

COOL FUTURES FUNDS MANAGEMENT – ACTIVITIES AND EXPERIENCE

We are an international team of highly qualified and experienced mathematicians, scientists, engineers, actuaries, epidemiologists, biostatisticians, risk managers, bankers, fund managers, investment managers and science communicators - determined to apply rigorous due diligence to science, engineering and strategic investment dependent projects, policies, and positions – both private and public.

We see high-resolution due diligence and accurate, reliable, and timely information as essential for an informed market and body politic to function optimally. These high-resolution insights and activities will be applied rigorously across our range of services and investments.

At the very least, the COVID 19 (covid) Response Inquiry Panel should take a brief ‘helicopter’ view to examine the ‘covid landscape’ as we, at Cool Futures Funds Management, see it.

This submission is made to assist the Inquiry “review the Commonwealth Government’s response to the COVID-19 pandemic and make recommendations to improve response measures in the event of future pandemics” to better anticipate and avoid the multitude of international, ethical, security, professional, medical, political, bureaucratic and scientific issues that forms the history and thus the narrative of the recent pandemic, before the promised and much heralded next pandemic.

It is made to widen and improve the lens through which the Inquiry focuses on the ‘pandemic’ itself and attempts to frame the lessons to be learnt from this examination. We suggest the Inquiry focuses on the ‘signal’ and not the ‘noise’ within both the Pandemic ‘narrative’ itself, as it panned out, and in the Terms of Reference examining and distinguishing between the ‘narrative’ and the ‘evidence’.

Surely, the open provision of accurate, reliable, and timely information should inform community debate through free speech to inform the people so that ‘good governance’ can naturally follow.

A better view, and richer understanding of the ‘landscape’ of the recent COVID pandemic will enable the Inquiry to, more effectively anticipate, adapt, and respond to future pandemics within the scope of Commonwealth Government’s responsibility.

In our view, the framing of the scope of this inquiry should begin at the beginning. In the beginning we must re-examine the source, nature, pathway, and timing of the covid ‘pandemic’.

The source, nature, pathway, and timing include covid emerging from a [REDACTED] in Wuhan in China, which was part financed by the [REDACTED] and the [REDACTED], and which was purposefully exported to the world by the [REDACTED]. This very focussed and intense Pandemic ‘beginning’ should be noted and dealt with as a key input.

The [REDACTED] military, the WHO and security and military elements of the [REDACTED] played foundational and sometimes divergent roles at the start of the covid pandemic. This must not be forgotten.

Similarly, the direction, function, and narrative of the WHO (controlled by the [REDACTED] and the [REDACTED] [REDACTED] in the handling of the Pandemic warrants more than a cursory look. The current efforts of the WHO (compromised and corrupted as they are, as above) to acquire direct control of the Pandemic and Health response of all signatory nations to the WHO Treaty, including in the Commonwealth of Australia, demands an immediate response of [REDACTED] ‘No’. We do not need an even more remote controller of our National Health system and resources response that would be the case if the Commonwealth of Australia ceded this control to the UN.

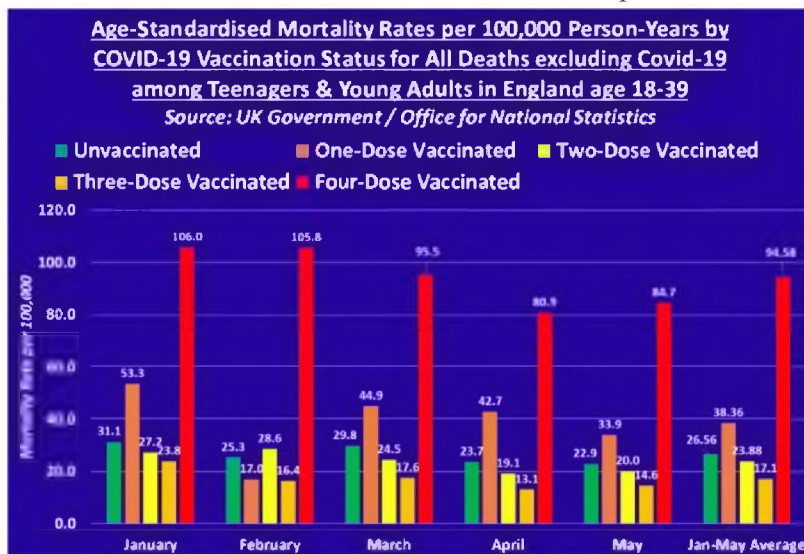
Bureaucracies, NGOs, and companies (including, National Governments, the UN including the WHO, the WEF, Pfizer and the like) made enormous gains in terms of money, power, and influence at the expense of ordinary citizens all around the globe, where wealth and freedom of speech and movement diminished for most, in favour of an elite bunch of globalist bureaucrats, billionaires and their intelligence community, political, and economic minders and courtiers.

As the twig is bent, so the tree shall grow. All that grew from the above, is the result of the above.

This Inquiry needs to be cognisant of this wealth and power transfer as the many negatives for the many, that came from the COVID 19 Pandemic, provided huge benefits for the elite few.

Some of what grew from the above, included the development, refinement, and ‘mandated’ use of a giant medical experiment (drugs) - a medical experiment foisted upon billions of people. The prototype testing of these same drugs (the resulting data from which had to be locked away by agreement between both the drug companies and the regulatory agencies for 75 years in an unambiguous demonstration of the ‘regulatory capture’ of the US FDA) has triggered a huge and continuous range of negative, and in many more cases than would usually be acceptable, deadly responses, from the uninformed subjects ‘consenting’ to this disastrous ‘medical experiment’.

It is now clear that the West did not do the basics at all well. By focusing on a vaccination response only, and by not encouraging the use of Vitamin B and D and Zinc through huge public awareness campaigns, and by making repurposed off-label treatments such as Ivermectin and Hydroxychloroquine illegal (and by threatening doctors and pharmacists accordingly), the Commonwealth Government guaranteed a much higher rate of infection and hospitalisation and death than would otherwise have been the case. This evidence free response must not be repeated.



Vaccination is not supposed to increase the death rate.

A German paper now tells us why. Briefly, there are four types of Immunoglobulin G, which together represent 75% of the serum antibodies in humans. IgG1, IgG2, IgG3 normally constitute 99.96% of the Immunoglobulin G in circulation. IgG4 is normally the balance of 0.04%.

What the German study found was that vaccination caused the proportion of IgG4 to rise after

the second dose and again after the third dose to near 40% in some individuals after the third dose. This is a bad thing because the role of IgG4 is to stop the immune system from overreacting to allergens like pollen. What it means with covid is that the IgG4 antibodies will bind to the covid virions and stop the rest of the immune system from attacking them. Which in turn means a higher covid infection rate and a higher death rate. Post the third dose, those with higher IgG4 levels were more likely to be infected with covid.

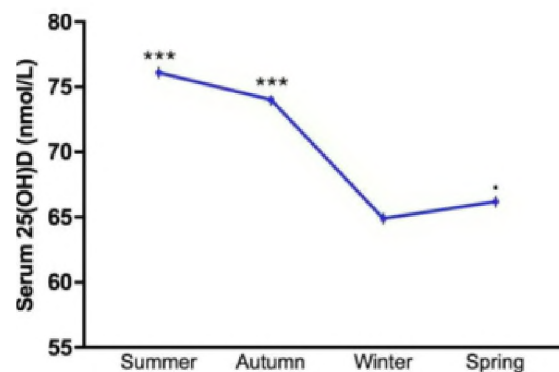
Our health bureaucrats have obscured the data they produce so that the hospitalization, admission to ICU, and death rates for the unvaccinated can't be determined. But with the introduction of the fourth vaccination dose an interesting trend has been established:

Some **statistics have** now come out of the UK (see above chart) with more detail by age group. This graphic shows the fate of the 18 – 39 age group by month from January to May 2023 as they progressed through the vaccination process. Fate as in death, because the bars are the mortality rate per 100,000:

The results have been clear, but the mRNA injection experiment continues. Is there no natural curiosity in our health authorities?

The ‘mortality rate per 100,000’ increase with vaccination beyond dose number four, coupled with the multitude of Pfizer Documents published during the course of 2023 clearly show that the covid vaccination experiment has failed.

There is another interesting thing about that graph. The hospitalization rate for all dose levels increased steadily from June to July. This may be due to lower vitamin D levels in winter. A study of 30,023 patients at [REDACTED] from 2014 to 2017 produced this graph of average blood vitamin D levels by season:



The summer and autumn average level was about 29 ng/ml, while the winter and spring average level was about 25 ng/ml. Note that the figure is in nmol/litre. A good level for vitamin D starts at 50 ng/m

The observations above raise some major ethical and governance issues. However, they also provide fraud, as a way around the fraudulently obtained indemnities obtained by duress (and thus captured) by some of the major drug companies.

Where companies whose business models involves massive and government subsidised distribution campaigns via regulatory capture and paying out fines and damages in excess of USD 60 billion over the last 10 years or so.

As the covid virus may have been the front end of a ‘two part [REDACTED] designed to inflict a pandemic and economic and political chaos on the World (the other half being the mRNA concoction). The next [REDACTED] may also be two part, and have the same or greater impact.

It is hoped The Inquiry will consider the above and the findings of previous relevant inquiries and reviews and identify knowledge gaps for further investigation. We hope it will also consider the global experience and lessons learnt from other countries (some of which is above) in order to improve response measures in the event of the future expected global pandemic.

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