

Key, Lori

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Sent: Sunday, September 12, 2021 5:38 PM
To: ClerkoftheBoard
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Subject: Public Comment: TURNING FLU CASES INTO COVID THROUGH MANIPULATION--Ventura BOS - September 14, 2021 -- Agenda #8

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TURNING FLU CASES INTO COVID THROUGH MANIPULATION---EASY AS PIE

For the past several months, my public comments have been pointing out that relabeling and repackaging disease is standard operating procedure in the field of “pseudo pandemics. ”

It doesn't take a rocket scientist to figure out that while cases of COVID-19 soared nationwide, hospitalizations and deaths caused by influenza dropped.

“There were 646 deaths relating to the flu among adults reported in 2020, whereas in 2019 the CDC estimated that between 24,000 and 62,000 people died from influenza-related illnesses.” (Fox News 7/25/21)

You might want to read those numbers again. The drop in flu deaths was miraculous. Anyone smell manipulation??

How could this happen? Maybe a conversation took place at the CDC that went something like this:

“Hey Bob, could you do me a favor? I need a whole lot of COVID death numbers. Can you shove some of your flu-death numbers over here?”

“Sure. No problem, Bill. We work for the same agency. We're all in this together. But if I give you thousands of flu-death numbers, I want something back. A piece of your COVID research funding. Our flu money these days would barely bankroll a junket for a dozen of us to the Bahamas.”

Here is more information on the disease-switcheroo; they don't teach this in medical school! This shell game has earned the medical cartel trillions of dollars.

The story begins with an “outbreak.” Somewhere on earth, we are told there is a cluster of unusual cases of illness.

The key word is “unusual.” Otherwise, who would care? People would instead say, “Forty people in Wuhan have lung congestion.” And that would spark no interest.

In Wuhan, it was “unusual pneumonia.” How so? No convincing answer. Some people have cited gray areas or opacity in pictures of patients’ lungs. Another claim: patients had extreme shortness of breath.

But wait!! Opacity and shortness of breath were mentioned and described in medical literature long before COVID!

Something else must be offered, to justify the term “unusual cases.” And we get it almost immediately, while we’re still trying to figure out what makes these patients’ illness new and different:

It’s a virus. A never-before-seen virus.

Already a switcheroo is in progress. There is nothing unusual in the Wuhan cluster of cases. And just as we’re about to realize that we’re hit with “new virus.”

Deadly air pollution has been hanging over Wuhan for a long time. It explains all sorts of lung infections, including pneumonia, a cardinal COVID symptom. And by the way, roughly 300,000 people in China die every year from pneumonia.

The “new virus” is trumpeted. But of course, as I’ve demonstrated many times, it hasn’t been found. No one isolated it. The so-called genetic sequencing of it was a fictional castle in the air based on supposition.

Accepting “new virus” as fact produces this situation: a list of very familiar clinical symptoms can now be called unique, because the cause is unique.

Suddenly, cough, chills, fever, fatigue, congestion, shortness of breath---which have been called flu, or just infection, or other names---are COVID. That’s the big switcheroo.

This is a war of smoke and mirrors. It is based on manufactured fear and suppression of facts with no debate. It is a fantasy world with more answers than questions. It’s all about control, power, and politics: Poli= many; tics = blood sucking parasites. .

Excerpts from: Jon Rappoport, August 2021

Judy Bruce, Simi Valley Resident