SUBMISSION TO FEDERAL GOVERNMENT FOR COVID ENQUIRY

our Submission Focus Points:

- 1 DEMAND a royal commission for a FULL investigation!
- 2 EXPOSE corrupt vaccine acquisitions and SECRET contracts with Vaccine manufacturers!
- 3 Illegal vaccine mandates!
- 4 Official misinformation about vaccines blocking transmission!
- 5 Vaccine injuries!
- 6 Silencing of doctors and experts!
- 7 AHPRA and ATAGI's censorship of doctors!
- 8 EXIT from the WHO and its tyrannical treaty proposition
- 9 CONFLICT OF INTEREST of independent panel members
- 10 FINANCIAL INCENTIVES or inducements to the health care sector associated with and proportionate to 'the number of jabs given', 'the number of hospital admissions', the number of ventilators used and the number of COVID fatalities'.
- 11 FALSE INFORMATION regarding existing therapies (Ivermectin, HydroxyC...)

Your submissions don't need to be perfect - we need QUANTITY! Let's OVERWHELM

Scope of inquiry

The terms of reference are broad. The independent panel can also consider other matters that support the overarching goal of enhancing our national preparedness and response systems to manage future pandemic events.

The inquiry will consider health and non-health responses to the pandemic, which were the sole responsibility of the Commonwealth Government or jointly with the states and territories. For example, the provision of vaccinations, treatments and key medical supplies to Australians, aged care, disability care, mental health support for those impacted by COVID-19 and lockdowns, assistance to maintain cross-border road and shipping supply chains, financial support for individuals and businesses, and assistance for Australians abroad.

Actions undertaken unilaterally by the states and territories are not in scope. However, the inquiry will consider the roles and responsibilities of the Commonwealth Government, and state and territory governments in managing pandemic responses, the interaction between these tiers of government, and the overall cohesiveness of the joint Australian response. This will include national governance mechanisms such as National Cabinet and the Australian Health Protection Principal Committee.

The inquiry will also consider how evidence informed decisions regarding interventions, such as lockdowns, in different jurisdictions across Australia, how evidence was used or produced during implementation of these interventions, and ideas to improve evidence-based pandemic prevention and response practices.

A range of reviews and 'lessons learned' have been undertaken by Commonwealth, state and territory government agencies and other non-government organisations. The inquiry will not duplicate this work – instead it will build on it, by identifying gaps, opportunities for best practice and applying a national perspective.

As the inquiry proceeds this website will be updated as required.

SUBMISSION to Commonwealth COVID-19 Response Inquiry

I am a
with over 40 years experience in industry
the latter where I was a
Director, prior to setting up my own companies).
and I have long had an interest in health and well-being, from the soils to pasture to animals (flora & fauna), nutritional density and human well-being. I come from a . I represent my family and my two businesses and related clients.
My reference points for this response is a background of having lived in and my visits to the and my visits to the (mainly East Germany) where I witnessed first-hand the impact of the socialist tyrannical totalitarian system, including direct encounters with east German people, families, the secret police (Stazi) the border guards and other authorities. One in three people was on the payroll of the Stazi, meaning every family had at least one person spying on their siblings, parents and other family members. And most significantly the incredibly oppressive nature of their system. It was corrupt, evil, functioned within a pervasive cloud of fear that stifled human expression, love, happiness and wellbeing. I vowed never to participate, encourage or allow (i.e. being complicit in any way) such a disastrous social and environmentally destructive experiment.

My focus points in terms of this submission are based around:

- The timing of this call for submissions just before the year end, Christmas and with an extremely narrow response window, is sneaky, deceptive and disengenuous
- Three years of living during the COVID period in Victoria, the assumption that
 what the public was being told was true, no ability to question or challenge the
 'narrative' of safe and effective, the cancelling of alternate views, denial of
 proper science, media propaganda, loss of freedom of speech, and the
 profound impact on human well-being, physical and mental.
- The scale of the Government response (at all levels, including the police, health and medical system, public servants, etc) was totally disproportionate, not to mention the legislation ushered in under 'a declared state of emergency'
- The censoring of the mainstream media NOT to provide a balanced report of events and certainly not represent the greater public interest with frank and fearless truth seeking journalism (there are thousands of documented cases of 'cover-up' or omission
- The other regulations passed by the Victorian Parliament during this time (impacting all sectors of society, particularly the ability of landholders to grow healthy chemical free food); the 'trialling' of mRNA vaccines with livestock (meat) prior to their slaughter 'just in case there is a future biosecurity issue' and hence force such medicines into the human food chain, including the ability of Government agents to enter a farm (without consent) and dispose of livestock
- Acquisition of vaccines was not disclosed to the public, the contracts and deals with Big Pharma (e.g. Pfizer, Moderna et al), and even the decision to spend enormous sums of public (tax-payer) funds to build an unnecessary

- quarantine centre north of Melbourne, and the construction of a mRNA vaccine facility in SE Melbourne.
- The incentive payments (not publicly disclosed) from Big Pharma to health practitioners based on stage of COVID infection through to death, must be disclosed.
- The lying of the Government (and co-opted public service and media)
 regarding the PCR tests, which were never designed to perform the task of
 verifying the existence of the COVID virus (references include the developers
 of the PCR test
 and mRNA technology
 The 95% false positive was evidence of this.
- The lack of 'informed consent' by medical practitioners, complicated by these people not being provided data about what is in the vaccines and the safety trials to provide them safe and effective vaccines (normally takes 10 years, but an untried and unproven gene therapy)
- The renaming or redefining of what constitutes a vaccine (the COVID treatments are a gene-based therapy, not a vaccine as per the original definition of an anti-body-based vaccine)
- The lack of transparency and honesty regarding the reporting of what constitutes 'COVID positive', the high correlation and in some instances clear causation of vaccine injuries 'adverse events', and reporting of a 'COVID death', where a large % was death from a co-morbidity
- The intentional construction and imposition of a society wide state of fear
- The unpublicised erection of 5G cell towers without public discussion or reporting (they just started appearing) – is there are relationship here or was it just co-incidence?
- Mandates these were illegal and employers were coerced into being forced to get the injection or lose their job
- Virus Transmission measures: a) Requirement of masks even the CDC and
 of course MANY other countries have proof (science) that they are NOT
 effective at stopping or minimising the transmission of the 'virus', indeed to the
 contrary; the mask both amplifies the level of virus inhaled and increased the
 CO2 level, which in turn can lead to enhanced respiratory vulnerability
- Virus Transmission measures: b) Big Pharma (e.g. Pfizer) by their own admission (ref. VP Pfizer public admission to the EU Parliament that the 'vaccine' never was shown to stop the spread or transmission of the virus)
- Why were doctors silenced and help prisoner to the COVID narrative propagated by the Regulators (TGA, ATAGI, APHRA) under threat of being de-registered? What is the expertise base behind these decision makers?
 Why did they not do any research or investigation in their own right (as servants of the public) but instead pointed to the claims of Big Pharma – they abdicated their responsibility and just rolled over!!
- Surely doctors who are at the front-line should be listened to, not the
 converse; similarly for the nurses and ambulance drivers who were treating
 people at record levels due to COVID, but not before the vaccinations started,
 only as a result of injuries and events sustained after the vaccine
- Just look at the definition of what constitutes a COVID related death or a COVID +ve patient; to be classified as a COVID vaccine injury, the event had to occur after 2 weeks from date of injection, hence overlooking the injuries that occurred between date of vaccine and 14 days, and the list continues
- Where was the independent scientific analysis done regarding the excess levels of all cause mortalities? Why were our dying friends and family not allowed to have a post-mortem and quickly shunted to the crematorium?

- Why have the mortuaries been recording excessively high levels of death for demographics that almost never experience such levels?
- Note: wrote in his book after the WW11 that he was amazed at how easily he could direct clever engineers, scientists and others to design and build weapons without ever seeming to question the purpose for such developments (their silent was complicit)
- What is the scale of monies transferred from Big Pharma into our regulatory bodies (under whatever guise)?
- Why does the Australian Immigration Department deny leading global medical experts access to our country.
- Why is the panel of inquiry not more broadly based than the three nominated people; for example was in the media on a regular basis promoting/supporting the Government narrative, much of which the data tells us to have been incorrect. Again, here is another level of trust lost
- Why has Australia abdicated it health responsibility to the WHO?; we do not need this; they are out of control, draconian,
 Just follow the money trail

Global media, alternate media, other nation's Bureau of Statistics and independent researchers are all starting to coalesce around the data. Most recently the UK, Scandinavia, and the very recent whistleblower data from NZ Govt which links correlation to causation. Independent statistical analysis claims that the probability of this not being the case is 1:100 billion. Extrapolate this to Australia and globally, the numbers are at a genocidal scale.

The conclude my submission, it has become very clear that:

- The science was NOT consulted; to the contrary
- There was no opportunity for open discussion (from varying view-points) as per the scientific process
- People have been intentionally subjected to (particularly in Victoria) the fullfrontal assault by a virtual police state; the police have lost the trust of the public
- Many people we know personally (family [son, siblings, cousins] and a range of clients) have suffered greatly from the impositions of social isolation and side-effects from the vaccines
- Assuming there is no sinister motive behind the appalling COVID responses by our Government and public servants (who can no longer be trusted), we must proceed with a broad based Royal Commission that is representative of all informed parties, for without this we learn nothing and cannot rectify the clear failures that led to the most horrendous medical ever witnessed by humanity – Australia being one of the epi-centres
- We need to create a culture of transparency and accountability at all levels, and DO WHATEVER IT TAKES to WIN BACK THE TRUST of the NATION, without which our democracy is lost, and the future of our children and future generations. What a frightening legacy that would be.