

# THE CITIZEN REPORTER

Edition 2, Version 1 -- Winter 2021

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VIRTUALLY ALL OF THE CONVENTIONAL NEWSPAPER AND TV REPORTS FOCUS ON COVID “CASES” AND “DEATHS,” without ever explaining that the vast majority of people who are assumed to have come in contact with “the novel coronavirus” either experience minor to moderate symptoms and recover, or they don’t get sick at all.

Indeed, worldwide recovery rates have hovered around 98% throughout the entire Covid-19 ordeal. But with such extremely high rates of testing via the PCR test---especially in the U.S.---of course the number of assumed “cases” will be highly inflated.

That’s because the common PCR test, as the *New York Times* revealed back in September 2020, can be so sensitive that it picks up extremely small traces of RNA and proteins that MIGHT or MIGHT NOT be traceable to the specific “novel coronavirus” that is said to be responsible for the “pandemic.” Due to the PCR test’s hyper-sensitivity (depending on how it’s calibrated) these trace amounts of material are automatically assumed to be a “positive case” of “Covid-19.”

And every day, the local TV-news stations and newspapers pump out “case” and “death” numbers, ignore recovery data, while asking NO questions about how cases and deaths are assessed. Main-stream journalists, in the age of Covid, simply repeat what they’ve been told through press releases from government health departments. There is NO effort to exercise scrutiny, pursue accuracy and assess both the pros and cons of vaccinations---none!

Then we’re told nonstop by health bureaucrats

and media parrots that all “cases” automatically represent certified Covid-19 “infections,” with the implication that all these “infected” people have a large enough viral load to be contagious to someone else. This is pure guesswork, but this is what has caused the masking craze. It is NOT real science.

However, if a healthy person tests “positive,” that could be a “false positive” to begin with, or the person may technically be “positive” but either that person has too small of a “Covid” viral load to get sick (much less be contagious), or the traces of biological materials that were detected are blamed on an assumed exposure to SARS-CoV-2 when they actually may stem from some other current or past infection that had nothing to do with Covid-19. So, is it any wonder why there are so many “cases” popping up?

## A HARD LOOK AT THE NEW VACCINES

But with vaccines now being distributed by the hundreds of thousands, people are rushing to get the vaccine without solid facts, due to media suppression of vaccine side-effects. Consider the following:

- Neither the Moderna vaccine, nor the Pfizer BioNTech vaccine, was put through normal animal trials. These highly experimental “vaccines” were rushed to market in about 7 months; and without those extensive animal trials, that means the people

### V-safe Active Surveillance for COVID-19 Vaccines

	Dec 14	Dec 15	Dec 16	Dec 17	Dec 18*
Registrants with recorded 1 <sup>st</sup> dose	679	6,090	27,823	67,963	112,807
Health Impact Events**	3	50	373	1,476	3,150
Pregnancies at time of vaccination	5	29	103	286	514

\*Dec 18, 5:30 pm EST

\*\*unable to perform normal daily activities, unable to work, required care from doctor or health care professional

receiving the vaccines are the “guinea pigs.”

- If you go online to a CDC document called “Anaphylaxis Following m-RNA COVID-19 Vaccine Receipt, Thomas Clark, MD, MPH, Dec. 19, 2020,” and scroll down a bit, there’s a chart (see it at the bottom of the previous column) that shows, according to the CDC’s own data, that there were 3,150 adverse reactions to Covid-19 vaccines in a just a five-day period. There were three reported reactions Dec. 14, 2020, but by Dec. 16 there were 373 before hitting 1,476 on Dec. 17 and 3,150 by Dec. 18. In addition, the National Vaccine Information Center found 181 cases (based on a Jan. 15 VAERS data release) where the Covid-vaccine recipient died.

- Those numbers, as that chart shows, specifically refer to “Health Impact Events\*\*” (with two asterisks \*\*). These events, as the double asterisks denote, mean “unable to perform normal daily activities, unable to work, required care from doctor or health care professional.” (That’s what the fine print at the bottom of the chart says)

HERE’S THE KEY QUESTION: Why has the media been so silent about vaccine complications, including suspected deaths? Doesn’t the public have the right to know the full story on these newly introduced “messenger RNA” vaccines BEFORE getting “the jab?” Take note that these “mRNA” injections are not traditional vaccines and have never been used on humans before. Think about that.

Notably, a Jan. 17 *Epoch Times* report said that 55 people who died may have passed away as a result of taking either the Moderna or the Pfizer-BioNTech vaccine. Furthermore, as of Jan. 28, 2021, the untimely death of a healthy 56-year-old south Florida doctor is under investigation for a possible vaccine link. And baseball legend Hank Aaron received the vaccine Jan. 5 and died Jan. 22. But the lazy media has avoided asking any hard questions about the cause of Aaron’s death. Instead, the media should impartially investigate and “let the chips fall where they may.”

Turn over >>>

Most data on adverse reactions to the Covid vaccines comes from the federal VAERS system. Established in the 1990s and co-managed by the Center for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA), VAERS is a passive reporting platform where both licensed medical professionals and laypersons can report adverse reactions to a received vaccine. Healthcare professionals are required by law to notify VAERS of an adverse reaction, but as a passive reporting system “it relies on individuals to send in reports of their experiences,” without strict oversight or enforcement.

However, a 2010 report by the Agency for Healthcare Research and Quality, part of the Department of Health and Human Services, estimated that between December 2007 and September 2010, only 1% of adverse effects were reported through the program. That means that, regardless of the limitations and imperfections of VAERS, most adverse vaccine reactions go unreported.

So, while keeping in mind that VAERS notoriously underrepresents adverse effects, the CDC has stated that 4,393 total adverse events to Covid vaccination were reported, including 13 deaths, between Dec. 14 and Dec. 23, 2020. And keep in mind that these numbers do not include any reported reactions since the beginning of January 2021, nor do they include any data from the state of New York (which has not reported to VAERS) or international vaccine recipients.

Additionally, the report focuses primarily on the Pfizer-BioNtech vaccine, as the Moderna shot was not approved until Dec. 21.

As of this writing, the CDC had not yet released official numbers on deaths caused by the Covid vaccines since the parameters for reporting require any adverse effect to take place on the day the shot was administered. This strange reporting rule will likely continue to skew the numbers, possibly giving the CDC grounds to deny any link or causation with the vaccine. At the onset of vaccine distribution, the CDC created a self-reporting smartphone app called vsafe. Similar in concept to VAERS but more accessible for

many users, V-safe asks patients to report any side effect experienced after receiving one of the approved vaccines. As previously approved vaccines are being distributed and additional vaccines by Johnson & Johnson and AstraZeneca are nearing emergency use authorization, one thing should be made clear—we still do not know if any of these vaccines will prevent infection or transmission of the disease. Even the manufacturers of these vaccines will only confirm that the shots “mitigate” symptomatic responses to contracting the virus.

But Vitamin C, zinc, improved sleep, proper nutrition and hydration and grandma’s chicken soup can mitigate the symptoms of any kind of flu, Covid-19 or otherwise. You don’t need a risky vaccine for that.

Therefore, getting the vaccine may not actually protect you from contracting the virus or from passing the virus on to those around you. Even the World Health Organization and mainstream media darling Dr. Anthony Fauci (a lifelong bureaucrat who gets all the press while doctors with opposing views are ignored) have admitted it remains unknown whether the vaccine will prevent people from becoming infected and/or infecting others.

As more and more cases of lethal or near-lethal reactions to these rushed vaccines emerge, clearly we must educate ourselves about what is right for our lives and our families, especially when Covid 19’s .06% average world mortality rate is far below Ebola (50%), and smallpox (30%), to name two examples.

In the American system, political power ultimately is derived from each citizen. Just as one person does not have the authority to force another person to wear a mask, close his or her business or take a vaccine, government cannot take the limited authority delegated to it by the citizens and force medical measures or business closures of any kind upon the people as a whole. Any municipal, county, state or federal official who rules otherwise is ruling beyond the authority delegated to that official. Issuing rules and edicts without authority is the very definition of tyranny. So, vaccinations must be kept strictly voluntary.

## RE-DEFINING COVID ‘CASES’ & ‘DEATHS’

Previously, it was only if you had a positive lab-test result that you could be counted as someone who died related to Covid-19. But according to Collin County, Texas officials, a lab test is no longer required for Covid death counts.

Watch the Collin County May 18, 2020 meeting directly at this link: [collincountytx.new.swagit.com/videos/62477](https://collincountytx.new.swagit.com/videos/62477) (Simply type that link into your address bar on your phone, tablet or computer. Anyone wanting to watch the footage should start at 15:25 into it and keep watching for about 12-15 minutes.

Regarding Covid “cases,” Collin County Judge Chris Hill (board chairman) remarked at the County Board’s May 18, 2020 meeting, “If you have a subjective fever [NOT even requiring a thermometer reading] and you have a headache . . . you now meet the qualifications to be a probable Covid-19 patient. I don’t think it can be over-stated how much this could . . . give a false narrative to our citizens. . . . I’m very concerned we could see the numbers jump very rapidly.”

Thus, the proof that all so-called “CV-19 deaths” were actually caused by the coronavirus is severely lacking. That, of course, is because deaths caused by various other medical conditions, often associated with old age, are often erroneously reported as certified “CV-19 deaths.” Also consider the National Vital Statistics System, or NVSS (a CDC division). On March 24, 2020, the NVSS announced a new ICD Code for CV-19 deaths. Starting with a question and then answering it, the NVSS, word for word, issued the following statement: “*Should COVID-19 be reported on the death certificate only with a confirmed test? COVID-19 should be reported on the death certificate for all decedents where the disease caused or is assumed to have caused or contributed to death.*”

Notice the word “assumed,” and take note that the underlined words in that statement were emphasized by the NVSS, not by the CITIZEN REPORTER. That means confirmations are not required for listing a death as being caused by CV-19. Let that sink in. ###