Anthony Fauci, NIH funds Ralph Baric, University of North Carolina (UNC), Chapel Hill, NC, "*Ralph Baric's work on rabbits, and the rabbit cardiomyopathy*" PN 9
   c. 2000, January 28 – "*The first vaccine ever patented for coronavirus was actually sought by Pfizer., specifically this s-spike protein*" PN 8
   d. 2002, April 19 – Ralph Baric patents recombinant virus, "*We made SARS and we patented it on April 19, 2002*" PN 12
   e. 2003, April 25 – "*CDC filed the patent on the SARS coronavirus in 2003 … "and the treatment was available three days later*." PN 26
      i. The NIH is the named owner of at least 138 patents since 1980, (FD p15)
      ii. The United States Department of Health and Human Services is the named owner of at least 2,600 patents. (FD p15)

3. **Leak the virus** – Martin/Fuellmich interview.
   "This was not a lab leak; this was an intentional bio weaponization of spike proteins to inject into people to get them addicted to a pan coronavirus vaccine." PN 57

4. **Declare national / state / county emergencies**.
   a. 2019 January 24, - Coronavirus Aid, Relief, and Economic Security Act (CARES) H.R. 748: was introduced in Congress, signed by President Trump, March 2020,
   b. 2020, January 23 - China has 239 cases and 8 deaths in 1.4 billion population,
   c. 2020, January 25 - Gilead Sciences accepting requests from clinicians for compassionate use of Remdesivir – NEJM reports 60% adverse events reported June 11, 2020.

d. 2020, February 4 - Public Readiness and Emergency Preparedness Act (PREP) invoked,
e. 2020, March 11 – WHO announces coronavirus global pandemic,
f. 2020, March 11 – United Kingdom lockdown due to Neil Ferguson's highly flawed mathematical model which projected 600,000 deaths in the United Kingdom,
g. 2020, March 13 - US declares national emergency
h. 2020, March 13 – Governor of Texas declares emergency

5. **Create media fear and hysteria**.
   a. Inflate false positives via FDA's EUA authorization of the fraudulent, Christian Drosden PCR Test, a technology that according to the inventor, Kary Mullis, "*should never be used to diagnose contagious diseases*", (American Frontline Doctors VS HHS /Fuellmich Int'l LawSuit)
   b. Elevate death totals by listing cause of death as COVID on death certificates with no clinical confirmation and discourage autopsies.
   c. Implement detrimental recommendations for diagnosis and for treatment protocols,
   d. Increase Medicare Inpatient Prospective Payment System (IPPS) payments by 20% for patients previously treated for COVID-19. Hospitals reported to encourage physicians to give diagnosis of COVID in order to raise reimbursement.
   e. Create 24-7 news and social media fear and hype with constant reporting of case numbers,
   f. Tables below depict the gross distortion of the number of COVID deaths when compared to common diseases in the US and other countries.

6. **GOAL #2: "Warp Speed" Vaccine Development.**
   a. **In order for vaccine manufacturers to have green light for development for EUA licensing,** it was necessary for the CRITERIA AND CONSIDERATIONS FOR THE ISSUANCE OF AN EUA FOR A COVID-19 VACCINE to be met, therefore, there could be "*no adequate, approved, and available alternative to the product for diagnosing, preventing, or treating the disease or condition"* such that recognition of any "*adequate, approved, or alternative*" treatments could not be tolerated in order to meet the Criteria and Considerations for EUA licensing of COVID-19 vaccines.
   b. **In order to effectively obstruct treatment options, the following Federal agencies** had to develop restrictive guidelines to prevent any treatments to protect EUA vaccine criteria.
   c. **CDC directs state medical boards and state departments of health services (DSHS).** COVID-19, CDC clinical management recommends not to prescribe treatment for viral symptoms. As reported, these limiting guidelines were implemented for out-patients who tested positive for COVID-19 and were sent home with no medical assistance and told not to seek hospital care until severe respiratory distress. In-patient care is limited to FDA recommendations of Remdesivir and steroids.
      i. *"Current clinical management of COVID-19 consists of infection prevention and control measures and supportive care, including supplemental oxygen and mechanical ventilatory support when indicated. FDA has approved one drug, remdesivir (Veklury), for the treatment of COVID-19 in hospitalized, patients aged 12 years and older who weigh at least 40 kg."*

7. **National Institute of Health (NIH) COVID-19 Treatment Guidelines directs physicians and hospitals and insurance companies.** NIH COVID-19 guidelines are to not treat outside of a clinical trial.
   *a. "recommends **against the use of any agents** for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pre-exposure or post-exposure prophylaxis (PrEP), except in a clinical trial (AIII)."*

GOAL #3: COVID-19 vaccines to receive full FDA approval in order to be added to the childhood vaccine schedule, so that all "covered persons" are shielded from liability with the National Childhood Vaccine Injury Act of 1986.

Once COVID-19 vaccines receive full FDA approval, EUA vaccine licensing is null and shielding from "PREP Act and COVID-19: Limiting Liability for Medical Countermeasures" is no longer applicable:

a. Covered persons include (i) the United States; (ii) manufacturers and distributors of covered countermeasures; (iii) "program planners"; and (iv) "qualified persons" who prescribe, administer, or dispense covered countermeasures.
b. In October 23, 2020, the PREP Act was amended to include private businesses that may qualify as "program planners" (and thus covered persons) when performing certain functions like following CDC guidelines.
c. Private businesses will receive immunity from liability under PREP Act from COVID 19 exposure.

GOAL #4: Implement world–wide mandates for vaccine compliance with bio-evidenced, identification mark and force vaccine compliance through bio-trackable "passports" to buy, sell, or travel.

WHEREFORE, PREMISES CONSIDERED, we pray that the evidence contained in the following documents will result in the State of Texas pursuing criminal charges against all national and international bad actors who premeditated crimes against humanity by instigating the SARS-CoV-2 pandemic, which is responsible for loss of millions of lives and devastation to world economies. As evidenced, the coronavirus pandemic is a racketeering, criminal conspiracy managed by Anthony Fauci, Peter Daszak, and Ralph Baric outlined in the Fauci Dossier document.

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This document was collated with the help of countless, sacrificial, international and national researchers, scientists, physicians, and activists. I serve on behalf of the people and I am not an attorney.

Thank you for your consideration,
Sheila Hemphill, CEO

worldometer Coronavirus Population

As of August 6, 2021

COVID-19 CORONAVIRUS PANDEMIC	WORLD / COUNTRIES / UNITED STATES	WORLD / COUNTRIES / USA / TEXAS
Last updated: August 06, 2021, 19:25 GMT	Last updated: August 06, 2021, 19:31 GMT	Last updated: August 06, 2021, 19:36 GMT
Weekly Trends - Graphs - Countries - News	United States	Texas
Coronavirus Cases: 202,122,208 view by country	Coronavirus Cases: 36,305,503	Coronavirus Cases: 3,201,828
Deaths: 4,286,736	Deaths: 631,901	Deaths: 53,716
Recovered: 181,759,959	Recovered: 29,805,834	Recovered: 2,978,224
COVID Live Update: 202,015,297 Cases and 4,285,724 Deaths from the Coronavirus - Worldometer (worldometers.info)	United States COVID: 36,305,503 Cases and 631,901 Deaths - Worldometer (worldometers.info)	Texas COVID: 3,201,828 Cases and 53,716 Deaths - Worldometer (worldometers.info)

The ***"New Normal Campaign"*** as outlined in the Executive Summary, reveals criminal activity surrounding the coronavirus pandemic and the schemes necessary for the purpose of ***"getting people to accept universal pan influenza, pan coronavirus vaccine",*** which are crimes against humanity. The four evidentiary sections of criminal activity are:

I. CRIMINAL ACTIVITY BY EVIDENCE ATTAINED FROM PATENTS

A. Background and Video source for Dr. Reiner Fuellmich

Dr. Reiner Fuellmich, is an international trial lawyer with licenses in California and Germany. He one of the four founding members of the German Corona Investigative Committee. Dr. Fuellmich has successfully sued large fraudulent corporations, like Volkswagen and Deutsche Bank. His worldwide network of lawyers has listened to a hundred experts from every field of science. They collected undeniable evidence that the COVID pandemic is a planned criminal operation. According to Dr Fuellmich a second Nuremberg trial may be needed, to prosecute all who are complicit in this unprecedented crime against humanity.

B. Background and Video source for David Martin, PhD

On July 12, 2021, Dr. Martin was interviewed by **Reiner Fuellmich**,

Dr. David E. Martin is the Founder and Chairman of M·CAM Inc., the international leader in innovation finance, trade, and intangible asset finance. He is the developer of the first innovation-based quantitative index of public equities and is the Managing Partner of the Purple Bridge Funds. He is the creator of the world's first quantitative public equity index – the CNBC IQ100 powered by M·CAM.

> *"From a corporate standpoint, since 1998, we have been the world's largest underwriter of intangible assets used in finance in 168 countries. In the majority of the countries around the world, our underwriting systems include the entire corpus of all patents, patent applications, federal grants, procurement records, e-government records etc. We have the ability to not only track what is happening and who is involved in what's happening, but we monitor a series of thematic interests for a variety of organizations and individuals, as well as, for our own commercial use. Because as you probably know we maintain three global equities in the indices which are the top-performing large-cap and mid-cap equity indexes worldwide. So, our business is to monitor the innovation that's happening around the world and specifically to monitor the economics of that innovation to the degree to which you know financial interests are being served, you know corporate interests are being dislocated etc. So, our business is the business of innovation and its foreign finance industry of social innovation."*

TRANSCRIBED HIGHLIGHTS FROM THE MARTIN/FUELLMICH VIDEO
Video links available at www.TheOmegaBrief.com

Paragraph Number (PN) represents the paragraph marker in the full video transcript.
Coloration of text indicates severity of content contained in the transcript as determined by the author of the brief -

Black Bolded – Significant, **Red bolded – Shocking,** **Red bolded Underlined – Alarming**

SUMMARY OF VIDEO COMMENTS FROM DAVID MARTIN:

1. PN 1: **So, our business is to monitor the innovation that's happening around the world and specifically to monitor the economics of that innovation the degree to which you know financial interests are being serve, corporate interests are being dislocated, etc. Our business is the business of innovation and its finance.**

2. PN 4: **we have reviewed the over 4,000 patents that have been issued around SARS coronavirus,**

3. PN 6: **What we found, as you'll see in this report, are over 120 patented pieces of evidence to suggest that the declaration of a novel coronavirus was actually entirely a fallacy; that there was no novel coronavirus. … Not only was this not novel anything, it has not been novel for over two decades.**

4. PN 8: **The first vaccine ever patented for coronavirus was actually sought by Pfizer.** The application for the the, the first vaccine for coronavirus, **specifically this s-spike protein**, so the exact same thing that allegedly we have rushed into invention the application first **was filed on January 28, 2000.**

5. PN 9: But as I said, the early work up until 1999, was largely focused in the area of vaccines for animals. The two animals receiving the most attention were probably Ralph Baric's work on rabbits, and the rabbit cardiomyopathy that was associated with significant problems among rabbit breeders, and then canine coronavirus in Pfizer's work to identify how to develop S and spike protein vaccine target candidates. **Giving rise to the obvious evidence that says that neither the coronavirus concept of a vaccine nor the principle of the coronavirus itself as a pathogen of interest with respect to the spike protein's behavior is anything novel at all. As a matter of fact, it's twenty-two years old based on patent filings.**

6. PN 11: **So, SARS is actually not a natural progression of a zoonetic modification of coronavirus.**

7. PN 12: **Where the NIAID built, "an infectious replication defective coronavirus" that was specifically targeted for human lung epithelium. In other words, we made SARS and we patented it on April 19, 2002 before there was ever any alleged outbreak in Asia which as you know followed that by several months.**

8. PN 14: **scourge pathogen was not only engineered, but could be synthetically modified in the laboratory using nothing more than gene sequencing technologies, taking computer code and turning it into a pathogen or an intermediate of the pathogen.**

9. PN 17: **And throughout fall of 2001, we began monitoring an enormous number of bacterial and viral pathogens that were being patented through NIH, NIAID, US AMRID, the US Armed Services Infectious Disease program, and a number of other agencies internationally that collaborated with them.** And our concern was that coronavirus was being seen as not only a potential manipulable agent for potential use as a vaccine vector, but **it was also very clearly being considered as a biological weapon candidate.**

10. PN 18: And this topic is of critical importance to get the nuance very precise because in addition to filing the entire gene sequence, on what became SARS coronavirus, **which is actually a violation of 35 US Code Section 101**. … **these patents not only covered the gene sequence of SARS coronavirus but also covered the means of detecting it using rtPCR.**

11. PN 20: Now the reason why this is a problem is because **if you actually both own the patent on the gene itself, as well as the patent on its detection, you have a cunning advantage to being able to control 100% of the provenance of not only the virus itself but also its detection, meaning you have entire scientific and message control**. And this patent sought by the CDC was allegedly justified by their public relations team as **being "sought so that everyone would be free to be able to research coronavirus." The only problem with that statement was, is it's a lie. … prior to CDC's filing for a patent, the patent office found "99.9 % identity" with the already existing coronavirus recorded in the public domain.**

12. PN 21: **Over the rejection of the patent examiner, and after having to pay an appeal fine in 2006 and 2007, the CDC overrode the patent office's rejection of their patent and ultimately in 2007 got the patent on SARS coronavirus.** Though every public statement that CDC has made that said that this was in the public interest, is **falsifiable by their own paid bribe to the patent office. … trying to "make information available for the public research" why would you not pay a fee to keep the information private**.

13. PN 22: **I wish I could have made up anything I just said but all of that are available in the public patent archive record which any member of the public can review and the public pair as it's called at the U.S. patent office has not only the evidence but the actual documents which I have in my possession.**

14. PN 24: **It's critically important because "fact checkers" have repeatedly stated that the novel coronavirus designated as SARS CoV 2 is in fact distinct from the CDC patent. And here's both the genetic and the patent problem; If you look at the gene sequence that is filed by the CDC in 2003, again in 2005, and then again in 2006. What you find is identity in somewhere in between 89% to 99% of the sequence overlaps that have been identified in what's called the novel subclade of SARS CoV 2**.

15. PN 26: on the **28th of April**, and listen to the date very carefully because this date is problematic. **Three days after CDC filed the patent on the SARS coronavirus in 2003, three days later Sequoia Pharmaceuticals, a company that was set up in Maryland. Sequoia Pharmaceuticals on the 28th of April 2003 filed a patent on "anti-viral agents of treatment and control of infections by coronavirus." CDC filed three days early and the treatment was available three days later.**

16. PN 28: Sequoia Pharmaceuticals and ultimately **AB Links Pharmaceuticals became rolled into the proprietary holdings of Pfizer, Crucell, and Johnson and Johnson.**

17. PN 30: So ask yourself a simply question, **how would one have a patent on a treatment for a thing that had been invented three days earlier?**

18. PN 32: The April 28, 2003 patent 7151163 issued to Sequoia Pharmaceuticals has another problem. **The problem is it was issued and published before the CDC patent on coronavirus was actually allowed.** So, the degree to which the information could have been known by any means other than insider information between those parties is zero. **It is not physically possible for you to patent a thing, that treats a thing that had not been published because CDC had paid an additional fee to keep it secret.**

19. PN 34: **This is definition of criminal conspiracy, racketeering, and collusion. This is not a theory, this is evidence. You cannot have information in the future inform a treatment for a thing that did not exist.**

20. PN 36: This is a RICO case, not could blow up into it, **it is a RICO case**. And the RICO **pattern which was established in April of 2003 for the first coronavirus was played out to exactly the same schedule with SARS CoV 2 show up**, **when we have Moderna getting the spike protein sequence by phone from the Vaccine Research Center at NIAID prior to the definition of the novel subclade. How do you treat a thing, before you actually have the thing?**

21. PN 41: **DARPA actively took an interest in coronavirus as a biological weapon. June 5, 2008, AB Links, which as you know now part of Sanofi, filed a series of patents that specifically targeted what we've been told is the "novel feature" of the SARS CoV 2 virus**. And you heard what I said, this is the **5th of June 2008**.

22. PN 43: **Specifically, they targeted what was called the poly basic cleavage site for SARS CoV, the novel spike protein, and the ACE2 receptor binding domain which is allegedly novel to SARS CoV 2. All of that were patented on June 5, 2008, and those patents in sequence were issued between November 24th of 2015**, which was U.S. patent 9193780, so that one came out **after the gain of function moratorium … every attribute that was allegedly uniquely published by the single reference publication, "*The novel bat coronavirus reveals natural insertions at the S1, S2, ACE2 cleavage site of the spike protein and possible recombinant 3 origin of the SARC CoV 2 virus*".** The paper that has been routinely used to identify the novel virus, unfortunately, **if you actually take what they report to be novel you find 73 patents issued between 2008 and 2019, which have the elements that were allegedly novel in the SARS CoV2.** Specifically, as it relates to the poly basic cleavage site, the ACE2 receptor binding domain and the spike protein. So, the clinically novel components of the clinically unique, clinically contagious, you know where I'm going with this. **There was no outbreak of SARS because we had engineered all of the elements of it and by 2016. The paper that was funded during the gain of function moratorium that said that the SARS coronavirus was "poised for human emergence", written by Ralph Baric, was not only poised for human emergence but it**

was patented for commercial exploitation - 73 times.

23. PN 48: **The statement that was made by Peter Daszak in 2015 reported in the National Academies of Press publication on February 12, 2016** who said, and I'm 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 profit at the end of the process."**

24. PN 54: **Peter Daszak the head of EcoHealth Alliance.**

25. PN 57: **Peter Daszak, the person who was independently corroborating the Chinese non-lab leaked non-theory because there wasn't a lab leak this was an intentional bioweaponization of spike proteins to inject into people to get them addicted to a pan coronavirus vaccine.** This has nothing to do with a pathogen that was released and every study that's ever been launched to try to verify **a lab leak is a red herring.**

26. PN 58: **And there's really nothing that is new, in this**

27. PN 59: **Nothing zero. 73 patents on everything clinically novel. 73 all issued before 2019 and I'm going to give you the biggest bombshell of all to prove that this was actually not a release of anything. Because patent 7279327 the patent on the recombinant nature of that lung targeting coronavirus, was transferred mysteriously from the University of North Carolina Chapel Hill to the National Institutes of Health in 2018.**

28. PN 56: **the single patent required to develop the Vaccine Research Institute's mandate, which was shared between the University of North Carolina Chapel Hill in November of 2019 and Moderna in November of 2019 when UNC Chapel Hill, NIAID, and Moderna began the sequencing of a spike protein vaccine. A month before an outbreak ever happened.**

29. PN 68: **The script for this was written first January 6, 2004**.

30. PN 70: **MERCK. At a conference called SARS and Bioterrorism. Bioterrorism emerging infectious diseases antimicrobials therapeutics and immune modulators. MERCK introduced the notion of what they called, "The New Normal", proper noun. The new normal which is the language that became the branded campaign that was adopted by the World Health Organization**, the Global Preparedness Monitoring Board, which was the board upon, **which the Chinese director of Center for Disease Control, Bill Gates's Dr. Elias of the Gates Foundation and Anthony Fauci sat together on that board of directors but the the first introduction of "The New Normal" campaign which was about getting people to accept a universal pan influenza, pan coronavirus vaccine was actually adopted January 6 2004**.

31. PN 71: **Moderna knew that it was going to be placed in the front of the line with respect to the development of a vaccine in March of 2019. … their term, "deliberate release of coronavirus." … in November they entered into a research and cooperative research and development agreement with UNC Chapel Hill with respect to getting the spike protein to put inside of the lipid nanoparticle. So that they actually had a candidate vaccine, before we had a pathogen allegedly that was running around.**

32. PN 73: **Anthony Fauci lamented the fact that he could not find a way to get people to accept the universal influenza vaccine. … March of 2019** in the amended patent filings of Moderna, we see that there is a epiphany that says, **"What if there was an accidental or an intentional release of a respiratory pathogen?**

33. PN 74: **recited in the book, "*A World At Risk*", which is the scenario that was put together by the World Health Organization in September of 2019. So, months before there's an alleged pathogen, which says that we need to have a coordinated global experience of a respiratory pathogen release, which by September 2020, must put in place a universal capacity for public relations management, crowd control, and the acceptance of a universal vaccine mandate. That was September of 2019. And the language of an intentional release of a respiratory pathogen was written into the scenario that quote must be completed by September 2020.**

34. PN 76: Well, this is the **Global Preparedness Monitoring Board's unified statement**.

35. PN 83: But it's **Moderna's patent applications that were amended in March of 2019 to include the deliberate release of a respiratory pathogen language.**

36. PN 84: **but any assertion that this, this pathogen is somehow unique or novel falls apart on the actual gene sequences which are published in the patent record. And then more egregiously falls apart in the fact that we have Peter Daszak himself stating that we have to create public hype to get the public to accept the medical countermeasure of a pan coronavirus vaccine.** And what makes that most ludicrous is the fact that as we know **World Health Organization had declared coronavirus a a you know kind of a a dead, a dead interest. I mean they, they said that that we had eradicated coronavirus as a concern, so why having eradicated it in 2007 and 2008**, **why did we start spending billions of dollars globally on a vaccine for a thing that had been eradicated by declaration in 2008?**

37. PN 85: **This is a tool and the interest of DARPA in creating a biological weapon out of this, this is a tool for everything else that latches on to this including population control for example.**

38. PN 87: **There is no question that by 2005 it was unquestionably a weapon of choice. … We are injecting a spike protein mRNA secret mRNA sequence which is a computer simulation. It's not derived from nature. … which has been known and patented for years. …**

the ludicrous nature of the story that this is somehow prophylactive or preventative flies in the face of a hundred percent of the evidence. Because the evidence makes it abundantly clear that there has been no effort by any pharmaceutical company to combat the virus. This is about getting people injected with the known to be harmful S1 spike protein.

39. PN 89: **Anthony Fauci tried desperately to get some of his quote "synthetic RNA vaccines" published, he had his own patents rejected by the patent office.**

40. PN 90: **"*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 it is not persuasive in regards to a vaccine*."**

41. PN 91: **This is the patent office. This is not some sort of public health agency. This is the patent office. *"The immune response produced by a vaccine must be more than merely some immune response but must also be protective. …* So, Anthony Fauci himself was told by the patent office themselves, that what he was proposing as a vaccine does not meet the patentable standard the legal standard or the clinical standard.**

42. PN 94: **hundreds of millions of people who are being injected with a pathogen stimulating computer sequence. Which is being sold under what the patent office what the medical profession and what the FDA in its own clinical standards would not suggest is a vaccine** but by using the term **we actually are now subjecting hundreds of millions of people to what was known to be by 2005 a biological weapon.**

43. PN 109 **So, this is where we see an enormous amount of response and reflexive behavior to media hype. There is no and I'm going to repeat this there is no evidence that the Delta variant is somehow distinct from anything else on GISIAD.**
44. PN 104: **the databases contain as many as more or 40 000 virus strains so could this could this Delta variant some kind of media hype you told us about before there.**

45. PN 106: **There is no such thing as an Alpha or a Beta or gamma Delta variant. This is a this is a means by which what is desperately sought a degree to which individuals can be coerced into accepting something that they would not otherwise accept. There has not been in any of the published studies on what has been reportedly the Delta variant. There has not been a population are not calculated which is the actual replication rate.**

46. PN 107: **What has been estimated are computer simulations but unfortunately, if you look at GISAID, which is the public source of uploading any one of a number of variations what you'll find is that there has been no ability to identify any clinically altered gene sequence which has then a clinically expressed variation.** And this is the problem all along. **This is the problem going back to the very beginning of what's alleged to be a pandemic is we do not have any evidence that the gene sequence alteration had any clinical significance whatsoever.**

There has not been a single paper published by anyone that has actually established that anything novel since November of 2019 has clinical distinction from anything that predates November of 2019. The problem with the 73 patents that I described, is that those 73 patents all contain what was reported to be novel in December and January of 2019 and 2020 respectively. So, the problem is, that even if we were to accept that there are idiopathic pneumonias. Even if we were to accept that there are some set of pathogen-induced symptoms. We do not have a single piece of published evidence that tells us that anything about the subclade SARS CoV 2 has clinical distinction from anything that was known and published prior to November 2019 in 73 patents dating to 2008.

47. PN 109: **So, this is where we see an enormous amount of response and reflexive behavior to media hype. There is no and I'm going to repeat this there is no evidence that the Delta variant is somehow distinct from anything else on GISIAD.**

48. PN 110: **"Is the Delta variant anything other than the selection of a sequence in a systematic shift of an already disclosed other sequence?" The answer is it's just an alteration in when you start and stop what you call the reading frame. There is no novel anything.**
49. PN 112: **When they actually talk about the DNA strands, which they call sequence id numbers, they actually specifically say the "organism is an artificial sequence an artificial sequence"**

50. PN 113: **the exact sequence that has gone into what is amplified inside of the injection seems to be elusive. It seems to be something that someone cannot in fact state with a hundred percent the sequence is x. … This was a manufactured illusion.**

51. PN 116: **Influenza did not leave the human population. Influenza was a failed decade-long pan-influenza vaccine mandate that was desperately, desperately, desperately promoted by governments around the world. They failed and they decided if influenza doesn't deliver on the public promise of getting everybody to get an injection, let's change the pathogen.**

52. PN 123: **Yeah, you need you need to create the illusion of demand and there is nothing right now that does a better job of creating the illusion of demand than the urgency of an event that you've manufactured.**

53. PN 125: **this was not a public health crisis this was an opportunistic marketing campaign to address a stated objective.** And that's why this is Occam's Razor, it's the easiest thing to describe because they're the ones that said it and the Occam's Razor reality is they said, **"they needed to get the public to accept a pan coronavirus vaccine counter measure and they needed the media to create the hype and investors would follow where they see profit." … if I have somebody who says we need to use the media to hype a medical countermeasure which is in fact the injection of a synthetic recombinant chimeric protein developed off of a computer simulation, if I'm actually going to listen to the motivation for why that might be**

being done, I will listen to the person doing the manipulation who says, "Investors will follow where they see profit."

C. Timeline of patents from page 19 of Fauci/COVID 19 Dossier

"Our underwriting systems include the entire corpus of all patents, patent applications, federal grants, procurement records, e-government records etc." List of these patents are available at www.TheOmegaBrief.com

1986-1990	NIAID Grant AI 23946 leading to patent U.S. 7,279,327 "Methods for Producing Recombinant Coronavirus" Filed 2002 and issued 2007 https://patents.google.com/patent/US7279327B2/ru The paper first published from the NIAID grant is https://europepmc.org/backend/ptpmcrender.fcgi?accid=PMC7109931&blobtype=pdf
1990	Pfizer files U.S. Patent 6,372,224 on a vaccine for the S-protein on coronavirus November 14, 2000 which was abandoned April 2010 making it public domain.
1990s	Work focused on CoV association with cardiomyopathy (see above) Early reference to the "emergence" of CoV as a respiratory pathogen in https://link.springer.com/content/pdf/10.1007%2F978-1-4615-1899-0_91.pdf
2000	Ralph Baric AI23946 and GM63228 from the National Institutes of Health actively working recombinant CoV
2001	National Institute of Health, Allergy and Infectious diseases. "Reverse Genetics with a Coronavirus Infectious cDNA Construct." 4/1/2001-3/31/005 $1.0 million total costs/yr. RS Baric, PI
2002	Asia CoV SARS outbreak
2003	CDC Patent filed and ultimately becomes US7,220,852 (the patent on the RNA sequence) and 7,776,521 (the patent on the testing methodology. These patents give the U.S. Department of Health and Human Services the ability to control the commercial exploitation of SARS coronavirus. Dr. Anthony Fauci appointed to the Bill and Melinda Gates Foundation's Global Grand Challenges Scientific Advisory Board (served through 2010). Sequoia Pharmaceuticals $953K for pathogen response and patent US7,151,163 https://www.sbir.gov/node/305319
July 21, 2003	Ralph Baric's team (using AI23946 and GM63228) file U.S. Patent 7,618,802 which issued on November 17, 2009. https://patents.google.com/patent/US7618802B2 Dana Farber Cancer Institute files U.S. Patent 7,750,123 on a monoclonal antibody to neutralize SARS CoV. This research is supported by several NIH grants including National

Institutes of Health Grants A128785, A148436, and A1053822.

2004 January 6, 2004 – SARS and Bioterrorism linked at Bioterrorism and Emerging Infectious Diseases: antimicrobials, therapeutics and immune modulators.
https://tks.keystonesymposia.org/index.cfm?e=web.meeting.program&meetingid=706
At was introduced by Merck

FAUCI AND BARIC start making money!!! National Institutes of Health, Allergy and Infectious Diseases. SARS Reverse Genetics. AI059136-01. $1.7 million total costs, RS Baric, PI. 10% effort. 4/1/04- 3/31/09. The project develops a SARS-CoV full length infectious cDNA, the development of SARS-CoV replicon particles expressing heterologous genes, and seeks to adapt SARS-CoV to mice, producing a pathogenic mouse model for SARS-CoV infection.
National Institutes of Health, Allergy and Infectious Diseases. R01. Remodeling the SARS Coronavirus Genome Regulatory Network. RS Baric, PI 10% effort. 7/1/04-6/30/09. $2.1 million
University of Hong Kong patents SARS associated spike protein
on CoV and pursues patent US 7,491,489

2005 DARPA gets in on the game Synthetic Coronaviruses. Biohacking: Biological Warfare Enabling Technologies, June 2005. Washington, DC. DARPA/MITRE sponsored event. Invited Speaker
Review timeline from https://www.youtube.com/watch?v=rO_EeYB0i0U and

https://www.davidmartin.world/wp-content/uploads/2020/04/20APRBotWslides.pdf

2008 Biodefense Grant U54 AI057157 commences with $10,189,682 to UNC Chapel Hill
https://taggs.hhs.gov/Detail/AwardDetail?arg_awardNum=U54AI057157&arg_ProgOfficeCode=104

2009 Biodefense Grant U54 AI057157 continues with $5,448,656 to UNC Chapel Hill (non-competitive grant from NIAID)

2010 Biodefense Grant U54 AI057157 continues with $8,747,142 to UNC Chapel Hill (non-competitive grant from NIAID)
Patent issuance for SARS coronavirus patents peak post the Asia outbreak at 391 issued patents.
August 6, 2010, Moderna (prior to its establishment) files U.S. Patent 9,447,164 which attracted the investment of (and “inventorship” for) venture capitalists at Flagship Ventures. This patent grew out of the work of Dr. Jason P. Schrum of Harvard Medical

School supported by National Science Foundation Grant #0434507. While the application claims priority to August 2010, the application didn't get finalized until

October, 2015. On November 4, 2015, the USPTO issued a non-final rejection on this original patent rejecting all claims.
https://www.nsf.gov/awardsearch/showAward?AWD_ID=0434507 with reference to the grant funding in
https://molbio.mgh.harvard.edu/szostakweb/publications/Szostak_pdfs/Schrum_et_al_JACS_2009.pdf

2011 Crucell joined the Janssen Pharmaceutical Companies of Johnson & Johnson in February taking with it all of its SARS technology.

Biodefense Grant U54 AI057157 continues with $7,344,820 to UNC Chapel Hill (non-competitive grant from NIAID)

2012 MERS isolated in Egypt
Biodefense Grant U54 AI057157 continues with $7,627,657 to UNC Chapel Hill (non-competitive grant from NIAID)

2013 Biodefense Grant U54 AI057157 continues with $7,226,237 to UNC Chapel Hill (non-competitive grant from NIAID)

2014 April 23, 2014, Moderna files patent on nucleic acid vaccine with Patents US9872900 and US10022435

2015 Moderna signs a vaccine development agreement with NIAID and executes it with the lead on the mRNA-1273 lead developer and inventor Guiseppe Ciaramella.
https://www.documentcloud.org/documents/6935295-NIH-Moderna-Confidential-Agreements.html

2016 NIH through Scripps Institute and Dartmouth College file patent application WO 2018081318A1 "Prefusion Coronavirus Spike Proteins and their Use" disclosing mRNA technology that overlaps (and is used in tandem with) Moderna's technology.
https://patents.google.com/patent/WO2018081318A1/en Lead Inventor Barney Scott Graham was well known to Moderna as he's the person at NIH that Moderna "e-mailed" to get the sequence for SARS CoV-2 according to Moderna's report here ("In January 2020, once it was discovered that the infection in Wuhan was caused by a novel coronavirus, Bancel quickly emailed Dr. Barney Graham, deputy director of the Vaccine Research Center at the National Institutes of Health, asking him to send the genetic

sequence for the virus.") https://www.wsws.org/en/articles/2020/05/26/vacc-m26.html In addition, co-inventor Jason McLellan worked with Graham on a vaccine patent jointly owned with the Chinese government filed in Australia in 2013 https://patents.google.com/patent/AU2014231357A1/en?inventor=Jason+MCLELLAN.

2017	August – Sanofi buys Protein Science Corp with considerable SARS patent holdings
2018	June – Sanofi buys Ablynx with considerable SARS patent holdings
2019	March, https://wyss.harvard.edu/news/sherlock-biosciences-licenses-wyss-technology-to-create-affordable-molecular-diagnostics/ funded by Open Philanthropy – the same organization that would be the financial sponsor of the Event 201 "table-top" exercise that laid out the entire "pandemic" plan in October 2019.

D. Alleged criminal violation

In the following 30-page Fauci/COVID-19 Dossier, are the following criminal allegations from Dr. Martin as identified from patent applications and agency and corporation activity:

The following three evidentiary sections are pending discovery:

II. FRAUDULENT IMPLEMENTATION OF EMERGENCY USE AUTHORIZATION FOR PCR TESTING FOR DETECTING SARS-COV-2 AND COVID-19 VACCINE LICENSING

III. CONSPIRACY TO DEFRAUD THE UNITED STATES BY EVIDENCE OF UNPRECENDENTED RECKLESS IMPLEMENTATION OF EMERGENCY USE AUTHORIZATION AND AGENCY RESTRICTIVE GUIDELINES

III. CONSPIRACY TO DEFRAUD THE UNITED STATES AND ITS CITIZENS BY FAILING TO VET THE WHO, NIH, CDC, FDA, ET.AL. PANDEMIC SCIENCE, PROTOCOLS, AND REPORTING

worldometer Coronavirus

WORLD WIDE COVID STATS AS OF AUGUST 6, 2021 - THE OMEGA BRIEF

COVID Live Update: 202,015,297 Cases and 4,285,724 Deaths from the Coronavirus - Worldometer (worldometers.info)

Sorted by % of Population - Some columns rearranged to accommodate printing - *supplement columns added for The Omega Brief

Visit www.theomegabrief.com for spreadsheet details

USA #1 in deaths means USA healthcare system worse than Brazil, India and Mexico

USA
#1 in # Death
#21 in % of Population

Ranking Deaths	Ranking % of Pop	Country, Other	Population	Total Cases	New Cases	Total Deaths	% of Deaths by Cases*	% of Deaths Population*	New Deaths	Deaths/ 1M pop	Total Tests	Tests/ 1M pop
			7,841,855,363	202,122,208	474,101	4,286,736	2.1209%	0.0547%	7,251	549.9		
5	1	Peru	33,473,230	2,121,061		196,760	9.2765%	0.5878%		5,878	15,715,737	469,502
24	2	Hungary	9,633,493	809,855	52	30,033	3.7084%	0.3118%	1	3,118	6,375,668	661,823
50	3	Bosnia and Herzegovina	3,258,462	206,106	75	9,691	4.7019%	0.2974%	2	2,974	1,083,943	332,655
23	4	Czechia	10,730,719	1,674,577	163	30,367	1.8134%	0.2830%		2,830	33,518,178	3,123,572
169	5	Gibraltar	33,680	5,101	9	95	1.8624%	0.2821%		2,821	316,524	9,397,981
32	6	Bulgaria	6,891,131	426,932		18,243	4.2730%	0.2647%		2,647	3,711,151	538,540
173	7	San Marino	34,009	5,147		90	1.7486%	0.2646%		2,646	71,492	2,102,149
64	8	North Macedonia	2,083,280	157,251	325	5,502	3.4989%	0.2641%	1	2,641	1,005,162	482,490
2	9	Brazil	214,211,100	20,066,587		560,801	2.7947%	0.2618%		2,618	55,034,721	256,918
101	10	Montenegro	628,153	103,158	279	1,635	1.5849%	0.2603%		2,603	523,620	833,587
9	11	Colombia	51,475,325	4,821,603		121,899	2.5282%	0.2368%		2,368	22,837,298	443,655
11	12	Argentina	45,648,942	4,989,402		107,023	2.1450%	0.2344%		2,344	19,868,624	435,248
41	13	Slovakia	5,462,536	392,963	65	12,541	3.1914%	0.2296%		2,296	3,180,547	582,247
27	14	Belgium	11,644,787	1,134,907	1,973	25,264	2.2261%	0.2170%	6	2,170	17,514,370	1,504,052
72	15	Slovenia	2,079,251	259,909	144	4,430	1.7044%	0.2131%	1	2,131	1,400,177	673,405
8	16	Italy	60,364,496	4,383,787	6,599	128,187	2.9241%	0.2124%	24	2,124	78,677,529	1,303,374
38	17	Paraguay	7,228,211	454,194		15,207	3.3481%	0.2104%		2,104	1,699,788	235,160
52	18	Croatia	4,077,532	364,599	108	8,270	2.2682%	0.2028%		2,028	2,337,984	573,382
16	19	Poland	37,801,235	2,883,796	172	75,281	2.6105%	0.1991%	6	1,991	18,824,636	497,990
7	20	UK	68,275,964	6,014,023	31,808	130,178	2.1646%	0.1907%	92	1,907	249,796,318	3,658,627
1	21	USA	333,124,903	36,305,346	3,602	631,901	1.7405%	0.1897%	22	1,897	541,516,151	1,625,565
4	22	Mexico	130,412,536	2,922,663	21,569	243,165	8.3200%	0.1865%	618	1,865	8,657,417	66,385
20	23	Chile	19,295,524	1,621,571	1,182	35,880	2.2127%	0.1859%	74	1,859	18,979,440	983,619
21	24	Romania	19,097,090	1,084,456	230	34,305	3.1633%	0.1796%	5	1,796	10,703,311	560,468
22	25	Ecuador	17,935,422	490,356		31,754	6.4757%	0.1770%		1,770	1,695,808	94,551
15	26	Spain	46,774,598	4,588,132	21,561	82,006	1.7874%	0.1753%	75	1,753	57,177,901	1,222,414
30	27	Tunisia	11,953,713	605,205	2,448	20,679	3.4169%	0.1730%	129	1,730	2,313,825	193,565
35	28	Portugal	10,164,154	982,364	2,377	17,440	1.7753%	0.1716%	18	1,716	15,575,069	1,532,353
62	29	Uruguay	3,486,899	382,155		5,982	1.5653%	0.1716%		1,716	3,106,917	891,026
10	30	France	65,431,537	6,258,953	25,077	112,158	1.7920%	0.1714%	60	1,714	108,060,497	1,651,505

worldometer Coronavirus

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COVID Live Update: 202,015,297 Cases and 4,285,724 Deaths from the Coronavirus - Worldometer (worldometers.info)

Sorted by % of Population - Some columns rearranged to accommodate printing - *supplement columns added for The Omega Brief

Visit www.theomegabrief.com for spreadsheet details

TEXAS
#3 in # Death
#25 in % of Population

Ranking		USA	Population	Total	New	Total	% of Deaths	% of Deaths	New	Deaths/	Total	Tests/
Deaths	% of Pop	State		Cases	Cases	Deaths	by Cases*	by Population*	Deaths	1M pop	Tests	1M pop
		USA Total	4,010,930	36,312,253	10,509	631,962	1.7404%	15.7560%	83	1,909	541,632,261	1,636,338
6	1	New Jersey	8,882,190	1,046,514	1,346	26,636	2.5452%	0.2999%	7	2,999	14,734,647	1,658,898
2	2	New York	19,453,561	2,228,617		54,295	2.4363%	0.2791%		2,791	61,760,779	3,174,780
12	3	Massachusetts	6,892,503	725,189		18,093	2.4949%	0.2625%		2,625	24,847,641	3,605,024
37	4	Rhode Island	1,059,361	155,527		2,743	1.7637%	0.2589%		2,589	4,646,974	4,386,582
25	5	Mississippi	2,976,149	356,055		7,613	2.1382%	0.2558%		2,558	3,072,117	1,032,246
11	6	Arizona	7,278,717	937,936		18,300	1.9511%	0.2514%		2,514	5,312,812	729,911
18	7	Louisiana	4,648,794	567,787		11,162	1.9659%	0.2401%		2,401	8,456,570	1,819,089
16	8	Alabama	4,903,185	599,633		11,574	1.9302%	0.2361%		2,361	2,906,242	592,725
23	9	Connecticut	3,565,287	357,345		8,296	2.3216%	0.2327%		2,327	10,022,271	2,811,070
41	10	South Dakota	884,659	125,592		2,050	1.6323%	0.2317%		2,317	499,224	564,312
5	11	Pennsylvania	12,801,989	1,238,398	1,485	27,995	2.2606%	0.2187%	8	2,187	15,169,056	1,184,898
9	12	Michigan	9,986,857	1,014,087		21,216	2.0921%	0.2124%		2,124	15,310,102	1,533,025
34	13	New Mexico	2,096,829	213,247		4,419	2.0722%	0.2107%		2,107	3,852,599	1,837,345
13	14	Indiana	6,732,219	779,317		14,045	1.8022%	0.2086%		2,086	11,339,156	1,684,312
29	15	Arkansas	3,017,804	397,238		6,247	1.5726%	0.2070%		2,070	4,135,313	1,370,305
8	16	Georgia	10,617,423	1,205,434		21,767	1.8057%	0.2050%		2,050	12,633,964	1,189,928
7	17	Illinois	12,671,821	1,433,313		25,974	1.8122%	0.2050%		2,050	27,119,503	2,140,143
44	18	North Dakota	762,062	112,050		1,541	1.3753%	0.2022%		2,022	455,332	597,500
31	19	Iowa	3,155,070	413,988		6,193	1.4959%	0.1963%		1,963	5,371,762	1,702,581
32	20	Nevada	3,080,156	362,275		5,979	1.6504%	0.1941%		1,941	3,774,069	1,225,285
20	21	South Carolina	5,148,714	631,037		9,939	1.5750%	0.1930%		1,930	8,611,809	1,672,614
26	22	Oklahoma	3,956,971	491,680		7,531	1.5317%	0.1903%		1,903	4,257,877	1,076,045
42	23	Delaware	973,764	112,070		1,833	1.6356%	0.1882%		1,882	756,187	776,561
15	24	Tennessee	6,829,174	910,185		12,798	1.4061%	0.1874%		1,874	8,505,278	1,245,433
3	**25**	**Texas**	28,995,881	3,207,232	5,404	53,770	1.6765%	0.1854%	54	1,854	34,392,721	1,186,124
4	26	Florida	21,477,737	2,724,131		39,403	1.4464%	0.1835%		1,835	33,398,556	1,555,031
33	27	Kansas	2,913,314	337,350		5,286	1.5669%	0.1814%		1,814	1,523,652	522,996
10	28	Ohio	11,689,100	1,136,934		20,530	1.8057%	0.1756%		1,756	14,190,989	1,214,036
19	29	Missouri	6,137,428	693,812		10,432	1.5036%	0.1700%		1,700	8,454,574	1,377,543
35	30	West Virginia	1,792,147	168,733		2,961	1.7548%	0.1652%		1,652	3,150,938	1,758,192

worldometer Coronavirus

TEXAS COVID STATS AS OF AUGUST 6, 2021 - THE OMEGA BRIEF

Texas COVID: 3,201,828 Cases and 53,716 Deaths - Worldometer (worldometers.info)

Sorted by % of Population - Some columns rearranged to accommodate printing - *supplement columns added for The Omega Brief

Visit www.theomegabrief.com for spreadsheet details

Ranking		County	Population	Total Cases	New Cases	Total Deaths	% of Deaths by Cases*	% of Deaths Population*	New Deaths	Active Cases	Total Tests
Deaths	% of Pop										
		Texas Total	**29,730,313**	**3,201,828**		**53,716**	**1.6777%**	**0.1807%**	**54**	**169,888**	**34,392,721**
222	1	Foard County	1,083	133		10	7.5188%	0.9234%			
226	2	Motley County	1,136	122		8	6.5574%	0.7042%		1	
88	3	Lamb County	12,473	2,578	10	83	3.2196%	0.6654%		67	
239	4	McMullen County	767	87		5	5.7471%	0.6519%		1	
30	5	Maverick County	59,614	11,328	24	365	3.2221%	0.6123%		N/A	
248	6	Kenedy County	338	42		2	4.7619%	0.5917%		3	
106	7	Dawson County	12,974	1,767		70	3.9615%	0.5395%			
167	8	Floyd County	5,570	949	1	30	3.1612%	0.5386%		40	
149	9	Brooks County	7,081	925	1	37	4.0000%	0.5225%		39	
201	10	Cochran County	2,897	342	1	15	4.3860%	0.5178%			
218	11	Culberson County	2,125	369		11	2.9810%	0.5176%		3	
169	12	Crosby County	5,683	796		29	3.6432%	0.5103%		N/A	
172	13	Haskell County	5,576	465		28	6.0215%	0.5022%		N/A	
208	14	Hall County	2,842	502		14	2.7888%	0.4926%		13	
193	15	Knox County	3,668	265		18	6.7925%	0.4907%		N/A	
231	16	Cottle County	1,430	195	1	7	3.5897%	0.4895%		N/A	
52	17	Hale County	32,956	6,347		158	2.4894%	0.4794%	1	68	50,250
203	18	Donley County	3,204	435		15	3.4483%	0.4682%		1	
35	19	Starr County	65,401	9,982	37	306	3.0655%	0.4679%		281	
77	20	Hockley County	23,121	3,307	6	107	3.2356%	0.4628%		90	
116	21	Terry County	12,323	1,723		57	3.3082%	0.4625%		2	
153	22	Coleman County	7,791	821	3	36	4.3849%	0.4621%		N/A	
181	23	Hansford County	5,257	960	1	24	2.5000%	0.4565%		5	
221	24	Dickens County	2,197	199	1	10	5.0251%	0.4552%		1	
44	25	Val Verde County	49,099	8,378		223	2.6617%	0.4542%		227	68,162
238	26	Stonewall County	1,346	161		6	3.7267%	0.4458%		N/A	
85	27	Willacy County	21,174	3,555	17	93	2.6160%	0.4392%		186	
118	28	Wilbarger County	12,753	1,946	1	56	2.8777%	0.4391%			
230	29	Briscoe County	1,614	185		7	3.7838%	0.4337%		10	
190	30	Mills County	4,853	677	2	21	3.1019%	0.4327%		15	

SARS CoV 2 No Variant – Not Novel

David Martin, PhD with Reiner Fuellmich

The following content was transcribed from the July 11, 2021 video interview conducted by Reiner Fuellmich and David Martin and this document is a word for word transcript.

Videos available at www.TheOmegaBrief.com

Legend of interviewed participants:

DM: David Martin, PhD
RF: Reiner Fuellmich, Attorney - Corona Investigative Committee
MS: Martin Schwab, Professor of law
VF: Viviane Fischer - Corona Investigative Committee
WW: Wolfgang Wodarg, MD

1. DM: Chairman of MCAM CNBC IQ100 index, international innovation risk. From a corporate standpoint, we have since 1998 been the world's largest underwriter of intangible assets used in finance in 168 countries so ,in the majority of the countries around the world. Our underwriting systems include the entire corpus of all patents, patent applications, federal grants, procurement records, e-government records etc. We have the ability to not only track what is happening and who is involved in what's happening, but we monitor a series of thematic interests for a variety of organizations and individuals as well as for our own commercial use. Because as you probably know, we maintain three global equities in the indices which are the top performing large-cap and mid-cap equity indexes worldwide. **So, our business is to monitor the innovation that's happening around the world and specifically to monitor the economics of that innovation the degree to which you know financial interests are being serve, corporate interests are being dislocated, etc. Our business is the business of innovation and its finance.**

2. RF: Translates into German

3. MINUTE MARKER 2:57

4. DM: From the standpoint of this interview, **we have reviewed the over 4,000 patents that have been issued around SARS coronavirus,** and we have done a very comprehensive review of the financing of all the manipulations of coronavirus which gave rise to SARS as a subclade of the beta coronavirus family.

5. DM: And so what I wanted to give you a quick overview timeline, because we're not going to go through 4,000 patents in this conversation. But I have sent to you and your team a document that is exceptionally important; this was made public in the spring of 2020. This document which you do have and can be posted in the public record is quite critical in that

we took the reported gene sequence which was reportedly isolated as a novel coronavirus indicated as such as the by the ICTV the International Committee on Taxonomy of viruses of the World Health Organization. We took the actual genetic sequences that were reportedly novel, and reviewed those against the patent records that were available as of the spring of 2020.

6. DM: **What we found, as you'll see in this report, are over 120 patented pieces of evidence to suggest that the declaration of a novel coronavirus was actually entirely a fallacy; that there was no novel coronavirus.** There are countless very subtle modifications of coronavirus sequences that have been uploaded but there was no single identified novel coronavirus at all. As a matter of fact, we found records in the patent records of sequences attributed to novelty going to patents that were sought as early as 1999. **Not only was this not novel anything, it has not been novel for over two decades.**

7. MINUTE MARKER 5:40

8. DM: But let's let's take a very short um and and, and, what I'll do is I'll take you on a very short journey through the patent landscape to make sure people understand what happened. But as you know, up until 1999 the topic of coronavirus, vis-a-vis the patenting activity around coronavirus, was uniquely applied to veterinary sciences. **The first vaccine ever patented for coronavirus was actually sought by Pfizer.** The application for the the, the first vaccine for coronavirus, **specifically this s-spike protein**, so the exact same thing that allegedly we have rushed into invention the application first was filed on **January 28, 2000**, twenty-one years ago. The idea that we mysteriously stumbled on the way to intervene with vaccines is not only ludicrous, it is incredulous.

9. DM: Because Timothy Miller, Sharon Klepfer, Albert Paul Reed, and Elaine Jones on January 28, 2000 filed what ultimately was issued as U.S. patent 6372224, which was the spike protein virus, a vaccine for the canine coronavirus which is actually one of the multiple forms of coronavirus. But as I said, the early work up until 1999, was largely focused in the area of vaccines for animals. The two animals receiving the most attention were probably Ralph Baric's work on rabbits, and the rabbit cardiomyopathy that was associated with significant problems among rabbit breeders, and then canine coronavirus in Pfizer's work to identify how to develop S and spike protein vaccine target candidates. **Giving rise to the obvious evidence that says that neither the coronavirus concept of a vaccine nor the principle of the coronavirus itself as a pathogen of interest with respect to the spike protein's behavior is anything novel at all. As a matter of fact, it's twenty-two years old based on patent filings.**

10. MINUTE MARKER 8:32

11. DM: What's more problematic, what is actually the most egregious problem is that

Anthony Fauci and NIAID found the malleability of coronavirus to be a potential candidate for HIV vaccines. **So, SARS is actually not a natural progression of a zoonetic modification of coronavirus.**

12. DM: As a matter of fact, very specifically, in 1999, Anthony Fauci funded research at the University of North Carolina, Chapel Hill specifically to create and you cannot, you cannot, help but, but you know lament, what I'm about to read because it come directly from a patent application filed on April 19, 2002. And you heard the date correctly, 2002. **Where the NIAID built, "an infectious replication defective coronavirus" that was specifically targeted for human lung epithelium. In other words, we made SARS and we patented it on April 19, 2002 before there was ever any alleged outbreak in Asia which as you know followed that by several months.**

13. MINUTE MARKER 10:15

14. DM: That patent issued as U.S. patent 7279327, that patent clearly lays out in very specific gene sequencing the fact that we knew that the ACE receptor, the ACE2 binding domain, the S1 spike protein, and other elements of what we have come to know as this **scourge pathogen was not only engineered, but could be synthetically modified in the laboratory using nothing more than gene sequencing technologies, taking computer code and turning it into a pathogen or an intermediate of the pathogen.** And that technology was funded exclusively in the early days as a means by which we could actually harness coronavirus as a vector to distribute HIV vaccine. I'll let you translate that, cause that's a lot of material.

15. RF: Okay

16. MINUTE MARKER 11:34

17. DM: It gets worse. We were, my organization was asked to monitor biological and chemical weapons treaty violations in the very early days of 2000. You will remember the Anthrax events in September of 2001 and we were part of an investigation that gave rise to the congressional inquiry into not only the Anthrax origins, but also into what was unusual behavior around Bayer's ciprofloxacin drug, which was a drug used as a potential treatment for Anthrax poisoning. **And throughout fall of 2001, we began monitoring an enormous number of bacterial and viral pathogens that were being patented through NIH, NIAID, US AMRID, the US Armed Services Infectious Disease program, and a number of other agencies internationally that collaborated with them.** And our concern was that coronavirus was being seen as not only a potential manipulable agent for potential use as a vaccine vector, but **it was also very clearly being considered as a biological weapon candidate.**

18. DM: And so, our first public reporting on this took place prior to the SARS outbreak in

the latter part of 2001. So, you can imagine how disappointed I am to be sitting here 20 years later, having 20 years earlier pointed that there was a problem looming on the horizon with respect to coronavirus. But after the alleged outbreak and I'm, I will always say alleged outbreak because I think it's important for us to understand that coronavirus as a circulating pathogen inside of the viral model that we have is actually not new to the human condition and is not new to the last two decades. It's actually been part of the sequence of proteins that that circulated for quite a long time. But the alleged outbreak that took place in China in 2002 and going into 2003, gave rise to a very problematic April 2003 filing by the United State Center for Disease Control and Prevention. And this topic is of critical importance to get the nuance very precise because in addition to filing the entire gene sequence, on what became SARS coronavirus, **which is actually a violation of 35 US Code Section 101**. You cannot patent a naturally occurring substance. The 35 US Code Section 101 violation was patent number 7220852. Now that patent also had a series of derivative patents associated with it. These are are patent applications were broken apart because they were of multiple patentable subject matter. But these include U.S. patent 46592703P, which is actually an interesting designation. U.S. patent 776521 that is 776521, **these patents not only covered the gene sequence of SARS coronavirus but also covered the means of detecting it using rtPCR.**

19. MINUTE MARKER 15:58

20. DM: Now the reason why this is a problem is because **if you actually both own the patent on the gene itself, as well as the patent on its detection, you have a cunning advantage to being able to control 100% of the provenance of not only the virus itself but also its detection, meaning you have entire scientific and message control**. And this patent sought by the CDC was allegedly justified by their public relations team as **being "sought so that everyone would be free to be able to research coronavirus." The only problem with that statement was, is it's a lie.** The patent office not once but twice rejected the patent on the gene sequence as unpatentable, because the gene sequence was already in the public domain. In other words, **prior to CDC's filing for a patent, the patent office found "99.9 % identity" with the already existing coronavirus recorded in the public domain.**

21. DM: **Over the rejection of the patent examiner, and after having to pay an appeal fine in 2006 and 2007, the CDC overrode the patent office's rejection of their patent and ultimately in 2007 got the patent on SARS coronavirus.** Though every public statement that CDC has made that said that this was in the public interest, is **falsifiable by their own paid bribe to the patent office.** This is not something that's subtle, and to make matters worse they paid an additional fee to keep their application private. Last time I checked if you're **trying to "make information available for the public research" why would you not pay a fee to keep the information private**.

22. DM: **I wish I could have made up anything I just said but all of that are available in the**

public patent archive record which any member of the public can review and the public pair as it's called at the U.S. patent office has not only the evidence but the actual documents which I have in my possession.

23. MINUTE MARKER 18:36

24. DM: Now this this is critically important. **It's critically important because "fact checkers" have repeatedly stated that the novel coronavirus designated as SARS CoV 2 is in fact distinct from the CDC patent. And here's both the genetic and the patent problem; If you look at the gene sequence that is filed by the CDC in 2003, again in 2005, and then again in 2006. What you find is identity in somewhere in between 89% to 99% of the sequence overlaps that have been identified in what's called the novel subclade of SARS CoV 2.** What we now know is that the core designation of SARS coronavirus which is actually the clade of the beta coronavirus family and the subclade that has been called SARS CoV 2 have to overlap from a taxonomy point of view. You cannot have SARS designation on a thing, without it first being SARS. So the the disingenuous "fact checking" that has been done **saying that somehow or another that the CDC has nothing to do with this particular patent, or this particular pathogen is beyond both the literal credibility of the published sequences** and it's also beyond credulity when it comes to the ICTV taxonomy; because it very clearly states that this is in fact a subclade of the clade called SARS coronavirus.

25. MINUTE MARKER 20:28

26. DM: Now what's important is on the **28th of April**, and listen to the date very carefully because this date is problematic. **Three days after CDC filed the patent on the SARS coronavirus in 2003, three days later Sequoia Pharmaceuticals, a company that was set up in Maryland. Sequoia Pharmaceuticals on the 28th of April 2003 filed a patent on "anti-viral agents of treatment and control of infections by coronavirus." CDC filed three days early and the treatment was available three days later.** Now just hold that thought for a second.

27. RF: Who is Sequoia Pharmaceuticals?

28. Well, there you go, that a good question because Sequoia Pharmaceuticals and ultimately **AB Links Pharmaceuticals became rolled into the proprietary holdings of Pfizer, Crucell, and Johnson and Johnson.**

29. RF: Wow

30. DM: So ask yourself a simply question, **how would one have a patent on a treatment for a thing that had been invented three days earlier?**

31. RF: Yea

32. DM: The April 28, 2003 patent 7151163 issued to Sequoia Pharmaceuticals has another problem. **The problem is it was issued and published before the CDC patent on coronavirus was actually allowed.** So, the degree to which the information could have been known by any means other than insider information between those parties is zero. **It is not physically possible for you to patent a thing, that treats a thing that had not been published because CDC had paid an additional fee to keep it secret.**

33. MINUTE MARKER 23:21

34. DM: **This is definition of criminal conspiracy, racketeering, and collusion. This is not a theory, this is evidence. You cannot have information in the future inform a treatment for a thing that did not exist.**

35. RF: This could well blow up into a RICO case ultimately.

36. DM: This is a RICO case, not could blow up into it, **it is a RICO case**. And the RICO **pattern which was established in April of 2003 for the first coronavirus was played out to exactly the same schedule with SARS CoV 2 show up**, **when we have Moderna getting the spike protein sequence by phone from the Vaccine Research Center at NIAID prior to the definition of the novel subclade. How do you treat a thing, before you actually have the thing?**

37. RF: Laughter

38. MINUTE MARKER 24:06

39. DM: Yea well, it's going to get worse here.

40. RF: Oh no, it can't get worse

41. DM: Oh it does, on June 5, 2008, which is an important date because it's actually around the time when **DARPA actively took an interest in coronavirus as a biological weapon. June 5, 2008, AB Links, which as you know now part of Sanofi, filed a series of patents that specifically targeted what we've been told is the "novel feature" of the SARS CoV 2 virus**. And you heard what I said, this is the **5th of June 2008**.

42. RF: They found what?

43. DM: **Specifically, they targeted what was called the poly basic cleavage site for SARS CoV, the novel spike protein, and the ACE2 receptor binding domain which is allegedly novel to SARS CoV 2. All of that were patented on June 5, 2008, and those patents in**

sequence were issued between November 24th of 2015, which was U.S. patent 9193780, so that one came out **after the gain of function moratorium**, that one came after the MERS outbreak in the middle east, but what you find is that then 2016, 2017, 2019, a series of patents all covering not only the RNA strands but also the sub components of the gene strands were issued to AB Links and Sanofi. And then we have Crucell and Rubio Therapeutics, Children's Medical Corporation, we have countless others that include Ludwig Maximilians Universitat in Munchen, Protein Science Corporation, Dana-Farber Cancer Institute, University of Iowa, University of Hong Kong, and the Chinese National Genome genome center in Shanghai, all identifying in patent filings that ranged from 2008 until 2017, **every attribute that was allegedly uniquely published by the single reference publication, "*The novel bat coronavirus reveals natural insertions at the S1, S2, ACE2 cleavage site of the spike protein and possible recombinant 3 origin of the SARC CoV 2 virus*".** The paper that has been routinely used to identify the novel virus, unfortunately, **if you actually take what they report to be novel you find 73 patents issued between 2008 and 2019, which have the elements that were allegedly novel in the SARS CoV2.** Specifically, as it relates to the poly basic cleavage site, the ACE2 receptor binding domain and the spike protein. So, the clinically novel components of the clinically unique, clinically contagious, you know where I'm going with this. **There was no outbreak of SARS because we had engineered all of the elements of it and by 2016. The paper that was funded during the gain of function moratorium that said that the SARS coronavirus was "poised for human emergence", written by Ralph Baric, was not only poised for human emergence but it was patented for commercial exploitation - 73 times.**

44. RF: Didn't Ralph Baric in a video clip said to his audience that you can make a lot of money with this.

    DM: Yes, you can and he has made a lot of money doing this.

45. MINUTE MARKER 29:14

46. DM: So, for those who want to live in the illusion that somehow or another that's the end of the story, be prepared for a greater disappointment because somebody knew something in 2015 and 2016 which gave rise to my favorite quote of this entire pandemic. And by that I'm not being cute my favorite quote of this pandemic was a statement made in 2015 by Peter Daszak.

47. MINUTE MARKER 29:48:00

48. DM: **The statement that was made by Peter Daszak in 2015 reported in the National Academies of Press publication on February 12, 2016** who said, and I'm 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 profit at the end of the process."

49. VF: That's quite shocking because I thought

50. DM: Let me let me just read that again just because I don't know if I might get lost in translation, so let me just go ahead and read it slowly, yeah when speaking to a multilingual audience maybe I should say it louder and as Americans love to do.

51. DM: **"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 profit at the end of the process."**

52. VF: That's really I mean Peter Doshi wasn't he the one who

53. RF: No, no, no, Peter Daszak, Peter Doshi is the good guy

54. DM: **Peter Daszak the head of EcoHealth Alliance.**

55. RF: No, no, Peter Doshi is the good guy

56. MINUTE MARKER 31:36:00

57. DM: **Peter Daszak, the person who was independently corroborating the Chinese non-lab leaked non-theory because there wasn't a lab leak this was an intentional bioweaponization of spike proteins to inject into people to get them addicted to a pan coronavirus vaccine.** This has nothing to do with a pathogen that was released and every study that's ever been launched to try to verify **a lab leak is a red herring.**

58. VF: **And there's really nothing that is new, in this**

59. DM: **Nothing zero. 73 patents on everything clinically novel. 73 all issued before 2019 and I'm going to give you the biggest bombshell of all to prove that this was actually not a release of anything. Because patent 7279327 the patent on the recombinant nature of that lung targeting coronavirus, was transferred mysteriously from the University of North Carolina Chapel Hill to the National Institutes of Health in 2018.**

60. DM: Now here's the problem with that. Under the Bayh Dole Act, the U S Government already has what's called a March in Right Provision. That means if the U S Government has paid for research, they are entitled to benefit from that research at their demand or at their whim.

61. DM: So, explain why in 2017 and 2018 suddenly the National Institutes of Health have to take ownership of the patent that they already had rights to held by the University of North Carolina Chapel Hill. And how did they need to file a certificate of correction to make sure that it was legally enforceable because there was a typographical error in the grant reference in the first filing. So they needed to make sure that not only did they get it right but they needed to make sure every typographical error that was contained in the patent was correct on **the single patent required to develop the Vaccine Research Institute's mandate, which was shared between the University of North Carolina Chapel Hill in November of 2019 and Moderna in November of 2019 when UNC Chapel Hill, NIAID, and Moderna began the sequencing of a spike protein vaccine. A month before an outbreak ever happened.**

62. RF: You have all the evidence right yeah?

63. DM: So that's why my focal isn't it I don't have to read it again

64. RF: No, you speak German huh?

65. DM: Yeah.

66. MINUTE MARKER: 34:50

67. RF: So, it's all about money?

68. DM: It has always been about money and just to answer a question that was asked slightly earlier. **The script for this was written first January 6, 2004**.

69. RF: January 6, 2004? Who wrote the script?

70. DM: **MERCK. At a conference called SARS and Bioterrorism. Bioterrorism emerging infectious diseases antimicrobials therapeutics and immune modulators. MERCK introduced the notion of what they called, "The New Normal", proper noun. The new normal which is the language that became the branded campaign that was adopted by the World Health Organization**, the Global Preparedness Monitoring Board, which was the board upon, **which the Chinese director of Center for Disease Control, Bill Gates's Dr. Elias of the Gates Foundation and Anthony Fauci sat together on that board of directors but the the first introduction of "The New Normal" campaign which was about getting people to accept a universal pan influenza, pan coronavirus vaccine was actually adopted January 6 2004**. So, it's been around quite quite a long time.

71. DM: I'm not going to belabor many more points other than to say that it was very clear

that MERCK knew that. Sorry that **Moderna knew that it was going to be placed in the front of the line with respect to the development of a vaccine in March of 2019.** And this is a very important date. Because in March of 2019, for reasons that are not transparent, they suddenly amended a series of rejected patent filings. Which was a very bizarre behavior. But they amended a number of patent filings to specifically make reference to an "intentional or accidental release." I'm sorry **their term, "deliberate release of coronavirus."** So, in March, they amended four failed patent applications to begin the process of a coronavirus vaccine development and they began dealing with a very significant problem that they had, which was they relied on technology that they did not own. Two Canadian companies, Arbutus Pharmaceuticals and Accuitis Pharmaceuticals, actually own the patent on the lipid nanoparticle envelope that's required to deliver the injection of the mRNA fragment. And those patents have been issued both in Canada and in the US and then around the world in their world intellectual property equivalents. Moderna knew that they did not own the rights and began trying to negotiate with Arbutus and Accuitis to get the resolution of the lipid nanoparticle patented technology available to be put into a vaccine. And we know, as I made reference to before, that **in November they entered into a research and cooperative research and development agreement with UNC Chapel Hill with respect to getting the spike protein to put inside of the lipid nanoparticle. So that they actually had a candidate vaccine, before we had a pathogen allegedly that was running around.**

72. MINUTE MARKER 39:00

73. DM: What makes that story most problematic, beyond the self-evident nature of it, is that we know that from 2016 until 2019, at every one of the NIAID Advisory Council board meetings, **Anthony Fauci lamented the fact that he could not find a way to get people to accept the universal influenza vaccine** which is what was his favorite target. He was trying to get the population to engage in this process. And what becomes very evident with Peter Daszak, with Ecohealth Alliance, UNC Chapel Hill and others. And then most specifically by **March of 2019** in the amended patent filings of Moderna, we see that there is a epiphany that says, **"What if there was an accidental or an intentional release of a respiratory pathogen?**

74. DM: And what makes that particular phrase problematic is it is exactly **recited in the book, "*A World At Risk*", which is the scenario that was put together by the World Health Organization in September of 2019. So, months before there's an alleged pathogen, which says that we need to have a coordinated global experience of a respiratory pathogen release, which by September 2020, must put in place a universal capacity for public relations management, crowd control, and the acceptance of a universal vaccine mandate. That was September of 2019. And the language of an intentional release of a respiratory pathogen was written into the scenario that quote must be completed by September 2020.**

75. RF: This was the text where Mrs. Brundtland was heading this commission. Isn't it?

76. DM: Well, this is the **Global Preparedness Monitoring Board's unified statement**. There are a number of people who have taken credit and then backed away from credit for it. But yes. you're right.

77. WW: I am right too when I say that also the ACE2 receptor, that it was already described in the patents before 2019.

78. DM: **Yes, we have 117 patents with specifically the ACE2 receptor targeting mechanism for SARS coronavirus.**

79. WW: So, because they always say this is the new thing with the virus.

80. DM: No, it's not new and it has not been even remotely new. It's in publications going back to 2008 in the weaponization conferences that took place in Slovenia in Europe, all across Europe and all across, the DARPA infrastructure. We've known about that since 2013, its isolation and amplification.

81. VF: And this, the amendment that MERCK did to this, the rejected patents applications, so, is was it only about the fact that it's like deliberately, you know like put into the environment or something or did they add anything else?

82. DM: Well, so these were fake there were four failed patent applications that were essentially revitalized in March of 2019. And it was Moderna. I misspoke. I spoke about MERCK. it was Moderna and I tried to correct that I'm sorry that that didn't come through. But it's **Moderna's patent applications that were amended in March of 2019 to include the deliberate release of a respiratory pathogen language.**

83. VF: Was those had not been rejected for some reason they were just not they were just sitting there basically?

84. DM: No, they, they, they do processes similar to other pharmaceutical companies where they ever green applications and continually modify, modify applications to enjoy the earliest priority dates available but that's why you have to go back and look at the amendment of the application records to find out when the actual amendment language was put in place. But yes, I mean the the fact of the matter is and like I said I'm not going to belabor all of the patent data but, **but any assertion that this, this pathogen is somehow unique or novel falls apart on the actual gene sequences which are published in the patent record. And then more egregiously falls apart in the fact that we have Peter Daszak himself stating that we have to create public hype to get the public to accept the medical countermeasure of a pan coronavirus vaccine.** And what makes that most ludicrous is the fact that as we know **World Health Organization had declared coronavirus a a you know**

kind of a a dead, a dead interest. I mean they, they said that that we had eradicated coronavirus as a concern, so why having eradicated it in 2007 and 2008, **why did we start spending billions of dollars globally on a vaccine for a thing that had been eradicated by declaration in 2008?** You know kind of kind of falls into the zone of incredulity to say the least.

85. RF: Doesn't that also mean if you, if you, if you take the entirety of the evidence, then this is a tool the corona virus and the vaccines. **This is a tool and the interest of DARPA in creating a biological weapon out of this, this is a tool for everything else that latches on to this including population control for example.**

86. MINUTE MARKER 45:15

87. DM: Well, listen this this we have to stop falling for even the mainstream narrative in our own line of questioning because the fact of the matter is this was seen as a highly malleable bioweapon. **There is no question that by 2005 it was unquestionably a weapon of choice.** And the illusion that we continue to unfortunately see very well-meaning people get trapped in is conversations about whether we're having a vaccine for a virus. The fact of the matter is we're not. **We are injecting a spike protein mRNA secret mRNA sequence which is a computer simulation. It's not derived from nature.** It's a computer simulation of a sequence **which has been known and patented for years.** And what we know is that that sequence as reported is reported across things, like you know, the very reliable phone conversations that took place between Moderna and the Vaccine Research Center by self-report. Where I don't know if you were on a phone call and you heard "att c c g g t t c c g a b b b". You know is there any chance you might get "a a a" letter, a vowel, or a consonant dropped here or there. The, the, **the ludicrous nature of the story that this is somehow prophylactive or preventative flies in the face of a hundred percent of the evidence. Because the evidence makes it abundantly clear that there has been no effort by any pharmaceutical company to combat the virus. This is about getting people injected with the known to be harmful S1 spike protein.** So, the cover story is that if you get an expression of a spike protein, you're going to have some sort of general symptomatic relief, but the fact of the matter is there has never been an intent to vaccinate a population as defined by the vaccination universe. And it's important.

88. MINUTE MARKER 45:15

89. DM: I mean let's let's review just for the record. When **Anthony Fauci tried desperately to get some of his quote "synthetic RNA vaccines" published, he had his own patents rejected by the patent office.** And I want to read what the patent office told him when NIAID's own Anthony Fauci thought that he could get an mRNA-like vaccine patented as a vaccine and here's the quote.

90. DM: **"*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 it is not persuasive in regards to a vaccine*."**

91. DM: Okay. **This is the patent office. This is not some sort of public health agency. This is the patent office.** ***"The immune response produced by a vaccine must be more than merely some immune response but must also 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 definition for being operative. In regards therefore claims 5, 7, and 9 are not operative as the anti-HIV vaccine."* , which is what he was working on is not patentable utility. **So, Anthony Fauci himself was told by the patent office themselves, that what he was proposing as a vaccine does not meet the patentable standard the legal standard or the clinical standard.**

92. RF: I know that David I know a lot of our viewers are really shocked I can see that from the responses one of our viewers is uh our PCR test specialist Professor Camera she can't believe what's going on here.

93. MINUTE MARKER 49:56

94. DM: What's going on here well here here's this the sad and sober irony is that I raised these issues beginning in 2002, after the Anthrax scare. **And the tragedy is we are now sitting in a world where we have hundreds of millions of people who are being injected with a pathogen stimulating computer sequence. Which is being sold under what the patent office what the medical profession and what the FDA in its own clinical standards would not suggest is a vaccine** but by using the term **we actually are now subjecting hundreds of millions of people to what was known to be by 2005 a biological weapon.**

95. RF: Translates into German

96. MINUTE MARKER 51:45

97. DM: So, I have I obviously have hundreds of hours of of this stuff committed to memory because I've been doing it for two decades, but if you have any questions, I'd be happy to answer them.

98. RF: I'm sure they're going to be hundreds of questions David we're going to be in touch I think you're going to be flooded by people by people's emails etc. I'm just going to forward what comes in or we're going to forward what comes in, but I do think but oh yeah, we have Martin Schwab he probably has a really serious question.

99. MS: And after me Wolfgang too. Okay I'm a legal professor with the faculty of law here in Budapest and I have to tell you that the Constitutional Protection Unit of the Ministry of Interior Affairs observes the so-called corona denial scene corona denier is everyone who dares to disagree with the official line with the official line, Yes, if this constitutional protection unit takes notice of me taking part in discussion that this pandemic was put on stage intentionally they will probably try to fire me from my job so I have to at least ask some questions. While I heard you talking, I am I took a look at patent number what's which one was it 7220852 and 7151163, 7220852 was filed in 12-Apr and 715 and so on was filed in April 28 of 2004 I see a difference between 16 not three days what did I misunderstand?

100. DM: No April 23rd 2003 was the CDC master filing date

101. MS: Okay, okay I asked this question because if they try to make me redundant for my job I have to provide strong evidence.

102. DM: Now listen, we have all of this sent to, I know Dr. Fuellmich has the has the entire record in the Fauci Dossier 100% of this record is in there. The additional addendum that I sent across all has the records in there including all the priority filing dates as well as the issue dates so 100% of this is in written published records and you have the written records.

103. RF: Okay I have created my own file and it's labeled David Martin.

104. MS: Okay, okay I did an analysis of media reportings here and I can confirm that they give a very one-sided account on the pandemic. Everyone who dares to declare the threat less dangerous than the government does will be denounced as conspiracy theorists as tin foil and so on you know. So the media exactly did what you pointed out in the sentence you repeated twice before now. Actually, they tell us the story of the Delta variant which is told to be much more contagious that everything else. Experts I have spoken to told me that **the databases contain as many as more or 40 000 virus strains so could this could this Delta variant some kind of media hype you told us about before there.**

105. MINUTE MAKER 56:15

106. DM: **There is no such thing as an Alpha or a Beta or gamma Delta variant. This is a this is a means by which what is desperately sought a degree to which individuals can be coerced into accepting something that they would not otherwise accept. There has not been in any of the published studies on what has been reportedly the Delta variant. There has not been a population are not calculated which is the actual replication rate.**

107. DM: **What has been estimated are computer simulations but unfortunately, if you look at GISAID, which is the public source of uploading any one of a number of variations what you'll find is that there has been no ability to identify any clinically altered gene**

sequence which has then a clinically expressed variation. And this is the problem all along. **This is the problem going back to the very beginning of what's alleged to be a pandemic is we do not have any evidence that the gene sequence alteration had any clinical significance whatsoever. There has not been a single paper published by anyone that has actually established that anything novel since November of 2019 has clinical distinction from anything that predates November of 2019. The problem with the 73 patents that I described, is that those 73 patents all contain what was reported to be novel in December and January of 2019 and 2020 respectively. So, the problem is, that even if we were to accept that there are idiopathic pneumonias. Even if we were to accept that there are some set of pathogen-induced symptoms. We do not have a single piece of published evidence that tells us that anything about the subclade SARS CoV 2 has clinical distinction from anything that was known and published prior to November 2019 in 73 patents dating to 2008.**

108. VF: But could it be that the Delta variant sort of is that just the difference is you know that the clinical symptoms are the same, but that it has the the you know the capability of like infecting someone who'd already gone, who's already gone through like variant B better well.

109. DM: **So, this is where we see an enormous amount of response and reflexive behavior to media hype. There is no and I'm going to repeat this there is no evidence that the Delta variant is somehow distinct from anything else on GISIAD.** The fact that we are now looking for a thing doesn't mean that it is a thing, because we are looking at fragments of things and the fact is that if we choose any fragment, I could come up with you know I could come up with variant omega tomorrow. Yes and I could come up with variant omega and I could say I'm looking for this sub strand of either DNA or RNA or even a protein and I could run around the world going, "oh my gosh, fear the omega variant" and the problem is that because of the nature of the way in which we currently sequence genomes, which is actually a compositing process, it's what we'd call in mathematics an interleaving, we don't have any point of reference to actually know whether or not the thing we're looking at is in fact distinct from either clinical or even genomic sense.

110. DM: And so, we're trapped in a world where unfortunately if you go and look as I have at the papers that isolated the Delta variant and actually asked the question, **"Is the Delta variant anything other than the selection of a sequence in a systematic shift of an already disclosed other sequence?" The answer is it's just an alteration in when you start and stop what you call the reading frame. There is no novel anything.** Yes, Wolfgang.

111. RF: I'll make a long story very short he's, he's in full agreement with your analysis. He understands your anguish with respect to you having told the world about these 20 years ago almost and he admires your tenacity. And he's extremely grateful for you having taken this very close look at the problem through patent law. It's Dr. Vodak believes that patents are

really problematic because it turns out that it is probably five times more expensive to patent drugs as opposed to having public, I mean not public private but public universities getting the stipends getting the money that they need in order to develop these vaccines.

112. DM: Yeah, let me I'm going to do something that's very unfair but I'm going to hold the document very close to the screen and it's only for representational purposes but I want you to see that this. This is the Baric patent that NIH needed to have returned to them for mysterious reasons in 2018. This is 7279327 people can look this up on their own. But if you actually look at the sequences that are patented, which is one of the things that we've done. We actually look at the published sequences and realize that depending on where you clip the actual sequence string, you will have the same thing or you'll have a different thing based nothing more than on where you decide to parse the clip. I want to read you, I mean this is something that comes directly from their patent application. **When they actually talk about the DNA strands, which they call sequence id numbers, they actually specifically say the "organism is an artificial sequence an artificial sequence"** meaning that it is not a sequence that has a rule base in nature. It is not something that was manifest for a particular natural derivative protein or natural derivative mRNA sequence that was isolated. Every one of these is in fact a synthetic artificial sequence. And if you go back and you look at each one of them, which we have done what you'll find is that the sequences in fact are contiguous in many instances but are overlapping in others. Where it is merely a caprice determination that says something is or is not part of an open reading frame or it is or is not part of a particular oligonucleotide sequence.

113. DM: Now the reason why that's important is because if we are going to examine what ultimately is being injected into individuals, we need the exact sequence not a kind of, similar to. We need the exact sequence and if you look at the FDA's requirement and if you look at the European regulatory environment and if you look at the rest of the world's regulatory environment for reasons that cannot be explained **the exact sequence that has gone into what is amplified inside of the injection seems to be elusive**. **It seems to be something that someone cannot in fact state with a hundred percent the sequence is x.** The problem that that presents is that at this point in time as much as we can be told that there are you know clinical trials going on and there are all sorts of other things going on we have no way of verifying that a complete sequence has been is or potentially even could be manufactured into what ultimately becomes the lipid nanoparticle that is the carrier frequency into which the injection is delivered. And it's important for people to understand that as far back as 2002, and all the way through the patent filings of 2003, and then the weaponization patents that began in 2008, in every one of these instances, fragments are identified, but they are identified without specificity. So, we don't have direct terminal ends of the fragments. We have fragments which have you know essentially hypothecated gaps into which anything can be placed. And that's the reason why I find the fact checking around the patent situation to be most disappointing because the reason why fact checkers among their general lazy attributes the reason why fact checkers are not actually checking facts, when it comes to the

patent matters, is because the actual sequences are not represented in a digital form that makes it easy to do this comparison. We literally had to take images of submitted typed paper and then code those in to do our own assessment. You cannot do this on the EPOS patent site. You cannot do this with WIPO data from Geneva. You cannot do this with the US Patent Office data. You actually have to go in and reconstruct the actual gene sequences by hand and then you compare them to what has been uploaded on the public servers and that's where you find that the question of novelty is something that was not addressed. **This was a manufactured illusion.**

114. MINUTE MARKER 1:07:47

115. WW: I had one more question is it possible that we have we see that the **influenza has vanished. Is gone.** We don't have influenza anymore. The influenza for sure is the viruses are also sequenced and is it possible that those, that those parts sequences we now speak about that they may they may exist in in both of the virus type so that it's just a matter of testing and matter of instruments to observe, What we find whether we find influenza or whether we find corona. If we if we have a certain if you have a book you have a word with five letters, and you will find this five letters in many books right.

116. DM: Exactly and yeah, Wolfgang your question is a beautiful metaphor of exactly the problem. The problem is if what we're looking for is something we've decided we've decided is worth looking for then, we'll find it. And the good news is we'll find it a bunch of places. And if we've decided that we're no longer looking for a thing it's not entirely surprising that we don't find it because we're not looking for it. The fact of the matter is whether it's the rtPCR tests that we decided that there are fragments, Which by the way I have looked at every one of the regulatory submissions that has been submitted to the FDA to try to figure out what was the gold standard to get the Emergency Use Authorization and what fragment of SARS Cov2 was officially the official fragment that was the comparator standard. And the problem is that you can't get a single standard. So, the question becomes in a world where there is no single standard, what is it that you actually find? Because if I'm looking for and why don't I just read this if I'm looking for c c a c g c t t t g. Do I add the next strand g or do I go no, no, no the next bit is g t t t a g t t c g and you get the point. The point is that where I choose to start and stop, I can actually say I found it! Oh, I didn't find it yeah and and I didn't find the match that I projected onto the data because I chose to look at the data in a way that I could not find the match. **Influenza did not leave the human population. Influenza was a failed decade-long pan-influenza vaccine mandate that was desperately, desperately, desperately promoted by governments around the world. <u>They failed and they decided if influenza doesn't deliver on the public promise of getting everybody to get an injection, let's change the pathogen.</u>**

117. RF: There are many more they can change.

118. DM: Oh goodness we've got tons more to come.

119. RF: Yes, but now we're on to them.

120. MINUTE MARKER 11:11:11

121. VF: I would like to tell you something about this development of the Drosden PCR test. You know because we looked at it, I mean just briefly not to that extent that you now looked at the patents that you just described, but we looked at this kind of miracle or like I mean strange aspect of like the Drosden test development. Because he in in despite the fact that he would have needed to basically through his employer, the charity who would be entitled to holding the patents on this you know his invention. **He just published the instruction to the vehicle so everyone could see it so basically the whole invention lost its you know the possibility to be patented.** And that's kind of strange you know when you look at it. So, we asked the charity in a freedom of information act request. And so, they said well you know, because it there was so much rush to get the you know this the test out, because there was this pandemic going on, so it was like we didn't look at the finances you know we just didn't care. So that's kind of strange as a procedure because I mean basically this this test is worth like billions. You know how could you just I mean this is a publicly financed hospital. How can they just give you know give away all this this whole thing. And then because he was also in close cooperation with the private company TIB Molbiol, it's the same with which he had developed all the PCR tests from 2002 from the first size and the mass sticker and so on and so on. So, it's very strange you know because he was basically like functioning as a door opener for this company you know because they also said to us. So basically it was Drosden who decided to which possible country or like laboratory or whatever the test this you know TIB Molbiol company would send out the test kits. In order to then of course make more money because he was basically like he had a first mover advantage you now Drosden and or this company. So, it's clear now I mean maybe there was nothing at that point because there was so many patterns already going on. So, basically from this not novel virus or PCR test. He couldn't patent anything that would have been new. So basically, was really like a very logical to thing to do then to use the whole thing as a just to you know make profit from this first mover advantage and maybe Drosden is somehow involved in this whole legal.

122. RF: He's one of the most important people in this scheme because he's the one who's whose strings they pulled first.

123. DM: **Yeah, you need you need to create the illusion of demand and there is nothing right now that does a better job of creating the illusion of demand than the urgency of an event that you've manufactured.**

124. RF: [Laughter] this sounds almost like comedy but it is not.

125. DM: Well, it is in that we have to realize that part of the reason why it was so easy for us to monitor and track this particular you know campaign of coercion and terror was because we've done it before. You know I started my comments by making sure people remember that when it came to solving for the Anthrax outbreak. Now remember that while we had hundreds of thousands of military people in the Middle East allegedly getting even for the events of September of 2001. We had two postal inspectors investigating Anthrax. Two. **The largest alleged bioweapons attack on US soil and we had two postal inspectors.** You can't genuinely believe that two postal inspectors are the you know the crime stopping you know mind bendingly powerful individuals in the universe. Now I have nothing against postal inspectors, but I can guarantee you that if I was investigating a bioterror attack, I would not have the post office having two postal inspectors as their crack team doing the investigation. **You know it was disingenuous and Congress knew it.** And that's the reason why you know, we publish a thing that's that that is not necessarily a bestseller but we publish an intelligence briefing on every violation of the biological and chemical weapons treaties that people have signed around the world. And it's a phone book that tells you where and who and who's funding. And so for us it wasn't hard to figure out that **this was not a public health crisis this was an opportunistic marketing campaign to address a stated objective.** And that's why this is Occam's Razor, it's the easiest thing to describe because they're the ones that said it and the Occam's Razor reality is they said, **"they needed to get the public to accept a pan coronavirus vaccine counter measure and they needed the media to create the hype and investors would follow where they see profit."** You do not have anything else you need to rely on to explain the events of the last 20 months, then the actual statement of the actual perpetrator. And I don't do the naval gazing exercise of going in to try to understand whether there were mommy issues behind a bank robber if they're holding a bag of money outside of a bank, I actually make the crazy assumption that maybe they're a bank robber. Similarly, **if I have somebody who says we need to use the media to hype a medical countermeasure which is in fact the injection of a synthetic recombinant chimeric protein developed off of a computer simulation, if I'm actually going to listen to the motivation for why that might be being done, I will listen to the person doing the manipulation who says, "Investors will follow where they see profit."** I don't need more explanation.

126. RF: Me neither okay this is mind-boggling. I'm really glad David that we spoke a couple of months ago maybe three four months ago. We were introduced to each other by David I'm, I'm sorry um James Henry right. And I was trying to find patent lawyers in this country who might be interested in this case. Now there are a few patent lawyers who understand about it but there's no one apparently up till now but maybe this is going to change. But there was no one willing to tackle this in the context of corona. That's the problem.

127. WW: But this is not new I've tried to find such a lawyer too specialized on patents for the commission for the German Bundestag some 10 years ago of more than 15 years ago and

we did not find because they were all afraid to be critical on the system.

128. DM: Yes

129. WW: They wouldn't be they would be distracted they would destroy their own job. This was very difficult

130. DM: Yeah, bear in mind bear that this is an old problem. Because the where the problem comes in. Ever since the establishment of the European patent office the Germans and the French not surprisingly have maintained animosity. That has you know been just this newest version of animosity that goes back centuries but when the EPO was set up the role of the patent office in Munich became a very nationalistic issue for Germany. And the notion that German patent examiners and German patent professionals still enjoyed supremacy over the rest of Europe became dogmatic. In 2003 and 2004 when the European patent office was first audited by my organization, and where **we showed that somewhere between 20 and 30 percent of the patents in Europe were functional forgeries, meaning that they were copied from previous patents.**

131. DM: The German representation of the European patent office lost their mind at the notion that they were doing anything remotely wrong. When the European union commissioned us to do an examination into software patents a few years later, at the request of the Swedish delegation, to the European Union and we showed hundreds and hundreds of software patents which were illegally granted by the European Union through the EPO and then we found out that it was German patent examiners and German patent practitioners who were the ones who were responsible for their filing. We once again saw that there was an enormous outcry. And so what happens is that we have a dogmatically held position, which says that even though the European patent office is supposed to be pan-European there is still in the minds of the German patent establishment a supremacy over the rest of Europe. And if you call into question anything including patents granted on a bio weapon you are treading on ground that there is no forgiveness for.

132. WW: Yes, we have we had some questions from transparency international and we were wiped out the topic was not followed.

133. DM: Yep, you just can't it's not it's not accessible and that's just the tragedy of what has unfortunately become a captured a regulatory capture organization. It's actually not doing the public service well thank you thank you for the time that you've spent and I hope that it was helpful it was very helpful thank you very much we're going to hear a lot of echoes thank you David and have a great weekend okay take care everybody.
Yeah, you too bye-bye

The Fauci/COVID-19 Dossier

This document is prepared for humanity by Dr. David E. Martin.

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Background:

Over the past two decades, my company – M·CAM – has been monitoring possible violations of the 1925 Protocol for the Prohibition of the Use in War of Asphyxiating, Poisonous, or other Gases, and of Bacteriological Methods of Warfare (the Geneva Protocol) 1972 Convention on the Prohibition of the Development, Production, and Stockpiling of Bacteriological and Toxin Weapons and Their Destruction (the BTWC). In our 2003-2004 ***Global Technology Assessment: Vector Weaponization*** M·CAM highlighted China's growing involvement in Polymerase Chain Reaction (PCR) technology with respect to joining the world stage in chimeric construction of viral vectors. Since that time, on a weekly basis, we have monitored the development of research and commercial efforts in this field, including, but not limited to, the research synergies forming between the United States Centers for Disease Control and Prevention (CDC), the National Institutes for Allergies and Infectious Diseases (NIAID), the University of North Carolina at Chapel Hill (UNC), Harvard University, Emory University, Vanderbilt University, Tsinghua University, University of Pennsylvania, many other research institutions, and their commercial affiliations.

The National Institute of Health's grant AI23946-08 issued to Dr. Ralph Baric at the University of North Carolina at Chapel Hill (officially classified as affiliated with Dr. Anthony Fauci's NIAID by at least 2003) began the work on synthetically altering the *Coronaviridae* (the coronavirus family) for the express purpose of general research, pathogenic enhancement, detection, manipulation, and potential therapeutic interventions targeting the same. As early as May 21, 2000, Dr. Baric and UNC sought to patent critical sections of the coronavirus family for their commercial benefit.[1] In one of the several papers derived from work sponsored by this grant, Dr. Baric published what he reported to be the full length cDNA of SARS CoV in which it was clearly stated that SAR CoV was based on a composite of DNA segments.

> *"Using a panel of contiguous cDNAs that span the entire genome, we have assembled a full-length cDNA of the SARS-CoV Urbani strain, and have rescued molecularly cloned SARS*

[1] U.S. Provisional Application No. 60/206,537, filed May 21, 2000

viruses (infectious clone SARS-CoV) that contained the expected marker mutations inserted into the component clones."[2]

On April 19, 2002 – the Spring before the first SARS outbreak in Asia – Christopher M. Curtis, Boyd Yount, and Ralph Baric filed an application for U.S. Patent 7,279,372 for a method of producing recombinant coronavirus. In the first public record of the claims, they sought to patent a means of producing, "an infectious, replication defective, coronavirus." This work was supported by the NIH grant referenced above and GM63228. In short, the U.S. Department of Health and Human Services was involved in the funding of amplifying the infectious nature of coronavirus between 1999 and 2002 ***before SARS*** was ever detected in humans.

Against this backdrop, we noted the unusual patent prosecution efforts of the CDC, when on April 25, 2003 they sought to patent the SARS coronavirus isolated from humans that had reportedly transferred to humans during the 2002-2003 SARS outbreak in Asia. 35 U.S.C. §101 prohibits patenting nature. This legality did not deter CDC in their efforts. Their application, updated in 2007, ultimately issued as U.S. Patent 7,220,852 and constrained anyone not licensed by their patent from manipulating SARS CoV, developing tests or kits to measure SARS coronavirus in humans or working with their patented virus for therapeutic use. Work associated with this virus by their select collaborators included considerable amounts of chimeric engineering, gain-of-function studies, viral characterization, detection, treatment (both vaccine and therapeutic intervention), and weaponization inquiries.

In short, with Baric's U.S. Patent 6,593,111 (Claims 1 and 5) and CDC's '852 patent (Claim 1), no research in the United States could be conducted without permission or infringement.

We noted that gain-of-function specialist, Dr. Ralph Baric, was both the recipient of millions of dollars of U.S. research grants from several federal agencies but also sat on the World Health Organization's International Committee on Taxonomy of Viruses (ICTV) and the *Coronaviridae* Study Group (CSG). In this capacity, he was both responsible for determining "novelty" of clades of virus species but directly benefitted from determining declarations of novelty in the form of new research funding authorizations and associated patenting and commercial collaboration. Together with CDC, NIAID, WHO, academic and commercial parties (including Johnson & Johnson; Sanofi and their several coronavirus patent holding biotech companies; Moderna; Ridgeback; Gilead; Sherlock Biosciences; and, others), a powerful group of interests constituted what we would suggest are "interlocking directorates" under U.S. anti-trust laws.

These entities also were affiliated with the WHO's Global Preparedness Monitoring Board (GPMB) whose members were instrumental in the Open Philanthropy-funded global coronavirus pandemic "desk-top" exercise EVENT 201 in October 2019. This event, funded by the principal investor in Sherlock Biosciences and linking interlocking funding partner, the Bill and Melinda Gates Foundation into the GPMB mandate for a respiratory disease global preparedness exercise to be completed by September 2020 alerted us to anticipate an "epidemic" scenario. We expected to see such a scenario emerge from Wuhan or Guangdong China, northern Italy, Seattle, New York or a combination thereof, as Dr. Zhengli Shi and Dr. Baric's work on zoonotic transmission of coronavirus identified overlapping mutations in coronavirus in bat populations located in these areas.

This dossier is by no means exhaustive. It is, however, indicative the numerous criminal violations that may be associated with the COVID-19 terrorism. All source materials are referenced herein. An

[2] https://www.pnas.org/content/100/22/12995

additional detailed breakdown of all the of individuals, research institutions, foundations, funding sources, and commercial enterprises can be accessed upon request.

Contents

35 U.S.C. § 101

From Justice Clarence Thomas' opinion for the majority

Section 101 of the Patent Act provides: "Whoever invents or discovers any new and useful ... composition of matter, or any new and useful improvement thereof, may obtain a patent therefor, subject to the conditions and requirements of this title." 35 U.S.C. § 101.

We have "long held that this provision contains an important implicit exception[:] Laws of nature, natural phenomena, and abstract ideas are not patentable." Mayo, 566 U.S., at ___, 132 S.Ct., at 1293 (internal quotation marks and brackets omitted). Rather, "`they are the basic tools of scientific and technological work'" that lie beyond the domain of patent protection. Id., at ___, 132 S.Ct., at 1293. As the Court has explained, without this exception, there would be considerable danger that the grant of patents would "tie up" the use of such tools and thereby "inhibit future innovation premised upon them." Id., at ___, 132 S.Ct., at 1301. This would be at odds with the very point of patents, which exist to promote creation. Diamond v. Chakrabarty, 447 U.S. 303, 309, 100 S.Ct. 2204, 65 L.Ed.2d 144 (1980) (Products of nature are not created, and "`manifestations... of nature [are] free to all men and reserved exclusively to none'").[3]

In their majority opinion in 2013, the U.S. Supreme Court made it abundantly clear that the Court had "long held" that nature was not patentable. Merely isolating DNA does not constitute patentable subject matter. In their patent, the CDC made false and misleading claims to the United States Patent & Trademark Office by stating that, "A newly isolated human coronavirus has been identified as the causative agent of SARS, and is termed SARS-CoV."[4] No "causal" data was provided for this statement.

When they filed their patent application on April 25, 2003 their first claim (and the only one that survived to ultimate issuance over the objection of the patent examiner in 2006 and 2007) was the genome for SARS CoV.

While this patent is clearly illegal under 35 U.S.C. §101, not only did the CDC insist on its granting over non-final and final rejections, but they also continued to pay maintenance fees on the patent after the 2013 Supreme Court decision confirmed that it was illegal.

In addition, the CDC patented the detection of SARS CoV using a number of methods including reverse transcription polymerase chain reaction (RT-PCR). With this patent, they precluded anyone outside of their licensed or conspiring interest from legally engaging in independent verification of their claim that they had isolated a virus, that it was a causative agent for SARS, or that any therapy could be effective against the reported pathogen.

It is important to note that the CDC's patent applications were also rejected in non-final and final rejections for ineligibility under 35 U.S.C. § 102 for being publicly disclosed prior to their own filing. In the first non-final rejection, the USPTO stated that the CDC's genome was published in four Genbank accession entries on April 14, 18, and 21, 2003 with identity ranging from 96.8% to 99.9% identical

[3] ***Association for Molecular Pathology v. Myriad Genetics, Inc.***, 569 U.S. 576 (2013)
[4] U.S. Patent 7,220,852

sequences.[5] Dr. Fauci knew, and failed to disclose evidence that the CDC patent was illegal, based on work he had funded in the years leading up to the SARS outbreak.

After seeking an illegal patent, petitioning to override the decision of an examiner to reject it, and ultimately prevailing with the patent's grant, the CDC lied to the public by stating they were controlling the patent so that it would be "publicly available".[6] Tragically, this public statement is falsified by the simple fact that their own publication in Genbank had, in fact, made it public domain and thereby unpatentable. This fact, confirmed by patent examiners, was overridden by CDC in a paid solicitation to override the law.

While not covered under 35 U.S.C. §101, Dr. Fauci's abuse of the patent law is detailed below. Of note, however, is his willful and deceptive use of the term "vaccine" in patents and public pronouncements to pervert the meaning of the term for the manipulation of the public.

In the 1905 Jacobson v. Mass case, the court was clear that a PUBLIC BENEFIT was required for a vaccine to be mandated. Neither Pfizer nor Moderna have proved a disruption of transmission. In Jacobson v. Massachusetts, 197 U.S. 11 (1905), the court held that the context for their opinion rested on the following principle:

"This court has more than once recognized it as a fundamental principle that 'persons and property are subjected to all kinds of restraints and burdens in order to secure the general comfort, health, and prosperity of the state…"

The Moderna and Pfizer "alleged vaccine" trials have explicitly acknowledged that their gene therapy technology has no impact on viral infection or transmission whatsoever and merely conveys to the recipient the capacity to produce an S1 spike protein endogenously by the introduction of a synthetic mRNA sequence. Therefore, the basis for the Massachusetts statute and the Supreme Court's determination is moot in this case.
Further, the USPTO, in its REJECTION of Anthony Fauci's HIV vaccine made the following statement supporting their rejection of his bogus "invention"

[5] USPTO Non-Final Rejection File #10822904, September 7, 2006, page 4.
[6] https://apnews.com/article/145b4e8d156cddc93e996ae52dc24ec0

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.

18 U.S.C. §2339 C *et seq*. – Funding and Conspiring to Commit Acts of Terror

Indirectly, unlawfully and willfully provides or collects funds with the intention that such funds be used, or with the knowledge that such funds are to be used, in full or in part, in order to carry out—

> **(A) an act which constitutes an offense within the scope of a treaty specified in subsection (e)(7), as implemented by the United States, or**
>
> **(B) any other act intended to cause death or serious bodily injury to a civilian, or to any other person not taking an active part in the hostilities in a situation of armed conflict, when the purpose of such act, by its nature or context, is to intimidate a population, or to compel a government or an international organization to do or to abstain from doing any act….**

By no later than April 11, 2005, Dr. Anthony Fauci was publicly acknowledging the association of SARS with bioterror potential. Leveraging the fear of the anthrax bioterrorism of 2001, he publicly celebrated the economic boon that domestic terror had directed towards his budget. He specifically stated that NIAID was actively funding research on a "SARS Chip" DNA microarray to rapidly detect SARS (something that was not made available during the current "pandemic") and two candidate vaccines focused on the SARS CoV spike protein.[7] Led by three Chinese researchers under his employment – Zhi-yong Yang, Wing-pui Kong, and Yue Huang – Fauci had at least one DNA vaccine in animal trials by 2004.[8] This team, part of the Vaccine Research Center at NIAID, was primarily focused on HIV vaccine development but was tasked to identify SARS vaccine candidates as well. Working in collaboration with Sanofi, Scripps Institute, Harvard, MIT and NIH, Dr. Fauci's decision to unilaterally promote vaccines as a primary intervention for several designated "infectious diseases" precluded ***proven therapies*** from being applied to the sick and dying.[9]

The CDC and NIAID led by Anthony Fauci entered into trade among States (including, but not limited to working with EcoHealth Alliance Inc.) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences) through the 2014 *et seq* National Institutes of Health Grant R01AI110964 to exploit their patent rights. This research was known to involve surface proteins in coronavirus that had the capacity to directly infect human respiratory systems. In flagrant violation of the NIH moratorium on gain of function research, NIAID and Ralph Baric persisted in working with chimeric coronavirus components specifically to amplify the pathogenicity of the biologic material.

By October 2013, the Wuhan Institute of Virology 1 coronavirus S1 spike protein was described in NIAID's funded work in China. This work involved NIAID, USAID, and Peter Daszak, the head of EcoHealth Alliance. This work, funded under R01AI079231, was pivotal in isolating and manipulating viral fragments selected from sites across China which contained high risk for severe human response.[10]

By March 2015, both the virulence of the S1 spike protein and the ACE II receptor was known to present a considerable risk to human health. NIAID, EcoHealth Alliance and numerous researchers lamented the

[7] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3320336/
[8] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7095382/
[9] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1232869/
[10] Ge, XY., Li, JL., Yang, XL. *et al.* Isolation and characterization of a bat SARS-like coronavirus that uses the ACE2 receptor. *Nature* **503,** 535–538 (2013).

fact that the public was not sufficiently concerned about coronavirus to adequately fund their desired research.[11]

Dr. Peter Daszak of EcoHealth Alliance offered the following assessment:

"*Daszak reiterated that, until an infectious disease crisis is very real, present, and at an emergency threshold, it is often largely ignored. To sustain the funding base beyond the crisis, he said, we need to increase public understanding of the need for MCMs such as a pan-influenza or pan-coronavirus vaccine. A key driver is the media, and the economics follow the hype. We need to use that hype to our advantage to get to the real issues. Investors will respond if they see profit at the end of process, Daszak stated*."[12]

Economics will follow the hype.

The CDC and NIAID entered into trade among States (including, but not limited to working with University of North Carolina, Chapel Hill) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences represented by Zheng-Li Shi) through U19AI109761 (Ralph S. Baric), U19AI107810 (Ralph S. Baric), and National Natural Science Foundation of China Award 81290341 (Zheng-Li Shi) et al. 2015-2016. These projects took place during a time when the work being performed was prohibited by the United States National Institutes of Health.

The public was clearly advised of the dangers being presented by NIAID-funded research by 2015 and 2016 when the Wuhan Institute of Virology material was being manipulated at UNC in Ralph Baric's lab.

"The only impact of this work is the creation, in a lab, of a new, non-natural risk," agrees Richard Ebright, a molecular biologist and biodefence expert at Rutgers University in Piscataway, New Jersey. Both Ebright and Wain-Hobson are long-standing critics of gain-of-function research.

In their paper, the study authors also concede that funders may think twice about allowing such experiments in the future. "Scientific review panels may deem similar studies building chimeric viruses based on circulating strains too risky to pursue," they write, adding that discussion is needed as to "whether these types of chimeric virus studies warrant further investigation versus the inherent risks involved".

But Baric and others say the research did have benefits. The study findings "move this virus from a candidate emerging pathogen to a clear and present danger", says Peter Daszak, who co-authored the 2013 paper. Daszak is president of the EcoHealth Alliance, an international network of scientists, headquartered in New York City, that samples viruses from animals and people in emerging-diseases hotspots across the globe.

[11] Forum on Medical and Public Health Preparedness for Catastrophic Events; Forum on Drug Discovery, Development, and Translation; Forum on Microbial Threats; Board on Health Sciences Policy; Board on Global Health; Institute of Medicine; National Academies of Sciences, Engineering, and Medicine. Rapid Medical Countermeasure Response to Infectious Diseases: Enabling Sustainable Capabilities Through Ongoing Public- and Private-Sector Partnerships: Workshop Summary. Washington (DC): National Academies Press (US); 2016 Feb 12. 6, Developing MCMs for Coronaviruses. Available from: https://www.ncbi.nlm.nih.gov/books/NBK349040/

[12] *Ibid.*

Studies testing hybrid viruses in human cell culture and animal models are limited in what they can say about the threat posed by a wild virus, Daszak agrees. But he argues that they can help indicate which pathogens should be prioritized for further research attention."[13]

Knowing that the U.S. Department of Health and Human Services (through CDC, NIH, NIAID, and their funded laboratories and commercial partners) had patents on each proposed element of medical counter measures and their funding, Dr. Fauci, Dr. Gao (China CDC), and Dr. Elias (Bill and Melinda Gates Foundation) conspired to commit acts of terror on the global population – including the citizens of the United States – when, in September 2019, they published the following mandate:

"Countries, donors and multilateral institutions must be prepared for the worst. A rapidly spreading pandemic due to a lethal respiratory pathogen (whether naturally emergent or accidentally or deliberately released) poses additional preparedness requirements. Donors and multilateral institutions must ensure adequate investment in developing innovative vaccines and therapeutics, surge manufacturing capacity, broad-spectrum antivirals and appropriate non-pharmaceutical interventions. All countries must develop a system for immediately sharing genome sequences of any new pathogen for public health purposes along with the means to share limited medical countermeasures across countries.

Progress indicator(s) by September 2020

> *• Donors and countries commit and identify timelines for: financing and development of a universal influenza vaccine, broad spectrum antivirals, and targeted therapeutics. WHO and its Member States develop options for standard procedures and timelines for sharing of sequence data, specimens, and medical countermeasures for pathogens other than influenza.*
>
> *• Donors, countries and multilateral institutions develop a multi-year plan and approach for strengthening R&D research capacity, in advance of and during an epidemic.*
>
> *• WHO, the United Nations Children's Fund, the International Federation of Red Cross and Red Crescent Societies, academic and other partners identify strategies for increasing capacity and integration of social science approaches and researchers across the entire preparedness/response continuum."*[14]

As if to confirm the utility of the September 2019 demand for "financing and development of" vaccine and the fortuitous SARS CoV-2 alleged outbreak in December of 2019, Dr. Fauci began gloating that his fortunes for additional funding were likely changing for the better. In a February 2020 interview in ***STAT***, he was quoted as follows:

[13] https://www.nature.com/news/engineered-bat-virus-stirs-debate-over-risky-research-%201.18787
[14] https://apps.who.int/gpmb/assets/annual_report/GPMB_annualreport_2019.pdf (page 8)

""The emergence of the new virus is going to change that figure, likely considerably, Fauci said. "I don't know how much it's going to be. But I think it's going to generate more sustained interest in coronaviruses because it's very clear that coronaviruses can do really interesting things.""[15]

[15] https://www.statnews.com/2020/02/10/fluctuating-funding-and-flagging-interest-hurt-coronavirus-research/

18 U.S.C. § 2331 §§ 802 – Acts of Domestic Terrorism resulting in death of American Citizens

Section 802 of the USA PATRIOT Act (Pub. L. No. 107-52) expanded the definition of terrorism to cover "domestic," as opposed to international, terrorism. A person engages in domestic terrorism if they do an act "dangerous to human life" that is a violation of the criminal laws of a state or the United States, if the act appears to be intended to: (i) intimidate or coerce a civilian population; (ii) influence the policy of a government by intimidation or coercion;

Dr. Anthony Fauci has intimidated and coerced a civilian population and sought to influence the policy of a government by intimidation and coercion.

With no corroboration, Dr. Anthony Fauci promoted[16] Professor Neil Ferguson's computer simulation derived claims that,

"The world is facing the most serious public health crisis in generations. Here we provide concrete estimates of the scale of the threat countries now face.

"We use the latest estimates of severity to show that policy strategies which aim to mitigate the epidemic might halve deaths and reduce peak healthcare demand by two-thirds, but that this will not be enough to prevent health systems being overwhelmed. More intensive, and socially disruptive interventions will therefore be required to suppress transmission to low levels. It is likely such measures – most notably, large scale social distancing – will need to be in place for many months, perhaps until a vaccine becomes available." [17]

Reporting to the President that as many as 2.2 million deaths may result from a pathogen that had not yet been isolated and could not be measured with any accuracy, Dr. Fauci intimidated and coerced the population and the government into reckless, untested, and harmful acts creating irreparable harm to lives and livelihoods.[18] Neither the Imperial College nor the "independent" Institute for Health Metrics and Evaluation (principally funded by the Bill and Melinda Gates Foundation)[19] had any evidence of success in estimating previous burdens from coronavirus but, without consultation or peer-review, Dr. Fauci adopted their terrifying estimates as the basis for interventions that are explicitly against medical advice.

- The imposition of social distancing was based on computer simulation and environmental models with NO disease transmission evidence whatsoever.
- The imposition of face mask wearing was directly against controlled clinical trial evidence and against the written policy in the Journal of the American Medical Association.

[16] https://www.cato.org/blog/did-mitigation-save-two-million-lives
[17] https://www.imperial.ac.uk/news/196234/covid-19-imperial-researchers-model-likely-impact/
[18] https://www.npr.org/2020/03/31/823916343/coronavirus-task-force-set-to-detail-the-data-that-led-to-extension-of-guideline
[19] https://www.gatesfoundation.org/Media-Center/Press-Releases/2017/01/IHME-Announcement

> *"Face masks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill."*[20]

- In both the Imperial College and the IHME simulations, ***quarantines were modeled for the sick, not the healthy.***

Insisting on vaccines while blockading the emergency use of proven pharmaceutical interventions may have contributed to the death of many patients and otherwise healthy individuals.[21]

Using the power of NIAID during the alleged pandemic, Dr. Anthony Fauci actively suppressed proven medical countermeasures used by, and validated in scientific proceedings, that offered alternatives to the products funded by his conspiring entities for which he had provided direct funding and for whom he would receive tangible and intangible benefit.

[20] https://jamanetwork.com/journals/jama/fullarticle/2762694?fbclid=IwAR2RE-c4V-fhUodui0JQRbiHRcgEJuDKG_21N4oL5zAfciQfWCyHAsetJmo
[21] https://www.reuters.com/investigates/special-report/health-coronavirus-usa-cost/

18 U.S.C. § 1001 – Lying to Congress

(a)Except as otherwise provided in this section, whoever, in any matter within the jurisdiction of the executive, legislative, or judicial branch of the Government of the United States, knowingly and willfully—

(1) falsifies, conceals, or covers up by any trick, scheme, or device a material fact;

(2) makes any materially false, fictitious, or fraudulent statement or representation; or

(3) makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry;

shall be fined under this title, imprisoned not more than 5 years or, if the offense involves international or domestic terrorism (as defined in section 2331), imprisoned not more than 8 years, or both. If the matter relates to an offense under chapter 109A, 109B, 110, or 117, or section 1591, then the term of imprisonment imposed under this section shall be not more than 8 years.

On October 22, 2020, the United States Government Accountability Office (GAO) published a report entitled: ***BIOMEDICAL RESEARCH: NIH Should Publicly Report More Information about the Licensing of Its Intellectual Property***. In this document, the authors reported that the National Institutes of Health (NIH) received, "up to $2 billion in royalties from its contributions to 34 drugs sold from 1991-2019."[22]

A casual review of the NIH Office of Technology Transfer report of active licenses[23] appears to conflict with the GAO report on several important facts. Conspicuously absent from the GAO report are over 30 patents associated with active compounds generating billions of dollars in revenue. Why would it be that the GAO and the NIH couldn't agree on something as simple as drugs generating income for NIH?

Since the passage of the Bayh Dole Act (Pub. L. 96-517, December 12, 1980), federally funded research has been an economic bonanza for U.S. universities, federal agencies, and their selected patronage. For the first decade following Bayh Dole, NIH funding doubled from $3.4 billion to $7.1 billion. A decade later, it doubled again to $15.6 billion. In the wake of September 2001, the National Institute for Allergy and Infectious Diseases (NIAID) saw its direct budget increase over 300% without accounting for DARPA funds of as much as $1.7 billion annually from 2005 forward. In 2020, NIH's budget was over $41 billion.

What has become of the $763 billion of taxpayer funds allocated to making America healthier since inventors have been commercially incentivized? Who has been enriched?

The answer, regrettably, is that no accountability exists to answer these questions.

The NIH is the named owner of at least 138 patents since 1980.

The United States Department of Health and Human Services is the named owner of at least 2,600 patents.

NIAID grants or collaboration have resulted in 2,655 patents and patent applications of which only 95 include an assignment to the Department of Health and Human Services as an owner. Most of these patents are assigned to universities thereby making the ultimate commercial beneficiaries entirely

[22] https://www.gao.gov/products/GAO-21-52

[23] https://www.ott.nih.gov/reportsstats/hhs-license-based-vaccines-therapeutics

opaque. One of the largest holders is SIGA Technologies (NASDAQ: SIGA) who, while publicly reporting close affiliation with NIAID, is not referenced in the NIH GAO report. SIGA's CEO, Dr. Phillip L. Gomez spent 9 years at NIAID developing its vaccine program for HIV, SARS, Ebola, West Nile Virus, and Influenza before exiting to commercial ventures. While their technology is clearly derived from NIAID science, the company reports revenue from NIAID but no royalty or commercial payments to NIH or any of its programs.

NIAID's Director, Dr. Anthony Fauci is listed as an inventor on 8 granted U.S. patents. None of them are reported in NIAID, NIH, or GAO reports of active licensing despite the fact that Dr. Fauci reportedly was compelled to get paid for his interleukin-2 "invention" – payments he reportedly donated to an unnamed charity.[24]

Of the 21 patents listed in the U.S. Food and Drug Administration's (FDA) Orange book itemized in the GAO report, none of Dr. Anthony Fauci's patents are listed. Furthermore, none of the NIAID patents are listed despite clear evidence that Gilead Sciences and Janssen Pharmaceuticals (a division of Johnson & Johnson) have generated over $2 billion annually from sales that were the direct result of NIAID funded science. Missing from the GAO report are 2 patents for Velclade® which has been generating sales in excess of $2.18 billion annually for several years. None of the patents for Yescarta® are listed in the GAO report. None of the Lumoxiti® patents are listed in the GAO report. None of the Kepivance® patents are listed in the GAO report. In violation of 37 USC §410.10 and 35 USC §202(a), over 13 of the 21 patents in the GAO report fail to disclose government interest despite being the direct result of NIH funding.

Dr. Anthony Fauci's Own Patent Track Record:

US Patent 6,190,656 and 6,548,055 **Immunologic enhancement with intermittent interleukin-2 therapy**

A method for activating a mammalian immune system entails a series of IL-2 administrations that are effected intermittently over an extended period. Each administration of IL-2 is sufficient to allow spontaneous DNA synthesis in peripheral blood or lymph node cells of the patient to increase and peak, and each subsequent administration follows the preceding administration in the series by a period of time that is sufficient to allow IL-2 receptor expression in peripheral or lymph node blood of the patient to increase, peak and then decrease to 50% of peak value. This intermittent IL-2 therapy can be combined with another therapy which targets a specific disease state, such as an anti-retroviral therapy comprising, for example, the administration of AZT, ddI or interferon alpha. In addition, IL-2 administration can be employed to facilitate in situ transduction of T cells in the context of gene therapy. By this approach the cells are first activated in vivo via the aforementioned IL-2 therapy, and transduction then is effected by delivering a genetically engineered retroviral vector directly to the patient.

This application is a continuation of U.S. patent application Ser. No. 08/487,075, filed Jun. 7, 1995, now abandoned, which is a continuation in part of U.S. patent application Ser. No. 08/063,315, filed May 19, 1993, now issued as U.S. Pat. No. 5,419,900, and U.S. patent application Ser. No. 08/452,440, filed May 26, 1995, now issued as U.S. Pat. No. 5,696,079, which is the National Stage filed under 35 USC 371 of PCT/US94/05397, filed May 19, 1994, the contents of which are incorporated herein by reference.

[24] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC545012/

Filed May 19, 1993

Issued a Final Rejection January 20, 1998. Rejected after abandonment August 14, 1998 and April 12, 1999. Reduced and modified claims granted May 8, 2000.

This family of patents was the basis of Fauci's lie to the ***British Medical Journal*** *in which he falsely stated:*

"Dr Anthony Fauci told the BMJ that as a government employee he was required by law to put his name on the patent for the development of interleukin 2 and was also required by law to receive part of the payment the government received for use of the patent. He said that he felt it was inappropiate (sic) to receive payment and donated the entire amount to charity."[25]

He was not "required by law" to commit fraud on the patent office and then get paid for it!

US Patent 6,911,527 **HIV related peptides**

This invention is the discovery of novel specific epitopes and antibodies associated with long term survival of HIV-1 infections. These epitopes and antibodies have use in preparing vaccines for preventing HIV-1 infection or for controlling progression to AIDS.

Filed May 6, 1999

Rejected as unpatentable January 22, 2003. Issued with a final rejection on July 15, 2004 after submitting reconsideration requests. Modified and restricted claims allowed September 29, 2004.

US Patent 7,368,114 **Fusion protein including of CD4**

Novel recombinant polypeptides are disclosed herein that include a CD4 polypeptide ligated at its C-terminus with a portion of an immunoglobulin comprising a hinge region and a constant domain of a mammalian immunoglobulin heavy chain. The portion or the IgG is fused at its C-terminus with a polypeptide comprising a tailpiece from the C-terminus of the heavy chain of an IgA antibody ara tailpiece from a C-terminus of the heavy chain of an IgM antibody. Also disclosed herein are methods for using these CD4 fusion proteins.

Filed October 24, 2002

Rejected as unpatentable August 18, 2006. Paid appeal to overturn examiner's findings February 15, 2007. Rejected again May 11, 2007. On October 10, 2007 applicants further narrowed the construction of what was clearly not a patent and the USPTO granted less than half the claims that had been sought in the original filing.

US Patent 9,896,509, 9,193,790 and 9,441,041 **Use of antagonists of the interaction between HIV GP120 and .alpha.4.beta.7 integrin**

[25] *Ibid.*

Methods are provided for the treatment of a HIV infection. The methods can include administering to a subject with an HIV infection a therapeutically effective amount of an agent that interferes with the interaction of gp120 and .alpha.4 integrin, such as a .alpha.4.beta.1 or .alpha.4.beta.7 integrin antagonist, thereby treating the HIV infection. In several examples, the .alpha.4 integrin antagonist is a monoclonal antibody that specifically binds to a .alpha.4, .beta.1 or .beta.7 integrin subunit or a cyclic hexapeptide with the amino acid sequence of CWLDVC. Methods are also provided to reduce HIV replication or infection. The methods include contacting a cell with an effective amount of an agent that interferes with the interaction of gp120 and .alpha.4 integrin, such as a .alpha.4.beta.1 or .alpha.4.beta.7 integrin antagonist. Moreover, methods are provided for determining if an agent is useful to treat HIV.

Rejected May 22, 2017 as Double Patenting. In their response, the applicants acknowledge the illegal act and seek only those components of their application that extend beyond the life of the issued patents. On October 11, 2017, the limited claims were issued.

A sample of the convoluted flow of funds that evades public disclosure.

U.S. Patent 8,999,351 was issued to Tekmira Pharmaceuticals Corporation in Burnaby, British Columbia. In their patent, they disclose that their research was supported by a grant from the National Institute of Allergy and Infectious Disease (Grant HHSN266200600012C). Ironically, this $23 million grant was awarded in 2006 to Alnylam Pharmaceuticals, Inc., not to Tekmira.[26]

In 2012, Alnylam agreed to pay Tekmira $65 million to settle legal disputes including a $1 billion damages claim for “relentless and egregious” misappropriation of Tekmira’s trade secrets. From the patent filing’s earliest priority of November 10, 2008, there is no public record stating Tekmira as the beneficiary of this NIAID grant. Notwithstanding, the lipid nanoparticle technology developed from this grant is the technology now used in the Moderna COVID-19 intervention. In their 10-Q filing, Alnylam reports to have a license to technology from Arbutus – formerly Tekmira – which has accused Acuitas of misappropriating trade secrets and licensing them to Moderna and Pfizer’s collaboration with BioNTech.

Additional references can be found at:

https://www.ott.nih.gov/nih-and-its-role-technology-transfer
https://www.accessdata.fda.gov/drugsatfda_docs/appletter/2017/206288Orig1s000TAltr.pdf
https://www.gao.gov/assets/720/710287.pdf
https://grantome.com/search?q=%22National%20Institute%20of%20Allergy%20and%20Infectious%20Diseases%22

[26] https://www.technologynetworks.com/genomics/news/alnylam-awarded-23-million-us-government-contract-to-develop-rnai-therapeutics-186097

15 U.S.C. §1-3 – Conspiring to Criminal Commercial Activity

Every contract, combination in the form of trust or otherwise, or conspiracy, in restraint of trade or commerce among the several States, or with foreign nations, is declared to be illegal. Every person who shall make any contract or engage in any combination or conspiracy hereby declared to be illegal shall be deemed guilty of a felony, and, on conviction thereof, shall be punished by fine not exceeding $100,000,000 if a corporation, or, if any other person, $1,000,000, or by imprisonment not exceeding 10 years, or by both said punishments, in the discretion of the court.

The National Institute of Health's grant AI23946-08 issued to Dr. Ralph Baric at the University of North Carolina at Chapel Hill (officially classified as affiliated with Dr. Anthony Fauci's NIAID by at least 2003) began the work on synthetically altering the *Coronaviridae* (the coronavirus family) for the express purpose of general research, pathogenic enhancement, detection, manipulation, and potential therapeutic interventions targeting the same. As early as May 21, 2000, Dr. Baric and UNC sought to patent critical sections of the coronavirus family for their commercial benefit.[27] In one of the several papers derived from work sponsored by this grant, Dr. Baric published what he reported to be the full length cDNA of SARS CoV in which it was clearly stated that SAR CoV was based on a composite of DNA segments.

> *"Using a panel of contiguous cDNAs that span the entire genome, we have assembled a full-length cDNA of the SARS-CoV Urbani strain, and have rescued molecularly cloned SARS viruses (infectious clone SARS-CoV) that contained the expected marker mutations inserted into the component clones."*[28]

On April 19, 2002 – the Spring before the first SARS outbreak in Asia – Christopher M. Curtis, Boyd Yount, and Ralph Baric filed an application for U.S. Patent 7,279,372 for a method of producing recombinant coronavirus. In the first public record of the claims, they sought to patent a means of producing, "an infectious, replication defective, coronavirus." This work was supported by the NIH grant referenced above and GM63228. In short, the U.S. Department of Health and Human Services was involved in the funding of amplifying the infectious nature of coronavirus between 1999 and 2002 ***before SARS*** was ever detected in humans.

Against this backdrop, we noted the unusual patent prosecution efforts of the CDC, when on April 25, 2003 they sought to patent the SARS coronavirus isolated from humans that had reportedly transferred to humans during the 2002-2003 SARS outbreak in Asia. 35 U.S.C. §101 prohibits patenting nature. This legality did not deter CDC in their efforts. Their application, updated in 2007, ultimately issued as U.S. Patent 7,220,852 and constrained anyone not licensed by their patent from manipulating SARS CoV, developing tests or kits to measure SARS coronavirus in humans or working with their patented virus for therapeutic use. Work associated with this virus by their select collaborators included considerable amounts of chimeric engineering, gain-of-function studies, viral characterization, detection, treatment (both vaccine and therapeutic intervention), and weaponization inquiries.

In short, with Baric's U.S. Patent 6,593,111 (Claims 1 and 5) and CDC's '852 patent (Claim 1), no research in the United States could be conducted without permission or infringement.

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[27] U.S. Provisional Application No. 60/206,537, filed May 21, 2000

[28] https://www.pnas.org/content/100/22/12995

We noted that gain-of-function specialist, Dr. Ralph Baric, was both the recipient of millions of dollars of U.S. research grants from several federal agencies but also sat on the World Health Organization's International Committee on Taxonomy of Viruses (ICTV) and the *Coronaviridae* Study Group (CSG). In this capacity, he was both responsible for determining "novelty" of clades of virus species but directly benefitted from determining declarations of novelty in the form of new research funding authorizations and associated patenting and commercial collaboration. Together with CDC, NIAID, WHO, academic and commercial parties (including Johnson & Johnson; Sanofi and their several coronavirus patent holding biotech companies; Moderna; Ridgeback; Gilead; Sherlock Biosciences; and, others), a powerful group of interests constituted what we would suggest are "interlocking directorates" under U.S. anti-trust laws.

1986-1990	NIAID Grant AI 23946 leading to patent U.S. 7,279,327 "Methods for Producing Recombinant Coronavirus" Filed 2002 and issued 2007 https://patents.google.com/patent/US7279327B2/ru The paper first published from the NIAID grant is https://europepmc.org/backend/ptpmcrender.fcgi?accid=PMC7109931&blobtype=pdf
1990	Pfizer files U.S. Patent 6,372,224 on a vaccine for the *S*-protein on coronavirus November 14, 2000 which was abandoned April 2010 making it public domain.
1990s	Work focused on CoV association with cardiomyopathy (see above) Early reference to the "emergence" of CoV as a ***respiratory pathogen*** in https://link.springer.com/content/pdf/10.1007%2F978-1-4615-1899-0_91.pdf
2000	Ralph Baric AI23946 and GM63228 from the National Institutes of Health actively working recombinant CoV
2001	National Institute of Health, Allergy and Infectious diseases. "Reverse Genetics with a Coronavirus Infectious cDNA Construct." 4/1/2001-3/31/005 $1.0 million total costs/yr. RS Baric, PI
2002	Asia CoV SARS outbreak
2003	April 25, 2003 CDC Patent filed and ultimately becomes US7,220,852 (the patent on the RNA sequence) and 7,776,521 (the patent on the testing methodology. These patents give the U.S. Department of Health and Human Services the ability to control the commercial exploitation of SARS coronavirus. Dr. Anthony Fauci appointed to the Bill and Melinda Gates Foundation's Global Grand Challenges Scientific Advisory Board (served through 2010). April 28, 2003 Sequoia Pharmaceuticals $953K for pathogen response and patent US7,151,163 https://www.sbir.gov/node/305319

July 21, 2003 Ralph Baric's team (using AI23946 and GM63228) file U.S. Patent 7,618,802 which issued on November 17, 2009.
https://patents.google.com/patent/US7618802B2

Dana Farber Cancer Institute files U.S. Patent 7,750,123 on a monoclonal antibody to neutralize SARS CoV. This research is supported by several NIH grants including National Institutes of Health Grants A128785, A148436, and A1053822.

2004 January 6, 2004 – ***SARS and Bioterrorism linked*** at Bioterrorism and Emerging Infectious Diseases: antimicrobials, therapeutics and immune modulators.
https://tks.keystonesymposia.org/index.cfm?e=web.meeting.program&meetingid=706
At this conference, the term "The New Normal" was introduced by Merck

FAUCI AND BARIC start making money!!! National Institutes of Health, Allergy and Infectious Diseases. SARS Reverse Genetics. AI059136-01. $1.7 million total costs, RS Baric, PI. 10% effort. 4/1/04- 3/31/09. The project develops a SARS-CoV full length infectious cDNA, the development of SARS-CoV replicon particles expressing heterologous genes, and seeks to adapt SARS-CoV to mice, producing a pathogenic mouse model for SARS-CoV infection.

National Institutes of Health, Allergy and Infectious Diseases. R01. Remodeling the SARS Coronavirus Genome Regulatory Network. RS Baric, PI 10% effort. 7/1/04-6/30/09. $2.1 million

November 22, 2004 University of Hong Kong patents SARS associated spike protein on CoV and pursues patent US 7,491,489

2005 DARPA gets in on the game Synthetic Coronaviruses. Biohacking: Biological Warfare Enabling Technologies, June 2005. Washington, DC. DARPA/MITRE sponsored event. Invited Speaker

Review timeline from https://www.youtube.com/watch?v=rO_EeYB0i0U and https://www.davidmartin.world/wp-content/uploads/2020/04/20APRBotWslides.pdf

2008 Biodefense Grant U54 AI057157 commences with $10,189,682 to UNC Chapel Hill
https://taggs.hhs.gov/Detail/AwardDetail?arg_awardNum=U54AI057157&arg_ProgOfficeCode=104

2009 Biodefense Grant U54 AI057157 continues with $5,448,656 to UNC Chapel Hill (non-competitive grant from NIAID)

2010 Biodefense Grant U54 AI057157 continues with $8,747,142 to UNC Chapel Hill (non-competitive grant from NIAID)

Patent issuance for SARS coronavirus patents peak post the Asia outbreak at 391 issued patents.

August 6, 2010, Moderna (prior to its establishment) files U.S. Patent 9,447,164 which attracted the investment of (and "inventorship" for) venture capitalists at Flagship Ventures. This patent grew out of the work of Dr. Jason P. Schrum of Harvard Medical School supported by National Science Foundation Grant **#0434507. While the application claims priority to August 2010, the application didn't get finalized until October, 2015. On November 4, 2015, the USPTO issued a non-final rejection on this original patent rejecting all claims.** https://www.nsf.gov/awardsearch/showAward?AWD_ID=0434507 with reference to the grant funding in https://molbio.mgh.harvard.edu/szostakweb/publications/Szostak_pdfs/Schrum_et_al_JACS_2009.pdf

2011 Crucell joined the Janssen Pharmaceutical Companies of Johnson & Johnson in February taking with it all of its SARS technology.

Biodefense Grant U54 AI057157 continues with $7,344,820 to UNC Chapel Hill (non-competitive grant from NIAID)

2012 MERS isolated in Egypt

Biodefense Grant U54 AI057157 continues with $7,627,657 to UNC Chapel Hill (non-competitive grant from NIAID)

2013 Biodefense Grant U54 AI057157 continues with $7,226,237 to UNC Chapel Hill (non-competitive grant from NIAID)

2014 April 23, 2014, Moderna files patent on nucleic acid vaccine with Patents US9872900 and US10022435

2015 Moderna signs a vaccine development agreement with NIAID and executes it with the lead on the mRNA-1273 lead developer and inventor Guiseppe Ciaramella. https://www.documentcloud.org/documents/6935295-NIH-Moderna-Confidential-Agreements.html

2016 NIH through Scripps Institute and Dartmouth College file patent application WO 2018081318A1 "Prefusion Coronavirus Spike Proteins and their Use" disclosing mRNA technology that overlaps (and is used in tandem with) Moderna's technology. https://patents.google.com/patent/WO2018081318A1/en Lead Inventor Barney Scott Graham was well known to Moderna as he's the person at NIH that Moderna "e-mailed" to get the sequence for SARS CoV-2 according to Moderna's report here *("In January 2020, once it was discovered that the infection in Wuhan was caused by a novel coronavirus, Bancel quickly emailed Dr. Barney Graham, deputy director of the Vaccine Research Center at the National Institutes of Health, asking him to send the genetic sequence for the virus.")* https://www.wsws.org/en/articles/2020/05/26/vacc-m26.html In addition, co-inventor Jason McLellan worked with Graham on a vaccine patent jointly owned with the Chinese government filed in Australia in 2013 https://patents.google.com/patent/AU2014231357A1/en?inventor=Jason+MCLELLAN.

2017 August – Sanofi buys Protein Science Corp with considerable SARS patent holdings

2018 June – Sanofi buys Ablynx with considerable SARS patent holdings

2019 March, https://wyss.harvard.edu/news/sherlock-biosciences-licenses-wyss-technology-to-create-affordable-molecular-diagnostics/ funded by Open Philanthropy – the same organization that would be the financial sponsor of the Event 201 "table-top" exercise that laid out the entire "pandemic" plan in October 2019.

15 U.S.C. §8 – Market Manipulation and Allocation

Every combination, conspiracy, trust, agreement, or contract is declared to be contrary to public policy, illegal, and void when the same is made by or between two or more persons or corporations, either of whom, as agent or principal, is engaged in importing any article from any foreign country into the United States, and when such combination, conspiracy, trust, agreement, or contract is intended to operate in restraint of lawful trade, or free competition in lawful trade or commerce, or to increase the market price in any part of the United States of any article or articles imported or intended to be imported into the United States, or of any manufacture into which such imported article enters or is intended to enter. Every person who shall be engaged in the importation of goods or any commodity from any foreign country in violation of this section, or who shall combine or conspire with another to violate the same, is guilty of a misdemeanor, and on conviction thereof in any court of the United States such person shall be fined in a sum not less than $100 and not exceeding $5,000, and shall be further punished by imprisonment, in the discretion of the court, for a term not less than three months nor exceeding twelve months.

Through non-competitive grant awards to UNC Chapel Hill's Ralph Baric, to selection of the Bio-Safety Level 4 laboratory locations, to the setting of prices for Remdesivir and mRNA therapies from Moderna and Pfizer, NIAID, CDC, and the U.S. Department of Health and Human Services have been involved in allocating Federal funds to conspiring parties without independent review.

Around March 12, 2020, in an effort to enrich their own economic interests by way of securing additional funding from both Federal and Foundation actors, the CDC and NIAID's Dr Fauci elected to suspend testing and classify COVID-19 by capricious symptom presentation alone. Forcing the public to rely on The COVID Tracking Project – funded by the Bloomberg, Zuckerberg and Gates Foundation and presented by a media outlet (***The Atlantic***) – not a public health agency – Dr. Fauci used fraudulent testing technology (RT-PCR) to conflate "COVID cases" with positive PCR tests in the living while insisting that COVID deaths be counted by symptoms alone. This perpetuated a market demand for his desired vaccine agenda which was recited by him and his conspiring parties around the world until the present. Not surprisingly, this was necessitated by the apparent fall in cases that constituted Dr. Fauci's and others' criteria for depriving citizens of their 1st Amendment rights.

15 U.S.C. § 19 – Interlocking Directorates

(1) No person shall, at the same time, serve as a director or officer in any two corporations (other than banks, banking associations, and trust companies) that are—

(A) engaged in whole or in part in commerce; and

(B) by virtue of their business and location of operation, competitors, so that the elimination of competition by agreement between them would constitute a violation of any of the antitrust laws; if each of the corporations has capital, surplus, and undivided profits aggregating more than $10,000,000 as adjusted pursuant to paragraph (5) of this subsection.

Dr. Fauci is on the Leadership Council of the Bill and Malinda Gates Global Vaccine Action Plan

Dr. Fauci while controlling the economic dispensation of Federal research funding, Dr. Fauci has been, and continues to be, on the World Health Organization's Global Preparedness Monitoring Board. He is joined on this board by the conflicted donor from the Bill and Melinda Gates Foundation's Dr. Chris Elias and the State Council of China's Dr. George F. Gao of the Chinese CDC. This GPMB stipulated that all member states must take part in a global simulation of the release of a respiratory pathogen.

Dr. Baric is one of the primary beneficiaries of U.S. Federal funds, runs a BSL-4 facility and sits on the International Committee on Taxonomy of Virus *Coronaviridae* Working Group tasked to confirm the presence of absence of the pathogen for which he is directly compensated.

As referenced in the section covering violations of 18 U.S.C. § 1001 above, numerous undisclosed commercial relationships exist between funded researchers, their funding agencies, and commercial interests in which disclosed and undisclosed commercial terms exist. A complete list of all potential implicated parties is listed in the section below entitled "The Commercial Actors".

It appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on genetic material were illegal, the CDC and National Institute of Allergy and Infectious Diseases led by Anthony Fauci (hereinafter "NIAID" and "Dr Fauci", respectively) entered into trade among States (including, but not limited to working with Ecohealth Alliance Inc.) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences) through the 2014 et seq National Institutes of Health Grant R01AI110964 to exploit their patent rights.

It further appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on genetic material was illegal, the CDC and National Institute of Allergy and Infectious Diseases (hereinafter "NIAID") entered into trade among States (including, but not limited to working with University of North Carolina, Chapel Hill) and with foreign nations (specifically, the Wuhan Institute of Virology and the Chinese Academy of Sciences represented by Zheng-Li Shi) through U19AI109761 (Ralph S. Baric), U19AI107810 (Ralph S. Baric), and National Natural Science Foundation of China Award 81290341 (Zheng-Li Shi) et al. 2015-2016.

It further appears that, during the period of patent enforcement and after the Supreme Court ruling confirming that patents on generic material was illegal, the CDC and NIAID entered into trade among States (including, but not limited to working with University of North Carolina, Chapel Hill) and with foreign nations to conduct chimeric construction of novel coronavirus material with specific virulence properties prior to, during, and following the determination made by the National Institutes for Health

in October 17, 2014 that this work was not sufficiently understood for its biosecurity and safety standards.

In this inquiry, it is presumed that the CDC and its associates were: a) fully aware of the work being performed using their patented technology; b) entered into explicit or implicit agreements including licensing, or other consideration; and, c) willfully engaged one or more foreign interests to carry forward the exploitation of their proprietary technology when the U.S. Supreme Court confirmed that such patents were illegal and when the National Institutes of Health issued a moratorium on such research.

Reportedly, in January 2018, the U.S. Embassy in China sent investigators to Wuhan Institute of Virology and found that, "During interactions with scientists at the WIV laboratory, they noted the new lab has a serious shortage of appropriately trained technicians and investigators needed to safely operate this high-containment laboratory." The Washington Post reported that this information was contained in a cable dated 19 January 2018. Over a year later, in June 2019, the CDC conducted an inspection of Fort Detrick's U.S. Army Medical Research Institute of Infectious Diseases (hereinafter "USAMRIID") and ordered it closed after alleging that their inspection found biosafety hazards. A report in the journal Nature in 2003 (423(6936): 103) reported cooperation between CDC and USAMRIID on coronavirus research followed by considerable subsequent collaboration. The CDC, for what appear to be the same type of concern identified in Wuhan, elected to continue work with the Chinese government while closing the U.S. Army facility.

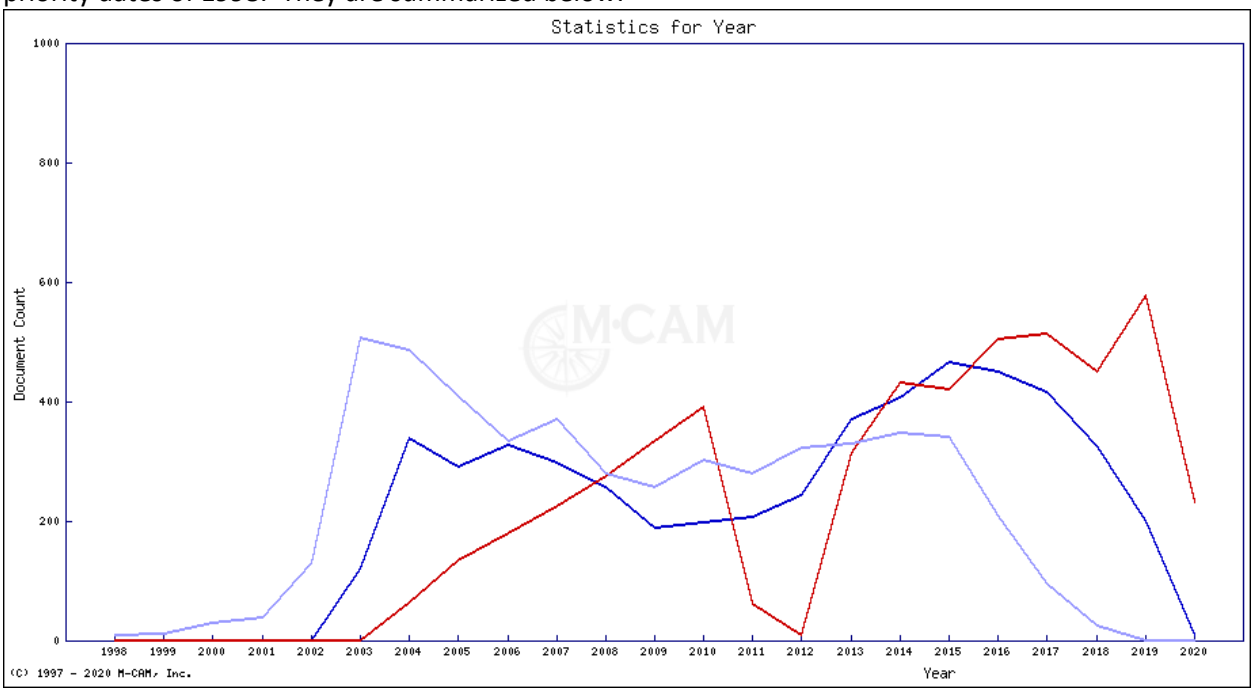
The CDC reported the first case of SARS-CoV like illness in the United States in January 2020 with the CDC's Epidemic Intelligence Service reporting 650 clinical cases and 210 tests. Given that the suspected pathogen was first implicated in official reports on December 31, 2019, one can only conclude that CDC: a) had the mechanism and wherewithal to conduct tests to confirm the existence of a "novel coronavirus"; or, b) did not have said mechanism and falsely reported the information in January. It tests credulity to suggest that the WHO or the CDC could manufacture and distribute tests for a "novel" pathogen when their own subsequent record on development and deployment of tests has been shown to be without reliability

35 U.S.C. §200 - 206 – Disclosure of Government Interest

35 U.S.C. §202 (c)(6)

An obligation on the part of the contractor, in the event a United States patent application is filed by or on its behalf or by any assignee of the contractor, to include within the specification of such application and any patent issuing thereon, a statement specifying that the invention was made with Government support and that the Government has certain rights in the invention.

Over 5000 patents and patent applications have included reference to SARS Coronavirus dating back to priority dates of 1998. They are summarized below.



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020		total
file	0	0	0	0	0	120	338	290	328	297	256	188	198	207	244	371	407	466	451	416	326	199	0	file	5111
issue	0	0	0	0	0	1	63	135	179	224	275	334	391	61	8	314	431	420	504	513	449	578	231	issue	5111
priority	10	12	29	38	129	506	487	408	335	370	279	256	303	279	322	330	348	342	208	95	25	0	0	priority	5111
total	10	12	29	38	129	627	888	833	842	891	810	778	892	547	574	1015	1186	1228	1163	1024	800	777	240	total	15333

On July 23, 2020, the Patent Trial and Appeal Board of the United States Patent and Trademark Office rejected Moderna's efforts to invalidate U.S. Patent 8,058,069. This patent, owned by Arbutus Biopharma Corp (principally owned by Roivant Science Ltd), covers the lipid nanoparticle (LNP) required to deliver an mRNA vaccine. Some of the core technology was based on work originally done at the University of British Columbia and was first licensed in 1998.

mRNA-1273 – the experimental vaccine developed by Moderna for COVID-19 – uses the LNP technology that Moderna thought it had licensed from Acuitas Therapeutics Inc., a firm developed by a former principal of Arbutus' prior company Tekmira. That license did not authorize Moderna to use the technology for the COVID-19 vaccine.

M·CAM and Knowledge Ecology International have independently confirmed that Moderna has violated U.S. law in failing to disclose the U.S. government's funding interest in their patents and patent applications. While this negligence impacts all of Moderna's over 130 granted U.S. patents, it is particularly problematic for U.S. Patent 10,702,600 ('600) which is the patent relating to, "a messenger ribonucleic acid (mRNA) comprising an open reading frame encoding a betacoronavirus (BetaCoV) S protein or S protein subunit formulated in a lipid nanoparticle." The specific claims addressing the pivot to the SARS Coronavirus were patented ***on March 28, 2019 – 9 months before the SARS CoV-2 outbreak!*** Both the patent and the DARPA funding for the technology were disclosed in scientific publication (*New England Journal of Medicine*) but the government funds were not acknowledged in the patent.

In 2013, the Autonomous Diagnostics to Enable Prevention and Therapeutics (ADEPT) program awarded grant funding to Moderna Therapeutics for the development of a new type of vaccine based on messenger RNA. The initial DARPA grant was W911NF-13-1-0417. ***The company used that technology to develop its COVID-19 vaccine, currently undergoing Phase I clinical trials in conjunction with NIH***.[29]

Under the Federal Acquisition Regulation (FAR) rules, contractor to the Federal Government must provide information regarding intellectual property infringement issues as part of their contract. Under FAR §27.201-1(c) and (d), the Government both requires a notice of infringement or potential infringement as well as retention of economic liability for patent infringements. Specifically, in FAR §52.227.3 (a), the "Contractor shall indemnify the Government and its officers, agents, and employees against liability, including costs for infringement of any United States Patent…". In addition to the patents cited by the USPTO in their examination of '600, M·CAM has identified fourteen other issued patents preceding the '600 patent which were used by patent examiners to limit patents arising from the same funded research including patents sought by CureVac.

In short, while Moderna enjoys hundreds of millions of dollars of funding allegiance and advocacy from Anthony Fauci and his NIAID, since its inception, it has been engaged in illegal patent activity and demonstrated contempt for U.S. Patent law. To make matters worse, the U.S. Government has given it financial backing in the face of undisclosed infringement risks potentially contributing to the very infringement for which they are indemnified.

[29] https://crsreports.congress.gov/product/pdf/IN/IN11446

21 C.F.R. § 50.24 et seq., Illegal Clinical Trial

It is unlawful to conduct medical research (even in the case of emergency) without a series of steps taken to:

a. **Establish the research with a duly authorized and independent institutional review board;**
b. **Secure informed consent of all participants including a statement of risks and benefits; and,**
c. **Engage in consultation with the community in which the study is to be conducted.**

Dr. Anthony Fauci has forced upon the healthy population of the United States an unlawful clinical trial in which the U.S. Department of Health and Human Services are extrapolating epidemiologic data. No informed consent has been sought or secured for any of the "medical countermeasures" forced upon the population and no independent review board – as defined by the statute – has been empaneled.

Through April 2020, the official recommendation by the ***Journal of the American Medical Association*** was unambiguous.

"Face masks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill."[30]

Part of that lack of evidence in fact showed that cloth facemasks actually increased influenza-linked illness.[31]

In contravention to established science, States, municipalities, and businesses have violated the legal requirements for the promulgation of medical counter measures during a public health emergency stating a "belief" that face masks limit the spread of SARS CoV-2. To date, not a single study has confirmed that a mask prevented the transmission of, or the infection by SARS CoV-2.

All parties mandating the use of facemasks are not only willfully ignoring established science but are engaging in what amounts to a whole population clinical trial. This conclusion is reached by the fact that facemask use and COVID-19 incidence are being reported in scientific opinion pieces promoted by the United States Centers for Disease Control and Prevention and others.[32]

Social distancing of up to 6 feet has been promoted as a means of preventing person-to-person transmission of influenza-like viruses. While one study hypothesized that infection could happen in a 6 foot range, the study explicitly states that person-to-person transfer was not tested and viability of the virus at 6 feet was not even a subject of the investigation.[33] That did not stop the misrepresentation of the study to be used as the basis for an unverified medical counter measure of social distancing. To date, no study has established the efficacy of social distancing to modify the transmission of SARS CoV-2. Public health officials have referenced:

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[30] https://jamanetwork.com/journals/jama/fullarticle/2762694
[31] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4420971/
[32] https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html
[33] *Werner E. Bischoff, Katrina Swett, Iris Leng, Timothy R. Peters, Exposure to Influenza Virus Aerosols During Routine Patient Care,* The Journal of Infectious Diseases*, Volume 207, Issue 7, 1 April 2013, Pages 1037–1046, **https://doi.org/10.1093/infdis/jis773***

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5907354/#CR43

In contravention to established science, States, municipalities, and businesses have violated the legal requirements for the promulgation of medical counter measures during a public health emergency stating a "belief" that social distancing of a healthy population limits the spread of SARS CoV-2. To date, not a single study has confirmed that social distancing of any population prevented the transmission of, or the infection by SARS CoV-2.

It is unlawful under the FTC Act, 15 U.S.C. § 41 et seq., to advertise that a product or service can prevent, treat, or cure human disease unless you possess competent and reliable scientific evidence, including, when appropriate, well-controlled human clinical studies, substantiating that the claims are true at the time they are made. As a result, every party promoting the use of face masks is violating the FTC Act.

All of these laws have been broken. All relevant authorities in the United States must cease and desist the use of face masks until the matters above are rectified.