



NATIONAL CITIZENS INQUIRY

Ottawa, ON

Day 3

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EVIDENCE

Witness 1: Dr. Christopher Shoemaker

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[00:00:00]

Shawn Buckley

I now want to turn to our first witness, Dr. Chris Shoemaker. Dr. Shoemaker, can I start by asking you to state your full name for the record, spelling your first and last name?

Dr. Christopher Shoemaker

Yes. My name is Christopher Allen Shoemaker, spelling of the last name is S-H-O-E-M-A-K-E-R, and the first name Christopher, C-H-R-I-S-T-O-P-H-E-R.

Shawn Buckley

And Dr. Shoemaker, do you promise to tell the truth, the whole truth, and nothing but the truth, so help you God?

Dr. Christopher Shoemaker

I do so.

Shawn Buckley

Now, I'm going to introduce you and I may not do justice, so if I don't, please feel free to fill in. You are a comprehensive physician in Ontario. You're a member of the College of Family Physicians of Canada. In your 45-year career since 1977, you've worked initially in emergency medicine in both Ontario and British Columbia. You later did family practice on two military bases in Ontario, assisting in the direct care of Canadian Forces members and their families. More recently, in 2020 through 2022, you worked in direct patient care at the West Ottawa COVID Care Clinic and were part of the Eastern Ontario Response Team to COVID-19. You have been an active member of the World Council for Health and their worldwide response to COVID, including therapy protocols for vaccine-induced spike injury.

And I think that that's not a bad introduction. You have been literally in the trenches as a physician for 45 years.

Dr. Christopher Shoemaker

Yes, indeed.

Shawn Buckley

I will tell those watching and the commissioners that I've entered your CV as Exhibit OT-2.

Now, you're here to discuss—really to sum it up—vaccine issues, but there's several different issues and I don't know where you want to start. Do you want to start with your thoughts on them being safe and effective or do you want to start somewhere else?

Dr. Christopher Shoemaker

Well, I think that's certainly central to everything, but as I discuss it, we will be on other topics of course over time, including sources of the vaccine and including other measures that could have been used instead of them.

To begin with, if I may, Mr. Buckley, I'd just like to introduce myself a little bit further, a little more personally to the audience and then carry forward, if I may, for at least three or four minutes.

Shawn Buckley

Sure.

Dr. Christopher Shoemaker

Thank you. Good morning, Commissioners, I'm honoured to be with you. I've observed the tremendous work that you've been doing across Canada. I was there in the room all three days that you were in Toronto and I think this is the most important activity going on in the world right now, to bring light to all of this. So thank you. And thank you, Mr. Buckley.

I like to help people. I'm a doctor, that's what I do. If I was introducing myself to you three years ago, I would have told you of my quiet practice taking care of children with difficult symptoms of Asperger's condition, anxiety, ADHD, autism spectrum, and obsessive-compulsive disorder. That's what I was doing in the last eight years of my clinical practice. But those days are behind me now.

Because of things that I learned, I had to speak to the greatest issue of childhood mortality and morbidity ever to happen in my 70 years on this planet. We were all children once. I was a child, the oldest of four. I still have a lovely sister. I had two lovely brothers who have pre-deceased me. When I was 44, my closest brother, Frederick, got pancreas cancer. And he was gone in six or seven months from having incurred that terrible, terrible illness. So, I lost my closest amigo back in 1995. But it made me reflect upon all of us.

All of us here are talking about losses of loved ones, losses of our own good health, the frailty, in a sense, of the human body. And no one thing causes our body to become frail. It can be a large truck that hits us when we don't look the right way crossing the street. And it can be a subtle little infectious organism in us that takes over and is unable to be treated.

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And additionally, it can be a poisoning of some kind, something in the environment that sets things in motion that means you're going to get quite ill with an autoimmune disease of some kind against that poison.

Essentially, what we have been forced to fight here with COVID-19 is the latter, is the last of those three things. It's a subtle, purposeful immunologic poison that's been put into our bodies and for which there was a plan—a plan that I'll outline for you a little later. I would just like to say why I'm going to be using a few videos and not speaking every word neutrally and straightforwardly. It's because it's what I did.

When I learned what I learned, I felt I had to go out and speak the real truth, even if it was just independent videographers that were covering me. And so I did that. And the reason I'd like you to see some of them is that, well, it's why the College took away my licence. The College [of Physicians and Surgeons of Ontario] decided that me speaking these truths was something that they considered not compatible with me being a licensed physician in Ontario.

So if I might ask for the first video and simply to show the commissioners and yourselves what I began to say in September of 2022 when I became fully informed. Thank you.

Shawn Buckley

Sorry, we just asked the sound to be adjusted so that you're more understandable.

Dr. Christopher Shoemaker

Very good. And in a couple of seconds, we'll have this first video.

Shawn Buckley

We always have obligatory technical issues. But actually, we've done really well and our team is just excellent. So, just bear with us.

Dr. Christopher Shoemaker

Oh yeah, no worries. I'll just set it up a little further. I was at old City Hall and new City Hall of Toronto. I was meeting with anyone that would come down to see me. I stood there and kneeled there both, for 10 straight days, as a vigil for the harm to children.

The reason that I chose to do it around that time was Denmark had just cancelled all vaccines for the children on September the 1st of 2022. And they'd cancelled them because of the added risk that was perceived and known. And they were the first country to ban vaccines for those 18 and under. They did that September 1st, 2022. We're nine months since then. And our countries here on this side of the Atlantic Ocean are still suggesting, inappropriately, that these shots be given to children of any age.

[Technician in background indicates that the videos were submitted without audio.]

Shawn Buckley

Oh dear, okay. Well, that's going to change things. And we can't actually log in with the Rumble link, right?

Okay. Dr. Shoemaker, we're just going to try Plan B technically. So we'll just have you continue. You're sharing with us actually a very important point that on September 1st of 2022, a full nine months ago, the country of Denmark actually banned using COVID-19 vaccines on children. And yet here we are in Canada: literally, our governments are still pushing vaccination on children when another country has banned them, concluding that that it's too dangerous.

Dr. Christopher Shoemaker

Yeah, in Denmark, for example, a child like Sean Hartman would still be alive because even when they were giving it to children, it was not mandated. It was available, but the parent could make their own decision and their child could attend to sports and anything to do with school without the vax. It was just determined because it was an experimental vaccine, it should be the legal choice of both the child and the parent whether to get vaccinated or not.

But they took away even that aspect. They just didn't let children get it at all as of September 1st of last year.

Shawn Buckley

Okay. While we're looking for that video, can you share with us your thoughts— Because obviously, you're against vaccinating children. And can you share with us why that is?

Dr. Christopher Shoemaker

Certainly. It's because the shots are immuno-toxic to everyone that receives it, whether you're 50 or whether you're five years of age. It's worse in childhood because the children have such a strong immune system. Strong immune systems are what react to spike being inappropriately in their cells. And if your cells, your myocardial cells

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are filled up with 40 trillion— And that's the number by the way, that's the number that the video I had hoped would surprise you with. Forty trillion mRNAs are in every shot you take, 40,000 billion.

There are only 80 viral entities that are in every polio shot you take. So if you get your four shots of polio over a lifetime or circumstance as a young child, you've had 320 little viral entities enter your body. Entities that are inert. Entities that can't reproduce or make more polio spike, if there was such a thing, inside you. It just won't happen. It's just the inert shell of the virus and the body can make a proper immune response to that.

And this is bad news whether you're an adult or a child. Specifically problematic for children because their innate immune system has to develop over the first 10 years. And when you give this sludge into the bodies of children, you are making your innate immune system not develop. The kind of things that keep you safe in the sandbox. The kind of things that keep you safe as a 16-year-old moving around the world, being exposed to new things. You need a strong innate immune system that has not been hijacked by an inappropriate

item put into you at age five. So that's why it was so important for it to stop in children as quickly as it did in Denmark. And that's why it's equally important that it happen here in Canada.

Shawn Buckley

Right. And so when you use the word immuno-toxic, you're meaning basically that it harms the immune system rather than helps.

Dr. Christopher Shoemaker

Yes. And if I could give you a picture of it. Everyone, we all understand transplants. We understand if someone's kidney is put into you or someone's heart is put into you, your own natural immune system would attack the heck out of that transplanted kidney or attack the heck out of that transplanted heart if the surgeons and internists didn't give a great degree of immune suppression. Very heavy drugs that would make your immune system basically go to sleep, so that that new heart or that new kidney could settle into your body.

Here's the problem with spike protein. When spike protein goes into your body, you got 30,000 billion cells in your body. You got 40,000 billion mRNAs, enough to go into every cell of your body. So they're all going in and they're all creating a flag. They are all creating the fact that your body recognizes your heart is no longer your heart; it's a transplanted heart. Your kidney is no longer your kidney; it's a transplanted kidney, the body thinks.

And that's why the body goes after it and that's why the attacks are so varied. That's why one person could be suffering massively from a hepatic or a kidney ailment and another person will have a dissection in the aorta: because the aorta is being inflamed by the attack. Or the heart, the typical one is myocarditis in children: young adolescents, male and female, getting pain and troponin elevations and all the features of myocarditis. It's because your immune system is— It's not the spike itself that's harming you, it's your immune system going after the spike that has changed the genetic image of your heart. And your body thinks it's not your heart and that's why it attacks the heck out of it. This is basic immunologic science.

The makers of this immuno-toxic vaccine knew this; they knew this for a purpose. You can't make something this damaging to humanity without doing it on purpose. That is actually my major message of my talk today. I accuse someone, I can't name them right now, but I accuse some entity of highly purposefully making things in the fashion that they did. Because it would not be as toxic as it is, it would not be so able to hijack your immune system, to kill you slowly or quickly, if it was not done purposely. It has been done purposely.

Shawn Buckley

And just so people watching your testimony understand, you use the polio vaccine as an example. And some people don't understand what a traditional vaccine is. So in the case of polio, a shot would contain 20 pieces of the polio virus that is inactive.

Dr. Christopher Shoemaker

That is correct.

Shawn Buckley

And so, we're talking 20 pieces.

Dr. Christopher Shoemaker

Eighty sorry, was the number, 80.

Shawn Buckley

Okay, 80. And then so those pieces are enough for your immune system to look at and go, "Oh, this is foreign, let's make an antibody against this." And that's how in the theory of vaccination, you would become immune.

But the COVID-19 vaccines, it's not 80 pieces. You used— How many? Like, you used the word trillion.

Dr. Christopher Shoemaker

Forty trillion. Everybody knows the trillion; governments talk about trillions of dollars all the time. But 40 trillion factories. It's factories that were sent into us, that's what a strand of mRNA is.

[00:15:00]

It's a factory and it produces whatever its product says to make. Whatever its genetic code says to make, it makes, and it makes these spike proteins and those have a life to them. Spike protein, once it's physically in a cell, is as alive as the cell, so that's very, very different.

One terribly important thing to add, and this is probably the best time to mention it. In the last three to four weeks, it has been spoken out extensively by Canada's PhD Dr. Jessica Rose and Sasha Latypova from the United States. They have made extremely clear that actually, it's one-third DNA that's in the weight of the shots and two-thirds RNA. So fine, two-thirds RNA is only 27 trillion. Meanwhile, there's 13 trillion actual DNA capsids: DNA, deoxyribonucleic acid, the kind of stuff that can get into the nucleus of your cell and change that part of you. So now not just the flag from the RNA is on the surface, there's actually changed DNA physically inside the nucleus of your many, many, cells. The reason that's there is ostensibly its poor design, poor manufacturing.

The Department of Defense in the United States, which assisted in manufacturing this, didn't care that it didn't meet vaccine standards. In fact, they did paperwork that specifically described the injection as—I don't want to use the wrong word here—a military countermeasure, a military countermeasure. They didn't call it a bioweapon, but they did call it a military countermeasure. And they specifically didn't call it a vaccine. And the reason was that if you call it a vaccine, it has to be made to vaccine standards, proper world standards for vaccines.

By calling it what they did, saying that there was an urgency to it, "We'll just call it a military countermeasure," the standards can be dropped. And so what if there's one-third as much DNA in this as there is RNA? And this happens when they stir the soup. When they make this stuff in great big kettles and cauldrons, there's going to be sludge. There's going to be the original DNA inside of a bacteria that's helped to make the RNA, but it was allowed to have inefficient and painfully, painfully almost soiled— What's going into you is

one-third DNA, two-thirds RNA, and that is the truth from Dr. Jessica Rose and Dr. Latypova, if I have the name correct. Horrible.

Shawn Buckley

While we're waiting to see if they can pull that video up, one thing that we haven't had a lot of evidence on is the effect on pregnancy and reproductive issues. But I'm getting the signal that we think the video's good to go, so we'll put that question on hold for a second and see if we can run that video now.

Dr. Christopher Shoemaker

Thank you.

[Video plays briefly, is still inaudible.]

Shawn Buckley

Oh, okay, so we're going to be out of luck on that.

Dr. Christopher Shoemaker

Would that be the case for all of the videos or just this particular one?

Shawn Buckley

David, do you want to check with the other ones that we had done last night? We apologize for those, Dr Shoemaker. We did ask our team to download those videos from the links you sent.

Dr. Christopher Shoemaker

No need to worry. We'll just go ahead as you're saying.

Shawn Buckley

So, I was kind of switching gears because one of the areas that we haven't had much evidence on is effect on pregnancy and potential effect on reproduction And I know that you have some thoughts on that and you've looked into that.

Dr. Christopher Shoemaker

Yes, indeed. Pregnancy. The Golden Rule of pregnancy: never use an unproven drug in pregnancy and never vaccinate in pregnancy. Never. Somehow "never" went away; "never" went away during COVID. That golden rule was broken. The last people that should get new drugs, unproven drugs, or vaccines should be pregnant women and the fetus inside them. They should be 10, 15 years out if you've got a wonderful new vaccine to use.

Polio would not have been given to pregnant mothers in the early days—not a chance—and actually has been discouraged ever since.

You don't vaccinate pregnant mothers. It's medical malpractice. Why have we allowed ourselves to do a medical malpractice, ostensibly recommending it?

[00:20:00]

And what has been the result? What has been the result? Well, Pfizer knew the results just as things were rolling out. They did a post-marketing analysis. And in their post-marketing analysis, there was a specific— There was about 300 people that they didn't tell you what happened to the other 270 or so. They didn't give the answer back. But they did give the answer for 29 pregnant mothers. And the 29 pregnant mothers that they gave the answer to, what happened to the pregnancy?

And it's published; it's part of the 75,000 pages of Pfizer data. And the published data by Pfizer showed that of the 29 pregnancies that they were willing to say what the results were (and the others that they hid), 28 out of 29 lost the pregnancy. A horrific number. Ninety-seven per cent of the fetuses were lost of those 29 that they were willing to tell us about. Of course, they weren't really willing to tell us about it because they thought that these data would be hidden for 75 years.

But the truth, when Dr. Naomi Wolf and others got to the truth, is that this cache of dear families who lost the ability to have this child in a ratio like that, 97 per cent in that group lost. The actual real-world data, the real-world data where it's really being spoken of and proven: hospital systems in Florida, hospital systems in other parts of the States that are being honest about it show that 50 to 67 per cent of pregnancies— Where the woman has received the vaccine while pregnant, 50 to 67 per cent of those pregnancies are lost, either early or late.

Incredible numbers. Anyone in the obstetrical units really knows the truth. They've seen stillbirth numbers that are obscene. They've seen early pregnancy losses, extra bleeding, spontaneous bleedings, and spontaneous abortion losses that have happened that are obscene numbers. And this is what happens when you break the Golden Rule of pregnancy. You never break the Golden Rule of pregnancy. Do not vaccinate—and especially do not vaccinate with a toxic spike protein into a viable human who's only this big.

A little viable human that's only this big and nanoparticles take the toxic stuff across through the placenta and into the cord and into the baby and into the baby's brain. And the mother received the shot when the baby was three months old inside her body because society was telling her, "That's the way you can protect yourself. That's the way you can protect grandma. You just do it too."

We were lied to. We were lied to. We didn't know if it was safe or not. We now know absolutely that it's not safe. And one of the biggest evidence that it's not safe was in this highly risked population: mothers and the children within them.

Shawn Buckley

I just want to make sure that people understand: so you're talking about the Pfizer data. This is the data that Pfizer would have submitted to the Food and Drug Administration in the United States to get their so-called emergency authorization and that Pfizer didn't want that disclosed to the public. There actually was a fight in court for it to become publicly available. And that's kind of your first clue, there's a problem. But now there's a team of doctors and scientists that I understand—I mean, it's thousands analyzing this data. And so this is actually Pfizer's own data that they record. There're 300 females in pregnancy that get the shot, but they don't report on 271 of those. They only report on 29.

Dr. Christopher Shoemaker

And those 29 were of the ratio of loss that I just described to you. Virtually, the vaccine functioned more efficiently as an abortogenic drug than RU-82.

Shawn Buckley

Okay. And then when you're talking about states like Florida, this is government data reporting basically a stillbirth rate of 50 to 60 per cent in mothers that are taking the vaccine during pregnancy.

Dr. Christopher Shoemaker

Again, I will say that, yes, that's government data and information from actual individual hospital boards and circumstances taken into totality. Yes.

Shawn Buckley

Now, I believe we have your video up, so we're going to try again.

[VIDEO plays but is barely audible. Dr. Shoemaker's videos are available on the NCI website as Exhibits OT-2a, OT-2b, OT-2c, OT-2h, OT-2i, OT-2j, and OT-2k.]

Dr. Christopher Shoemaker

To be honest, I think we could drop this video. I think we've touched the points that are on this. The key point ladies and gentlemen

[00:25:00]

is that skilled immunologists, skilled virologists, skilled pathologists have stated that the 100 micrograms of RNA and DNA combined—100 micrograms, the weight of a thyroid pill—is enough for 40 trillion virtually weightless mRNAs. These extremely small, have of course minuscule weight. You don't need tons of it. You just need 100 micrograms. And 100 micrograms is 40,000 billion viral entities. It's on their labelling. They say on the label how much is going into you. And that is how much is going into us every three to six months, if we keep listening to the morons above us.

Shawn Buckley

Now one of the things that we've been told when we're being told to take this vaccine is that we should really take one for the team. So that, and you already used the example for a pregnant mother, "Take one so grandma doesn't get sick." The whole idea is, at least as communicated, that we're supposed to take these vaccines so that we're protecting others: we're not catching COVID and we're not transmitting COVID.

And I'm wondering if you can share with us whether that is truthful messaging or false messaging—what your thoughts on that are.

Dr. Christopher Shoemaker

Well, very good. Just as I begin, could I ask David to see if he can bring up slide two and perhaps put it in the background on the screen? If what we call slide two, that's in the bar

graph with the angled look [Exhibit OT-2e], that would be the one. If that can be brought up onto the screen it will allow me to speak to your question. Very good.

So the topic is—Are we protecting others, are we reducing infection in ourselves, is the vaccine working? This is from the Cleveland Clinic, which is a group of five or six hospitals in Cleveland. It has 40,000 staff—40,000 staff in this huge hospital system. In September of 2022, for 90 straight days, they followed the symptomatology of all 40,000 staff at the Cleveland Clinic.

The black line at the bottom that starts at zero cases and wanders its way up to a fairly low number—I won't try to quote it right now, but that's the unvaccinated staff. Unvaccinated staff at the Cleveland Clinic had very, very, very little, low numbers of COVID events in themselves. Each line above it is more and more vaccinations. The red line was one shot, the green line was having had two shots, the purple line above that was having had three shots, and the pale orange line at the top was having had four or five shots.

So they had a spectrum of numbers of shots that people had taken who worked in the clinic. And in an absolutely arithmetic progressive way, you went from whatever was the rate for the unvaccinated—very modest down there at the bottom right—it was doubled and tripled and 3.5. Once you'd had four shots you were 3.5 times, as a staff member, more likely to be carrying COVID, having COVID, passing it on to patients, having positive PCR tests, getting sick, going to the ICU. Every factor went up by a factor of 3.5 when you were highly vaccinated.

If you were left alone— And they did have 8,000 staff who worked unvaccinated in the hospital. And don't you dare blame them that they were somehow the source of all this; forget it, they weren't. They were healthy. They had the least amount of time off for illness themselves. They were like most unvaccinated people. They had an innate immunity. They weren't having COVID nearly as long as their colleagues.

And this 3.5 to 1 ratio: being more likely to transmit it to granny, more likely to transmit it to the patient, more likely to transmit it within your own family the more vaccinated you got. This is settled science now, ladies and gentlemen. It's settled science that the more you get vaccinated with this non-vaccine—and it is a non-vaccine—the sicker you are and will be of many diseases, but especially sicker when it comes to COVID itself.

Shawn Buckley

It's just interesting that you had to add "and don't say that the unvaccinated were causing this." Because one thing I've never been able to get my mind around with all the hysteria to force people to take the vaccination, is that, well, logically, if the vaccine worked, if it protected you from getting COVID, then why would you care if anyone else is vaccinated? You could be the only one in the herd and you shouldn't care—if it works, right?

[00:30:00]

It's just interesting that you added that. So when we're being told the vaccine is effective, "effective" means, at least in the public mind, "Well, I'm less likely to catch COVID and transmit COVID, if I get vaccinated." But the truth is it's really negative efficacy: So with each shot, you're more likely to catch COVID and hence more likely to spread COVID than if you hadn't had any shots.

Dr. Christopher Shoemaker

That is exactly what we have learned and found. And what we learned and found was enough to turn everything off in September of 2021. In September of 2021, these data—not from the Cleveland Clinic but from other sources—were beginning to show up. And they absolutely knew before they started giving it to children. And they absolutely knew before they moved into mandates in 2021, September. It was absolutely known that this was the trend. The vaccine was not working as a vaccine. It was doing zero to prevent you from getting COVID.

A true vaccine means—forget about symptom-lowering—a true vaccine means you don't get the disease. When you get a rabies vaccine, is the dog or cat expected to get rabies? No, not at all. It's supposed to be totally 100 per cent effective. And this is negatively effective. It makes you more likely to get the disease. It's tragic. We'll move on to other things, but that's the best I can describe it.

Shawn Buckley

Let's move on to other things. Which topic would you like to cover next?

Dr. Christopher Shoemaker

I guess just briefly to ask, would any of the videos be available, or basically not? Okay, that's fine. Okay, so I'll just speak to one topic that I was going to be speaking on. On two short videos that were connected. And that topic is: Who made this and why?

In its origins, it originated when Dr. Fauci was told by Barack Obama, President of the United States, "Do not do gain of lethality research anywhere. It's too dangerous." The year was 2014. The year was 2014, Dr. Fauci was told, "Do not do this kind of research anywhere." He specifically went around what the president told him. He specifically went to the military within the U.S. and asked if they could do it. They were incredulous. They said, "What are you coming here for? You know that you've been told by the President not to do it. You can't do it. You won't do it under our aegis. You won't be doing it anywhere, Dr. Fauci." So that was the second time he was told, "Do not do this."

He went around them. He took it to EcoHealth Alliance. He took it to Peter Daszak. He said, "Peter, this sucker that I got working with Dr. Baric out of North Carolina, we really want to do gain of lethality research on coronaviruses. Could you take it over to Wuhan? Could you generate it there?" They exchanged emails over those three or four years as it was being worked on initially. And then in December of 2015, after knowingly for one year working in Wuhan to create something that was perhaps dangerous or toxic or testable, whatever the ostensible purpose was, they exchanged a final email where Peter Daszak said, "We've got it."

And what "we've got it" meant was that they had an impressive improvement in lethality of the coronavirus with the genetic genomes that we're now also familiar with.

And what happened after 2015 is that those same genomes were brought back to the States. Because, of course, it was to a degree a U.S. product and they wanted any vaccine that was related to this genetic genome to be produced in the United States. And so it was worked on in the United States for the next three years. Between 2016 and 2018-19, during those three years, they continued in Wuhan to make whatever it was that could be released in an aerosolized form or a fashion that was going to create a version of flu. That was happening over there.

Meanwhile in the U.S., Fauci, Baric and now at that point, the U.S. Department of Defense, which was cooperating with them—those three entities had the vax being worked on at the ready. So, it was not Operation Warp Speed that just started suddenly in 2019-20 to get a vaccine within a year. No. The purposefully damaging non-vaccine was being worked on for four years, between 2015 and 2019. Maliciously worked on because everybody who was in the real know about this—Pfizer, Moderna, and especially the U.S. Department of Defense knew that they were creating something that if it went into the human body would harm the human body

[00:35:00]

and would make it more likely to have that tragic immune reactivity that I talked about 12 minutes ago. So there it was, not Warp Speed [but] a three-year program to make a dangerous immune-damaging and, basically, body-damaging shot.

What their reasons were, I'll have a comment at the end as to what I think the entity really is. It isn't just Fauci, it isn't just the Department of Defense. There is a different entity that's actually in charge of all of this, and I'll share that at the end of my talk.

Shawn Buckley

And just by way of timing, we've got about nine and a half minutes left. I want to allow time for commissioners to ask you questions also because I anticipate there's going to be some of those. What I'd like to do is ask you a specific question and then have you go into what you were just speaking about.

But you had sent me some notes about these lipid nanoparticles that surround these RNA and DNA packages. And I want you to comment on those and what happened to the animals that were tested. Because I think people need to understand what they knew before they rolled out this program.

Dr. Christopher Shoemaker

And can I just ask is the microphone adequate for the room? Is it okay? Okay.

Lipid nanoparticles, LNPs. RNA or DNA cannot move from place to place unless it's got a little vehicle to travel in and this vehicle was invented by a Canadian company. The company was Acuitas [Therapeutics] out of British Columbia. And neither Pfizer, Moderna, nor the U.S. Department of Defense would have been able to use any of these carriers—lipid nanoparticles or plasmids, which is another version of it. They would not have been able to use either of them to carry RNA or DNA into the human body unless they paid a royalty to Acuitas. Acuitas has been paid. Acuitas continues to get paid. It gets lots and lots and lots and billions and billions of dollars for their intellectual property.

Sadly, when these lipid nanoparticles were tested for danger and for safety with no RNA in it, with no DNA in it, just to see, what does it really do to animals, can it be used liberally? All the animals died. All the animals. They're a lot smaller than humans, but they died, a hundred percent. Because the LNPs were going to their brains. It would go into their hearts, it would go into their kidneys, it would go into their ovaries. Within a few days, every animal given LNPs was deceased.

Therefore, we are using a carrier that is known to be lethal on some level. And we're using it without, certainly, having proved its true safety in humans because we sure as heck

didn't prove its safety in animals. And it doesn't matter the names attached to the invention of this.

The fact is that the science and Dr. Roger Hodkinson showed it. Roger Hodkinson has told us about the hundred-fold elevation of density in the ovaries compared to the body in general. These lipid nanoparticles are good at crossing two or three barriers in particular. They go across the ovary barrier and the testes barrier into the reproductive system, massively, and they go across the brain barrier into all structures of the brain, massively.

Do they go anywhere else with some degree? Well of course they do. We have a blood system and the blood system can take these lipid nanoparticles to heart and to liver and to other areas of body, of course. But the highest density—the three places, our genetic productive system of ovaries and testicles and our brain cognitive system—and that's what LNPs do. They are toxic to those areas even with nothing in them and they sure as heck are toxic when they're carrying spike or the mRNA/DNA to create spike.

Shawn Buckley

And I'll just ask, because we've got six minutes left, if you want to switch to— There was something that you wanted to make sure was covered.

Dr. Christopher Shoemaker

Oh, thank you. Actually, it's on this general topic that we're into, as it were, right now. Just give me a moment to collect my thoughts. Because we've had quite a different presentation than we originally thought.

So, how could it go well? Lies after lies with people not taking direction from the people who, in a true chain of command, should have had control over them.

[00:40:00]

President Obama should have had a true control over this rogue, Dr. Fauci. He just didn't. Dr. Fauci did what he did. Certain people had Dr. Fauci's ear. And this is why I would like to give a name to this "they" that we talk about. "They" do this, "they" do that. We never know who "they" is. Well, I'm going to give they a name. They are the unelected-people-control-entity. Unelected-people-control-group or -entity. The unelected-person-control-group or -entity. That entity clearly exists because that entity is above the U.S. Department of Defense. That entity is above any specific prime minister that we have in this country.

That entity has arms and tentacles. That entity is the World Economic Forum. That entity is the WHO [World Health Organization]. And that entity is the Bill and Melinda Gates Foundation. And that is the entity that is driving, and has always driven, this malicious creation of a toxic agent to go into humanity. So to that entity I say, "We don't know you right down to the core puzzle who you are, but we've got a pretty good picture. We know who could have had massive influence and financing and assist to this program. A program that had no scientific merit, zero scientific merit, and has had massive scientific human negative effect."

So to the UPCE, the unelected-person-control-entity, I say to you, "Shame on you. Shame on you." We people who had to yell and scream in our speeches, the dear people who have been at this table talking about the hemorrhagic events happening to them after a shot, or after shedding, or the deceased child that they mourn for. The ladies who spoke of their

mother who died within 10 minutes of getting a COVID shot in the pharmacy in Saskatchewan.

I mean, every one of these cases have a source. And the source in the true, true sense of the word is the unelected-person-control-entity.

And it's time for the world to march in the streets. It's time for the world to realize this is not just a medical problem. It is a medical problem: fifty million extra deaths a year is a medical problem. And that's what the numbers are showing. Numbers out of Germany, numbers out of the U.S., numbers out of the United Kingdom just in the last week showing that all-cause mortality elevation is creeping up every month, another few percentage points higher. So if it's 45 per cent or 100 per cent more than it should be now, well, it's going to go to 200 per cent; it's going to 300 per cent; it's going to go to 400 per cent. These are slow, immune, toxic, lethal shots. I call on the world to stop them. And that I think, is where I'll end.

Shawn Buckley

Thank you, Doctor. So Commissioners, we only have two minutes left for questions because we do have to be tight. Are there any questions?

And there being no questions, Dr. Shoemaker, I apologize that we had technical difficulties. It was not for lack of trying on our team.

Despite that I can assure you, you gave some really valuable testimony to us and shared some very important things we hadn't heard specifically. Some things come to mind about the sheer numbers and about the animal deaths and your contribution on the pregnancy thing was information that we were lacking. So I'm just telling you that you've made a valuable contribution.

Dr. Christopher Shoemaker

Absolutely Shawn. And if I could just take 60 seconds then just to conclude if I may.

Shawn Buckley

Yes.

Dr. Christopher Shoemaker

We talked about numbers in animal labs and why lipid nanoparticles with royalties in Canada should never have been used for anything. And they should now never be used to go into pork or cows or anything in the world. They just shouldn't be. We should get real about this.

And it does have a Canadian aspect to it. This company, Acuitas, and the foundations that supported it: I invite people to look very carefully at which foundations, a foundation, that specifically profited from backing Acuitas and continues to profit with every shot. I leave it to lawyers and RCMP folks to look into who supported this nefarious research and ultimately nefarious research in Canada.

Shawn Buckley

And Dr. Shoemaker, I just want one more comment from you.

[00:45:00]

Because, according to worldfamilydoctorday.org, today is World [Family]Doctor Day. And I would ask, what message you would send to the doctors of the world today, May 19th, 2023?

Dr. Christopher Shoemaker

Well, on World Doctors Day, I send to my colleagues, and we are colleagues— My medical school graduation was 1975. My first days in clinical practice, post internship and residency were in 1977. We've all been working at this for a while and many of us for fewer years. We should take pride in looking at real science. We should take pride at protecting the true health of our patients. This is tough to look at. It's tough to point and say, "The emperor has no clothes." It's tough to say that the people above us, the medical agencies above us, have been fooled into advising us incorrectly. But their advice to not speak on these topics, to have us not speak on this topic, was illogical advice and it was advice that they were tricked into.

So dear doctors of the world, let's none of us be trapped. Let's none of us be tricked. We are tricked no more. We will help the human population. We will refuse to put these shots into our shoulders. We'll refuse, like Denmark did. And Denmark, by the way, bans it now for adults as well. Things have moved along. Denmark now bans it for just about everybody in their country to get these shots. So let's ban it for ourselves. Ban it for ourselves by taking back our shoulders, taking back the recommendations, doctors.

We know that it's creating turbo cancers in patients. We know it. There're other slides I would have showed you of cancers just exploding in people because they've had a shot [Exhibit OT-2f]. Their MRI goes from looking pretty neutral and 10 days after the shot, their whole body is blacked out with metastasis because it's 10 days after they just received this death vax.

So that is my message to my fellow doctors of the world. Again, thank you to the NCI.

Shawn Buckley

Thank you, Dr. Shoemaker. On behalf of the National Citizens Inquiry, we sincerely thank you for coming to testify.

[00:47:39]

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