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2 July 2021

Senator the Hon. Marise Payne
Minister for Foreign Affairs
Canberra
By email: foreign.minister@dfat.gov.au

Cc:
The Hon. Michaelia Cash
Attorney-General
Canberra
By email: attorney@ag.gov.au

Dear Minister,

Biological Weapons
COVID-19 Vaccines

1. We wrote to you on 8 June 2021 (copy enclosed) on the understanding that you are the Minister responsible for administration of the United Nations *Biological Weapons Convention of 1972* ("UNBW Convention") as adopted in Australia in the *Crimes (Biological Weapons) Act 1976 (Cth)* ("CBW Act"). That letter, which has not been acknowledged, called on the Government to immediately suspend the rollout of the COVID-19 vaccines pending a full investigation into the claims that the SARS-CoV-2 viral sequence may have been deliberately manipulated so as to create a template for the biological weaponisation of the COVID-19 vaccines.

2. The urgency and importance of this issue to the health of Australians should not be ignored. Considering the generally mild nature of COVID-19 symptoms and that the vaccines at best only reduce symptoms and are linked to a significant and growing number of serious adverse events both here and overseas, without a favourable risk/benefit analysis there are already strong grounds to suspend the rollout for safety reasons, a position now held by many scientists and doctors worldwide.

3. A litany of serious adverse reactions to the COVID-19 vaccines remain unresolved, such as neurological and musculoskeletal symptoms including unresolved muscle spasms, muscle pain and continuous stiffness in joints, gastrointestinal symptoms

including nausea, vomiting and stomach pain, respiratory symptoms including hyperventilation and breathlessness, heart problems including myocarditis and pericarditis, blood clotting including venous thrombosis and skin disorders including severe rashes and welts. Currently, the TGA reports 33,807 adverse events and the U.S. VAERS system reports 384,270 total events, providing strong indications of safety problems.

4. The nature and extent of these injuries is distressing, and all the more in light of the scientific research and circumstantial evidence that points to the SARS-CoV-2 spike protein as an engineered mechanism which, when adapted for use by vector-based vaccines or mRNA vaccines and injected into the bloodstream, will wreak havoc on the body's immune system.

5. COVID-19 vaccines (whether viral or mRNA) use non-targeted or vector-based technologies which are known to cause antibody-dependent enhancement ('ADE'), a phenomenon that can lead to both increased virus infectivity and virulence, with potentially fatal results. Numerous scientists have predicted ADE to be a long-term risk for COVID-19 vaccines.

6. Another related long-term risk that can cause fatality is pathogenic priming, also identified in some studies and predicted for COVID-19 vaccines, which is related to ADE but works slightly differently in that the body starts to produce antibodies against its own spike proteins, in effect attacking itself and leading to severe auto-immune reactions.

7. In May 2020, virologists Sorenson, Susrud and Dalgleish published a paper[1] setting out the longer-term risks of non-targeted vaccine technologies which increase the likelihood of ADE occurring and/or fail to mitigate its effects. Briefly, a neutralising or binding antibody contains epitopes, which are groups of amino acids produced to match and neutralise the epitopes on the virus. Epitopes are recognised by the immune system. If the peptide amino acids on the spike protein of the virus are closely matched to that of humans, the epitopes on the antibodies produced may not neutralise the peptides on the spike protein fully if it does not recognise the entire protein as a foreign invader. The resultant partial binding can create havoc later, through the mechanism of ADE, when the virus returns in a mutated form and partial binding occurs leading to the body producing non-binding antibodies and facilitating entry of the virus into human cells, increasing infectivity.

8. Sorenson et al proceed to contrast vector-based and synthetic peptide technologies, claiming the risk of ADE can be mitigated by the use of targeted vaccine technology

[1] *Biovacc-19: A Candidate Vaccine for Covid-19 (SARS-CoV-2) Developed from Analysis of its General Method of Action for Infectivity* (Cambridge University Press, 29 May 2020)

relying on modelling synthetic vaccine peptides to generate targeted antibody production. It is to be noted here that Sorenson et al included RNA technologies as vector-based.

9. Building on this work, Sorenson et al issued a draft paper[2] which posited that SARS-CoV-2 was more likely created by deliberate manipulation than by natural evolution. They identify specific features usually associated with so-called 'gain of function' ("GoF") experimentation to create high-potency chimeric viruses, including that the viral spike protein (a) has human-like domains well-adapted for human co-existence increasing the chance of ADE and similar phenomena; (b) displays new amino acid inserts with increased charge which enables increased infectivity due to binding to co-receptors/ negatively charged receptors on human cells; and (c) has dual mode capability, allowing binding to ACE2 proteins on human cells and/or to co-receptors on cells.

10. The increased ADE potential of viral vector vaccines can be exploited using those GoF features of the SARS-CoV-2 spike protein to induce or elicit ADE and pathogenic priming. Indeed, the observed serious adverse reactions outlined above are consistent with pre-signalling the severe or fatal outcomes of those conditions.

11. The latter study by Sorenson et al remained unpublished due to political pressures. However, their position has recently been corroborated from various sources, including:

    (a) disclosures by scientists involved in GoF research such as Professor R Baric who was involved specifically in two experiments: (a) in 2015, a bat CoV spike protein was inserted into SARS-CoV extracted from a rat, (b) 2017, 8 different chimera viruses were created by recombining up to 11 new sequences of SARS-type bat CoVs, 2 of which were able to directly infect human cells;

    (b) whistleblower disclosure by Dr Li-Meng Yan, an ex-WIV immunologist who has published papers claiming that the SARS-CoV-2 sequence is an unrestricted bioweapon;

    (c) public statements by Dr R Malone (inventor of mRNA vaccines) advocating against the use of these technologies for the SARS-CoV-2 virus;

    (d) the opinions of prominent scientists and doctors including Professor R M Fleming and Dr P McCullough in support of the GoF claims, including identifying mechanisms of inflammatory responses resulting in a pathological spike protein;

[22] *The Evidence which Suggests that This is No Naturally Evolved Virus A Reconstructed Historical Aetiology of the SARS-CoV-2 Spike*

(e) biodistribution studies prepared by vaccine companies showing the potential for distribution of spike proteins throughout the blood and organs from intramuscular delivery;

(f) experimental findings revealing the vaccine toxicity and neurotoxicity of the spike protein that can cross the blood-brain barrier;

(g) studies conducted by Professor J Lyons-Weiler detailing the possible pathways of pathogenic priming and referring to all previous coronavirus vaccines never passing the pre-clinical stage with animal trials resulting in consistent auto-immune reaction outcomes (noting that both the Pfizer and Moderna human clinical trials did not rule out pathogenic priming);

(h) a renewed U.S. ban on controversial gain of function research following a Senate enquiry revealing collaboration between the National Institute of Health and the Wuhan Institute of Virology ('WIV'), the laboratory at the centre of the COVID-19 outbreak; and

(i) investigations by journalists Markson and Mendes, revealing that the CSIRO and several Australian universities have engaged in at least 10 joint projects with the WIV in the past decade linked to the Chinese military.

12. Concerns of foul play regarding how the pandemic was sparked were sufficiently serious in March 2020 for the Prime Minister to call for international investigations, and on 24 June 2021 for the Health Minister to announce a halt and review of GoF research in Australia at the National Health and Medical Research Council.

13. The foregoing shows that there are clearly strong grounds to suspect that GoF research has played a role in the development of the pathogenic SARS-CoV-2 spike protein, which can exploit the high ADE potential of vector-based vaccines, and may well be causing many of the adverse reactions we are witnessing.

14. Under these circumstances, the Government's 28 June 2021 announcement that the COVID-19 vaccines are to now be mandated for all residential aged care workers comes as an enormous shock and disappointment. It is nothing short of reckless for the National Cabinet to now agree that COVID-19 vaccinations are to be mandated for residential aged care workers as a condition of working in an aged care facility through shared Commonwealth, State and Territory authorities.

15. Such a decision is not only incongruent with the concerns informing the Health Minister's review but may also result in offences against the person and

contraventions of the CBW Act and Australia's international obligations under the UNBW Convention which prohibits the acquisition, stockpiling and retention of microbial agents that have no justification for peaceful purposes and any delivery means designed to use those agents for hostile purposes (section 8; article 1).

16. Under these circumstances, the Government is obliged to conduct an exhaustive investigation into the question of whether the COVID-19 vaccines constitute bioweapons for the purposes of the CBW Act. Section 12 of the CBW Act provides for the Minister to appoint an analyst to conduct a thorough examination of a substance to certify the results, and section 10 provides for the Attorney-General to use the certificate as evidence in prosecutions of offences against the CBW Act.

17. We therefore urge the Minister to immediately:

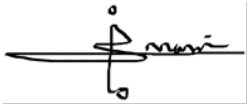
    (a) appoint an analyst under section 12 of the CBW Act to analyse the COVID-19 vaccines and in particular, the design and operation of the spike protein generation components; and

    (b) suspend the roll out of COVID-19 vaccinations, including all or any mandating of the vaccines pending satisfactory resolution of the issue.

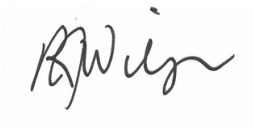
18. Should the Government not appoint an analyst and suspend the rollout and cease all directives for mandating the COVID-19 vaccines within 14 days, we may need to instruct our lawyers to take action in the Courts seeking urgent injunctive relief and a writ of mandamus without further notice.

Yours sincerely,

Serene Teffaha
Chief Executive Officer



Mani Shishineh
Director



Judy Wilyman
Director