Thu 6/17/2021 4:14 PM

At today’s all employee meeting, and specifically with regard to the ongoing COVID restrictions imposed by local management, our plant manager stated that facemasks will be an indefinite requirement due to the fact that he has employees that won’t get vaccinated (and employees stating that they can’t be vaccinated). He also stated that he’s not happy with the percentage of vaccination in our area, and until these numbers (percentages) are sufficient based on his judgement alone we will continue indefinitely with the facemask policy.

I’ve covered some of this before (some I have not), but here are some of my initial thoughts:

1. There’s still zero acknowledgement of COVID recovered individuals and natural immunity, despite evidence showing that natural immunity is better than immunity from the vaccine.
   1. <https://technologyreview.com/2021/01/06/1015822/covid-19-immunity-likely-lasts-for-years/amp>
   2. <https://pubmed.ncbi.nlm.nih.gov/33427749/>
2. This vaccine is technically not a vaccine, meaning that the world hasn’t yet updated its definition of ‘vaccine’ to include gene therapy… Oh, wait, never mind, they DID recently update the definition of ‘vaccine’ to include this new medical device.
   1. <https://www.merriam-webster.com/dictionary/vaccine>
3. The vaccine is still not FDA approved and is under Emergency Use Authorization (EUA), meaning that there’s still the question of whether this treatment meets the 21 CFR 601.2 requirement that presides over the approval process.
   1. <https://vaccine.unchealthcare.org/science/vaccine-approval/whats-the-difference-between-fda-emergency-use-authorization-and-fda-approval/>
   2. <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>
   3. <https://www.fda.gov/vaccines-blood-biologics/development-approval-process-cber/biologics-license-applications-bla-process-cber>
4. There are studies indicating that there are significant side-effects from the vaccines based on mRNA technology, yet there is zero liability to anyone involved in administering it.
   1. <https://pubmed.ncbi.nlm.nih.gov/22536382/>
   2. <https://pubmed.ncbi.nlm.nih.gov/17194199/>
   3. <https://pubmed.ncbi.nlm.nih.gov/18941225/>
   4. <https://pubmed.ncbi.nlm.nih.gov/12725690/>
5. There is evidence supporting the notion that those who have acquired natural immunity are at higher risk of adverse events if vaccinated.
   1. <https://noorchashm.medium.com/a-letter-of-warning-to-fda-and-pfizer-on-the-immunological-danger-of-covid-19-vaccination-in-the-7d17d037982d>
6. This is clear and straightforward coercion that could even be considered discrimination. There is refusal to recognize natural immunity, but full and unquestioned recognition is given to vaccine immunity. “And since you won’t vaccinate, you get masks indefinitely.”
7. Who will be held accountable for adverse reactions experienced by employees (especially those with acquired natural immunity) that were coerced into receiving the vaccine?
8. Even if masks even narrowly worked to stop viral transmission (they don’t, and I have provided much evidence in prior correspondence supporting this notion), a recent discovery of dangerous pathogens and chemical cocktails on face masks should be added to the list of reasons why we should be questioning our blind adherence to mask recommendations. To pretend that there are zero risks and harms from extended periods of donning a facemask could very well turn out to be a big mistake.
   1. <https://alachuachronicle.com/dangerous-pathogens-found-on-local-residents-face-masks/>
   2. <https://www.ecotextile.com/2021040127603/dyes-chemicals-news/exclusive-chemical-cocktail-found-in-face-masks.html>

There are clearly risks associated with every aspect of this pandemic, if we can still call it that. The point that I am trying to get to here is that there should be informed consent regarding all aspects. And while I am reaching my wit’s end with regard to conveying that there are alternative viewpoints and risks surrounding this pandemic, it is not in me to abandon my principles and stand idly by. We must not forget that the Scientific Method requires a healthy level of skepticism, that a proper Questioning Attitude requires Critical Thinking, and that entertaining debate regarding all of the important topics/mitigations associated with this pandemic may be our safest way out of this very complex situation. A single-minded approach will undoubtedly result in oversights (some potentially devastating) that may have been prevented had we been more willing to entertain opposing viewpoints.

These emails are not necessarily intended for anything other than informational purposes, so do with them what you wish. I am clearly dismayed at the lack of questioning attitude within this company, and I feel some obligation to document the fact that there are alternative viewpoints (including my own) surrounding this unprecedented time we are all experiencing together. Ultimately, I wish to avoid making short-sighted mistakes with potentially devastating long-term consequences, all for a virus that has proven to have an IFR similar to that of the flu for the majority of the world’s population (and there’s thankfully even less risk than flu to our children). Will history prove that WE will be responsible for devastating our children’s future as a result of our own fear, illusion of control, and blind adherence to supposed experts and authorities?

“I would rather have questions that can’t be answered than answers that can’t be questioned.” -Richard Feynman

Sincerely,

**Brent S. Jeffcoat**