

Q: Are you here today working under your oath as a constable?

Q: What is your name?

Q: What is your 'collar' number?

Q: What is your warrant card number?

Q: Do you normally work out of this station?

Constables, **this could prove to be the most significant tour of duty you ever work**. This may take a while, but what you are about to hear is extremely important and urgent.

We are here today to report crime - in fact a number of criminal offences.

The disease known as **Covid-19** is under investigation.

We already have a Crime Reference number from the London Metropolitan Police - **6029679/21**

A complaint was made at Hammersmith Police Station in London, on **20th December 2021**, and a parallel complaint has been lodged with the INTERNATIONAL CRIMINAL COURT, based in The Hague in the Netherlands.

I also have **their** acknowledgement Application Reference number - **OTP-CR-473/21**

There is significant and irrefutable evidence from hundreds of complainants, victims, whistle-blowers and medical professionals who have made written statements to confirm that significant injuries and, in some cases, even death, are being caused by the **anti-Covid injections**.

The evidence within the UK is being collated primarily by the Hammersmith Police, and it is my understanding that the constables there handling the multiple allegations are overwhelmed by the sheer number of crime complaints.

For that reason, I can confirm **all UK Chief Constables have been contacted, and informed of this, and have been asked to assist by accepting and dealing with further such crime reports in their respective areas**. This information should have been filtered down to all ranks and civilian staff, so that they all are aware and able to deal with incoming allegations.

Because those complainants' allegations of criminal negligence, malfeasance and other related offences against UK statute are **so extensive**, and because there are a number of **non-UK companies** implicated, a parallel complaint is being lodged with the INTERNATIONAL CRIMINAL COURT. These reports form part of a co-

ordinated multi-national legal ‘**class action**’, which alleges violations of the Nuremberg Code and other international statutes.

Which brings us to the reason for OUR visit here today.

We are aware of people contacting police stations to lodge their complaints and using crime number 6029679/21. However, we are troubled by the fact that this crime number relates to The Metropolitan Police and the potential for victim statements in other parts of the country to be dismissed if people attempt to use this crime number. For this reason, we would like to clarify the best course of action as we are supporting a number of witnesses and victims who are ready to come forward within our local community. We realise the crimes they wish to report are against the State and they are scared of being victimised further - can I remind you that you work for the public, not the Government. We are seeing doctors being struck off for speaking out. We’re seeing NHS staff losing their jobs over their right to bodily integrity and we are seeing people harmed by this experimental jab which is still under trial. What advice do you suggest we give to those damaged by the jab who now wish to make a complaint? Will they receive their own crime reference number? Will they be treated fairly and believed? (Crime is GBH Without Intent).

Our wider allegation is that a deliberate campaign of mis-information is being conducted by this present government - with the co-operation of the main stream media, social media platforms and fact checkers.

The government appears to be putting undue influence on media platforms to silence free speech and end any debate. Therefore civil servants and media workers are also implicated in the following alleged crimes.

The evidence to support **THAT** allegation has also been lodged with constables at Hammersmith Police Station.

Offences against statute and common law being alleged here are:

- Malfeasance in public office
- Misconduct in public office
- Conspiracy to cause grievous bodily harm
- Conspiracy to administer poisonous substance with intent to cause serious harm - even in many cases - to kill.
- Gross negligent manslaughter
- Corporate manslaughter
- Corruption in public office
- Fraud
- Blackmail

- Conspiracy to commit murder
- Terrorism
- Genocide
- Torture
- Crimes against humanity
- False imprisonment
- Multiple breaches of human rights
- War crimes - the allegation is that we are in a **Silent War with Quiet Weapons** being used against us
- Multiple breaches of the **Nuremberg Code 1947**
- Multiple breaches of the **Human Rights Act 1998**

And **TREASON** may also be added to the list of charges.

This could become the world's largest ever criminal case. The case is already under way in many countries worldwide. The evidence is overwhelming and irrefutable.

So, by virtue of **Section 3, Criminal Law Act 1967**, we today call upon you, as a constable, and your colleagues as constables, to assist us in the **CLOSURE** of **ALL** vaccine centres in the area for which your station is responsible. Sec. 3 of that Act states:

“any person may use such force as is reasonable in the prevention of crime or of effecting or assisting in the arrest of offenders or persons unlawfully at large”

The injections are a ‘gene-therapy’ weapon, a bio-weapon, potentially a murder weapon. Up to 5th January 2022, within the UK under the Yellow Card Reporting Scheme, **more than 1.4 million** adverse reactions have been reported including cardiac disorders, skin disorders and vascular disorders and **1,932 people** have died and after receiving ONE or MORE jabs. Anyone speaking out about this is cited as a conspiracy theorists. It seems all healthy debate as been shut down.

Our present government is procuring millions of vials of this material, permitting it to be administered to the general public, even to children knowing that the material injected can cause injury and even prove fatal to many hundreds of UK citizens.

The evidence of this must be seized by police constables as part of their investigation and taken into protective custody. It is incumbent on you to do so without fail, without delay, in all areas within your jurisdiction.

The **Criminal Law Act 1967** gives to any man or woman the power and authority to prevent crime, including the use of such force as is

reasonable, necessary and proportionate, in order to prevent that crime from happening.

You, **Constable X**, may feel personally resistant to this duty, however, there is now a live criminal investigation under way, and your action (or inaction) will form part of the evidence in that action.

The personal oath binds every constable with a duty to protect the people around him or her.

You are all public servants, kept in place with public taxes and public money. If crime, injury or death is occurring it is your duty to work to prevent those offences. Evidence (equipment, vials of the harmful material) must be gathered and safely stored pending court proceedings. This a requirement in statute.

The same statute applies whether constables are in uniform or in civilian dress. Should you fail to do this, you would be committing the offence of 'misconduct in public office' even 'perverting the course of justice'. There is an individual duty to act, which may prove to be the difference between constables being '**witnesses**' to the crime or '**defendants**' to the subsequent charges. It is no longer possible to meekly hide behind the phrase "I was only following protocol or obeying orders".

We leave with you these TWO aspects of our report today -

1. Please provide us with guidance on how we help victims to come forward with confidence that they will be heard.

2. Please advise when we can expect you to begin closure of the vaccine centres to prevent further occurrences of harm.

If we do not hear from you within 10 days, we will assume you are not planning to take further action in relation to this matter. We will then need to seek legal advice on how we, the public, can lawfully prevent further crimes from occurring in these centres.

IMPORTANT PUBLIC ANNOUNCEMENT COVID-19 SCANDAL

METROPOLITAN POLICE FINALLY LAUNCH MAJOR INVESTIGATION

Metropolitan Police Crime Number: 6029679/21

Hugely significant allegations have been made of serious crimes being committed by a number of UK Government ministers, civil servants, heads of news networks etc.

Crimes cited are misfeasance and misconduct in public office, conspiracy to commit grievous bodily harm, conspiracy to administer a poisonous and noxious substance to cause serious harm and death, gross negligence manslaughter, corporate manslaughter, corruption, fraud, blackmail, murder, conspiracy to commit murder, terrorism, genocide, torture, crimes against humanity, false imprisonment, multiple breaches of human rights, war crimes, multiple breaches of The Nuremberg Code 1947, multiple breaches of The Human Rights Act 1998, treason will also be added.

The UK's biggest criminal investigation is now live. **Hammersmith CID** and **The Metropolitan Police** have accepted and are reviewing 1000's of pages of evidence and have agreed there is enough to proceed. All UK police forces have been made aware of this investigation.

The case was lodged on 20th December 2021 by a group including **Dr Sam White**, lawyer **Philip Hyland** (PJH Law), Lawyer **Lois Bayliss** (Broad Yorkshire Law) and retired policeman **Mark Sexton**. Requests for assistance have been made to international lawyer **Robert F Kennedy Jnr** (nephew of J F Kennedy), Dr Reiner Fuellmich (German lawyer who exposed the Volkswagen Audi emissions scandal), **Dr. Michael Yeadon** (Former Pfizer Vice President), plus countless other doctors, professors, virologists, NHS whistleblowers, biologists, data experts and lawyers nationally and internationally; some of whom have already made direct contact with the UK police and were acknowledged by Superintendent Simpson (Assistant to Cressida Dick, Head of The Metropolitan Police).

Mark Sexton says: "The evidence submitted by Philip Hyland and Dr Sam White against the UK's **Medicines and Healthcare products Regulatory Agency (MHRA)** is damning and shows they did not carry out due diligence surrounding the vaccine data, trials and studies; and that they continued to ignore the death, harm and injury that the covid vaccines cause. This is now a live criminal investigation. We were forced to act due to the complacency of the UK Government, despite them being fully aware of the catastrophic death and injury figures to adults and children alike".

"This is nothing short of genocide; once again it seems that profit over people is the overriding motive. There has been and still is a deliberate blanket campaign of misinformation. Many don't even realise that the covid vaccine is still an experimental product. This is the most far-reaching criminal inquiry ever undertaken. A national scandal that threatens the lives and the livelihoods of every person in the UK. **The demand to stop the vaccination program remains a priority and the police are reminded on a daily basis**".

"We have to act on a united front to get the truth out to the public and stop the unsafe Covid vaccine rollout. We have several thousand pieces of evidence to discredit the safety and efficacy of this vaccine, but we are still **encouraging members of the public to contact us and the police to fully support the criminal investigation**. We therefore appeal to anyone who has suffered the death of a loved one following a covid vaccine and anyone who has been injured by it, e.g. blindness, heart issues, blood clots, stroke, myocarditis, miscarriages and still-births, etc".

"We'd also like to hear from those illegally threatened with '**No jab, no job**'".

"We must act now. If you have information to assist the police inquiry, please contact Lois Bayliss of Broad Yorkshire Law: loisbayliss@broadyorkshirelaw.co.uk **Or call the police on 101.** If you believe you are the victim of a crime, a crime report must be accepted".

Spread this announcement everywhere hashtag [#6029679/21](https://twitter.com/6029679/21)



IN ADDITION:

A separate filing has also been made to **The International Criminal Court in The Hague**. File number: OTP-CR-473/21. That case is not listed on the ICC website but you can read about that here, or scan the QR code:

<https://www.docdroid.com/WUjv6iw/icc-complaint-7-1-pdf>



Dr Sam White also wrote a powerful letter to the Chair of UK's Medicines and Healthcare products Regulatory Agency (MHRA) - 'Request for Undertakings for breaches of legal obligations and breaches of duties of care'.

<https://pjhlaw.co.uk/wp-content/uploads/2021/12/letterMHRA.pdf>

There are numerous other covid scandal investigations and court cases happening worldwide.



If you want unassailable evidence, there are many online resources too numerous to mention. Please take all reasonable steps to protect your device when browsing online. Here is one example:

<https://www.saveusnow.org.uk/covid-vaccine-scientific-proof-lethal/>



DECLARATION, CEASE AND DESIST AND NOTICE OF LIABILITY

WORLD COUNCIL FOR HEALTH CALLS FOR AN IMMEDIATE STOP TO THE COVID-19 EXPERIMENTAL "VACCINES"

A. CONSENSUS OF WORLD'S FOREMOST EXPERTS

Globally renowned experts, including Dr. Paul Alexander, Dr. Byram Bridle, Dr. Geert Vanden Bossche, Prof. Dolores Cahill, and Drs. Sucharit Bhakdi, Ryan Cole, Richard Fleming, Robert W. Malone, Peter McCullough, Mark Trozzi, Michael Yeadon, Wolfgang Wodarg, and Vladimir Zelenko, among many others, consistently warn the world about the adverse effects resulting from Covid-19 experimental injections; they also warn about their long-term effects, which cannot be known at this time since most clinical trials will be not completed until 2023, and some as late as 2025.

In June 2021, Dr. Tess Lawrie, co-founder of the World Council for Health and member of the Council's Steering Committee, courageously described the global crisis and called for urgent action: *"There is now more than enough evidence on the [UK] Yellow Card system to declare the COVID-19 vaccines unsafe for use in humans. Preparation should be made to scale up humanitarian efforts to assist those harmed by the COVID-19 vaccines and to anticipate and ameliorate medium to longer term effects."*

B. DECLARATION

The World Council for Health declares that it is time to put an end to this humanitarian crisis. Further, the Council also declares that any direct or indirect involvement in the manufacturing, distribution, administration and promotion of these injections violates basic principles of common law, constitutional law and natural justice, as well as the Nuremberg Code, the Helsinki Declaration, and other international treaties.

C. UNCENSORED FACTS

We now know that children are over one hundred times more likely to die from these experimental injections than Covid-19. Injected athletes, globally, are collapsing before our very eyes. In spite of the fact that reporting systems are limited and passive, millions of adverse effects have been recorded, which include death, paralysis, blood clots, strokes,

myocarditis, pericarditis, heart attacks, spontaneous miscarriage, chronic fatigue and extreme depression.

See: <https://coronavirus-yellowcard.mhra.gov.uk/>

See: <https://vaers.hhs.gov/>

See: <https://www.ema.europa.eu/en/human-regulatory/research-development/pharmacovigilance/eudravigilance>

See: <http://www.vigiaccess.org/> (search covid-19 vaccine)

D. VICTIM TESTIMONIES

The World Council for Health acknowledges and respects the experiences and testimony of the victims of this worldwide medical experiment. We also declare and confirm that safe, effective and affordable treatments for Covid-19 exist and should be made available to all who need them.

See: <https://www.wewanttobeheard.com/>

See: <https://nomoresilence.world/>

See: <https://www.vaxtestimonies.org/en/>

E. NOT SAFE, NOT EFFECTIVE

Recent studies confirm the risks associated with Covid-19 experimental injections. Emerging research establishes that the injections are neither safe nor effective, and, in fact, are toxic. While some of the known ingredients of the injections cause biological harm, it is even more concerning that the unknown and undisclosed ingredients may present an even greater threat to human health.

F. CEASE AND DESIST

The World Council for Health is ethically and lawfully bound to issue this Declaration, demanding that governments and corporations cease and desist from direct or indirect participation in the manufacturing, distribution, administration or promotion of Covid-19 experimental injections.

The Council declares that every living man and woman has a moral and legal duty to take immediate and decisive action to halt this unprecedented medical experiment, which continues to cause unnecessary and immeasurable harm.

29th November 2021

www.worldcouncilforhealth.org

G. NOTICE OF LIABILITY

The right of bodily integrity and the right to informed consent are inalienable and universal human rights, which have been trampled by government mandates and corporate imperatives. Thus, the World Council for Health declares that any person or organization directly or indirectly participating in the manufacturing, distribution, administration or promotion of Covid-19 experimental biologics will be held liable for the violation of principles of justice grounded in civil, criminal, constitutional and natural law, as well as international treaties.

Signed:

Charles Kovess

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Charles Kovess
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Dr. Jennifer Hibberd

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Jennifer Hibberd
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Dr. Mark Trozzi

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Mark Trozzi
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Dr. Naseeba Kathrada

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Naseeba Kathrada
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Dr. Robert J McLeod

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Dr. Tess Lawrie

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Dr. Vince Vicente

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Karen McKenna, MBA

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Maria Hubmer Mogg

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Michael Alexander

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Rob Verkerk PhD

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Shabnam Palesa Mohamed

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Tracy Chandler

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Zac Cox

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Stephan Becker

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Steering Committee, Law Committee, Scientific and Medical Committee - **World Council for Health**

SERVED TO:

DATE:

WITNESS:

UKcitizen2021

by the people...for the people

PUBLIC STATEMENT

24th January 2022

Many people who are resident in the United Kingdom understand the need for a collective voice and a sense of belonging when it comes to making a stand against officialdom. A lone voice all too often remains unheard.

Now, more than ever, it has become increasingly apparent that a strong, unified voice of the people is required, in order to retain many freedoms which previously were, to a large degree, simply taken for granted, but now, seem to be being insidiously eroded by Government and related/associated organisations and individuals, not only here in Britain, but all around the world.

Collectively, under the 'banner' of **UKcitizen2021** those of us who are proponents of the freedoms identified within the *Universal Declaration of Human Rights*, as well indeed as all and any additional freedoms vested in individuals as of natural right, are committed to defending, safeguarding and protecting such rights, for ourselves and for our fellow human beings, everywhere.

Together, we possess a wealth of diverse expertise which originates from within our ranks - We have medical doctors, scientists, law enforcement and military personnel, as well as lawyers, teachers, civil servants, judges and many many more professions. This provides our collective with a very broad level of expertise and experience, which touches upon every element of a modern, forward thinking society.

Robust awareness is especially important in the current challenging times, which is why we have our own dedicated groups of police officers and detectives, medical and healthcare personnel, lawyers, scientists, all with a depth of knowledge suitable to enable a wide range of public officials to be challenged, fairly and appropriately, when a need for such challenges arise. In short, we have people who understand the internal 'nuts & bolts' of operation, in relation to, for example, Government Departments, Police Forces and health organisations like the NHS.

What **UKcitizen2021** is...

- *a non-political collective of forward thinking individuals*
- *a forum for those with common areas of expertise to flourish through the sharing of ideas and concepts*
- *a place where UK residents can reach out to ask for peer support and assistance, when required*
- *a 'think tank' where individuals are able to utilise their skills and experience for the betterment of all*

What **UKcitizen2021** is not...

- *not politically motivated or affiliated in any way whatsoever*
- *not radical - for example, vaccines are now a matter of contention, whereas we take a pro-choice stance*
- *not judgemental - we understand that everyone is able to make a useful contribution, big or small*
- *Not anti establishment, whilst recognising and appreciating when an establishment must be held accountable*

What else...

We operate an open agenda, but insist that activities remain lawful, appropriate, proportionate and enshrined alongside an approach which engenders honesty and integrity.

For and on behalf of UKcitizen2021

Web: UKcitizen2021.org | Email: info@ukcitizen2021.org

UKcitizen2021

for the people...by the people

Date: December 2021

To: All UK Chief Constables

This is an urgent message to all Chief Constables.

Dear Chief Constables,

On Monday the 20th of December 2021 at Hammersmith Police Station in London a criminal complaint was made.

The complaint of Gross Negligent Manslaughter and Serious Misconduct in public office were accepted and a crime number issued accordingly.

The Complainants are, lawyer Philip Hyland of PJH law, lawyer Lois Bayliss of Broad Yorkshire law, Medical Doctor Sam White and retired Police Constable Mark Sexton. There are a significant amount of victims to these crimes, some have already come forward and hundreds of thousands will identify themselves in due course.

The significant amount of irrefutable and damning evidence shows and proves the current vaccine program is causing harm, injury and death on a massive scale. The scale of these harms is being deliberately suppressed by The Government and the media.

We are in possession of a vast amount of evidence to show and prove vitamin C, vitamin D, Ivermectin, Hydroxychloroquine and zinc are all proven and safe treatments for the virus, COVID-19 SARS Cov 2. They have all been deliberately suppressed and the public refused access to said medications in place of a vaccine that has been rushed, still in their trial stages, using emergency legislation and the unnecessary introduction of the Coronavirus Act 2020.

There is also evidence that scientific recommendations and advice have been influenced by commercial and private interests rather than public health and that those direct or indirect interests have not been transparently declared. Further there is also evidence that the public health response has been based on unreliable data generated from PCR and LFT tests which are inaccurate and unfit for purpose and withdrawn from use in other jurisdictions as a health hazard. There is no evidence of an isolated virus. There is also evidence that Midazolam and Remdesivir has been used inappropriately and has caused death and injury which has later been ascribed as caused by SARS COV2.

Notwithstanding this we have also supplied The Metropolitan Police a list of forty world renowned experts from a list of approximately twelve thousand, Doctors, Professors, Immunologists, Virologists, Lawyers, Barristers and data analytical experts all available to fully support the assertions made, provide their expertise and credibility to assist The Metropolitan police and any other UK police force with this very serious criminal investigation.

1 of 3

Please also be aware an application has been made and acknowledged by the International Criminal Court in The Hague. Acknowledgment was received on the 6th of December 2021, some of those named in the ICC complaint are also named responsible in the criminal complaint lodged at the Metropolitan Police.

The complaint is against a number of UK Government Ministers, C.E.O's of all Covid vaccine manufacturers, Dr Anthony Fauci, Bill and Melinda Gates Foundation, Klaus Schwab World Economic Forum, Tedros Adhanom W.H.O, Peter Daszack President of the Heath alliance, June Raine of the MHRA and Dr Rajiv Shah of the Rockefeller foundation.

The victims are the people of the United Kingdom.

This accepted application now places a duty on The Metropolitan Police and all forty three Police forces in England and Wales to carry out a full and competent criminal investigation.

The Metropolitan Police are now aware of the ICC application and the ICC are also aware of The Metropolitan Police and their criminal investigation, they've also been made aware we have notified all forty three Chief Constables of the same.

It is now incumbent upon you all to treat this as a national emergency. To individually and collectively notify the general public to stop taking the vaccines, to make contact with all Healthcare establishments in the United Kingdom and advise them to withdraw all vaccines and stop administering them straight away. The vaccines must be seized as evidence in a criminal investigation and placed into secure detained property to be independently forensically examined.

You have been contacted for one reason and one reason only and that is to protect the British public from serious harm, injury and death.

This is a genuine cause for concern and be reassured this is not vexatious or frivolous in any way.

Superintendent Jon P Simpson assistant to Commissioner Cressida Dick is aware of this criminal complaint and acknowledged same by email to one of the original informants on the 23rd of December 2021.

Metropolitan Police crime number
6029679/21
Hammersmith Police Station
Officers allocated,
DS Mallett
PC Irvine.

International Criminal Court, The Hague, Netherlands, case reference number,
OTP-CR-473/21
Submitting Lawyer Hannah Rose.

We respectfully request as a matter of public safety to halt all Covid 19 vaccines to prevent any more unnecessary harm, injury and death being caused.

We ask for acknowledgment of receipt of this email without delay and thank you in anticipation of same.

Yours sincerely.

Philip Hyland
Lois Bayliss
Dr Sam White
Hannah Rose
Mark Sexton



COVID-19 VACCINE ADVERSE DRUG REACTIONS TO 05/01/22

Type of Condition (System of Care)	Reactions	Deaths
Blood disorders	26074	21
Cardiac disorders	23960	319
Congenital disorders	210	2
Ear disorders	17600	1
Endocrine disorders	802	0
Eye disorders	23309	0
Gastrointestinal disorders	130174	31
General disorders	400803	660
Hepatic disorders	777	10
Immune system disorders	5993	6
Infections	32244	220
Injuries	18256	3
Investigations	18526	4
Metabolic disorders	12037	5
Muscle & tissue disorders	167542	2
Neoplasms	858	20
Nervous system disorders	274402	295
Pregnancy conditions	1054	16
Product Issues	330	1
Psychiatric disorders	29603	7
Renal & urinary disorders	4250	14
Reproductive & breast disorders	52322	1
Respiratory disorders	52518	202
Skin disorders	96088	3
Social circumstances	740	0
Surgical & medical procedures	2139	1
Vascular disorders	21682	88
TOTALS	1414293	1932

Source: coronavirus-yellowcard.mhra.gov.uk

 **Yellow Card**

UK Freedom Project

COVID-19 VACCINE ADVERSE DRUG REACTIONS TO 05/01/22

GYNAECOLOGICAL REACTIONS

Type of Condition	Reactions	Deaths
Foetal complications	2123	3
Exposures associated with pregnancy, delivery and lactation	4172	0
Spontaneous Abortions and Stillbirths	735	13
Menstrual and Ovarian Issues	44037	0
Total	51067	16

Total Adverse Reactions: 1,414,293 (31,447 this week) Total Deaths: 1,932 (19 this week)

 **Yellow Card**

Source: coronavirus-yellowcard.mhra.gov.uk

UK Freedom Project

Stephen Lightfoot
Chair
MHRA

014/PH/2477
17 December 2021

Dear Mr Lightfoot

Re: Request for Undertakings for breaches of legal obligations and breaches of duties of care.

Summary of statements of evidence prepared for an Injunction Application.

Claimants: Dr Sam White, Andrew Doyle and Debbie Webb:

I am instructed by the following claimants: Dr Sam White, Andrew Doyle and Debbie Webb in connection with your organisation's role in authorising the SARS-CoV-2 injections in the United Kingdom.

These injections are unsafe, still in clinical trial, and should be withdrawn immediately. Your failure to investigate known concerns amounts to gross negligence in office, and renders you and the executive board liable for serious misconduct in office, mal or misfeasance in public office and, or, rendering all the office holders potentially liable for corporate manslaughter in that you have been wilfully blind to the known harms of the SARS-CoV-2 injections. You have taken no action. You have a lawful duty to protect the public, and you have wilfully failed in that duty.

The claimants are:

Dr Sam White, herein after referred to as "Dr White". Dr White has evidenced concerns of the lack of safety regarding the vaccine and the suppression of safe and effective therapeutics. Dr White is unable to give his patients effective advice because the MHRA has failed to authorise safe and effective treatments other than Budesonide for use by the over 50s which was recommended as a treatment in or around April 2021¹

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¹ [https://www.thelancet.com/article/S2213-2600\(21\)00160-0/fulltext](https://www.thelancet.com/article/S2213-2600(21)00160-0/fulltext)

Andrew Doyle, and Debbie Webb are both students at Southampton University, who are unable to go on placements by reason of the fact that they have declined consent to be injected.

Andrew Doyle, who is a second year medicine student, is facing a Fitness to Practice Hearing at Southampton University on 7 January 2022 for alleged “serious professional misconduct” for declining the injection for SARS-CoV-2. He will fail his year if he does not consent to injection. The university has given him the option of changing course and vocation.

All the claimants are owed a duty of care by you not to misconduct yourself in office.
All the claimants are owed a duty of care by you to act on concerns raised.

All the claimants are owed a duty of care by you to ensure safe and effective medicines are authorised.

All the claimants are owed a duty of care by you to suspend authorisation of the SARS-CoV-2 injections and their clinical trials on evidence of material risk.

By failing in your duty of care you have committed a tort.

All of the claimants have suffered, and are about to suffer, immediate losses as a consequence of your tortious acts.

Damages are an inadequate remedy for loss of the ability to give patients a full range of options on therapeutics.

Damages are an inadequate remedy for the loss of a vocation and career in medicine, and in Ms Webb’s case a career and vocation in podiatry.

You are in breach of your duty as you have knowingly omitted to take action to avoid the preventable, and avoidable harms of SARS-CoV-2 injections.

The known facts of the SARS-CoV-2 injections are as follows:

- 1. According to expert evidence relied on by the claimants the US data shows that the SARS-CoV-2 injections are 91 times deadlier than a flu injection.**
- 2. According to expert evidence relied on by the claimants 10 batches of Pfizer SARS-CoV-2 injections are responsible for over 7% of all Vaccine Adverse Event Reporting System [VAERS] reported deaths.**
- 3. According to expert evidence relied on by the claimants the true level of adverse events for SARS-CoV-2 injections is likely 11 times higher than that reported by the MHRA.**
- 4. According to expert evidence relied on by the claimants nine months is insufficient time to obtain approval of a regulated injection, such injections usually take twelve years from proof of concept to use. The same expert concludes that the Conditional Marketing Authorisation (CMA) used by MHRA to approve SARS-CoV-2 vaccines in the UK does not sufficiently protect patients from harm, or even death.ⁱ Furthermore, multiples of injections, covering a large percentage of the UK population is still ongoing and the risk could involve thousands if not millions of people.**
- 5. According to expert evidence relied on by the claimants there is an abundant evidence base to support the approval of Ivermectin in early treatment protocols as set out in expert witness Doctor Peter McCullough's, Doctor Pierre Kory and Doctor Tess Lawrie's witness statement.**
- 6. According to expert evidence relied on the excess deaths in young males are more likely than not to be vaccine induced.**
- 7. According to expert evidence relied on the PCR tests were approved by the WHO in reliance on an academic paper written by Professor Drosten**

which was peer reviewed and found to be academic fraud. The WHO is itself in receipt of substantial funding by the Gates' Foundation.

I note the following:

- a. The normal number of fatal adverse vaccine reports on Yellow Cards is 20, [so 1,822 for Covid vaccines for 51 weeks](#) is sufficient to show avoidable harm, given the known and agreed issue of under-reporting of adverse events..
- b. The MHRA has an estimate that actual reports are made [at the rate of 10%](#).

It is estimated that only 10% of serious reactions and between 2 and 4% of non-serious reactions are reported. Under-reporting coupled with a decline in reporting makes it especially important to report all suspicions of adverse drug reactions to the Yellow Card Scheme.

- c. The MHRA has not published any FOI replies to the internet [since the end of June](#) (several hundred are now pending). This is an egregious breach of your legal duty to provide accurate and up to date data on safety.
- d. The MHRA's statement from [the weekly bulletin acknowledges](#) that the three injections in use have quite different profiles in relation to inflammatory heart disease.

Based on reports of suspected ADRs in the UK, the overall reporting rate across all age groups for suspected myocarditis (including viral myocarditis), after both first and second dose, is 10 reports per million doses of COVID-19 Pfizer/BioNTech Vaccine and for suspected pericarditis (including viral pericarditis and infective pericarditis) the overall reporting rate is 8 reports per million doses. For COVID-19 Vaccine Moderna, the overall reporting rate for suspected myocarditis is 38 per million doses and for suspected pericarditis is 22 per million

doses. For COVID-19 Vaccine AstraZeneca the overall reporting rate for suspected myocarditis (including viral myocarditis and infectious myocarditis) is 3 per million doses and for suspected pericarditis (including viral pericarditis) is 4 per million doses. It should be noted that more than one event can be included in each report.

I write to you to request that you will confirm in writing on or before 24 December 2021 that you undertake to do the following:

1. Stop all clinical trials of the SARS-CoV-2 injections immediately.
2. Suspend the conditional marketing authorisation [CMA] for all SARS-CoV-2 injections.
3. Suspend June Raine MBE from her post and require her to disclose all her direct and indirect financial interests in all of the products she is regulating.
4. During the suspension of the CMA require all CMA holders for SARS-CoV-2 injections to disclose the following:
 - a. The isolated SARS-CoV-2 purified virus sample for independent analysis with gold standards chain of custody of the evidence.
 - b. All safety and efficacy raw data from the start of the clinical trials to present.
 - c. Disclose any bio-distribution studies undertaken.
 - d. Publish all the ingredients of the injections.
 - e. Have the ingredients checked by independent researchers for toxicity with criminal standards of evidence gathering regarding chain of custody of the evidence.
5. Suspend the CMA for LFT and PCR tests.
6. During the CMA suspension authorise the use of Ivermectin and other protocols shown to be safe and effective for SARS-CoV-2.
7. Take steps to bring to the attention of NICE and all NHS Trusts concerns over any treatment protocols involving the use of Remdesivir and Midazolam in treating UK patients for SARS-CoV-2.

Should you fail to give an undertaking on the above terms in writing, I am instructed to apply to the High Court to obtain an injunction to order you to do so. Such an

undertaking should be in writing to arrive at my offices within 7 days of the date of this letter. Such an undertaking should also be announced at a special Christmas evening television broadcast by you as Chair of the MHRA, accompanied by an announcement published on your website and press-released to all media.

The legal basis for this request for an undertaking and any application to the High Court is straightforward.

1. The Chief Executive Officer, June Raine, holds public office.
2. As CEO of the MHRA she commands a substantial salary package of £250,000.00 per annum.
3. The public office she holds requires the MHRA to intervene where material risks of a regulated product are present and investigation is warranted.²
4. The public expects the CEO to address concerns notified to her by the public and take immediate action.
5. All the SARS-CoV-2 injections are still in clinical trial under the Clinical Trial Regulations 2002.
6. It is gross misconduct not to bring to the board's attention and/or take action on concerns on safety and efficacy of the SARS-CoV-2 injections notified by the public to the MHRA.
7. You may be liable for corporate manslaughter and/or other criminal offences for omitting to rectify concerns when they were brought to your attention.
8. It is gross misconduct not to take any action when those concerns are brought to MHRA's attention.
9. Ms Raine misconducts herself in public office as she has failed to take any action when she is on notice that preventable harm is occurring. She has been on notice throughout 2021. One such example is concern over SARS-CoV-2 injection induced deaths of unborn children brought to her organisation's attention in August 2021. We note subsequent reports of increases in still births in Scotland³.

²

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/949131/Pharmacovigilance_how_the_MHRA_monitors_the_safety_of_medicines.pdf

³ <https://www.heraldscotland.com/news/19726487.investigation-launched-abnormal-spike-newborn-baby-deaths-scotland/>

10. The MHRA and Ms Raine's legal duty is to apply the precautionary principle and investigate and prevent any avoidable harm.⁴
11. Under her contract of employment Ms Raine is required to take immediate steps to rectify any situation that is brought to her attention that causes harm.
12. A failure to act on information of avoidable harms amounts to gross negligence.
13. Throughout 2021 June Raine has been notified of serious concerns involving regulated products and has taken no action.
14. A gross dereliction of duty amounts to gross negligence which is a form of gross misconduct.
15. *Adesokan v Sainsburys Supermarkets Limited* in the Court of Appeal is clear on the duties of senior personnel to avoid harm and loss when brought to their attention via email or other media.⁵
16. Misconduct in public office and or gross negligence in public office amounts to a tort as well as potentially a criminal offence, and a Police report will be made on 20 December 2021.
17. The particulars of the gross negligence and or misconduct in public office are:
 - a. June Raine and/or the MHRA "conditional market authorised" SARS-CoV-2 injections without:
 - i. Seeing evidence of an isolated virus,
 - ii. Without doing a proper consideration of safe and effective treatments which could be re-purposed such as Ivermectin. Ivermectin used with great success by Doctor Peter McCullough, world renowned physician and world leader in the practice of evidence based medicine and standards of clinical and academic research excellence. His brilliance at communicating the truth makes him a historic and heroic figure and an unimpeachable witness of truth.
 - iii. Critically examining the raw safety and efficacy and quality Chemistry, Manufacturing and Controls (CMC) data.
 - iv. Considering whether the use of PCR tests or equivalent Nucleic Acid Amplification Test [NAAT] to determine who participated on

⁴ *Regina v Dytham* CACD ([1979] 1 QBD 722, (1979) 69 Crim App R 722)

⁵ <https://www.bailii.org/ew/cases/EWCA/Civ/2017/22.html>

the clinical trial was appropriate and reliable. Failing to take and action following publication of the Corman Drosten review which described the Drosten paper and subsequent use of PCR tests as academic fraud. We have expert witness evidence from Doctor Lidya Angelova, one of the authors of the review. It should be noted that the Portuguese Court of Appeal, in upholding the fundamental human rights of their citizens, found the use of PCR tests without a Doctor overseeing the process was and is unlawful as causing harm and breaching human rights.

- v. Failing to rigorously examine the toxicity tests supplied with CMA authorisation documents for all of the ingredients of the injections.
- vi. Failing to publish to the public a full list of ingredients. Without information on the constituent components and or ingredients of the injections means patients do not have sufficient information on which to give informed consent. A Doctor's Hippocratic Oath includes doing no harm and not administering toxins. This point has been made by Doctor Stephen Frost. Doctor Stephen Frost also observes that post-mortems and inquests have reduced as a result of the Coronavirus Act becoming law in 2020. The rules on certifying death certificates were eased meaning certifying Doctors may have had limited knowledge of the deceased and or were relying on the results of a PCR test without further diagnosis. The increase in cremations has meant post-mortems and evidence and knowledge from pathological samples has also decreased. Mr John O'Looney, undertaker, has written to the Chief Coroner requesting that full inquests and post-mortems are immediately resumed as he has observed an increased number of deaths amongst young, previously fit and healthy, young men. We note Dr Clare Craig's expert opinion on this point. We also observe in passing the number of elite, professional athletes who have had recent publicised heart issues. Humans have an inalienable right to life and inalienable rights to bodily integrity and autonomy.

- b. Ms Raine and/or the MHRA did not suspend the clinical trials and or CMA when the following avoidable harms from the CMA SARS-CoV-2 injections were brought to her attention:
- i. Death.
 - ii. Serious injury including myocarditis.
 - iii. Vaccine induced deaths of babies in utero.
 - iv. Issues with the clinical trial data were raised by a whistle blower on 2 November 2021 from a Clinical Research Organisation.⁶
 - v. Issues with batches were known from March 2021⁷ and a failure to act later caused disproportionate harms.
 - vi. Awareness that other jurisdictions had withdrawn authorisation of the SARS-CoV-2 injections from the market for some, if not all cohorts.
- c. Ms Raine and or the MHRA continued with CMA of SARS-CoV-2 injections when she was aware of:
- i. Safe and effective alternatives.
 - ii. The avoidable harms referred to at 2 (b).
- d. Ms Raine and/or the MHRA gave CMA to PCR and LFT tests despite:
- i. The known unreliability of the tests.
 - ii. The finding of the Corman Drosten review that found the paper to support the use of PCR tests was academic fraud, implicating the WHO and leading politicians.
 - iii. A court in Portugal in December 2020 finding the tests unlawful and in breach of human rights when used without a clinical diagnosis.
 - iv. Other jurisdictions withdrawing the products from market as unsafe and ineffective.
- e. Failing to refer the following to NICE and or other regulators for investigation despite being aware of known issues in the treatment of SARS-CoV-2 with:
- i. Remdesivir.
 - ii. Midazolam.

⁶ <https://www.bmj.com/content/375/bmj.n2635>

⁷ <https://www.independent.co.uk/news/science/covid-pfizer-vaccine-doses-uk-latest-b1815398.html>

18. The claimants are suffering loss as a result of Ms Raine's torts and her failure to prevent avoidable harms of loss including injury or death. Their statements detail the loss.
19. Dr White is suffering the loss of being unable to prescribe alternative safe and effective medicines which puts Dr White's patients at risk. Dr White has had his human rights curtailed as an individual who has not been injected. It should be noted that Dr White was subject to conditions imposed on his practice following an investigation conducted by the GMC. The High Court found the conditions unlawful, in breach of Dr White's human rights. Part of the alleged disinformation which was key to the GMC's investigation was the point made by Dr White that non-clinical masks in non-clinical settings are more than likely to cause harm. Dr White saw no robust evidence to support the policy adopted. Nor could Dr White see any benign motive for the government making face coverings a requirement unless one had a reasonable excuse when no evidence existed for face coverings making any material difference to infection rates. Dr White noted the harms face coverings caused, the lack of safety data for the gene therapy injections and the ability of those injections to manipulate DNA and urged the use of the precautionary principle. These evidence based statements earned Dr White a suspension from the NHS and investigation and prosecution by the GMC with Dr White banned from speaking on social media about the pandemic. Dr White applauds the judgement of HHJ Dove upholding Doctor White's human rights. Dr White deplores the conduct of the GMC who sought to pay no regard to patient safety and too much regard for political policy which may have been influenced by commercial interests, or worse charitable interests funded by businessmen who made system bugs a feature of their business model. Dr White was cancelled by social media for holding evidence based concerns about patient safety. For example we understand that neither the Cabinet Office or the HSE hold any risk assessments for face coverings. Dr White had censorship imposed by the GMC, his regulator, who have responsibility for regulating Doctors in accordance with their lawful duty to protect patients from unsafe Doctors. Dr White was silenced for pointing out that there was clinical data to support the use of safe and effective therapeutics for early treatment of symptoms associated with SARS-CoV2. Dr White now faces discrimination for withholding consent from one of the CMA authorised

injections, the injections that carry a material risk of death or serious injury. Dr White faces discrimination for the HMRA's unconscionable failure to authorise Ivermectin and Zinc as shown to be safe and effective by Doctor Tess Lawrie, a champion of independent scientific research and evidence based medicine and as detailed extensively in Doctor Peter McCullough's witness statement. The unlawful suppression of safe and effective alternatives to injections was a point Dr White made in his letter dated 2 July 2021 blowing the whistle on alleged criminal conduct by those leading the pandemic response, including Boris Johnson. One of the allegations made was that commercial interests were likely to be influencing public health policy and the interests of big business are not always aligned with the health interests of the public. The MHRA are paid to keep the public safe from harmful medicines. Damages are an inadequate remedy in the circumstances.

20. The other claimants are at the point of being asked to leave their clinical courses at Southampton University because they are unvaccinated. Medical student Andrew Doyle has been told by his university Southampton University that he will fail his course if he does not agree to take a SARS-CoV-2 injection which is still in clinical trial. Mr Doyle is up before a Fitness to Practice Hearing for Serious Professional Misconduct on 7 January 2022 for refusing to be injected. Podiatry student, Debbie Webb, has not been given clinical placements to enable her to pass her course. We note, in passing, Southampton University's links with the Gates Foundation.⁸

21. Damages are an inadequate remedy for all the claimants.

22. Other potential claimants from the dental profession and the NHS have asked to be joined to this action. Their statements are being prepared and attest to individuals losing a hard earned career and being forced out of a vocation and profession for upholding their fundamental human right to decline an injection, an injection authorised by your organisation despite the known harms and material risks. No individual should have to run the material risk of death or serious injury from an injection authorised by you where safer and more effective treatments are available.

⁸ <https://www.gatesfoundation.org/about/committed-grants/2020/04/inv016631>

23. Should an injunction be granted, a group litigation order will be sought from the court to accommodate the substantial number of individuals suffering losses as a result of the breaches of your legal obligations.

The statements which support this request and a court application are as follows:

1. Statement from principal claimant **Dr White** detailing the existence of safe and effective therapeutics including the immune system. Dr White's statement refers to his historic high court judgment lifting the restrictions imposed on his social media use. One of the points made by Doctor White is the potential for grant and sponsorship money to conflict with public health. There is clear evidence that scientific output has been tailored to meet what sponsors or governments want from the science. There is evidence that the science relied on has had errors in either the assumptions on which the computer models were based or inherent unreliability of the PCR tests used as a key data input. Data from PCR tests should only be relied on if accompanied by a clinical diagnosis. Any policy based on data drawn from PCR test data alone has been found to be unlawful by the Portuguese Appeal courts and in breach of their citizen's human rights.
2. Statements from claimants **Andrew Doyle and Debbie Webb** detailing the pressure they are under from Southampton University to take the injection or lose their university place and or vocation or career.
3. Expert statement for **Professor Sucharit Bhakdi** detailing the harms of the SARS-CoV-2 injections. In particular Professor Bhakdi states with great clarity the design of the SARS-CoV-2 injections are such that they cannot work and cause harm.
4. Expert statement from **Professor Dr Arne Burkehardt**, a pathologist, which details findings from the post mortems of 15 deceased but injected. The statement reads:

...Histopathological findings of similar nature were detected in organs of 14 of the 15 deceased. Most frequently afflicted were the heart (14 of 15 cases) and the lung (13 of 15 cases). Pathologic alterations were furthermore observed in the liver (2 cases), thyroid gland (Hashimoto's Thyroiditis, 2 cases), salivary glands (Sjögren's Syndrome; 2 cases) and brain (2 cases).

8. A number of salient aspects dominated in all affected tissues of all cases:

- *inflammatory events in small blood vessels (endothelitis), characterized by an abundance of T-lymphocytes and sequestered, dead endothelial cells within the vessel lumen;*
- *the extensive perivascular accumulation of T-lymphocytes;*
- *a massive lymphocytic infiltration of surrounding non-lymphatic organs or tissue with T-lymphocytes,*

9. *Lymphocytic infiltration was occasionally with signs of intense lymphocytic activation and follicle formation. If present, this was regularly accompanied by tissue destruction (9 cases).*

10. *This combination of multifocal, T-lymphocyte dominated pathology that clearly reflects the process of immunological self-attack is without precedent. Because vaccination was the single common denominator between all cases, there can be no doubt that it was the trigger of self-destruction in these deceased individuals.*

5. Expert statement from **Dr Pierre Kory** detailing the safe and effective clinical use of Ivermectin as well as alleged corruption of Liverpool University and or Professor Hill regarding their failure to recommend Ivermectin. Professor Hill is alleged to have agreed in a video call with Doctor Tess Lawrie that it would be difficult for Professor Hill to recommend Ivermectin as his employer and department were in receipt of funding from the Gates Foundation. A common link between the foundation and Moderna, one of the SARS-CoV-2 injections CMA injections approved by your organisation. We also observe in passing that the MHRA was itself in receipt of Gates' money. Money which can be shown to influence the academic output of Professor Hill who put the commercial pressures applied by his sponsors above what the evidence suggested was the safe and effective alternative. Dr Lawrie is alleged to have drily observed she did not know how Professor Hill could sleep.at night.
6. Expert statement from **Dr Tess Lawrie** detailing her letter to you regarding authorising Ivermectin and your failure to take any action on that letter. In that letter Dr Lawrie referred you to the meta study showing the safety and effectiveness of Ivermectin.
7. Expert statement from **Dr Peter McCullough** detailing the use of Ivermectin in clinic.

8. Expert statement from **Dr Urso** detailing the risk from the SARS-CoV-2 injection of ADE subsequently borne out by clinical data from the PHE. We observe the excess deaths in homes noted by Professor Heneghan.
9. Expert statement from **Dr Bryan Ardis** detailing the issues around Remdesivir in treatment of SARS-CoV-2 and in particular whether any symptoms previously attributed to SARS-CoV-2 are in fact attributable in full or in part to the use of Remdesivir.
10. Expert statement from **Dr Clare Craig** opining that the excess deaths seen in young adults is likely due to Pfizer SARS-CoV-2 injections.
11. Expert statement from **Professor Dolores Cahill** describing the harm, injury, adverse events and deaths reported following the SARS-CoV-2 injections in the clinical trials including those due to Immune related Adverse Events and Antibody Dependent Enhancement. Professor Cahill's opinion is that under the 'First do no Harm' and the Precautionary Principle, because of the evidence of harm, loss, adverse events, injury and death reported to men, women and children on the SARS-CoV-2 clinical trials, Professor Dolores Cahill has evoked the 'First do no Harm' and the Precautionary Principle to ask for the immediate halt to the SARS-CoV-2 injections /clinical trials.
12. Expert statement from witness identified as **Marek Pawlewski MSc** (data analytics expert) showing the SARS-CoV-2 injection is 91 times more deadly than the Flu injection in a year-on-year analysis based on reports of adverse events.
13. Expert statement from witness identified as **Jason Morphett PhD** (data analytics expert) showing that there are some Pfizer batches that account for a disproportionate number of deaths and adverse events. That in fact, 10 Lots of Pfizer/BioNTech injections account for 628 deaths. That the likelihood is that adverse events are 11 times under-reported in the UK.
14. Statement from **Professor Roger Hodgkinson** detailing his research into virulence of SARS-CoV-2.
15. Statement from **Dr Kevin Corbett** on the use of PCR both for SARS-CoV-2 and HIV.
16. Statement from **Christina Massey** on the failure to isolate the virus. Christine has submitted over 140 freedom of information requests to over 125 institutions and has no record of an isolated virus, including from Imperial College.

17. A statement from **Doctor Julian Harris** giving evidence relating to the inadequate and unsafe protocols in place at a PCR testing facility with multiple points of process where cross contamination of PCR swabs is a material risk.
18. A statement from one of the authors of peer review of the Corman Drosten review, **Dr Lidiya Angelova**. The conclusion of the review was that the PCR test and the academic paper it relied on was academic fraud implicating the WHO and other international politicians. ⁹
19. A statement from two nurses employed by the NHS detailing a lack of training on serious adverse event reporting as well as giving evidence on the increases in number of admitted patients with suspected vaccine induced injuries.
20. A statement from Nick Hunt former Civil Servant on FOIs to MHRA related to his reporting to MHRA in April and August 2021 reports of alleged vaccine induced spontaneous abortion and hearing loss. The MHRA took no action.
21. A statement from a member of the public confirming that she informed the MHRA of the risk the spike protein may go beyond the injection site. The MHRA took no action.
22. A statement from a vaccine injured witness who attests to partial paralysis following a SARS-CoV2 injections, with a condition related to the spinal cord.
23. Expert Statement from **Hedley Rees** detailing the average timescale for vaccine development is 12 years. 9 months is inadequate time to obtain full safety and efficacy data including manufacturing processes involved in biologics and the need for constant vigilance to ensure quality is controlled and maintained. There is no published data by the MHRA relating to QC audits, and random testing of finished products.

9

https://www.researchgate.net/publication/346483715_External_peer_review_of_the_RT-PCR_test_to_detect_SARS-CoV-2_reveals_10_major_scientific_flaws_at_the_molecular_and_methodological_level_consequences_for_false_positive_results

24. A statement from **Philip Hyland** summarising the evidence before the court including those not referred to above. All of the above statements are available by download and you should email me for a link.
25. Evidence from members of the public is still arriving in related to your organisation's failure to respond to concerns highlighted. These statements will be taken and presented to the court.
26. Evidence is being gathered from a specialist detailing coercive propaganda techniques methodology and language deployed by the MHRA website particularly aimed at school children and pregnant women. This expert has analysed the website against the seven Hawking Foundation Materials used to coerce children to take the vaccine in schools. The same methodology has been deployed by the MHRA in their guidance to pregnant women.
27. Evidence is being gathered from a chartered safety specialist on the usual risk analysis which should be deployed by a regulator in these circumstances, in particular regarding pregnancies and miscarriages.
28. It is possible that other expert witnesses will give statements to any hearing. Robert Malone, Mike Yeadon and Richard Fleming have been approached.
29. Statements will be taken from Doctors David Halpin and Stephen Frost as well as funeral director, John O'Looney in advance of the application for an injunction.
30. Ex-England Footballer Matt Le-Tissier has been approached for evidence of his knowledge of cardiac related issues in professional sports people and footballers in particular and any surrounding transparency issues relating to the professional football associations.
31. Statements have been prepared and substantially agreed, most are signed and some are pending signature. Please contact me for a link to the statements.

I look forward to hearing from you within 7 days and on or before 24 December 2021 at the latest, confirming you will be doing the following:

1. Suspending the CMA for all SARS-CoV-2 injections and immediately stop all clinical trials.
2. During the suspension requiring all CMA holders for SARS-CoV-2 injections to disclose the following:
 - a. The isolated virus sample to allow independent analysis and approved chain of custody.
 - b. All safety and efficacy raw data as well as CMC data from the start of the clinical trials to present.
 - c. Disclose any bio-distribution studies undertaken.
 - d. Disclosure of a full list of ingredients in the injections.
3. Suspending the CMA for LFT and PCR tests.
4. During the suspension authorising the use of Ivermectin and other protocols proven to be safe and effective.
5. Taking steps to bring to the attention of NICE and all NHS Trusts concerns over any treatment protocols involving the use of Remdesivir and Midazolam in treating UK patients for SARS-CoV-2.
6. Ensure that the withdrawal of the injections is announced via broadcast and print media and published on the MHRA's website on or before 24 December 2021.

You have an opportunity to take decisive and immediate action and prevent avoidable harm under the precautionary principle and in accordance with your legal obligations.

I look forward to receiving the written undertakings by return.

This letter will be a public letter given the importance of the issues at stake.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Philip Hyland', with a short horizontal line underneath.

**Philip Hyland
Principal
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18a Maiden Lane
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Lincolnshire
PE9 2AZ**

Commissioner Dick
Metropolitan Police
New Scotland Yard

Via email

014/PH/2477
25 January 2022

Dear Commissioner Dick

Re: Crime Reference Number: 6029679/21

Further to the news that the Metropolitan Police has opened a criminal investigation into the Prime Minister's partying can I respectfully suggest that that enquiry is added into the above crime reference number as the recorded crimes are linked – serious misconduct in public office.

Holding numerous parties whilst simultaneously outlawing parties because of a claimed risk of SARS CoV2 implies that the Prime Minister, Cabinet and others knew they were overstating the material risk from SARS CoV2. We made this point to Sir Simon Stevens regarding over-statement of material risk by public officers as well as potential conflicts of interest as far back as 2 July 2021, a letter which you were copied in on. ¹

The use of clinical applied psychology and propaganda techniques via a subservient media to obtain compliance with harmful policies is an aggravating feature of the offence. We note in this regard you made a statement that non-mask wearers should be socially shamed.² We note also that Basit Javid appeared to align himself to the Conservative Party.³

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¹ <https://www.covid19assembly.org/wp-content/uploads/2021/07/Letter-to-Sir-Simon-Stevens.pdf>

² <https://www.bbc.co.uk/news/uk-england-london-53498100>

³ <https://twitter.com/pritipatel/status/1349056750725586946>

In relation to crime reference number 6029679/21 we have a number of points to make.

1. In order to issue a crime reference number the Police Officer has to be satisfied on the balance of probabilities on the evidence presented that a crime or crimes have been committed. The guidelines are clear.⁴ We have numerous victims that have given statements which have been supplied to you. You have been presented with clear evidence that the General Medical Council unlawfully used their powers to silence any Doctor who alerted the public to material risks. You have evidence that the General Medical Council took no action against a television Doctor who has told egregious and harmful lies on television. The General Medical Council is still using its powers to stifle criticism of harmful policies. That is serious misconduct in public office.
2. This crime is still being assessed or investigated, as the case may be, and reportedly, the four officers assigned to the case are fundamentally and axiomatically unable to cope with the scope and volume of evidence. A substantial number of witness statements, expert and victims, have been uploaded or been handed in.
3. We are still very concerned that no action has been taken by the Police or others to inform the public of the issue of the circulation of bad batches of SARS CoV2 injections. Witness evidence has been supplied that at least one young woman has been permanently injured as a result of having a bad batch injected. This harm has been avoidable since at the latest 20 December 2021 when the crime was recorded and at the earliest March 2021⁵ when the issue of the risk of bad batches via manufacturing techniques became apparent. It is not enough for public officials to freeze when action is required. The precautionary principle applies which means the injections should be immediately halted.⁶

4

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/992833/count-general-jun-2021.pdf

⁵ <https://www.bmj.com/content/372/bmj.n627>

⁶ <https://pubmed.ncbi.nlm.nih.gov/15968832/>

4. We wish to make an appointment with the officers to present irrefutable evidence of the manslaughter, put at its lowest, of ninety citizens of the United Kingdom. To date we have not received any response from an email requesting an appointment. This appointment should be a Police priority.

5. The Metropolitan Police has an opportunity to lead the world in transparent, rule of law, Policing where all citizens are equal before the law. Judging by the integrity of the Officer who recorded the crime we have confidence that the Metropolitan Police will rise to the challenge.

The purpose of this communication is to:

1. Request that a sufficient number of officers are assigned to the case, in order to assimilate and evaluate the volume of evidence being presented. It is inevitable that liaison with international colleagues will be required as similar crimes have been committed around the world.

2. Request resolution of the following, outstanding, potential conflict of interests in accordance with long established principles of public life last set out by Nolan:⁷
 - a) The present Secretary of State for Health and Social Care (a government Cabinet post), Sajid Javid, is one of the alleged offenders of the crime recorded on 20 December 2021. There is a potential conflict of interest, since a brother of Sajid Javid is Basit Javid. Basit Javid is currently a temporary Deputy Assistant Commissioner (T/DAC) in the London Metropolitan Police. T/DAC Basit Javid is in command of overseeing Professional Standards (one of eight sub-units of the Professionalism

⁷ <https://www.gov.uk/government/publications/the-7-principles-of-public-life>

Department, under an Assistant Commissioner, in which department, Basit Javid is the second-most senior rank).

- b) In the interests of transparency, we would request that the officer in question be removed from any interaction in crime case No [6029679/21](#) (and any related cases or actions) and be formally relieved of any responsibility relating to it, and excluded from any Intelligence sharing and investigative progress. In short, excluded in entirety from anything to do with the case. Moreover, we request, with all due respect, formal notification of your having implemented this step and indeed some tangible evidence that it has been practically implemented, for which we thank you in anticipation.

We would like to mention that this request in no way casts or implies any doubt whatsoever upon the officer's integrity. It is merely in the interests of solid professionalism, transparency and impartiality, given the officer's extremely close familial bond, of being a brother, to one those accused in the crime recorded at [6029679/21](#). No doubt Officer Javid has made his conflict known and has removed himself from any compromising position he is in.

The list of persons to whom this letter has been forwarded is drawn up on the basis of the gravity of the crimes reported in Crime Case No [6029679/21](#). The gravity and breadth of these crimes mean this investigation is not only national but international in scope.

When we reported the crime we made it known that Robert F Kennedy Junior was willing to testify as the scope of some of the criminality reported is set out in forensic detail in his book on Fauci. This offer remains open as is the assistance of Brook Jackson who blew the whistle to the British Medical Journal.⁸

⁸ <https://www.bmj.com/content/375/bmj.n2635>

Many thanks for your assistance in this matter.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Philip Hyland', with a horizontal line underneath.

Philip Hyland
Principal
PJH Law
Solicitors

Cc: Mayor of London and Deputy
Cc: the Home Secretary
Cc: The London Assembly
Cc: the Investment Advisory Board
Cc: Her Majesty's Inspectorate of Constabulary (HMIC)
Cc The Independent Office for Police Conduct (IOPC)
Cc: Directorate of Audit, Risk and Assurance (DARA)
Cc: The College of Policing
Cc the Association of Police and Crime Commissioners.
Cc: The National Crime agency
Cc The International Association of Chiefs of Police
Cc: Interpol