

# 100 questions they don't want to answer

The most troubling part of the pandemic to me is the lack of transparency and accountability. The authorities love to create mandates we must follow, but they refuse to be held accountable.



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## THE 100 QUESTIONS

Here's a list of questions that you can ask your doctor, local, state, and federal lawmakers and health authorities. I haven't had any luck getting any of these questions answered on camera so I can share the answers with you. Perhaps you will have better luck.

There aren't 100 questions here yet, but there will be when I'm done with this. Check back in a few days for the update. Hyperlinks will be added later to all the references.

### General questions

1. [Incriminating Evidence](#) is a collection of counter-narrative evidence. Can we go through that one piece at a time and can you explain how these are all wrong? Or conversely, perhaps you can find just one document that you can show is wrong in that article?

### Censorship

1. President Biden has a Disinformation Dozen list. Why not debate these people instead of censoring them? Is it right for the leader of the free world to proudly proclaim a censorship list?
2. Facebook has removed vaccine victim support groups with over 200,000

users. Why was this done? Why didn't the medical community say a word in protest? How is removing a support group for vaccine injured a benefit to society?

3. Will you sponsor a law allowing people who have had live saving content removed from large social media platforms to sue for statutory damages?

## Accountability

1. Why won't any member of the FDA/CDC outside committees debate me for \$1M just to show up at the debate table?
2. Why are people trying to censor the doctors instead of debating them? Why weren't any of the 270 signers of the letter asking Spotify to censor Joe Rogan willing to debate Malone on the issues they objected to?
3. Why won't any local, state, or federal lawmaker or official agree to answer any of these questions in a live recorded video interview?
4. How can the CDC not find a single safety signal with these vaccines other than minor symptoms? It was the DoD who found the myocarditis signal.
5. Will the CDC ever admit there are thousands of adverse events and deaths?
6. Why did Steven A. Anderson of the FDA (who is the top person for safety monitoring for these vaccines) duck all my phone calls and emails when I asked if he wanted to see the troubling safety signals in VAERS?
7. Why did Janet Woodcock not follow through on her agreement to investigate the Maddie de Garay case?
8. Everyone knows there was fraud in the Phase 3 trial for 12-15 year olds. How come nobody is saying anything?
9. Jessica Rose's paper on myocarditis was unethically pulled by Elsevier for no stated reason. Why is the academic community not saying anything?
10. Social media companies have removed the accounts of people who tried to expose the truth. This cost hundreds of thousands of lives. Will the social media companies be held accountable?
11. Is there a single member of congress who will object to Biden's censorship list?
12. If the State Board removes the license of a physician for "misinformation" and said "misinformation" later turns out to be true, shouldn't the affected physician be allowed to sue the State Board for treble damages and attorney fees?

## Pandemic response

1. Why didn't we just mandate everyone get the Fareed-Tyson protocol if they got COVID? This would have resulted in very few deaths. Why did the NIH refuse to investigate this?
2. Everyone knows about the Fareed-Tyson protocol today. Why not simply mandate its use now and drop the other restrictions?
3. When we found out the vaccines did nothing to prevent infection, the societal benefit ended at that point. Why didn't we drop the mandates then?

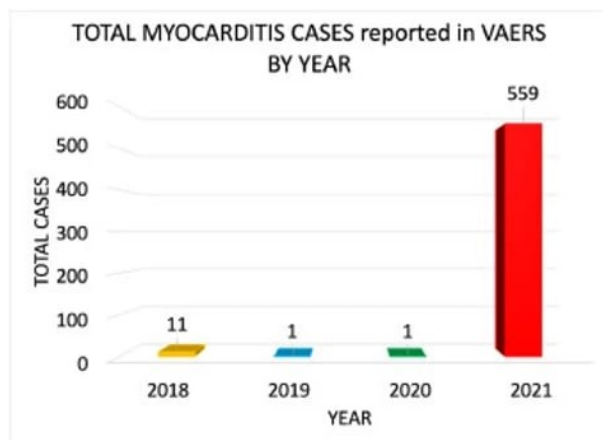
## Vaccine efficacy

1. There are over 9 studies that show the vaccines make it MORE likely (not less likely) you'll be infected from COVID. Did they make a mistake in all 9 studies?
2. The latest UK and Scotland data show negative vaccine efficacy. Was there a mistake?

## Vaccine safety

1. Why do 13 different method show that over 150,000 Americans have been killed by the vaccines?

2. Why did the Pfizer trial report 24% more deaths in the vaccine arm than the placebo arm? Isn't it supposed to be the other way around? Why weren't there autopsies in any of those deaths? How can Pfizer be certain those deaths weren't caused by the vaccines?
3. My neurologist has 20,000 patients and 2,000 vaccine injured. She's been in practice for 11 years w/o a vaccine injury. This vaccine is over 20,000X worse than other vaccines. If the vaccine is so safe, how do you explain a 10% injury rate?
4. There are now over 1M adverse events reported in the VAERS system. Using CDC's methodology, we know VAERS is ~40x underreported. That's 40M adverse events and > 5,000 conditions that are significantly elevated. How can the CDC not spot a single safety signal (other than myocarditis)?
5. There are over 5,000 significantly elevated adverse events in the VAERS system. How come we aren't giving people a list of these? If they weren't caused by the vaccines, then what were they caused by?
6. How can the CDC not find any deaths caused by the vaccines, yet top pathologists like Ryan Cole and Sucharit Bhakdi claim that over 90% of the deaths within 60 days post-vaccination were likely caused by the vaccine. One of the world's top pathologists, Peter Schirmacher, also found results consistent with their findings. Why should we trust the CDC? Did these pathologists make a mistake?
7. Why is the CDC "still investigating" all the cases where the autopsy showed the person was killed by the vaccine?
8. Why isn't the CDC requiring that autopsies be done by pathologists trained in spotting COVID vaccine injury if the death was within 30 days of the vaccine?
9. If the risk of myocarditis is only "slightly elevated" due to the vaccine, then how do you explain this chart from Jessica Rose's paper?



10. Ryan Cole has been a pathologist for 26 years. He's seen nearly 500,000 patients and done 550 autopsies. He recently found a saphenous vein in a patient's leg 4 feet long that was SOLID with clots. He's never seen anything like that in his entire career. Others in the patient were 6 to 24 inches long. This was in a patient who died just 3 days after a booster shot. If it wasn't the vaccine that caused this, then what did?
11. If myocarditis after the vax is so rare, then how do we explain at least 4 myocarditis cases in a small private school (Monte Vista Christian School) among fewer than 400 boys?
12. Why are there so few autopsies?
13. Shouldn't a 3 year old dying from cardiac arrest just one day after being vaccinated set off alarm bells? Does anyone care?
14. If the vaccines are so safe and effective then why do surveys of firemen and

airline pilots show that 80% would choose not to be vaccinated if they weren't forced to?

## Biased news coverage

1. People who die within 60 days of the vax are 90% likely to have died from the vaccine. How come we never talk about when they were vaccinated in their obituary? Why are there so few autopsies in these cases?
2. Why does Jake Tapper use ad hominem attacks against Robert F. Kennedy, but will not debate him? Isn't this unfair?

## Corruption

1. Why did FEMA make a cash offer to Ernest Ramirez to declare his son's death a COVID death? Did they have evidence the coroner got it wrong?
2. Maddie de Garay, who was 12 at the time, was injured in the Pfizer phase 3 trial. She's paralyzed. She's now becoming a quadriplegic. Why didn't the FDA, CDC, or NIH investigate? That's clinical trial fraud. Why aren't we telling people that based on the clinical trial, there is a 1 chance in 1,000 your child could be paralyzed too?
3. Why aren't any coroners trained on how to spot death from COVID vaccines?
4. Why aren't all deaths within 4 month of vax being autopsied to see if the vaccine caused the death? Even if we just did this for 1 day?
5. Why is there no stopping condition? How many kids have to die from cardiac arrest before we stop the vaccines?
6. Why refusing to fill valid ivermectin prescriptions protecting health? What studies show that the risks outweigh the benefits? Don't you have to cherry pick studies to show that?
7. Why was every single early treatment protocol using existing drugs/supplements suppressed by the NIH?
8. Why is ivermectin so expensive? One vaccine injured patient must pay \$220 for 20 pills. Why is this not covered by insurance?

## Intimidation tactics

1. If doctors are free to practice medicine, then why is only one doctor in California willing to write medical exemptions from the vaccine?

## Mandates

1. Is it ethical to mandate a vaccine that is more likely to kill people than to save them?
2. Is it ethical to mandate a vaccine where most all of the vaccine injured cannot be cured?
3. Is it ethical to ever mandate any vaccine ever?
4. If the mandates are to protect society, why isn't there a risk benefit analysis anywhere?
5. Why it is ok to mandate vaccination for kids when the data shows we kill over 100 kids to save 1. Was there an error in Dr. Toby Rogers' analysis?
6. If you want to mandate something, why not mandate that everyone with COVID get early treatment ?
7. Why won't anyone with a mandate accept liability?
8. Why must I be vaccinated to watch my daughter graduate from college? Why is testing not sufficient?
9. If you die from the vaccine, many insurance companies won't pay for it since you opted for an experimental treatment forced by your employer. Is it right for the burden to be on you?
10. If the vaccines are as safe and effective as claimed, why do we need mandates?

## Masks

1. Why are masks mandated when every randomized controlled trial shows that cloth and surgical masks are completely useless against COVID.
2. Can anyone show a study showing the risk reduction from an N95 mask varies over time within a room? It goes to zero after a short amount of time. What is it?
3. Why are we not educating the public about P100 respirators? Don't we want to protect people?

## Social distancing

1. Where is the study showing that 6 feet results in a benefit? How does that benefit decay over time?

## Testing

1. Since there is no evidence of asymptomatic spread, why are we testing people who are asymptomatic?
2. Since there is no evidence the naturally recovered can infect others, why are we testing these people and requiring them to be vaccinated?

## Liability

1. If the vaccines are safe and effective, then why do the manufacturers need liability protection?
2. If the vaccines are so safe, why aren't any of the organizations that mandate vaccines accepting liability?

Note: This is just an initial list. I'll add more over time, but this should be a good warmup set of questions.



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