Dear NACI Committee members,

I am writing with respect to your review of data and objective evidence in consideration for the approval of the covid-19 vaccines for infants and children <5 years of age. The decision before you has more to do with your individual and collective integrity as opposed to a life-saving measure.

Data from PHAC clearly shows that:

1. *Children <5 yrs of age have an extremely low risk of a severe outcome from Covid-19*
2. *The majority of Canadians test negative of covid-19, and of those who test positive, the majority fully recover. The exception is well known to be the elderly with underlying health conditions.*
3. *The difference in case rate of those vaccinated for covid-19 compared to the unvaccinated is ~0.48% (480/100,000). Furthermore, at the peak of cases in February 2022, the case rates were identical.*
4. *The difference in peak hospitalization rate of those vaccinated for covid-19 compared to the unvaccinated, in February 2022 is ~0.17% (170/100,000).*
5. *There are 9,627 serious adverse events following covid-19 vaccinations in Canada, and it is well known that if an individual experiences a decline in health outside of a designated temporal reporting period, that the 'vaccine' is dismissed as a potential cause.*

Many doctors and scientists worldwide, since Dec. 2020, have questioned the claims of efficacy, and claims of safety of the covid-19 vaccines. Recent data released from Pfizer, together with data and real-world experience show these doctors and scientists were correct. Yet government(s) and health authorities have and continue to dismiss their concerns and warnings.

Furthermore, the recent approval by the US FDA of the covid-19 vaccines for children <5 years old was a real-time example of a process void of integrity, and one which left many unanswered questions. These questions are listed below, and I would request that you review and provide data to support the answers to each one.

Sincerely,

Regards,
(NAME)
(ADDRESS)

***"… we're never going to learn about how safe this vaccine is unless we start giving it."* – Professor Eric Rubin of Harvard University** FDA Vaccines and Related Biological Products Advisory Committee (VRBPAC), 10/26/21

Please note the link to the FDA proceedings:

Slide presented by the FDA during the June 15 2022 VRBPAC meeting, discussed at 3:39:10

1. Why did 2/3 of all the participants drop out of the Pfizer clinical trials?
2. **Why is the Moderna dosage more than 8 times as much as the dosage in the Pfizer shot?**
3. Why are 6–23-month-old infants given the same dosage as much larger 4–5-year-old children? Is that safe, or is it an overdose?
4. Where are the statistics that my child is at risk due to COVID-19?
5. Have there been any studies regarding the interactions between the COVID injection and all the other vaccines our babies are given?
6. How will these injections impact the long-term fertility of my infant baby?
7. Why are these injections being pushed on infants before long term studies of cancer and auto-immune diseases have been completed?
8. **Why are the genetic sequences of the modified spike protein mRNA found in the Pfizer and Moderna injectable products not public knowledge?**

QUESTIONS (6-23 months and 2-4 years):

1. **Why did 73% (1,027-277=750/1027=73%) (6-23 mo) and 71% (1,673-481=1,192/1,673=71%) (2-4) of the participants in the treatment groups drop out of the study?**
2. Why is it being ignored that 98 of the 1027 infants (6-23 mo) and 127 of the 1673 2–4-year-olds who received the Pfizer injections were diagnosed with COVID-19? The injections clearly did not prevent illness.
3. Why was the "effectiveness" of the Pfizer injection NEGATIVE (-29.7%) after the first injection (6-23 mo)?
4. Why is it being ignored that the PLACEBO was 100% effective for the first 7 days after Dose 3?
5. Why did 151 participants (treatment) disappear from the study before it started? (N=1178-1027=151) (6-23 mo)?
6. Why did Pfizer fail to follow up with, and fail to report on 17.5% (336-277=59/336=17.5%) of the 6–23-month-old children and 13% (553-481=72) of the 2–4-year-old children who received Dose 3?
7. Why is it being ignored that ALL of the 58 participants (6-23 mo) and the 92 participants (age 2-4) who were diagnosed with COVID-19 in the placebo groups survived COVID-19 infection and developed natural immunity?
8. Why are Pfizer and the FDA allowed to divert attention to immuno-bridging when the efficacy data clearly shows that the vaccines were ineffective regardless of their ability to trigger the production of antibodies?