

## PROCESS NOTICE

19. MARCH 2021

This process notice applies to national and local authorities and government officials who have directly / indirectly contributed and continue to contribute to the physical, mental, economic, social and societal damage caused to the Norwegian population through violations of national and international legislation and conventions, including but not limited to the Constitution. , The Communicable Diseases Act, the European Commission on Human Rights, as well as conventions sanctioned and signed by Norway in connection with human rights violations, so-called «Crimes against humanity», p. The Geneva Convention and the Nuremberg Code.

For the sake of simplicity, the process notice is sent to the Government by the Prime Minister as well as the top management of the health authorities and some other driving elected representatives.

For: Government and Storting representatives

For: FHI and the Norwegian health authorities

For: The Office of the Auditor General v / The Auditor General Per-Kristian Foss

For: The Attorney General

Copy: Raymond Johansen, City Council Leader

Copy: Approx. 400 newspapers / media houses

Copy: The Storting's Justice Committee

Copy: NHO, Sykepleierforbundet, Legeforeningen, Oslo Handelsstand m.fl.

Copy: Social networks

**Copy: Dr. Reiner Fuellmich**, lawyer and one of four members of the German Corona Investigative Committee who are now working with an international network of lawyers who will argue the biggest tort case ever, the Corona Fraud Scandal, which has meanwhile unfolded into probably the greatest crime against humanity ever. Contact the Corona Investigative Committee: <https://corona-ausschuss.de/>

For information, follow the link to a court decision from Germany which concludes that closure measures (similar to Norway) are unconstitutional:

<https://ahrp.org/german-court-in-weimar-declares-lockdown-unconstitutional/>

English (Google) translation of this letter attached hereto.

This letter is sent by Varslerhuset on behalf of an ever-growing group of Norwegian citizens who want to use their democratic rights - if necessary, through the courts - to end the closure and restrictions in connection with the so-called Covid 19 pandemic. Thus, the letter is signed by some of those who participate in this group, see attached signature page.

Varslerhuset Norge AS (House of Whistleblowing Norway Ltd.) was established in 2018 by those who sign this and has i.a. worked with whistleblowing and whistleblowing cases for several 10-years - communication in and between people. Varslerhuset consists of an interdisciplinary council, as well as a large national and international network of lawyers, doctors and other professionals, as well as a number of lay people.



## IS IT DANGEROUS TO BE RIGHT WHEN THE GOVERNMENT IS WRONG?

The question is, of course, rhetorical. History has shown us that there is nothing more dangerous than challenging government officials and institutions when they make mistakes and / or take actions that in a moral and legal perspective would lead to moral condemnation and imprisonment if the actions were committed by the citizens. History is now being repeated by "whistleblowers" who are critical of the authorities' measures in connection with the so-called Covid 19 virus receiving anonymous (murder) threats. Thus, it is emphasized that Varslerhuset is the messenger of this process warning on behalf of an ever larger group of Norwegian citizens who want a completely different approach to the social situation our top authorities have brought the country into.

As a Norwegian citizen, it is nevertheless our right and duty to inform the Storting (Parliament) and the current government of the following matters of importance for infection control measures and the closure of society.

We ask for confirmation per. immediately upon receipt of the letter.

### Introduction

**Global mortality = 0.024%, ie per mille (Source: NIPH) - «Chew a little on the number»**

In the following, documentation is presented that the closure / restrictions in connection with the so-called Covid 19 virus were made on a failing basis, in violation of national and international law, as well as in violation of international law / the European Convention on Human Rights (ECHR), and according to ongoing international legal proceedings. , including the German Corona Investigative Committee, represents so-called «crimes against humanity».

The documentation shows that:

- PCR tests are useless, especially for "bikes" of more than 35 (source; CDC, WHO, FDA and others). According to department head, Truls M. Leegaard, at the Department of Microbiology and Infection Control, «40 bicycles are run on the PCR devices at Ahus. This is standard »for the whole country.

In other words, the infection statistics that are used as a basis for closure and restrictions is 100% incorrect, not 99%, but 100% incorrect

Go to this link for further information: <https://www.lukkopp.no/koronainformasjon>

- Covid 19 (Sars Cov 2) virus is not isolated (scientific), ergo it can be discussed whether the virus exists at all (Source: Including but not limited to CDC report July 2020)
- The vaccines have not been scientifically approved and have been proven to lead to significant injuries, disorders and death, most recently in connection with AstraZeneca vaccine used in Denmark (blood clots and deaths)
- Documentation indicates that the COVID-19 SARS COV2 virus has been patented, presumably already in 2016/2017 (Can be denied by FHI if this is incorrect)
- According to Nobel laureate in medicine (HIV), Professor Luc Montagnier, the virus was developed in a laboratory, most likely in a so-called "bioweapons" laboratory in Wuhan, China, see link: <https://www.bitcute.com/video/XxTOEOpiG7ag/>.

- The economic and financial consequences of closures and restrictions are enormous, especially for small and medium-sized (private) companies.

[https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/?fbclid=IwAR08OFgWj9bSCZfyopSQztLHwRkek2cMwnTL76T\\_H8LV\\_8PSDz0Krxn10qo](https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/?fbclid=IwAR08OFgWj9bSCZfyopSQztLHwRkek2cMwnTL76T_H8LV_8PSDz0Krxn10qo)

Swedish documentary of 2020 lock-down: [https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/?fbclid=IwAR08OFgWj9bSCZfyopSQztLHwRkek2cMwnTL76T\\_H8LV\\_8PSDz0Krxn10qo](https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/?fbclid=IwAR08OFgWj9bSCZfyopSQztLHwRkek2cMwnTL76T_H8LV_8PSDz0Krxn10qo)

The inquiry to you - our elected representatives - has thus been provoked by countless studies which show that the result of the restrictions is significantly greater suffering and death than the virus itself and at any point has been able to cause.

Where it is natural with a confirmation / denial in connection with a specific relationship, it is done in the form of a Question. It is natural that the NIPH / Ministry of Health answers, and we kindly request that the Question (s) be answered thoroughly and that any refutations include irrefutable documentation for the claim. We ask FHI to send a copy of its response to the recipients of this letter, ie members of the Government and the Storting, the Justice Committee, and NRK, TV2 and other media companies (assume that FHI has the email addresses for these).

We will forward your reply to Dr. Reiner Fuellmich at the German Corona Investigative Committee for possible use in the "Nuremberg trial" that a number of lawyers in a number of countries are preparing with a claim about "Crimes against humanity".

### **Dr. Fauci at the US Center for Disease Control (CDC) on the PCR test**

In this interview with Dr. Fauci, he confirms that PCR tests done with more than 35 cycles are useless, see: <https://www.bitchute.com/video/UzPEqzBqsQs/>

In Fauci's own words:

"If you get a cycle threshold of 35 or more that. That the chances of it being replication confident are miniscule".

Miniscule can be translated into Norwegian as "microscopic".

Tests done with e.g. 37 cycles describe Fauci as "dead nucleatides", which in direct translation means that it is impossible to identify the virus. M.a.o. there is no documentable evidence that the virus is present in the individual's body.

Fauci is the leader of the United States Center for Disease Control (CDC) and the White House Corona Task Force Team. What he says is in accordance with all other documentation that exists in relation to these tests, and agrees with what the inventor of the test himself has stated (Dr. Kary B. Mullis was awarded the Nobel Prize for this in 1993).

For example, the following from the CDC (US Institute of Public Health): "CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel":

**"Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms."**

Herewith Interview with Fauci (CDC): <http://www.epimonitor.net/Fauci-Interview.htm>

In "plain Norwegian": A positive test is no guarantee at all that the Covid 19 virus causes infection (regardless of which bikes are used); probably Covid 19 is not the virus in the body at all.

Department chief physician Truls M. Leegaard, at the Department of Microbiology and Infection Control Ahus, confirms that «40 bicycles are run on the PCR devices at Ahus, and that this is standard for health Norway. In plain text, this means that:

When the Norwegian media, presumably with FHI as a source, state that there are, for example, 500 new Covid 19 cases in the last 24 hours, then this is according to above test criteria 100% error. There are, in simple terms, no new cases of the so-called Covid 19 virus. ZERO.

**Question: Are the NIPH / Norwegian health authorities in possession of documentation that refutes the above statements from Dr. Fauchi at CDC (Corresponding Norwegian NIPH) and are the NIPH / health authorities able to present the documentation for this? If not, why are the authorities directly misinforming their own people?**

### **A preliminary conclusion**

Strictly speaking, we could have ended the letter here. The above documentation about the so-called Covid 19 virus - the PCR test's total uselessness to detect infection, as well as WHO's, CDC's, FDA's and others. lack of isolation from the virus - disqualifies every measure and every restriction the Norwegian authorities have imposed on the Norwegian people. If there is a virus - of unknown / known nature - figures from the above-mentioned international institutions show that the mortality rate is 0.024%, ie per mille, a figure which in itself disqualifies every measure and every restriction the Norwegian authorities have imposed on the Norwegian people

### **Purpose and validity of PCR tests**

According to the test method's inventor, Nobel Prize winner and biochemist, Kary Banks Mullis, the application of the PCR test is DNA research, where it is used to copy and enlarge genetic material, not to diagnose an active viral infection. The test cannot distinguish between active or dead virus.

The Swedish Public Health Agency has stated that "PCR tests cannot determine whether someone is contagious".

Pathologist Dr. Roger Hodkinson and CEO of the biotechnology company Western Medical Assesments, which produces PCR tests and he states that positive test results do not mean clinically active infectious infection and that all testing should stop due to the false numbers this produces.

- Politicians and the media are behind an unfounded hysteria. We see a politician and politicians playing the role of medics, which is a very dangerous game, says Dr. Hodkinson in Israel National News.

"The PCR tests are scientifically useless," says Björn Hammarskjöld in News Voice, assistant professor of pediatrics at Strömstad Academy.

Corman-Drosten Review Report, written by 22 renowned researchers points out 10 serious errors with the PCR tests. The WHO has also commented on this report, and has therefore been somewhat skeptical about the use of PCR tests.

In Portugal, the PCR test was ruled illegal and invalid by the judicial system in relation to the detection of infection and was declared invalid as a basis for being able to quarantine people. Portugal News states in the judgment that the PCR tests do not measure up, scientifically, in relation to what the PCR test is used for over large parts of the world.

**Question: Is FHI, the Norwegian Directorate of Health, the members of the government and the Storting in possession of documentation refuting Nobel Prize winner Kary Bank Mullis, who invented the PCR test, a statement that the test «is not to diagnose an active viral infection. The test can not distinguish between active or dead virus »?**

**Question: Likewise, are FHI, the Norwegian Directorate of Health, the members of the government and the Storting in possession of documentation that refutes Dr. Fauci at the CDC, the Public Health Authorities in Sweden, as well as all of the above in relation to the PCR test's "worthlessness"?**

**Question: If FHI et al. is not in possession of such documentation, why is the PCR test (which according to FHI is ridden on up to and over 40 bicycles) used to report hundreds of new infections every day?**

### **Does Covid 19 exist?**

The CDC, WHO (World Health Organization), FDA (Food and Drug Administration) and more and more international research institutions confirm that they have not been able to "isolate" the so-called Covid 19 virus, which, and from a common linguistic understanding, means that the virus does not exist, other than "in our heads".

**Oxford Dictionary:** "Isolation: The action of isolating; the fact or condition of being isolated or standing alone; separation from other things or persons; solitariness."

Can it get clearer? Can it be misunderstood?

Dr. Andrew Kaufmann: <https://www.bitchute.com/video/s6kXM41pyadb/>

<https://andrewkaufmanmd.com/sovi/?pagenum=9>

**Question: Are the FHI / health authorities in possession of irrefutable evidence that the Covid 19 virus has been isolated, either by the FHI itself or the CDC, WHO, FDA or other recognized research institution? If so, are the NIPH / health authorities able to present irrefutable documentation in the form of "scientific proof" for this?**

In light of the above in connection with the PCR tests and lack of scientific evidence that Covid 19 even exists, we can draw the following conclusion (early March 2021):

- Proven infected according to FHI: 73,500 - correct number is 0
- Mutantly infected according to FHI: 1,630 - correct number is 0 (a non-isolated virus can not mutate)
- Died according to FHI: 633 - correct number is 0

**Question: How do the NIPH / health authorities explain these horror figures? Is there another agenda that is kept hidden from the people?**

### **Does a mortality rate of 0.024% justify shutdown and restrictions?**

The American Institute for Economic Research recently published 21 studies from several countries that show that shutting down society has little or no effect on the spread of the virus. This should be taken into account when UNICEF chief Henrietta Fore announces in VG that measures such as closing schools have "[destroyed] much more in total, than it has done well".

#### **Great Barrington Declaration:**

We now know from chief physician Halvor Næss at Haukeland hospital and doctor / researcher Charlotte Haug at SINTEF, virologists Dr. Martin Kulldorff, professor and epidemiologist at Harvard University, Dr. Sunetra Gupta, professor and epidemiologist and immunologist at Oxford University and Dr. Jay Bhattacharya, professor and epidemiologist, Stanford University and from more than 52,600 researchers and doctors involved in the petition and signature campaign, the Great Barrington Declaration and from former Chief Science Officer of the pharmaceutical company Pfizer Dr. Mike Yeadon, that at best these (shutdown) measures are greatly exaggerated

Further documentation from a number of highly respected and recognized institutions in relation to the overwhelming negative effects of closure and restrictions can be found here:

<https://thefatemperor.com/scientific-analyses-and-papers-on-lockdown-effectiveness/>

(See attached source reference)

What is the scientific basis for infection control measures?

We ask you to look at the legality of coronary restrictions and on what scientific basis these restrictions are based, and the validity of PCR tests to test for an active infection when the virus does not meet Koch's postulates.

Infection rates and number of patients

The above documentation shows that central authorities actively promote a false narrative in relation to pointing out infection as if everyone is potentially ill and a carrier, even without symptoms. The Government does this through deliberate misinformation about current infection rates, ie based on a test that does not diagnose active infection.

- An adult has at all times approx. 3 kg of dangerous and harmless bacteria and viruses in the body, some also corona, without being ill, writes professor and doctor Dag Bratlid in Aftenposten.

Doctor and professor emeritus Dag Bratlid and foreign doctors point out that it is not a question of infection, but that it is a matter of being a carrier without being contagious. Dag Bratlid states that infection means "transmission of disease"

If you are infected, you are ill and doctors do not use the term "infected" for those who do not have symptoms.

- One should rather report how many (few) have actually become ill. We have had this virus for a long time, yet the virus is detected in well under 1 percent. Based on infection medicine assessments, covid-19 is therefore a small "infectious" virus, says Bratlid.

Question: The media is allowed to answer for itself, but why does the government engage in grossly misleading dissemination of information and who is responsible for influencing our media, including the state channel NRK, to relentlessly and persistently disseminate this misleading dissemination of information?

Medications and good treatment options for covid-19

Initially under this point, we encourage the NIPH / Directorate of Health, government and parliamentary representatives to watch video from the conference "Frontline Doctors of America", see link:

<https://www.americasfrontlinedoctors.com/the-stand-the-truth-about-the-covid-19-vaccine.html>

Against this background:

In the relatively one-track debate, it is again said that vaccines are the only solution. Hans Husum, district doctor in Finnmark, states in the North Norwegian debate that safety with a little-tested vaccine has previously been shown to have major consequences.

If, for the sake of theory, we assume that SARS CoV2 is isolated, which it is not, there are medications and several treatment protocols as better alternatives to untested vaccines. M.a.o. it is not necessary or justifiable to use the population as "guinea pigs" for the world's largest pharmaceutical companies. One of these medications is Ivermectin. Ivermectin has been reviewed in 35 trials by 221 researchers and in 10,336 patients with very positive results (up to 90% improvement). Experiments have so far shown that Ivermectin reduces the number of cell-associated viral DNA by 99.8% in 24 hours.

On Tuesday, December 8, 2020, Dr. Pierre Kory M.D. Associate Professor at St. Luke's Aurora Medical and University of Wisconsin School of Medicine testified in the U.S. Senate. Dr. Kory is the president of the COVID-19 Critical Care Alliance and in his testimony Dr. Kory says that he works to save covid-19 patients and has continuously worked on the development of a new treatment protocol using Ivermectin. As evidence, Dr. Kory was able to present 30



studies using Ivermectin that have been shown to be very effective, which can also be used with great success preventively.

See Dr. Kory's testimony in the Senate, Senate Homeland Security and Governmental Affairs Committee hearing.

The National Institutes of Health (NIH) in the United States has updated its recommendations and approved the use of Ivermectin for the treatment of covid-19.

A new report published in the American Journal of Medicine on January 1, 2021 shows that the drug hydroxychloroquine (HCQ) is effective in treating Covid-19. Patients who have had the opportunity to take HCQ at home at an early stage in combination with zinc, almost never became ill and drastically reduced the risk of dying. The report states that it is safe to use and distribute hydroxychloroquine as a treatment option for covid-19.

The German / Norwegian doctor Heiko Santelmann, former researcher and natural medicine (<https://www.facebook.com/drsantelmann4health/>), was the first in Norway to announce i.a. Steinar Madsen about good and well-known medicines such as HCQ, as well as vitamins and minerals, which in retrospect had been of great benefit to vulnerable groups and people with weakened immune systems. Santelmann has never received a response from the Norwegian authorities to his many inquiries.

It is assumed that FHI, the Norwegian Directorate of Health, as well as government and parliamentary representatives are aware of the fact that many doctors, health workers, lay people and others are very sceptical of a rapidly developing, experimental vaccine with new technology and what it can inflict on people. long term. None of the new vaccines against covid-19 have sufficient studies on long-term effects, and even the short-term effects are not well enough known and documented.

Even Espen Rostrup Nakkstad says in TV2 that he waits until he sees the documentation to be sure that the vaccine is effective and safe. This after the vaccination of the elderly was initiated.

Steinar Madsen from the Norwegian Medicines Agency, stated the following in TV2 Nyhetskanalen on 23 / 12-2020, at 12:09 «[Now, in the monitoring phase we look at two things], one is that the vaccine works, that it actually protects against covid-19 and the other is side effects that we do not know about yet, and what is interesting is that these severe allergic reactions were not detected in the studies. " The journalist in TV2's studio did not come up with a single critical question after this statement, which probably says something about the journalistic level.

Is there a scientifically valid need for an experimental vaccine when there are good treatment options for covid-19 that have a survival rate of 99.976%? The Norwegian Medicines Agency states that 110 people have died from the vaccination (see weekly report March 2, 2021). Was this meant to protect the elderly and the weak?

The Ministry of Health and Care Services, FHI and the government should consider that there are effective treatment methods for covid-19 and not expose the Norwegian people to test

trials with experimental vaccines. Experimental testing on humans is a violation of the Geneva Conventions, and thus represents a crime against humanity, as described in the Nuremberg Code. Any upcoming compulsory vaccination is also a violation of the aforementioned.

**Question: Why do FHI and the Norwegian Directorate of Health not inform and promote alternative preventive and curative medicines that have been tried out 50-60 years ago and are easily accessible to all citizens?**

**Question: Why do FHI and the government instead want to "forcibly vaccinate" the entire population with untried, unscientifically approved vaccines that are proven to lead to injuries, in both the short and long run, disorders and so far, hundreds of deaths?**

### Survival and death statistics

Massive media coverage of harmful gatherings of people in the spring, summer, and fall of 2020 did not prove to lead to mass deaths. If we look at the figures for the world, and using the WHO's own figures, 1.85 million people died (from 1 December 2019 to 1 December 2020), out of a population of 7.836 billion. Thus, the mortality rate is 0.024% in the first year. The figures are also overreported, partly as a result of the PCR test's documented uselessness, see e.g. statement by Dr. Fauci at the CDC, as well as, and amazingly, a coercive regime in several countries where doctors are "forced" to issue death certificates with Covid 19 as the cause of death with the threat of losing the right to perform their profession; at U.S. hospitals offering \$ 20-30,000 for each patient in the year of death the aken is stated to be Covid 19. The incentive scheme turned out to be so lucrative that, for example, a driver who allegedly drove the car into the rock wall and died from the injuries was listed as a Covid 19 death.

The Norwegian figures from FHI and the Norwegian Directorate of Health show normal mortality, even if one does not take population growth into account:

<http://www.balloon.nu/stat/dode/dode2010-2020.html> Main page: [http://balloon.nu / state / Sources](http://balloon.nu/state/Sources): NIPH and the Norwegian Directorate of Health

Research has been carried out on whether the closure of society, in whole or in part, works and 21 studies, from several countries, show that it is of very little use (see also source references attached). When you consider that a number of problems arise with regard to exposed treatment for heart problems, cancer, etc., that gyms are closed, that amateur sports are closed, financial problems and children's conditions of upbringing are decimated, it is seen that shutting down society causes long-term problems.

There is reason to question whether the government's current infection control measures are based on medical science, and several doctors have begun to ask serious questions about the measures and vaccines. For example, Professor and doctor Mette Kalager has stated in NRK that the closure of the fitness centers is a good example of how the authorities have closed down without giving good answers or a scientific justification. Considering what the gyms have to say for public health in the long run, for people of all ages, and that it is

preventive especially for people who are predisposed to a number of public diseases, the closure of the gyms is a directly harmful act.

Furthermore, for example, Professor and researcher Tore Bonaksen at Høgskolen i innlandet otil NRK referred to a new study, which found a doubling of post-traumatic stress symptoms in the Norwegian population during the coronary pandemic compared with the year before the pandemic. Fear of losing your job and financial problems are strongest, says the professor.

Elling Ulvestad, professor and head of department at the Department of Microbiology at Haukeland University Hospital, questions the authorities' constant declines in an interview with TV2 and believes that the coronary measures are too strict and that there is no reason to be worried about mutations. He receives professional support from department head Gunnar Skov Simonsen at the University Hospital in Northern Norway, Tromsø.

Central authorities have relied on increasing or potentially increasing numbers of infections or mutated viruses as the explanation for persistent and new restrictions on the population. The death toll from covid-19 has not increased proportionally at the same time. The ever-increasing discrepancy between infected and dead since the outbreak in March last year has shown that the virus is less dangerous than expected. Despite this growing discrepancy, the Government has chosen to pursue the policy it has.

Such handling has shown that they are unable to weigh between public health and common sense on the one hand, and blind politics on the other.

**Question: In the daily review in early February 2021, journalist Ingvild Bryn could tell us that there was an "African mutant" of the virus, and that this mutated virus would come to Norway in May 2021. How could NRK and Ingvild Bryn, as far as who preferably / anywhere, tell us that this alleged variant would arrive in Norway exactly 3 months later? Who instructed Bryn to say something so fabulously inexplicable? And who "leaked" the day after "the virus had already arrived in Norway", apparently for the purpose of covering up "Bryns blemme" the day before?**

**Question: What is the view of the NIPH / Health Directorate of international research which concludes that all viruses mutate and they become weaker and weaker through this process until they die out?**

### **Mass vaccination of the population**

It is assumed that the authorities are familiar with so-called "adverse effects" of using "non-scientifically approved vaccines" on the population and what responsibility this entails for decision-making bodies such as the government, the Storting, the health authorities and others.

Still, the following links are attached:

Lawyer Reiner Fuellmich et al. sues WHO for misleading the world in connection with the "Covid 19" outbreak:

<https://www.israelnationalnews.com/News/News.aspx/297626>

Dr. Delores Cahill testimony of lawyer Reiner Fuellmich regarding (lethal) effect of the vaccines:

[https://cdn.lbryplayer.xyz/content/claims/Dolores-Cahill-Interview-Reiner-Fuellmich-Question-COVID-mRNA-](https://cdn.lbryplayer.xyz/content/claims/Dolores-Cahill-Interview-Reiner-Fuellmich-Question-COVID-mRNA-Vaccine/aacd0aa491c0934928b1bfff6f65d37fa4d387ea1/stream?download)

[Vaccine/aacd0aa491c0934928b1bfff6f65d37fa4d387ea1/stream?download](https://cdn.lbryplayer.xyz/content/claims/Dolores-Cahill-Interview-Reiner-Fuellmich-Question-COVID-mRNA-Vaccine/aacd0aa491c0934928b1bfff6f65d37fa4d387ea1/stream?download)

Former Merck employee Brandy Vaughn on vaccines:

<https://www.bitchute.com/video/stK0ivM71NHI/>

Robert F. Kennedy Jr.'s speech to 50,000 people in Berlin on August 29, 2020 (Note: Kennedy has a disease that affects the speech organ):

<https://www.bitchute.com/video/Og5oeliG3VeM/>

Robert F. Kennedy - press conference ahead of the above-mentioned public meeting in Berlin:

<https://m.youtube.com/watch?v=wM7NL IWZD5I & feature =youtu.be>

### **Who is most credible of Bill Gates and Robert F. Kennedy jr.?**

Since Bill Gates resigned from Microsoft for approx. 10 years ago and began his business in "Big Pharma" and vaccine development, as well as establishing himself as the largest contributor to the World Health Organization - larger than any other nation state - Gates' fortune has more than doubled; from about \$ 60 trillion to \$ 120 trillion. According to Bill Gates, the opportunity for profit in the vaccine industry is better than in any other business he has made money on.

Robert Francis Kennedy jr. 17. is an American lawyer, radio host, author and environmental activist. He is the son of former Attorney General Robert F. Kennedy and nephew of former President John F. Kennedy. Kennedy is known for his commitment to human rights and the environment, as well as being a sharp critic of "Big Pharma" and excessive vaccine use, especially with regard to children. Kennedy has written several books and articles on the subject and has received the prestigious American Book Award for his work. So, who is most credible of Bill Gates and Robert Kennedy when it comes to the facts and circumstances surrounding the so-called Covid 19 virus and the use of vaccines?

Let's take a closer look at the question.

As stated in the attached testimony of Dr. Astrid Stuckelberger, [www.astridstuckelberger.com](http://www.astridstuckelberger.com), Bill Gates demanded that the WHO include him in the WHO Executive Board in 2017, which is a body reserved for nation states. According to Stuckelberger, Gates believed that he, as the largest economic contributor to the WHO (compared to all member countries) should have the same status as the WHO Member States. The fact that the WHO receives hundreds of millions of dollars from a private individual with large ownership interests in Big Pharma is in itself startling.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7569658/>

This is stated in the following testimony given to lawyer Reiner Fuellmich at the German Corona Investigative Committee, see link:

<https://www.bitchute.com/video/6klfbm3tpLRB/>

Here are many interesting and relevant facts about Covid 19, first and foremost that Gates should have forced acceptance from the vast majority of WHO member countries to automatically buy vaccines from companies owned / controlled directly / indirectly by Bill Gates if there was a virus outbreak / pandemic of international character. Here plays i.a. the vaccine company GAVI a role and we also assume CEPI with headquarters in Oslo. CEPI was also established in 2017 on the initiative of Børge Brende in the World Economic Forum, The Bill and Melinda Gates Foundation, and Prime Minister Erna Solberg and reportedly has several billion kroner available for vaccine purposes.

Incredibly, GAVI, headquartered in Switzerland, has "diplomatic immunity" for civil and criminal acts, and given GAVI's area of activity, ie vaccines, this immunity means that neither GAVI nor Bill Gates can be prosecuted if vaccines are owned / controlled / sold by / through GAVI leads to injury or death.

In an article on March 11, 2021, Robert F. Kennedy jr. writes that prior to COVID, Bill Gates planned a large-scale censorship of vaccine-critical voices in the event of a worldwide pandemic hitting the world. Gates did this several months before Covid 19 was first discovered in a conference in October 2019 called "Event 21". According to Kennedy, Gates wanted to use the largest social media platforms to censor all criticism of vaccines, which is what has happened. Perhaps most strikingly, Gates planned this several months before the world learned of "Covid 19". Here are some of Kennedy's observations:

- The participants in Event 21 discussed ways to control the flow of information in the media, and especially on social channels, e.g. through propaganda campaigns for vaccine use and censorship of counter-perceptions
- Jane Halton, ANZ Bank Australia and Event 21 participant assured Event 21 participants that the Gates Foundation was developing algorithms that could identify and block "misinformation" to the public; m.a.o. anything that could harm Gates and Big Pharma's financial interests in the development and sale of vaccines
- George Gao, president of the Chinese Center for Disease Control, was concerned with how to suppress information that Covid 19 was developed and produced by a laboratory, ie in Wuhan

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- Other participants who participated in Event 21 and who actively participated in the discussion on how to keep the audience "in the dark" and misinformed included, among others:

Chen Huang - Apple researcher and Google employee

Dr. Tara Kirk Sell - Senior Researcher at Bloomberg School of Health's

John Hopkins Center for Health Security

Matthew Harrington - CEO of Edeleman Public Relations

Stephen Redd, Admiral Public Health

Adrian Thomas - Johnson & Johnson (Pharmaceutical Company)

Avril Haines, former CIA Deputy Director

Tom Inglesby, John Hopkins biosecurity expert

Kevin McAleese, Gates employee

To read the whole article see:

<https://childrenshealthdefense.org/defender/gates-planned-social-media-censorship-vaccine-safety/>

**Question: Here it should be more than enough to dig in for a skilled digging journalist, but our question is short and sweet to ask for a complete statement from our health authorities and our Prime Minister on economic and other matters regarding the above allegations from Stuckelberg about agreements with Bill Gates directly / indirectly and whether Norway has signed and / or committed to buy vaccines as Dr. Stuckelberger claims?**

**Question: If this is correct, we probably have an explanation for why NIPH, the Norwegian Directorate of Health, and / or the government / Storting have bought sufficient vaccines to vaccinate Norway's population 2 to 3 times? The question then becomes what financial consequences this has for Bill Gates and Norwegian taxpayers, and whether the conclusion of such a purchase agreement contains incentives for Norwegian citizens, for example Børge Brende and Erna Solberg, and whether this is the reason why alternative tried drugs, such as Ivermectin do not recommended by the Norwegian authorities?**

### **Virus origin**

According to Nobel laureate in medicine (HIV), Professor Luc Montagnier, the virus was developed in a laboratory, most likely in a so-called "bioweapons" laboratory in Wuhan, China, see link:

<https://www.bitchute.com/video/XxTOEOpjG7ag/>.

This is in line with what former Secretary of State Mike Pompeo has confirmed a number of times.

The startling thing about Nobel Prize winner Montagnier's statement is that his conclusion that the virus was produced by a biological weapons laboratory is easy to prove and that he is in possession of such 100% documentable evidence.

This link presents several documents that substantiate that the virus was laboratory-produced at the military-approved biolaboratory in Wuhan; that is, in a laboratory that produces biological weapons, see:

<https://youtu.be/o9fSstlypUg>

Among other things, the following emerges:

- Jake Sullivan, National Security Advisor USA emphasizes the need for an independent investigation into China and the origin of the virus
- A number of employees at the Wuhan laboratory were affected by "virus-like symptoms" in the autumn of 2019, several months before the outbreak
- In connection with the above point, the US Defense Department published the following official statement: The US government has reason to believe that several researchers inside the WIV became ill in autumn 2019, before the first identified case of the outbreak, with symptoms consistent with both Covid 19 and common seasonal illnesses (US State Department, 15 January 2021)
- Further from US State Department: The WIV (Wuhan Institute of Virology) has engaged in classified research including laboratory animal experiments, on behalf of the Chinese military since at least 2017, The US and other donors who funded or collaborated on civilian research at the WIV have a right and an obligation to determine whether any of our research funding was diverted to secret Chinese military projects at the WIV. When you compare the above with Bill Gates and Event 21, see above, a disturbing picture emerges of what the world, including Norway, has actually been exposed to.

Considering the uselessness of the PCR test, as well as all other documentable conditions regarding this alleged - not isolated / non-existent - virus, Professor Montagnier's statement is logically completely correct.

**Question: Do the NIPH / health authorities agree with Professor Montagnier? If not, please provide irrefutable evidence to the contrary?**

**Question: If the virus is a laboratory-produced biological weapon, this is undoubtedly an act of war and so-called "crimes against humanity", i.a. violation of the Geneva Convention. If so, what does the government / parliament intend to do about it?**

**Violation of infection control measures as stipulated in the Constitution**

We draw attention to the fact that the infection control measures that the government has now introduced violate Norway's constitution. The Norwegian government has disregarded constitutional provisions 101, 102 and 106 due to current infection control measures, which are based on PCR tests that do not distinguish between active or dead virus. I would like to point out that state and municipal authorities violate the constitution and commit crimes against Norway's population.

As stated in lawyer Reiner Fuellmich's statement in connection with the mass lawsuit against e.g. The World Health Organization, WHO, considers that state / national authorities have already committed documented violations of international law and the ECHR, so-called "Crimes against humanity".

We suspect that the Norwegian health authorities, as well as our elected government and parliamentary representatives, are up to date on the massive opposition worldwide to the persistent measures and restrictions that have effectively and demonstrably over the past 12-13 months caused major suffering and desert. Like all legal proceedings that are now being prepared in a number of countries against named politicians and government officials, I assume that Norwegian politicians and government officials are also aware of the above-mentioned violations of national and international law, as well as the responsibility associated with this, ultimately the possibility of to be held accountable for the offenses that already have and still take place.

**Question: Why is society shut down - with the serious physical, mental, economic, social and societal damage this causes - when the so-called Covid 19 virus has a mortality rate of 0.024%, ie more or less like a "regular seasonal flu"?**

### **Our appeal to you, our government**

Mountain weather rule no. 8 tells us that "there is no shame in turning around", but for most hikers an important prerequisite for understanding this is that they have also read mountain weather rule no. 5, 6 and 7, which in summary encourages hikers to "listen to experienced mountain people », « use a map and compass », as well as « do not walk alone».

The above seems today to be most applicable to Norwegian health authorities and politicians, and I therefore strongly and respectfully urge that you follow the mountain weather rules so that further physical, mental social and economic damage and suffering, as well as death due to closures and restrictions, in violation of national and international law, ceases immediately.

The responsibility is enormous, but still easy to live up to - if you can and have the will to take a critical look at what you are doing.

Do you have it?

We look forward to their response / confirmation that Norwegian society is "opened" immediately, and that such confirmation is in our hands by 26. March 2021.



## Legal Process notification

This letter serves as a process warning in the event that our authorities - nationally and locally - refrain from giving us the requested confirmation, see above, within the deadline.

Sincerely and on behalf of concerned and conscientious Norwegian citizens,

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Varslerhuset Norge (which mediates)

Sources of the letter (not exhaustive):

<https://www.aier.org/article/lockdowns-do-not-control-the-coronavirus-the-evidence/>

<https://www.vg.no/nyheter/utenriks/i/zgM9bv/fn-topp-om-coronatiltakene-dette-gjorde-norge-feil>

<https://www.msn.com/en-gb/health/medical/dr-mike-yeardon-three-facts-no-10-s-experts-got-wrong/ar-BB1ayv0f>

<https://gbdeclaration.org/>

<https://www.msn.com/en-gb/health/medical/dr-mike-yeardon-three-facts-no-10-s-experts-got-wrong/ar-BB1ayv0f>

<https://www.fluoridefreepeel.ca/wp-content/uploads/2020/08/McMaster-2020-GR-10-DECISION-LETTER.pdf>

<https://legemiddelverket.no/nyheter/meldte-bivirkninger-etter-koronavaksine-pr-14-januar-2021>

<https://nyadagbladet.se/inrikes/folkhalsomyndigheten-backar-pcr-test-kan-inte-avgora-om-nagon-ar-smittsam/>

<https://nyadagbladet.se/inrikes/folkhalsomyndigheten-backar-pcr-test-kan-inte-avgora-om-nagon-ar-smittsam/>

<https://www.israelnationalnews.com/News/News.aspx/291690>

<https://newsvoice.se/2020/12/pcr-tester-terror-covid-19>

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<https://www.who.int/news/item/14-12-2020-who-information-notice-for-ivd-users>

<https://www.who.int/news/item/14-12-2020-who-information-notice-for-ivd-users>

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<https://www.aftenposten.no/meninger/debatt/i/qLKXw0/hva-vil-det-si-aa-vaere-smittet>

<https://c19ivermectin.com>

<https://www.bitchute.com/video/FXy0Dyb9xYmM>

<https://covid19criticalcare.com/>

<https://www.tv2.no/nyheter/11846298%20>

<https://www.forskningsetikk.no/ressurser/fbib/lover-retningslinjer/nurnbergkodeksen>

<https://www.aier.org/article/lockdowns-do-not-control-the-coronavirus-the-evidence>

<https://www.nrk.no/norge/full-krangel-om-nedstenging-av-treningssentrene-1.15248572>

<https://lovdata.no/dokument/NL/lov/1814-05-17>

<https://www.uio.no/for-ansatte/enhetssider/med/helsam/aktuelle-saker/2019/kalager-er-blitt-professor.html>

[https://en.wikipedia.org/wiki/Kary\\_Mullis](https://en.wikipedia.org/wiki/Kary_Mullis)

<https://freedomplatform.tv/dr-martin-kulldorff-the-great-barrington-declaration-how-focused-protection-can-prevent-lockdowns-get-the-world-back-to-work/>

<https://www.dailymail.co.uk/debate/article-8899277/Professor-Sunetra-Gupta-reveals-crisis-ruthlessly-weaponised.html>

<https://www.bt.no/btmeninger/debatt/i/weejxd/tiltakene-mot-korona-er-ute-av-proporsjoner>

<https://legemiddelverket.no/Documents/Bivirkninger%20og%20sikkerhet/Rapporter%20og%20oversikter/Koronavaksiner/20210211%20Rapport%20over%20meldte%20bivirkninger%20koronavaksine.pdf>

[https://www.amjmed.com/article/S0002-9343\(20\)30673-2/fulltext](https://www.amjmed.com/article/S0002-9343(20)30673-2/fulltext)

<https://www.nrk.no/innlandet/flere-fikk-symptomer-pa-posttraumatisk-stressyndrom-etter-koronaen-1.15365489?>

<https://www.mdpi.com/1660-4601/17/24/9210>

<https://www.tv2.no/nyheter/11962323/?>

<https://www.nyatider.nu/ny-rapport-hydroxiklorokin-effektivt-mot-covid-19-2/?>

Documentation of damage associated with the shutdown (not exhaustive):

THIRTY + LOCKDOWN LACK OF EFFICACY PAPERS & ANALYSIS:

1. STANFORD - Effects of NPI on Covid-19 - A Ta desert. Like all legal proceedings that are now being prepared in a number of countries against named politicians and government officials, I assume that Norwegian politicians and government officials are also aware of the above-mentioned violations of national and international law, as well as the responsibility associated with this, ultimately the possibility of to be held accountable for the offenses that already have and still take place.

Question: Why is society shut down - with the serious physical, mental, economic, social and societal damage this causes - when the so-called Covid 19 virus has a mortality rate of 0.024%, ie per mille, ie more or less like a "regular seasonal flu" ?

A challenge

Mountain weather rule no. 8 tells us that "there is no shame in turning around", but for most hikers an important prerequisite for understanding this is that they have also read mountain weather rule no. 5, 6 and 7, which in summary encourages hikers to "listen to experienced mountain people »,« use a map and compass », as well as« do not walk alone ».

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The responsibility is enormous, but still easy to live up to - if you can and have the will to take a critical look at what you are doing.

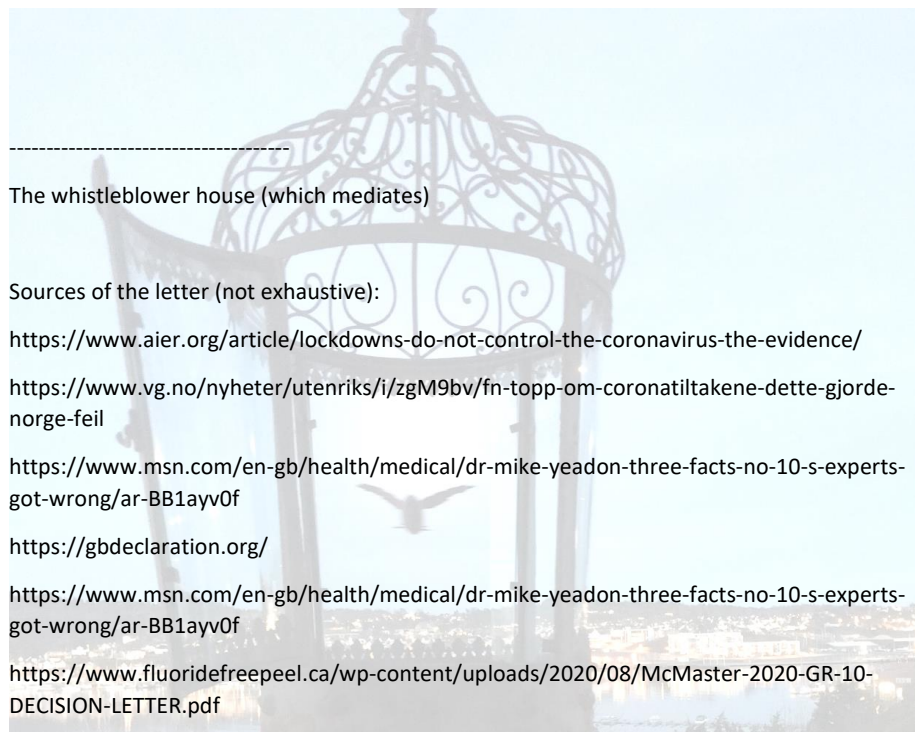
Do you have it?

We look forward to their response / confirmation that Norwegian society is "opened" immediately, and that such confirmation is in our hands by 19 March 2021.

Process notification

This letter serves as a process notice in the event that you do not presumably give us the requested confirmation, see above, within the deadline.

Sincerely and on behalf of concerned and conscientious Norwegian citizens,



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The whistleblower house (which mediates)

Sources of the letter (not exhaustive):

<https://www.aier.org/article/lockdowns-do-not-control-the-coronavirus-the-evidence/>

<https://www.vg.no/nyheter/utenriks/i/zgM9bv/fn-topp-om-coronatiltakene-dette-gjorde-norge-feil>

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<https://nyadagbladet.se/inrikes/folkhalsomyndigheten-backar-pcr-test-kan-inte-avgora-om-nagon-ar-smittsam/>

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<https://c19ivermectin.com>

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THIRTY + LOCKDOWN LACK OF EFFICACY PAPERS & ANALYSIS:

1. STANFORD - Effects of NPI on Covid-19 - A Tale of Three Models
2. Stay-at-home policy is a case of exception fallacy - an internet-based ecological study
3. LANCET NO EFFECT ON MORTALITY Paper
4. Was Lockdown in Germany Necessary? - Homburg
5. KOCH Institute Germany Analysis
6. BRISTOL UNIVERSITY Paper
7. NATURE Submission Flaxman et al Response
8. PROFESSOR BEN ISRAEL ANALYSIS
9. NIH Paper
10. WOODS HOLE INSTITUTE Paper
11. EDINBURGH STRATCLYDE UNIVERSITY Paper
12. BRITISH MEDICAL JOURNAL BMJ Paper
13. ISRAEL MASSIVE COST OF LOCKDOWN PAPER
14. EPIDEMIOLOGY Too Little of a Good Thing Paper
15. Smart thinking: lockdown and Covid-19 Implications-for-Public-Policy
16. SCOTLAND Life Expectancy Paper
17. LOCKDOWN COSTS MORE LIVES Paper Federico
18. DID LOCKDOWN WORK? Paper
19. FOUR STYLIZED FACTS ABOUT COVID-19
20. HOW DOES BELARUS...
21. LIVING WITH CHILDREN IN UK
22. PANDATA COUNTRY ANALYSIS
23. NEJM MARINE STUDY QUARANTINE
24. A MATTER OF VULNERABILITY STUDY
25. Government Mandated Lockdowns do NOT Reduce Mortality - New Zealand Wrong
26. Dec 30th Longitudinal variability in mortality predicts Covid-19 deaths

27. Lockdown Effects on Sars-CoV-2 Transmission - The evidence from Northern Jutland
28. Assessing Mandatory Stay - at - Home and Business Closure Effects on the Spread of COVID - 19
29. COVID-19 Rethinking the Lockdown Groupthink
30. STANFORD Effects of non-pharmaceutical interventions on COVID-19 - A Tale of Three Models
31. Flaxman Rebuttal - The effect of interventions on COVID-19
32. COVID-19 Lockdown Policies - An Interdisciplinary Review

LOCKDOWN HUGE HARMS PAPERS & ANALYSIS:

Note: also go to <https://collateralglobal.org/>

1. MILLION DOLLAR SOCIAL DISTANCING
2. COST BENEFIT ANALYSIS OF LOCKDOWN
3. BMJ IOANNIDIS DEBATE
4. NIH NEGATIVE IMPACTS OF LOCKDOWN
5. BMJ: HERD IMMUNITY POLICY COULD SAVE LIVES
6. IMPACT OF LOCKDOWN DISORDERS
7. BMJ DELAYED ACCESS TO CARE
8. CAMBRIDGE: LIVING WITH COVID - BALANCING
9. PSYCHIATRY RESEARCH - LIVING WITH COVID
10. JAMA HOSPITALIZATIONS FOR CHRONIC DISEASE
11. IRISH CANCER SOCIETY SUBMISSION
12. ECLINICAL DEATHS OF DESPAIR
13. OUR EXCESS DEATH MESS
14. DEATH BY LOCKDOWN
15. LOCKDOWN - A FOCUS ON THE POOR AND CHILDREN
16. MENTAL HEALTH AND LOCKDOWN
17. PROJECTED DEATHS OF DESPAIR FROM LOCKDOWN
18. THE PRICE OF PANIC

Oct 2019 WHO Pandemic Guidelines - no Lockdown Allowed:

WHO Oct 2019 Pandemic Guidelines

Excellent Paper on Dr. Hope Simpson's "The Transmission of Influenza" masterclass book:  
<https://virologyj.biomedcentral.com/articles/10.1186/1743-422X-5-29>

Immunity 101: Great Summary of Population Immunity Reality

Jan 16th Riposte to Quillette Snowdon Junk-Journalism: Quillette Snowdon Junk-Journalism  
Riposte

A Letter from Locked-Down Ireland: The Conversation Nobody is Prepared to Have

