

The COVID Narrative and “Conspiracy Theories”: A Physician’s Perspective

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You might have recognized that something is gravely amiss with the narrative regarding COVID.

You might have a general sense that you are being deceived or have even noticed the large discrepancy between public policy and medical evidence in terms of lockdowns, mask mandates, school closures, vaccine mandates, early outpatient treatment of COVID, etc.

You might be asking, what is going on?

Before we can begin to answer this question, it must be first understood that preemptive tactics have been employed, most likely without your awareness, to limit your ability to openly consider this question. A common technique used in propaganda focuses on pre-programming one’s reactions by linking a particular label to a notion of illegitimacy.

In this way a susceptible individual will be unable to objectively assess the content from any source once this label has been applied. Multiple entities, including mainstream media, have worked diligently to illegitimize the term “conspiracy theory” by aggressively linking it with extremism, paranoia, and delusion. This is a dangerous misconception intended to undermine the basis of critical thinking.

What is a conspiracy theory? Put simply it is a theory about a conspiracy. But let’s further dissect these terms.

The first component of this term is conspiracy. Are conspiracies the self-talk of paranoid schizophrenics or **do actual conspiracies take place**, specifically in the United States involving the US government and private sectors with the intent or effect of deceiving and manipulating American citizens?

The fact is that many such conspiracies have taken place in the United States in recent history. The details of these events are well established and typically disclosed when the

documents are declassified, often after the government is pressured to divulge the information. This requires a significant amount of time to have elapsed after the event and, more importantly the persistent effort of critical thinking American citizens.

These events are often shocking and appalling. As the details are easy to find I will simply provide a short list of such conspiracies in no particular order. If these terms are unfamiliar, I encourage you to educate yourself on these important elements of recent US history.

Cointelpro, Gulf of Tonkin incident, MK-Ultra, William Binney and NSA warrantless surveillance,

Dark alliance and Gary Webb,

Operation Mockingbird,

Project Sunshine, Operation Sea Spray, Operation CHAOS, Project Bluebird, Project Artichoke, QK-Hilltop, MK-Delta,

Pentagon bacteria test and over 200 similar tests on unknowing US citizens,

Salk Vaccine Dr. Bernice Eddy and SV40,

Operation Northwoods,

Ed Snowden documents,

Dept of Treasury Poisoned Alcohol,

Operation Paperclip,

“Tuskegee study of untreated syphilis in the negro male”,

Nayirah testimony,

FEMA Ricin toxin poisonings,

Michael R. Taylor Monsanto VP/FDA Deputy Director, Operation Berkshire,

Atomic Energy Commission radiation experiments including Fernald school radioactive oatmeal,

University of Rochester Uranium and University of Iowa radioactive iodine in pregnant women which prompted the formation of the ACHRE, U.S. military race-based testing of mustard gas.

The list goes on and on.

The very recent declassification of UFO documents demonstrating the decades long cover-up of UFO sightings is a stark reminder. Not only was there an active cover-up right up until 2021, but these documents remain highly redacted[1-2]. Furthermore, the government admits that a significant portion of these documents remain classified[3]. Thus, portions of this cover-up actively continue.



The bottom line is that the belief that conspiracies do not take place is naïve and frankly false.

In fact, there are so many nefarious government conspiracies that have taken place in recent history in the United States that there has not been a time in the last 80 years that a conspiracy was not taking place. While one could, and certainly should, debate about what conspiracies *are* taking place currently, the stance that no conspiracy is taking place is simply irrational.

The second component of this term is theory. The message from mainstream media is that “theory” equates with falsehood, misconception, or inaccuracy. In science however, theory is not such a dirty word. On the contrary, the term *theory* is closely associated with truth.

Theory is an integral part of the scientific method for discovering truth.

All studies based on the scientific method begin with a *hypothesis*. The investigator then goes about seeking evidence to either support or refute the hypothesis. If refuted the hypothesis is rejected and then **not** considered a viable theory.

If the evidence does support the hypothesis, this becomes a theory that is accepted as probable.

Take for example the germ theory of disease. This is the theory that diseases are caused by *germs* or pathogens such as bacteria, viruses, parasites etc. Although the major model used to explain disease in western medicine, germ theory does not completely explain disease, which can occur via other mechanisms and is clearly influenced by other factors including factors intrinsic to the diseased individual.

This theory has an interesting history.

Dr. Ignaz Semmelweis, who was a highly respected physician, was committed to a mental asylum by his colleagues in 1865 simply for proposing this theory. Another common scientific theory is heliocentric theory: the theory that the earth revolves around the sun. We of course have an immense amount of evidence to support this theory. Einstein’s general theory of relativity explains gravity among other things. Cell theory is the theory that living things are composed of one or more cells. There are many theories that are widely considered a close approximation of truth.

A civilian who is aware that conspiracies take place, but unable to prove their existence

usually for decades after they occur, is in a challenging scenario. One can only speculate about conversations that occur in high places and behind closed doors. The power of government level entities to cover up details of such events leaves the rest of world relatively blind.

Nonetheless the pursuit of truth in this regard is vital to the health of any free nation.

Indeed, it is the duty of the citizens to press for this truth. So, what can be done? In the world of science there is a parallel that can be drawn upon from the study of physics, particularly astrophysics.

No one knows for sure what is happening light years away or what occurred billions of years ago. Nonetheless there is a burning desire to understand these events.

Thus, the field of physics is divided into two subdisciplines: theoretical physics and experimental physics.

The theoretical physicists, such as **Albert Einstein and Stephen Hawking**, pose theories based on a combination of observation, calculation, and creativity, often with little actual evidence. Although the theories can never really be proven, the experimental physicists take these theories and try to *disprove* them by running experiments. They will take the stance for example that *if* the theory is valid, then x would also be true. They then test x. If a theory stands up to this scrutiny it remains a viable theory. Most theories are disproven. Others become the defining model of our universe. No one considers theoretic physicists to be delusional. They play a vital role in the pursuit of truth.

The next time you hear the term “conspiracy theory”, pay attention to the intent of the speaker.

Is it being used in an attempt to invalidate the theory or persuade you to immediately reject the content of the theory without consideration? If so, this is a gross misuse of the term.

Also pay attention to *your* immediate intellectual reaction. Do you find yourself more apt to reject the content in question simply because it has been so labeled? Do not succumb to such manipulation.

The very fact that aggressive propaganda has been issued in this regard with increasing frequency should be an indication of the presence of an active conspiracy which is working to avoid discovery. I am not suggesting conspiracy theories be immediately accepted as fact.

Instead begin with the notion that the content is potentially valid and should be applied to an exercise of thought, exploring the evidence to either support or refute such a theory. Ask yourself if the content being discussed is *actually a theory* or is it simply evidence being presented that implies that a conspiracy exists.

Perhaps a theory has not even yet been overtly formulated. In that case, do not shy away from generating a theory to explain such information, then go about testing your theory with the evidence available. This is not a radical or fringe approach. This is a normal intellectual method for processing new information and discovering truth.

The Covid Narrative

For the purpose of this paper, I will assume you are one of the many people who have come to recognize that a group of extremely powerful individuals have gone to unimaginable lengths to make a COVID vaccine mandatory and are intent on ensuring every person on earth receives it.

They created the virus and the “vaccine”, released the virus on the world, made sure that it spread, exaggerated the number of infections, exaggerated its lethality, attempted to block all effective treatment, circumvented informed consent and the Nuremberg code in administering the inoculation, refused to disclose the ingredients, covered up deaths and injuries that have resulted from the inoculation, effectively silenced all dissenting voices, destroyed the life of anyone who spoke out and have managed to get the majority of the world’s health care providers and leaders to ignore all of this and instead promote a false narrative through a combination of bribery, threats, retaliation and outright brainwashing. Establishing the above is beyond the scope of this paper, but if you are not convinced these are at least probable realities I encourage you to continue to explore the validity of the narrative you are being told.

Given the above, the question then becomes: why? Why did they go to such lengths to establish the norm of universal global vaccine mandates? The exact details have not yet been revealed; therefore, we are left to develop theories. There is a significant amount of evidence that can be drawn upon to guide and support such theories, which we will examine. Like the investigator of any crime, we must first identify the motive. You might be tempted to consider that the money generated by the vaccines is the primary motive.

There are certainly massive conflicts of interest between government regulators and Big Pharma.

Until you consider the breadth of entities across the entire planet that have conceded and even contributed to this agenda in a highly coordinated and nearly simultaneous fashion from the very beginning. The United States is the only nation in the world that allows pharmaceutical companies to engage in direct-to-consumer advertising, other than New Zealand, which imposes very strict regulations on what can and cannot be said[4]. If pharmaceutical companies cannot even get the German or Australian governments for example, to let them run an ad on TV for any cost, does it stand to reason that they would comply with the most draconian vaccine mandates in history simply to financially benefit Pfizer? Also keep in mind that a vaccine dose costs about \$40.

In contrast monoclonal antibody treatments cost about \$450 up to \$2300 per dose[5-6]. That’s a 10 to 50-fold potential increase in revenue per dose, yet monoclonal antibodies are being aggressively blocked. These products are manufactured by some of the largest and most influential pharmaceutical companies in the world including Roche, Eli Lilly, GlaxoSmithKline and AstraZeneca. Roche alone spends more money than Pfizer in lobbying every year[116]. This behavior is not consistent with a motive of making money for big pharma.

Finally, the cost of the pandemic, and especially lockdown measures, that has been incurred by essentially every sector and industry of the global economy, dwarfs the revenue generated by the handful of pharmaceutical companies who have benefited from COVID vaccinations[7-9

]. As an increasing mass of people become aware of the sinister agenda unfolding, and the evidence of nefarious intent becomes more apparent, I suspect the new false narrative will indeed become a collusion between big pharm and a few bad actors in high positions. These individuals may even take the fall. Make no mistake, this is a scapegoat, a distraction meant to hide the true intent of the scheme. Fauci is a patsy. Do not be duped into participating in spreading this false deception. Much grander ambitions are being pursued.

We know that whoever is behind this agenda is extremely powerful.

Powerful enough to exert control over the governments, media, major corporations, and healthcare institutions of essentially every nation on the planet. Knowing this, establishing a motive is simple, and it is not money. Any individual or group with this much power and influence has more money than they could ever spend. The motivation of every leader of any large group, at any point in time is the same: control. Specifically control over human behavior. Not only does this feed into the ego drive of a leader, because this equates with supreme power, but it is also the most fundamental and functionally necessary target to achieve any other goal. As a leader you want your nation and your people to function as efficiently as possible, like a well-oiled machine. What is the barrier? The inability to control human behavior. As a modern leader, if you desire preservation of natural resources, longevity of earth's ability to support human life, optimal population numbers, optimal productivity, minimal waste or even crime control, safety, and compliance in any fashion, you need to control human behavior.

The problem is that if you conflict too much with the desires and motivations of your people, they will ultimately revolt or fail to comply and you will lose control rather than gain it. Thus, there has always had to be a balance. The 40-hour work week, the cost of goods, even speed limits are examples of this balance. Traditional methods of controlling human behavior are well known: laws, punishment, manipulation of religion, establishment of cultural norms and expectations, etc. During the industrial revolution, the methods for obtaining control over human behavior became scientific. Frederick Taylor is famous for devising methods in the early 1900's to optimize the efficiency of factory workers and mitigate the demands of highly skilled laborers by imposing a system of extreme divisions of labor.

The goal was to transform skilled and creative individuals into uniform, easily replaceable cogs in a wheel. His methods were quickly embraced by Mussolini and Lenin. Despite the undeniable effectiveness of Taylor's methods, there were consequences. In their article "Where Have All the Robots Gone", Harold Shepherd and Neal Herrick described that Taylor's methods have diminishing returns beyond a certain point. Workers become dissatisfied and alienated, developing increasing resistance towards the system and even unfavorable voting patterns[10]. Taylor's methods are felt to be a major contributor to Russia's Kronstadt Rebellion of 1921[11].

Thus, over the last century a more equitable balance had to be struck between worker and employer. Other methods of control in the modern era include the institutionalization of education and propaganda through television and other media. While these methods have been effective, their success has been limited. Human behavior continues to pose a major barrier to the goals of world leaders. What else can be done? How can they achieve better control without diminishing returns and without people realizing or resisting?

Medicine and Technology to Modify Human Behavior

The quest to utilize medicine and technology to manipulate human behavior began in the US around the time of World War II. Josef Mengel was educated at the Rockefeller Foundation funded German eugenics program before going on to become the “angel of death” at Auschwitz[85].

Several Nazi doctors who carried out this work under Hitler’s regime were brought illegally to the US via operation paperclip[12-13]. Project Bluebird and Project Artichoke officially began in the early 1950’s. These gave rise to MK-Ultra along with QK-Hilltop, MK-Naomi, and MK-Delta, all of which led to MK-Search. These CIA operations were explicitly aimed at human mind control and behavior modification. Thousands of American citizens underwent brutal and tortuous experimentation without their informed consent[13-14]. Despite the extensive experimentation on human subjects using various drugs, the most productive experiment was when they implanted microchips into animals.

In 1965 the CIA was able to literally remote control a group of dogs through a field by way of microchips implanted in their brains. Per declassified documents, the primary limitation noted by the investigators was that the dogs could only be controlled within a range of about 200 feet and plans were described to continue experimentation in “other species”[15-16].

In the same year Dr. Jose Delgado succeeded in remotely manipulating the behavior of a bull, also using an electronic device implanted in its brain[17]. Delgado continued his work on mind control using implanted devices through Yale University and published over 100 papers. After performing similar experiments in cats and monkeys he moved on to human trials. In a story published in Scientific American, writer John Horgan describes, “Delgado could induce fear, rage, lust, hilarity, garrulousness and other reactions” in his human subjects[18].

MK-ultra was exposed in 1974 by **Seymour Hersh**, a journalist with a long career of exposing government cover-ups via anonymous sources[19-20]. The program was subsequently investigated by a committee led by then **Vice President Nelson Rockefeller**.

The CIA claimed at that time that the program had conveniently been self-terminated just one year prior in 1973. Unfortunately, most of the documents of MK-Ultra were destroyed. Still tens of thousands of pages were ultimately declassified and made available to the public thanks to the freedom of information act. In keeping with the CIA narrative, documents only lead up to 1973.

Documentation beyond that point remains classified. Despite the narrative that MK-Ultra ended in 1973, there is no proof that these projects and the quest for control over human behavior was ever actually discontinued. In fact, following the completion of the investigations into CIA mind control experimentation, President Ford penned an executive order in 1976 prohibiting “experimentation with drugs on human subjects, except with the informed consent, in writing and witnessed by a disinterested party, of each such human subject.”[13, 20-21] Aside from the redundancy of this statement, which simply reiterates already well-established codes of medical and bioethics including the Nuremberg code, this executive order is suspiciously limiting.

Why was it necessary to add the phrase “with drugs”? Whether intentional or not, there is clear omission of any prohibition of experimentation using implantable devices, despite this being a component of MK-Ultra. In 2004 John Greenwald, founder of The Black Vault, a site which catalogues declassified government documents, uploaded the MK-Ultra documents. It was later discovered by a man named Oscar Diggs that thousands of pages were missing, and Mr. Greenwald subsequently requested these missing documents from the CIA in 2018.



Remarkably the CIA replied that these pages were *intentionally omitted* from the original request because they pertained to “behavior modification” rather than “mind control”, which was the subject of the investigation into MK-Ultra[22-23]. In other words, the CIA considers “behavior modification” a separate component of their activities from “mind control”. While the actual distinction is nebulous at best, the fact that the CIA considers these to be distinct operations further supports the notion that at least the “behavior modification” component of their activities has indeed persisted.

In 1965 a computer was roughly as large as a full-sized refrigerator yet had roughly the processing power of a basic handheld calculator[24]. In contrast, Intel’s most current 2021 processor is just 7 nanometers (nm) large[25-26]. For perspective, 1nm is one billionth of a meter, smaller than the wavelength of visible light. A single atom has a width of 0.5nm. If living animals could be controlled like remote control cars in 1965, it is not hard to imagine how far the trajectory of technological advancement would take us nearly 60 years later.

While the technology possessed by government entities typically well exceeds that available in the private sector, we *can* nonetheless look to known and published technology in the private sector today to give us an idea of what might be currently possible. One field of science that is relevant to the goal of control over human behavior is genetic modification. Our DNA can be altered in a nearly infinite number of ways. This technology has been around for decades, hence the prevalence of GMO (genetically modified organism) food. One can hardly find non-GMO corn anywhere in North America now. Genomics is one of the largest fields of science in practice and focuses on the function and editing of genomes[27]. Genetic modification is powerful, and the possibilities are limitless, but the changes are permanent and difficult to control, particularly with regard to manipulating behavior.

Nanotechnology

Nanotechnology and specifically nanobots offer a form of technology that seems more attractive and is certainly more in line with the evolution of techniques that were being explored in the 1960’s. These are robots 50 to 100nm wide. This is about 1/10,000 the size of a human cell or 1/1,000 the size of the nucleus. They can be made of a variety of materials, are of course invisible to the naked eye and can easily be injected through a needle and syringe. They can enter the brain, target areas that control certain behaviors

and influence those behaviors[28-31].

The largest barrier to nanorobot's ability to enter the brain is the blood brain barrier, a highly selective semi-permeable border that protects the brain from elements in circulation. Spike protein is known to aggressively disrupt the blood brain barrier[32-33]. This may be the very reason for the spike protein having been placed on the virus and why the "vaccine" contains the mRNA to generate spike.

More importantly, the mRNA itself is encapsulated in lipid nanoparticles and we know the jab contains significant amounts of this ingredient. Lipid nanoparticles were designed as a vehicle to assist in the transit of materials across the blood brain barrier and into the brain. Indeed, this is precisely how they have primarily been used prior to the development of COVID vaccines[120].

When a sufficient number of nanomachines assemble, they become a microchip or computer processor. They can receive and transmit information via electromagnetic waves[34-37]. Thus, behavior could be remotely controlled and modified in a certain fashion one minute and modified differently the next.

This is not science fiction but rather an entire established field of science with such a large body of ongoing published literature that there are over 75 different peer reviewed periodic journals in print dedicated just to keeping up with the literature related to this field[38-43]. **One subdiscipline of nanotechnology involves using DNA to build these nanobots,** called DNA origami nanomachine technology[44]. In 2014 researchers in Israel injected DNA origami nanobots into a living cockroach and built what the investigators described as a computer to manipulate certain tissues[45].

DNA Origami

I have read through a considerable amount of the literature on DNA origami nanotechnology and from what I have seen, the vast majority comes out of Asia and third world countries. It seems unlikely that the United States and European countries would not have an interest in this field. Perhaps research from the west is not being published because of the obvious implications of what they are developing. Meanwhile, in a 2015 webinar Ray Kurzweil, director of engineering at Google, openly asserted, **"In the 2030s we are going to send nano-robots into the brain."**[46-48].

This statement came off as more of a threat than a prediction, which was endorsed in the same year by Nicholas Negroponte, founder of the MIT Media Lab, and **James Friend**, a professor of mechanical engineering at UC San Diego. In fact, **Dr. Friend estimated in 2015 that we were only two to five years away from human brain nanobots**[47]. Despite their enthusiasm in this regard, according to a 2014 pew research survey 72% of Americans are *not* interested in a brain implant even if it could improve memory or mental capacity[49]. Apparently, this technology may not be implemented based on choice.

The Vaccine Adverse Event Reporting System (VAERS) tracks adverse events that occur in association with vaccinations. VAERS was established in 1990 and is managed by the CDC and the FDA. The system allows the lot number of the vaccine dose in question to be entered along with the reported event, providing the ability to track adverse events in relation to a particular lot or set of lots[50]. The adverse events associated with COVID have been historically unprecedented in comparison to prior vaccines[51].

As you might imagine the rate of adverse events in a given vaccine, for example the seasonal flu shot, will be relatively consistent across batches, i.e. low lot-to-lot variability. Isolated lots that are contaminated or corrupted will show up as outliers and thus can be identified using this system to facilitate a recall and root cause analysis. Based on an unpublished analysis of VAERS data from COVID vaccines performed by Paardekoooper et. al. there has allegedly been extreme lot-to-lot variability in association with COVID vaccines, far beyond what would be expected from any naturally occurring variability and highly unusual based on other vaccines in the system.

According to their review this phenomenon is present across all three COVID vaccine manufacturers distributing in the US. Many lots have few or even zero serious adverse events while many others have thousands of serious adverse events. If this is accurate, it would indicate that COVID vaccine lots do not all have the same contents. Their data suggest that there are at least 2 or 3 distinctly different categories of lots within a given product, each containing different ingredients, or at least a different ingredient, that is responsible for this very high rate of adverse events, including deaths and miscarriages[52]. It is important to understand that those who wish to examine the contents of a vaccine vial, including the FDA or any independent lab, cannot simply identify all the contents.

There is no method or technology that accomplishes this task. This is a basic limitation of toxicology. Instead, one must test a sample for a specific ingredient. In this manner you can check for the presence or absence of any given *known* ingredient but will be incapable of identifying the presence of an ingredient you do not specifically look for.

This highlights just how little is known about what these injections contain. It is well known that the FDA does not have all the drug and/or vaccine information on a given product during their review processes and are at the mercy of the manufacturer to provide this information. Such information has often been nefariously withheld by the manufacturer, which was recently well demonstrated during the Purdue OxyContin debacle[53-54].

It is another matter entirely however when the FDA is seen to actively collude with the pharmaceutical industry to hide safety information from the public. **Shockingly, after a group of more than 30 academic professors and scientists requested the FDA share the data it utilized to determine the safety of Pfizer-BioNTech's Comirnaty vaccine via the Freedom of Information Act, the FDA requested the courts allow more than 55 years to provide this information.**

This is a glaring indication of these two entities conspiring to hide something about the vaccine, potentially related to its contents. The courts ultimately granted at least 8 months to provide this information. As of the time of this writing Pfizer is stepping in to intervene in the lawsuit as well as to "help redact those pages" during this release process. Also remember this only pertains to the Comirnaty formulation, which is not actually being administered to anyone at this time. We can know absolutely nothing about any of the EUA vaccines, which include the legally distinct EUA version of the Pfizer-BioNTech vaccine, as none of these products have been granted FDA approval[56-58].

Some have suggested that the intent of the vaccinations may be to kill off a percentage of the population or directly decrease biologic fertility. This theory is certainly supported by the Gates and Rockefeller family ties to the eugenics movement as well as Bill Gate's longstanding contention that overpopulation is one of the greatest problems facing humanity[59-64].

In addition, the lot-to-lot variability data, if accurate, indicate the presence of an experimental design to assess the lethality and fertility effects of a given ingredient or set of ingredients. Keep in mind, however, that you do not need to kill people, or even render them infertile to decrease the population *if* you can control their behavior, particularly their drive to reproduce. Furthermore, it is important to note that the planet is actually approaching a population *decline* in the next twenty years if current trends continue. Global fertility rates have been steadily declining for decades and now over 95 countries have either fallen below replacement fertility levels, including the United States and every country in the European union, or will be at sub-replacement levels within the next 3 years[65-70]. There is no question that those behind this will want to be extremely selective of which demographics they adjust and at what rate. They will need to be able nimbly adjust reproduction rates, and they are just as likely to want to increase those rates versus decrease.

To review, based on the preponderance of evidence the primary goal of those behind the COVID agenda is most likely to achieve control over human behavior via the introduction of a highly effective and covert means for such manipulation. As Dr. McCullough has pointed out, “all roads lead to the vaccine”. The nanotechnology currently available can manipulate human behavior and can be implemented via an injection. Spike protein and lipid nanoparticles in the vaccine will facilitate entry into the brain.

The US government has a decades long history of performing dangerous interventions on US citizens aimed at mind control and behavior modification without their knowledge or consent and there is no proof this was ever discontinued. While we have no way of knowing everything that is in the vaccines, VAERS data, the open efforts of both the FDA and Pfizer to withhold the safety data, and Pfizer’s attempts to deceive the public regarding the distinctions between its various formulations[56-58], indicate that we are being lied to about their contents.

If the effects of this manipulation were to become apparent to the unvaccinated, most of those individuals would never willing submit to inoculation. There would be a war. Therefore, the entire population must be inoculated before the effects are evident. Three potential scenarios, or a combination thereof, then exist. The first is that the technology has the ability to lay dormant until everyone has received the inoculation, at which point it can be activated remotely. Based on the current state of technology this is absolutely possible. Alternatively, the current injection does not actually contain this technology. In this scenario the purpose of this phase is simply to normalize universal global vaccine mandates with the intention that during a future pandemic or wave there will a brisk global acceptance of the technology-containing inoculation within a short timeframe. Finally, the current vaccinations are intended to test this technology on mass scale for future implementation. A combination of the above is most likely.

Bill Gates has been very outspoken regarding his intention to vaccinate the entire planet

He has been integrally involved with every facet of the global response to the pandemic since well before it began.

There are multiple hints that indicate that Gates and others behind this agenda are planning on facing significant resistance to full compliance with the vaccine.

Ultimately, they are not planning on this being voluntary, nor are they planning that simply making it a law or a mandate will lead to compliance.

This will need to be strictly enforced under harsh penalty for their objectives to be met. Bill Gates has funded MIT to develop an application of what is known as **Quantum dot technology to create a sort of tattoo which is placed simultaneously with a vaccine.**

The Quantum Dot Imprinting Technology

It is invisible to the naked eye but can be read by a cell phone camera and will contain the vaccine data along with any other personal health information[70-72]. **Quantum dot** imprinting is done using a bioluminescent enzyme called luciferase or luciferin, which is noted 60 times in the Moderna COVID vaccine patent US 10,898,57474-75. Although this enzyme has other uses, together these facts raise concern that those who have received this inoculation may have already received a Quantum dot imprint without being aware. **In 2018 Gates filed a patent for an implantable sensor which tracks your “biometric data” and links this information to the generation of cryptocurrency.** According to the patent, the device will “award cryptocurrency to the user whose body activity data is verified”. This application was filed around the time that event 201 was being drafted[76-77].

CryptoCurrency

Also, around this time Bill Gates teamed up with Google and Ripple, the company who developed the cryptocurrency XRP and who develops financial exchange technology, to create Mojaloop Foundation.

According to their website Mojaloop’s mission is to develop software to be used for digital payment systems to enable financial services between individual users, banks, government entities, merchants, mobile network operators, providers, and technology companies - connecting the underserved with the emerging digital economy.

They aspire for their system to get “people to use digital payments instead of cash” and state that there must be “full involvement of the private sector”[78-80]. **Together these technologies point to a plan to control access to finances based on compliance with vaccination.**

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Notes

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