

When it's our Police officers who are asking these **questions** and making these **statements**, I think we have this duty of knowing how our laws are being used. For this original [website's-link](#) is for the pictures.



The website linked above, showcases two letters that have been written by two New South Wales policemen to the State's Police Commissioner, pleading for recognition of the truth of **how the law is being used**, and for an inquiry to be commissioned into the cause of the wrong use of the law.

**The first letter** may be available through the AdvocateMe law firms's web site as linked on the title page, but is also available through my own storage-&-download [site](#). The first letter, written by Senior Constable Alexander Cooney, lays the groundwork for the second letter.

Senior Constable Cooney has written a very concise letter, stating the logic behind his plea very clearly with a very brief reference for Commonwealth, Constitutional and Statutory law and a reference to the treaty between the Commonwealth and States, detailing how they cooperate.

This first letter details how these laws have been wrongfully used, and how the police force is being pressured into acting against their consigning oath. Please see the copy of Senior Constable Cooney's [letter](#) on pages 12 to 17 of this document.

**The second letter**, also written by a Senior Constable who's a leader of the Public Order & Riot Squad, supports the first letter and explains how his riot squad has been pressured into acting, what he seems to construe as unlawfully, or at least contrary to his consigning oath.

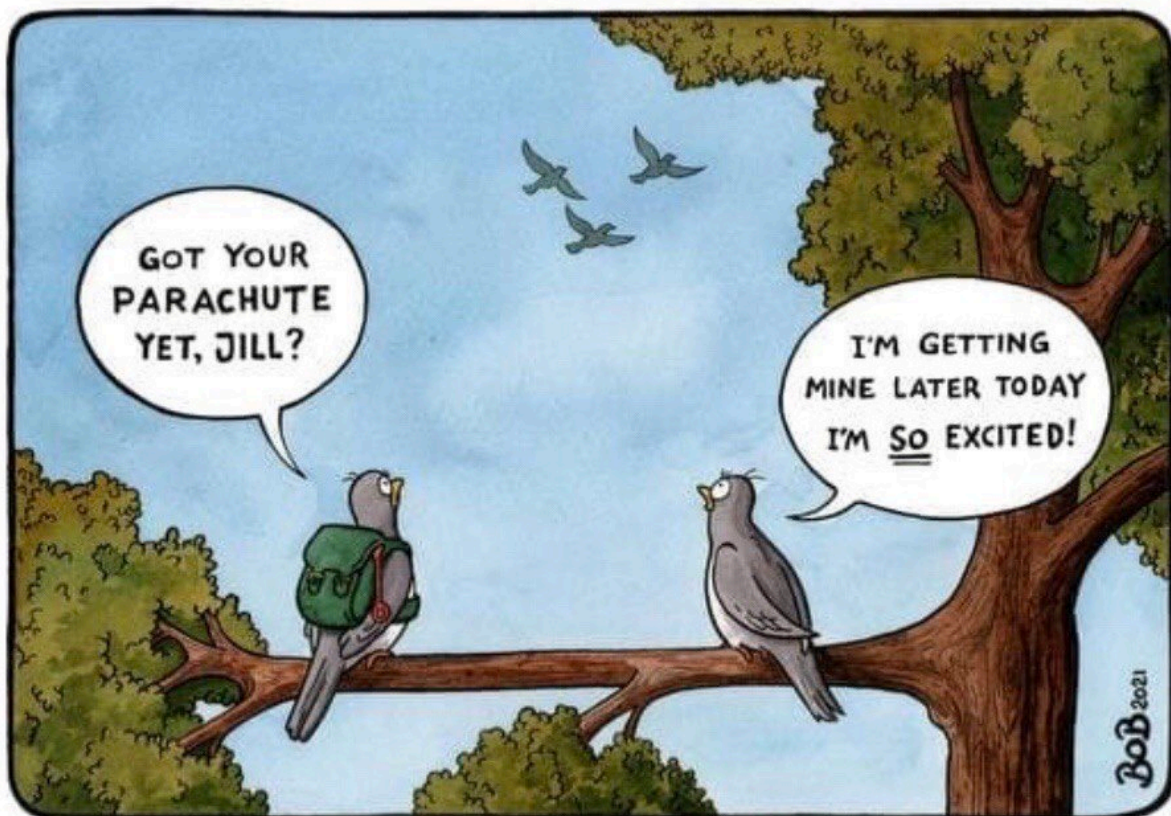
The first letter states on pages 4 to 5, that under a declared State of Emergency, "emergency requirements and directions cannot request an individual to be isolated, detained, tested, vaccinated, medically treated or bodily searched in the absence of a **biosecurity control order** issued to the individual", and that "These measures are referred to as biosecurity measures and are captured under Subdivision B of Division 3 of Part 3 of Chapter 2 of the Biosecurity Act 2015.

And that in itself, is the main purpose of this document: to explain **what a person's rights are** by the **Federal Framework** for the **Management of Public Health Risks**, concerning the use of governmental, **Emergency Powers**. But first:





**Therapist:** So let me get this straight...  
You're vaccinated and think they  
only work if everyone gets them?



We seem to have endured so many contradictions, that now: we need to know where we stand.

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Key:

In the context of the document [underlined texts](#) are website links.

The [AustraliaOne political party](#) recently put out a summary of our lawful rights, that's almost identical to the following page's claims. I've just added some clarifications at the end.

# THE NUREMBERG CODE

KEEP THIS WITH YOU AT ALL TIMES  
THIS CANNOT BE DISSEMBLED BY ANYONE

The Nuremberg Code came after Nazi doctors and scientists were put on trial for medical experiments and treatments that they tried on prisoners without their **consent**, leaving them with permanent injury. It was developed to prevent the same thing from happening again where people have not given **informed consent**, nor being able to withdraw from the experiment. Forced, coerced and mandated vaccinations and medical experiments are in direct violation of the Nuremberg Code and are judged to be war crimes.

## Nuremberg Code, Article 1

The voluntary consent of the human subject is absolutely essential.

## Article 6 of the UNESCO 2005 statement on Bioethics and Human Rights

Article 6, Section 1:

Any preventative, diagnostic and therapeutic medical intervention is only to be carried out with the prior, **free and informed consent** of the person concerned, based on adequate information. The consent should, where appropriate be express, and may be withdrawn by the person concerned at any time and for any reason, without disadvantage or prejudice.

Article 6, Section 3:

In no case should a collective community agreement or the consent of a community leader or other authority, substitute for an **individual's informed consent**.

## The Australian Federal Biosecurity Act 2015

Where comparable conditions apply, Australia's Biosecurity Act 2015 has precedence over any State Act, by **Section 5 and 109 of the Commonwealth Constitution**.

The Federal Biosecurity Act 2015, **Section 95** says there must be **no use of force for** (Sections 85-94):

- providing **contact information** of people whom you have been in contact with - Section 85
- reporting signs and **symptoms** to a biosecurity officer - Section 86
- **restricting behaviour** such as not visiting a place, or remaining at a place - Section 87
- wearing **specified clothing** or equipment to prevent a disease from spreading - Section 88
- decontamination, washing, **sterilising of clothing** and personal effects - Section 89
- undergoing **an examination** to determine the presence of a disease - Section 90
- requiring **body samples** for diagnosis - Section 91
- receiving a **vaccination or treatment** - Section 92
- receiving **medication** to manage a disease - Section 93

At all times, appropriate medical and professional standards must be applied - Section 94

## Your consent is essential at all times.

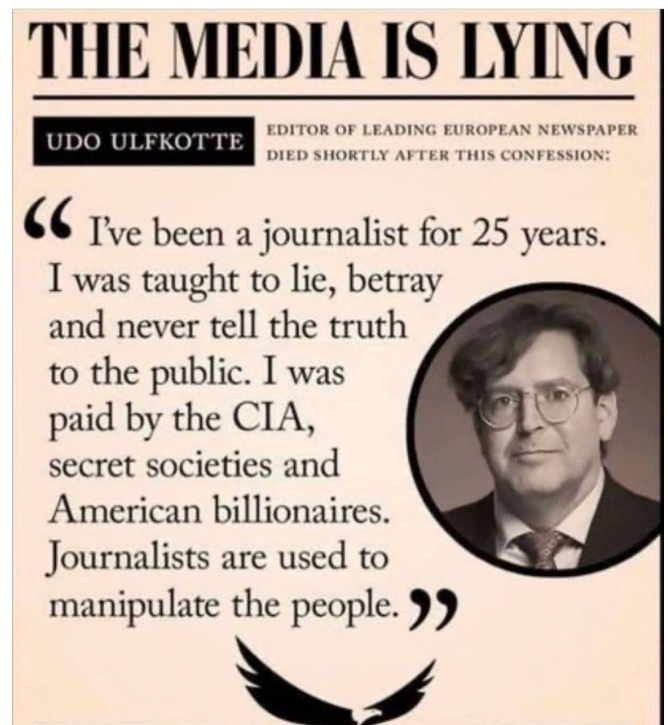
Any forcing or coercion into receiving a mandated vaccine or for participating in any type of medical experiment are in direct violation of the Nuremberg Code, if you haven't given your free and informed consent. Therefore it's 'your body, your choice'.

As more vaccines have been added to the CDC schedule, that tendency for those who administer the vaccines, to violate the Code has clearly increased. There are risks of vaccine injuries and possible death, and these vaccine providers are often exempt from litigation, also they are known to downplay and suppress the truth of the effect of their vaccines.

On the basis of these law claims, any claimant who withholds their free and informed consent, is **exempt** from taking or receiving a vaccine, from wearing a mask, from being forced into self isolation, and from submitting to any **unlawful** State-legislated mandate and directive that's given by an unauthorised enforcement officer. Enforcement officers can only be authorised by the Biosecurity Act's criteria.

The Nuremberg Code, the UNESCO 2005 Statement, and the Biosecurity Act 2015 Section 95 are applicable anywhere in Australia **even if** the Biosecurity Act has declared an emergency. For these law claims take precedence over any comparable and unlawful directives given by a State.





### So, where has this all gone wrong?

Yes, the mainstream media have been “the tail, wagging the dog”! And yes, the ‘vaccine’ roll-out among the nations is by an experimental vaccine that’s never been proven to immunise anyone!

For a more thorough explanation of how we’ve come into this situation where there’s so many contradictions, oppressive effects of governing strategies and social upheaval concerning the claimed “pandemic” and “states of emergency” please see this 45 minute video, called [Monopoly](#). It really describes and explains the corporate interests very clearly.

It gives the background for comprehending that a global conspiracy is indeed being waged against the populations of the nations. The video makes what’s unbelievable, believable!

Complementary to that first video, this 30 minute video that’s an interview with [Dr. Lee Merritt](#), who’s an immunologist and virologist, shows the believability that “the pandemic” is truly being used as biological weaponry for warfare against the populations of the nations.

Finally, for video background, these two videos of corporate-trial-lawyer: Reiner Fuellmich’s lawful campaign against the corporate and personal interests that have perpetrated “the pandemic” - [one of eleven minutes](#) run time and the [other of nineteen minutes](#), are testimony as a safeguard against the corruption, that it will be bought to justice.

As Reiner says in the second video, he’s hopeful that bringing justice to the perpetrators of “the pandemic” will result in an entirely reformed world of nations afterwards, but that many people will die who’ve given their consent to the mainstream plot of the conspiring corporations’ agenda.

Therefore, we need to know where we stand, so as to guard ourselves against the corruption and it’s allurements of a false hope through partisan interests and contests, through the deception that vaccinations will cure “the pandemic” and risk of disease, and know how to stand against these corruptions of our rights.

For us as Australians, the knowledge of how to stand comes through the true interpretation and use of the Biosecurity Act, along with each of our own moral integrity of course.

A Melbourne lawyer: Serene Teffaha of [AdvocateMe law firm](#), has very kindly made a video that explains the use of our Federal Biosecurity Act. This is very significant since **Section 5 and 109 of our Commonwealth Constitution** provide that our Biosecurity Act 2015 has precedence over any State Act where comparable conditions apply.

Therefore, since there's been such State government mishandling, even tyranny by the use of the containment measures that are being used to "control the pandemic", Serene has explained what are the true limits of our States' emergency powers by explaining:

**The Federal Framework for the Management of Public Health Risks  
and Emergency Powers, also for States and Territories.**

The video may still be on YouTube but is downloadable from [this storage site](#), titled: Serene Teffaha - Biosec. Act.

The next four pages present the study notes I've recorded as a summary of the video. Each topic and claim of Serene's speech and presentation is given a meter-location (e.g. 00:52 - no minutes and 52 seconds into the video) of the video's run time, that corresponds to the video's location of its run-time so that any reader can refer quickly to the video's presentation by topic.

**Video Location (00:00) and Notes** (including my own comments and "direct quotes" from Serene's speech)

00:52 The **framework** is "a series of laws that are meant to be read and understood in context". Public Health risks are managed through the Federal legislation of the:

**Biosecurity Act 2015** - cited sections subsections are Sections and Subsections of the Act.

The full text of the Biosecurity Act is available for viewing and/or download through [this link](#). The download that's available through the link is the current Act, including all amendments, that's in force as of April 2021.

02:35 Section 8: State laws cannot be inconsistent with this Act. They must act concurrently with it, says the Federal Legislator, that is: the Federal process of making and enacting legislation. In the purity of our Parliament's operation, politicians are not legislators, the process is!

02:54 Subsection 1: In the case that the Biosecurity Act is used to override State laws, "It (this process of interpretation) won't exclude the States' and Territories' laws, except when it comes to **emergency directions** in relation to **emergency powers** when they're played out".

03:32 "**When can a state of emergency be declared?**"

Section 475: The Governor General must do this, which he did on the 18th March 2020. "The States and Territories can do so as well, as long as it's acting concurrently with the Biosecurity Act, and especially when it comes to emergency directions it has to ensure that the Biosecurity Act's rules are the ones that are followed".

04:14 "Section 477: Sets out the **requirements for the Federal Health Minister** making and determining emergency requirements during a human biosecurity emergency period, and this is very clear in terms of what the Federal Health Minister can decide", viz: at 04:39, Subsection 3:

In a declared State of Emergency, which has its own criteria, the Federal Health Minister can decide:

- the requirements that apply to persons, goods or conveyances when entering or leaving specified places
- the requirements for specified place to be evacuated
- the movement of persons, goods or conveyances and if a recommendation has been made or referred to in relation to these requirements

05:06 “Now that’s very important here that **the Biosecurity Act, Section 477 is restricting the emergency requirements** (in a State of Emergency) through those things, meaning that you can’t do things on a particular individual that they call (the Federal Act calls) the Biosecurity measure can only do, meaning: you can’t do certain things that include:

- \*diagnosing, \*taking body samples, \*asking people to wear clothing or equipment, the masks for example, \*vaccinating, \*medicating, \*testing, \*contact tracing

These things can’t just be done to a group of people pursuant to our Federal top-boss legislation”.

06:03 “You can’t just come up and go: Yeah, we’re going to do all that to you! No. Why? Because the important thing is that we’re looking here at an assessment of Public Health Risk. That means it’s only when you can show that you are exposed to a risk to the disease, or you have signs and symptoms of that disease, can **a person authorised to do so**, give you a specific requirement”.

“That means no laws, no policy can require you to be \*bodily sampled, \*vaccinated, \*detained, \*isolated, \*clothing masked. You can’t be required to do those things unless it’s under strict circumstances”.

#### 07:10 **What are those strict circumstances?**

Section 60 & 61

Section 60 tells you **what you need to do before you impose** a **Biosecurity Control Order** on someone, and when you can impose it.

“Essentially, it’s when the individual has one or more signs or symptoms of a listed human disease, or the individual has been exposed to a listed human disease, or another individual has one or more of the signs of a listed human disease, or the individual has failed to comply with an entry requirement” - which is basically if you are sick on entry to the country as well and you need to be isolating, but that’s only if you’re sick!” Only if you have signs and symptoms. And only if **an authorised officer** can do so.

08:17 Section 61

This “specifies what has to be on **the Order** that’s issued to you, once we **show you are at risk**, that you **have the signs and symptoms** and that **you can contact trace the person** who you’ve been exposed to, **then** we can give you a number of different requirements - only under **those circumstances**. Perfectly healthy people should not be required to do anything!”

“The presumption under the Biosecurity Act is that you are healthy until you’re proven sick”.

**The Biosecurity Act is set up to identify health-risk.** 09:20 “Where you’re a risk, then measures can be taken. It can’t be taken on a group. ... (The way it works, is that) We (they, the authorised officer) will ask you to do things when we’ve determined you’re a risk”.

10:04 “So, **if your employer (or anyone** for this matter!) is saying to you: Oh, you need to be vaccinated. No, you can’t require me to do so (therefore ask them):

- Are you an **authorised officer**? No.
- Am I a risk, and has a medical practitioner assessed **my degree of risk**? No.



- Have you issued me a [Biosecurity Control Order](#) specifying the reasons and everything? No. Then you can't require me! You can recommend it, but you can't require me to do so **because there's no serious public health risk** that I need to mitigate (submit to controlling)".

10:52 "Now **what is constituted by a Biosecurity Control Order** is this:

Section 61: The Biosecurity Control Order of the Biosecurity Act

"A human Biosecurity Control Order that is enforced [in relation to an individual](#) must specify the following:

- the ground under which the Order is imposed on the individual
- the listed human disease in relation to which the Order is imposed upon the individual
- any signs or symptoms to be listed to the human listed disease
- the prescribed contacts' information provided by the individual
- a unique identifier code for the Order, so it can't just be (some sort of) this generic one (that applies to everybody) that's thrown out by Government
- each biosecurity measure which the individual must comply with, and an explanation why each biosecurity measure is required in relation to anything, such as \*decontamination, \*examination, \*body samples, \*vaccination, etc
- any information required to be included, and in the period for which the Order is in force must not be more than three months
- and, in relation to being issued the appropriate rights of review, which is very important

So you can't just say: Kinda think you've been exposed! No, you have to actually identify the person (by these measures and rights)".

### 12:35 **Rights of Review**

"We have rights of review in the country, and they don't go away simply because Government says: Nah (we're going to do things our own way, against established laws)".

### 13:58 **What are the Biosecurity Measures?**

"What are the things that they have to follow these processes for? They can't require you, **no one can require you to give contacts** unless you've been ordered under a Biosecurity Control Order. The **health status!** Biosecurity Control Order. (as determined by a medical practitioner). **Restricting behaviour!** Biosecurity Control Order. **Clothing and equipment!** A Biosecurity Control Order. **You don't tell healthy people to be masked.** That's not how we work in this country".

Besides! As Serene says: Random Clinical Trials (RCTs) have proven scientifically that the wearing of masks is damaging to people's health.

15:29 Besides the Sections noted above, the conclusions, judgments and applications that arise from, and are qualified by the Biosecurity Act as referred to generally, are drawn from the following Sections of the Act. Each of the powers conferred depend on the issuance of a personal Biosecurity Control Order.

See pages 93 to 97 of the [Biosecurity Act 2015](#)

Refer: Section 88: Clothing, Equipment, Biosecurity Measures,

Section 89: Decontamination

Section 90: Undergoing an Examination

Section 91: Requiring Body Samples for Diagnosis

Section 93: Receiving Medication

Section 94: Appropriate Medical or other Standards to be Applied

Section 95: No Use of Force

Section 96: Travel and Movement Measures

Section 97: Isolation Measures

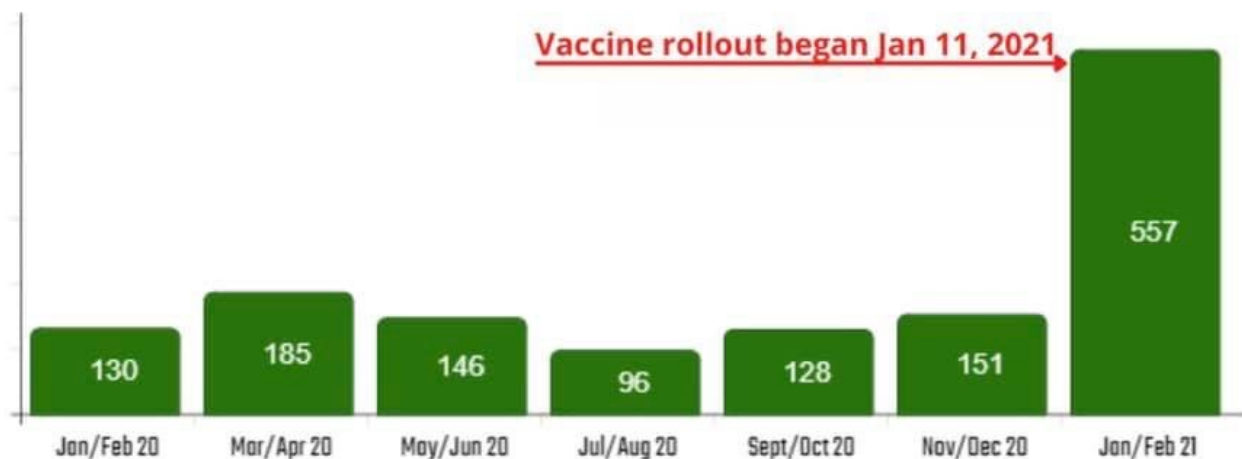
Imagine a man who forced his wife to stay away from her friends, family, and job. Imagine he also told her she should not leave the house unless absolutely necessary, and to cover her face and avoid people if she does go out. Imagine he threatened her with punishment if she didn't submit. Would you call this abusive?

It does not stop being abuse when the government does it.



## Deaths in 60 Irish Nursing Homes

2020 - 2021



**Data source: RIP.ie**

RIP.ie is not an official source of mortality statistics

HEALTHFREEDOMIRELAND.COM

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Could we call that: Ritual Abuse? Therefore, to what ritual of a health directive are our governments conforming? It's time for some weeping "between the temple and the altar".

## 17:03 So how does this sit with the States?

e.g. Section 200 of the **Victorian Public Health and Wellbeing Act**

“They’re (the Victorian Government are) pinning their hat on Section 200” and ignoring and denying the relevance of the whole Act. For “there’s been recent amendments to bring it in line with the Biosecurity Act”, that is: Section 117.

“Section 200 has not be changed since the year 2008, but Sections 117 and 123 were introduced recently to bring them in line. Section 117 says: You need to issue a person a **Public Health Order** (which is) similar to what a Biosecurity Control Order says”, and Serene goes on to read the Act’s amended Sections, explaining how this is so.

Serene explains how the Public Health and Wellbeing Act has been used in Victoria by interpreting and using for justification of the State Government’s actions, Section 200 to the exclusion of Sections 117 and 123, which otherwise would have brought it into line with the Federal Biosecurity Act 2015.

Therefore the same conditions as are explained above should have been, and be-being observed by each State, making any personally applied **Biosecurity Measure** that’s been and are being imposed on citizens of our nation’s States and Federation, **contingent upon** the imposition of a properly formulated, written and presented: **Biosecurity Control Order**, which can only be enforced if the person is **proven to be sick** and **proven to be a risk to Public Health**.

There are penalties for criminal behaviour, but any criminal conduct is defined beyond these criteria of identifying and controlling a public health risk, by criminal law, and is penalised by criminal law, not by Biosecurity requirements that are based upon identifying and mitigating or alleviating and controlling a public health risk.

Therefore, a Public Health Order that’s been formulated by a State or Territory Government and then cast over the State’s or Territory’s whole population contravenes the Federal Biosecurity Act, because a whole population cannot be designated as being sick at any one given time, nor can that entire State’s population be proven worthy of a Control Order by being a Public Health risk.

### Personal Claim

In the event that anyone is confronted by an enforcement officer of any description, and required by that officer to comply with any enforcement direction:

**Sections 60 and 61** of the Federal [Biosecurity Act](#), pages 72-73 are the main sections that apply:

**If anyone is saying to you:** Oh, you need to be vaccinated, wear a mask, be self isolated or even be quarantined. You can affirm:

- Are you an **authorised, Biosecurity officer**?
  - Am I at risk of a listed disease, and has a medical practitioner assessed **my degree of risk**?
  - Have you issued me with a **Biosecurity Control Order** specifying the reasons and everything?
- Since you’re answering no to each of these questions, I affirm that you’re not authorised by State nor Federal legislation to require me to conform to your requirements. You can recommend it, but you can’t require me to do so **because there’s no serious public health risk** that’s confirmed and established by a Control Order, showing that I need to submit to controlling that risk.

## **New South Wales Policemen's First Letter**

October 26, 2020

To: Michael Fuller

Police Commissioner of New South Wales

### **RE: Open Letter Concerning the Police Enforcement of ongoing COVID-19 restrictions**

We are writing to you to raise concerns we have about the use of the police to enforce the ongoing restrictions placed upon our citizens relating to COVID-19, which has seriously eroded community trust in our great police force.

Since the Attorney General Declared a State of Emergency for the novel coronavirus, our governments have acted upon certain powers to impose restrictions on its citizens, using the police to enforce their rules.

Due to the novel nature of the SARS-CoV-2 virus, most people concurred that certain restrictions should be followed, until more was learnt about the virus.

With the initial modelling from the Imperial College in the UK <sup>[1]</sup> and the Peter Doherty Institute here in Australia, indicating a catastrophic number of cases that would severely burden our hospital system and could result in up to 150,000 Australian deaths <sup>[2]</sup>, it is easy to comprehend why our governments would respond as they did and why the vast population would comply.

With these frightening projections it became evident that we needed to find a way to quickly diagnose the disease. Yet the Centre for Disease Control in the US states that "no quantified virus isolates of the 2019-nCoV are currently available". <sup>[3]</sup> So even without the virus being isolated, the RT PCR test was picked to become the gold standard for testing.

We note that the modelling was later found to have serious calculation errors, such that experts who later reviewed it have said "no serious scientist gives (it) any validity". <sup>[4, 5]</sup> And now the RT PCR test has been proven to be unreliable at best, with the inventor stating it should "never be used to diagnose infectious disease", because it cannot tell if what it detected is alive or dead. <sup>[6, 7, 8]</sup> This test is still being relied upon to make critical decisions in the interest of public health and safety.

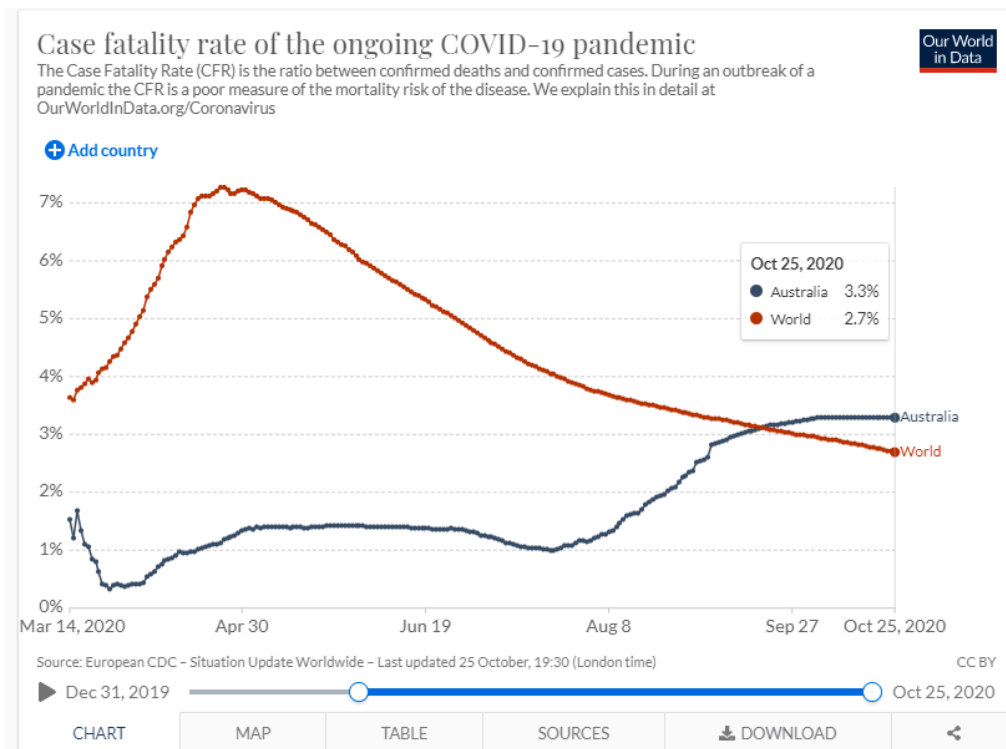
In the same way we cannot use an inaccurate speed detection device to proctor a civilian's speed, the same must be demanded of a faulty RT PCR test and as such, police should not in any way mandate testing for covid-19, or rely on any outcome of the results.

Now that we have almost 12 months of statistical data that can be relied upon, in place of flawed computer modelling, these statistics show a reality that is far from the modelling projections, which were relied upon by National Cabinet in their response.

For example, we now know that around 45% of people who contract the virus are asymptomatic <sup>[9]</sup> and asymptomatic transmission is between 0-2.2% <sup>[10]</sup>. We also know that 80% of people who contract the virus will only have mild symptoms <sup>[11]</sup> and it is overwhelmingly the elderly and immunocompromised who are at risk of severe symptoms that could result in death. <sup>[12]</sup>

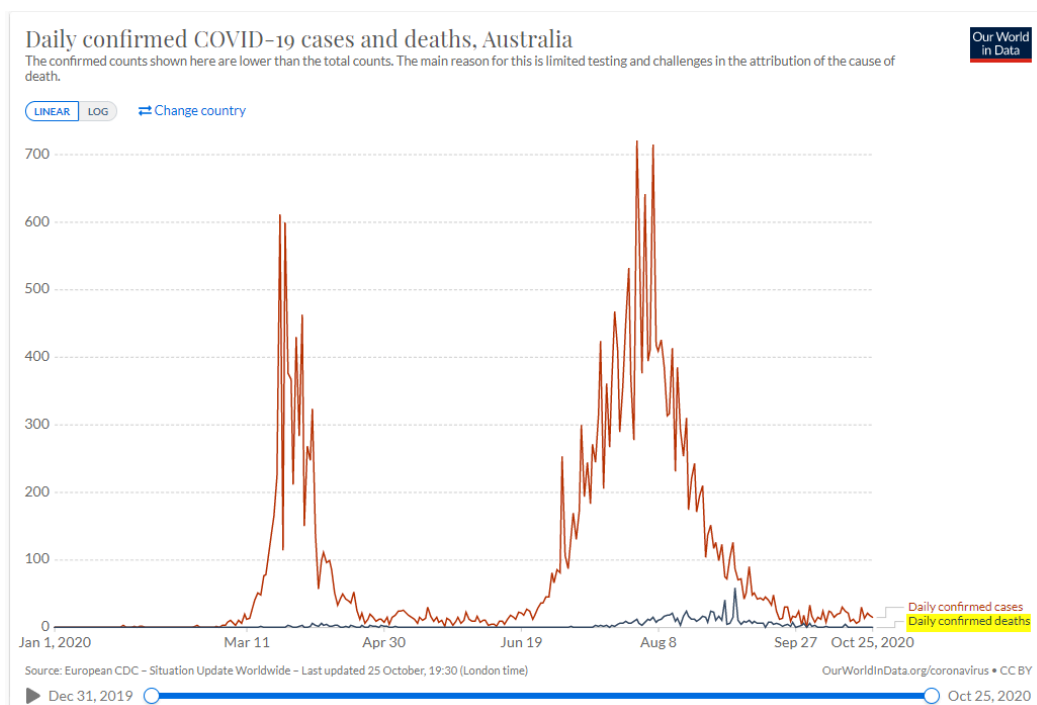


At the time of writing, the world-wide survival rate for covid-19 is 97.3%. [13] The ordinary flu is 99.9%.  
[14]

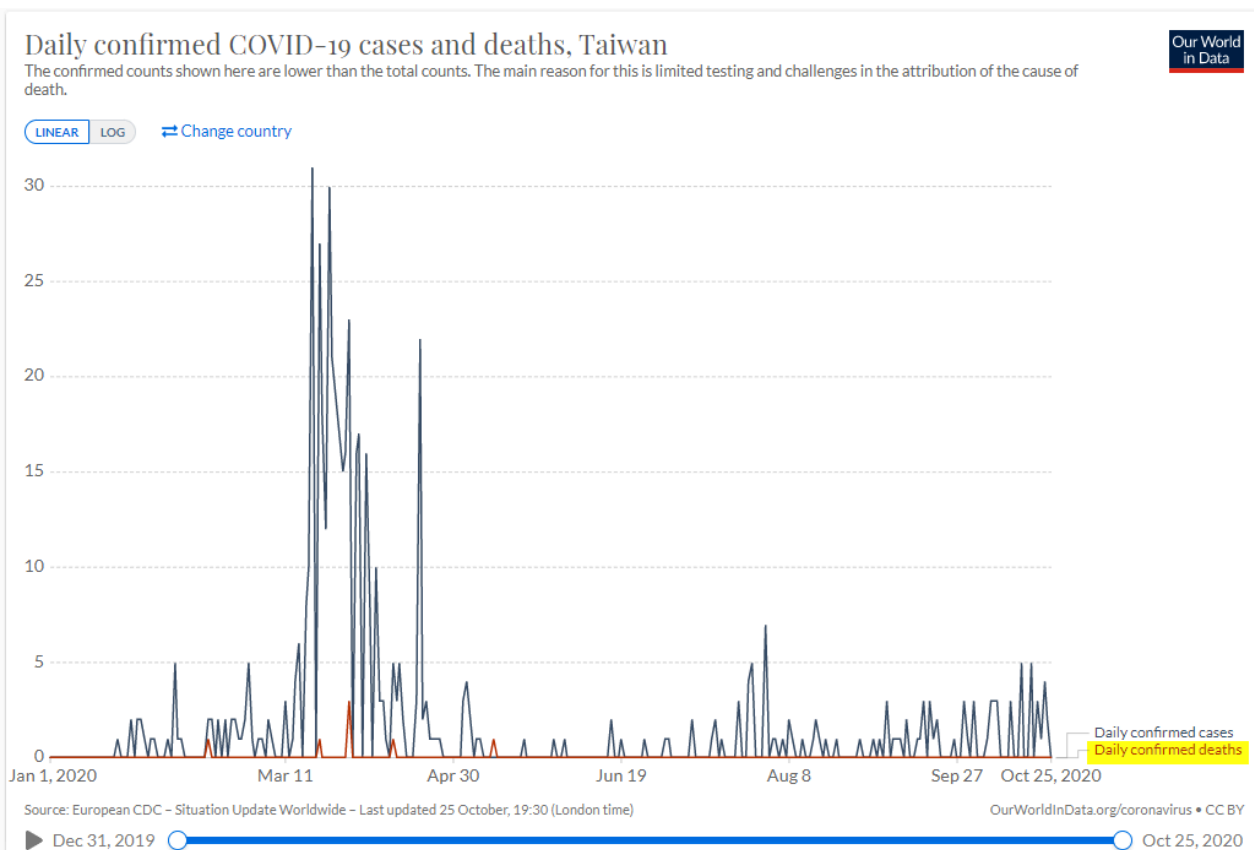
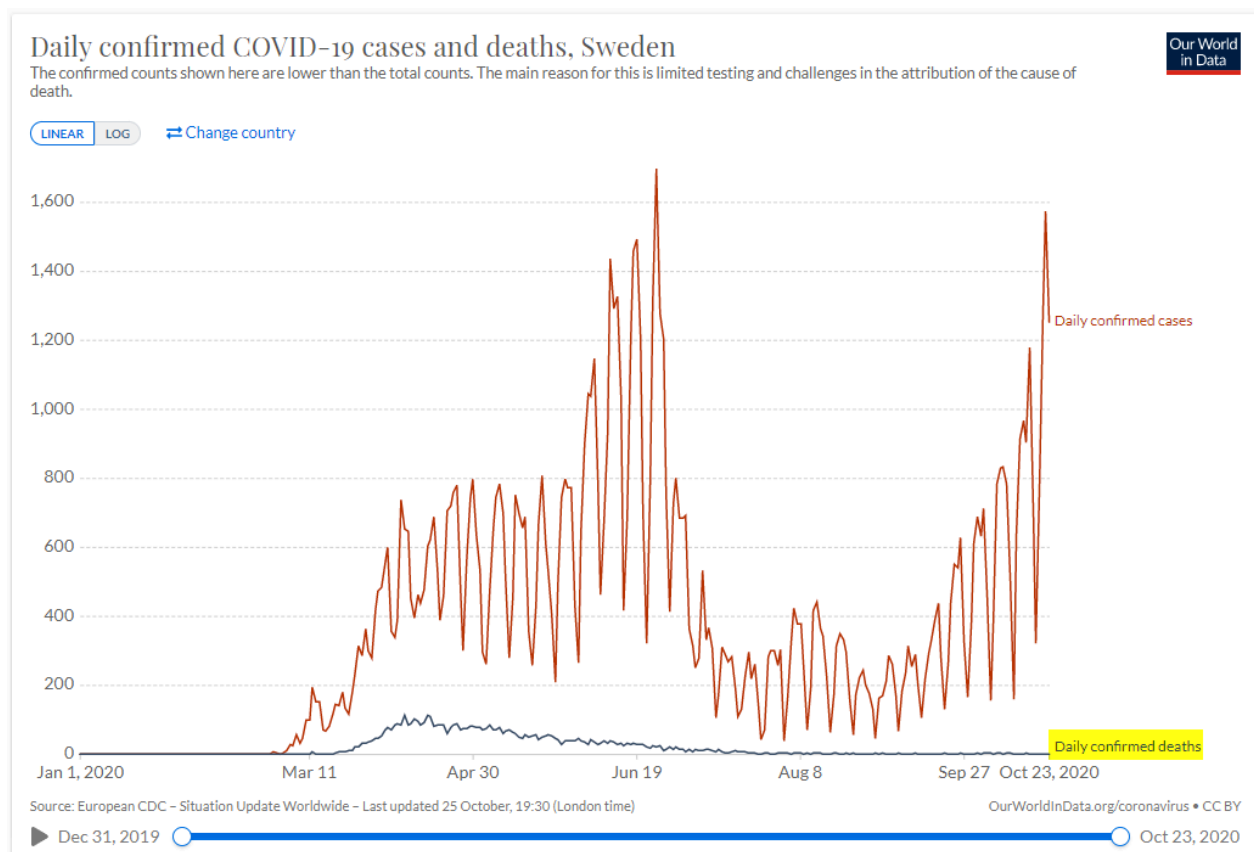


Furthermore, statistics clearly show that while the confirmed cases may be on the rise, the percentage of deaths is plummeting.

Here are some statistics which reflect this reality:



Sweden and Taiwan did not enforce lockdown on its citizens like much of the world did. Although Sweden failed to take better precautions to protect the elderly in the early stages, their death rate is comparable, and Taiwan's is outstanding: -



The statistics show there is a high infection rate across the globe, but very low deaths; regardless of whether there was forced lockdowns or not. What we can derive from analysis of this is that these two distinctly different ways have resulted in much the same outcome.

We note from the recent Federal budget, huge debt and unemployment, is that our lockdowns have created a series of problems that now seem to outweigh the threat this virus poses. In our line of work, we know that the socio-economical problems created here will transpire into a greater threat down the track, as people struggle to deal with the collateral damage this is causing.

We have been told that the advice from the World Health Organisation is a key aspect to the National Cabinet response, yet Dr David Nabarro of the WHO recently stated “We in the World Health Organization do not advocate lockdowns as the primary means of control of this virus,” [15]

So in spite of the facts, as they stand now, it would appear that the National Cabinet has been lagging in its capacity to adapt to the reality of the situation and this is causing them to fail in their duty to respond in proportion to the risk. The risk being overwhelmingly with the elderly and immunocompromised. [16, 17, 18]

What is even more concerning is the prohibition on prescribing hydroxychloroquine for COVID-19 [19], when over 121 peer reviewed scientific studies have shown it to be effective in treating and preventing the disease [20, 21, 22]. Instead, the federal government has done a vaccine deal with AstraZeneca [23] and Australians told we cannot expect to go back to normal until a vaccine arrives.

AstraZeneca has been found guilty of offences relating to off-label or unapproved promotion of medical products, making false claims, kickbacks and bribery, consumer protection violation, healthcare offences, government-contracting violations and more. Since 2000 they have been fined over US\$1.1 billion dollars for these offences and violations. [24] Still, they have been granted protection from future product liability claims relating to its COVID-19 vaccine [25].

Alarmingly, Prime Minister Scott Morrison stated they will make the vaccine “as mandatory as you can possibly make it” [26], in spite of the criminal record of its producer, their exemption from liability claims, the fact we already have at least two approved and extremely safe medications in Ivermectin [27] and hydroxychloroquine; shown to be effective treatments and the reality that the virus does not pose a serious threat to the healthy. It seems these decisions appear to be corporate interests, not in the best interests of public health and wellbeing as is claimed.

All this indicates that the ongoing restrictions on the healthy population is a disproportionate response, yet the police are still expected to continue to enforce these measures and at risk of being forced to vaccinate against a disease that is showing not to be virulent, with a vaccine that has had no long-term safety studies and then forcing it upon the population. The evidence would suggest resources are better directed to protect the vulnerable.

We are concerned with the legitimacy of the actions we are being told to take against the citizens of Australia. States and territories cannot rise above the commonwealth constitution as well as international treaties we are signatories to, yet this is occurring.

**Under the state of emergency**, the emergency requirements are qualified and restricted by the significant fact that **emergency requirements and directions cannot request an individual to be isolated, detained, tested, vaccinated, medically treated or bodily searched in the absence of a biosecurity control order issued to the individual** (emphasis added).

These measures are referred to as biosecurity measures and are captured under Subdivision B of Division 3 of Part 3 of Chapter 2 of the Biosecurity Act 2015. [28]

*(Emergency and public health powers, at the States and Territories, do not provide a carte blanche to breach an individual's human rights by isolating them, or detaining them or testing them without the proper required notifications and risk assessments first).*

There is an inter-governmental agreement <sup>[29]</sup> which places the Commonwealth in the lead, as well as the Australian Health Sector Emergency Response Plan <sup>[30]</sup>. This ensures that the States and Territories act to compliment the Federal Legislative Framework.

Article 7 of the international convention of civil and political rights states “no-one shall be subjected to torture or to cruel inhuman, or degrading treatment or punishment, in particular, no-one shall be subjected without his free consent to medical or scientific experimentation.” <sup>[31]</sup>

Article 27 of the Vienna convention on the law of treatise “A party may not invoke the provision of its internal law as justification of its failure to perform a treaty.” <sup>[32]</sup>

Article 7 of the Australian human rights commission Act 1986 states “no-one should be subjected to torture or to cruel inhuman or degrading treatment or punishment, in particular, no-one shall be subject without his free consent to medical or scientific experimentation.” <sup>[33]</sup>

Section 109 of the commonwealth of Australia constitution states “when a law of a state is inconsistent with a law of the commonwealth, the latter shall prevail, and the former shall to the extent of the inconsistency be invalid.” <sup>[34]</sup>

With federal and international legislation breaches, it will be taken that we are complicit and consensual in their undertaking on the people of Australia, potentially rendering us criminally liable under the Crimes Act 1914 <sup>[35]</sup>, as well as the Criminal Code Act 1995 <sup>[36]</sup>.

Many members of the force are fed up with the approach to enforce oppressive rules placed upon the population in the name of COVID-19 and the looming mandatory vaccinations. We feel a real calling to do our part to stop this oppression, so we are writing to you to raise the following issues:-

- Police Force employees have ‘choice’ as to whether or not to receive vaccines;
- The Police believe that all members of the community also have choice around receiving vaccines;
- Police do not participate in any way in the forcing of vaccines upon the population;
- That the Police Association start preparing to defend Police employees who choose to not be vaccinated
- To raise the alarm that there is a global dictatorship occurring and the Police Force is being used as a tool to push these global and corporate agendas upon the population; and
- To warn the Police Force not to simply acquiesce to these requests, rules and laws and to act in the best interest of its population, not tyranny of government.

Recently letters have been written to our leaders from the legal fraternity, including high profile Judges and QC's <sup>[37]</sup>, The Australian Institute for Progress penned by 30 public intellectuals including 15 professors of relevant disciplines, one of whom is an advisor on health and well-being economics to the UK government <sup>[38]</sup>, Advocate Me's open letter to all leaders seeking to review disproportionate response to SAR-CoV-2 <sup>[39]</sup>, as well as hundreds of doctors from the medical fraternity <sup>[40]</sup>. Despite the government continually parroting that they are following the advice of *'the experts'*, all these requests have been ignored and the police used as the enforcers of these senseless rules.

We ask that you consider the information provided herein and the NSW Police Force statement of values:-



**Each member of the Police Force is to Act in a manner which:**

- Places integrity above all;
- Upholds the rule of law;
- Preserves the rights and freedoms of individuals;
- Seeks to improve the quality of life by community involvement in policing;
- Strives for citizen and police personal satisfaction;
- Capitalises on the wealth of human resources;
- Makes efficient and economical use of public resources; and
- Ensures that authority is exercised responsibly.

Many of us believe that we are removing our own rights and freedoms by enforcing these rules upon the community, including our family and friends. And the community are confounded by the intensified police enforcement around peaceful freedom protests and how inconsistent this was when compared with the Black Lives Matter protests. This contradiction is further destroying public confidence.

We are reaching out to all our fellow police officers across the country, to write a similar letter to their respective police commissioners, or sign our form at <https://advocateme.wixsite.com/copsforcovidtruth> to show your support for this stance, which we have called **Cops for Covid Truth**.

With trust in our police force now seriously eroded, we ask you to consider now challenging the necessity of the ongoing restrictions to restore community trust, by being an integral part of returning our State and Country back to normality.

Regards

Alexander Cooney Senior Constable Coffs/Clarence Highway Patrol  
NSW Police Force Grafton Police Station  
5 Duke Street Grafton NSW 2460

And other signatories

All source reference links below (concerning references [1] to [40] please access the copy of [the original pdf document](#) for the use of the forty activated links)

## Personal Claim-Steps & Affirmations

Listing the **simple facts** to be **remembered and used**:

### From the Nuremberg Code:

Forced, coerced and mandated **vaccinations** and **medical experiments** are in direct violation of the Nuremberg Code and are judged to be **war crimes**.

Nuremberg Code, Article 1

The **voluntary consent** of the human subject is absolutely essential.

### From UNESCO's 2005 statement on Bioethics and Human Rights

Article 6, Section 1:

Any preventative, diagnostic and therapeutic medical intervention is only to be carried out with the prior, **free and informed consent** of the person concerned, based on adequate information. The consent should, where appropriate be express, and may be withdrawn by the person concerned at any time and for any reason, without disadvantage or prejudice.

Article 6, Section 3:

In no case should a collective community agreement or the consent of a community leader or **other authority**, substitute for an **individual's informed consent**.

### From our **Commonwealth Constitution** and Federal Biosecurity Act 2015

Where comparable conditions apply, Australia's Biosecurity Act 2015 has precedence over any State Act, by **Section 5** and **109** of the **Commonwealth Constitution**.

### From the **Biosecurity Act's criteria** for the management of public health risks:

State-enforced containment measures such as self isolation, lockdowns, some quarantine measures, the wearing of masks and vaccinations are all subject to these **public authorities' proof of a health risk** through the **issue of a Biosecurity Control Order on an individual**.

## **Quotes of our current Commonwealth of Australia Constitution Act**

Qualifying Quote of the Act's title: "This compilation was prepared on 4 September 2013 taking into account alterations up to Act No. 84 of 1977".

Act No. 84 of 1977 is the last Constitution changing Act to this point in time. Our Constitution can't be changed except by a nationwide referendum. Act No. 84 of 1977 is the last referendum.

### **Section 5**

#### **5 Operation of the Constitution and laws**

This Act, and all laws made by the Parliament of the Commonwealth under the Constitution, shall be binding on the courts, judges, and people of every State and of every part of the Commonwealth, notwithstanding anything in the laws of any State...

### **Section 109**

#### **109 Inconsistency of laws**

When a law of a State is inconsistent with a law of the Commonwealth, the latter shall prevail, and the former shall, to the extent of the inconsistency, be invalid.

## Drawing Conclusions

“We have never to date, quarantined healthy people”, ~Professor Delores Cahill.

Based on over a year's statistics, the **health risk** of Covid-19 infection is “quantified by the World Health Organisation to be a 0.14% infection fatality rate”, ~Reiner Fuellmich.

That's 0.0014 of a probability or 14 ten-thousandths of a chance that, **if contracted**, the disease would kill you. Fourteen chances out of ten thousand! = 1 chance out of 714!

Remember: the **Federal Framework for the Management of Public Health Risks** as explained by this document and as is consistent with the laws analysed here, is **a law-framework for the management of health risks**. Therefore, if you're not a health risk, you're 'above the law'!

I write above: **if contracted** in bold type because, besides a vaccination campaign that's supposed to confer immunity, which [many doctors](#) are saying is not the case with the Covid-19 vaccines, that is, that they don't confer immunity, there's also [preventions and cures](#) for the disease.

So, **if contracted**, the disease **may be** - 1 chance out of 714 - able to kill you.

The 0.14% infection fatality rate, is “equivalent to the seasonal flu's fatality rate”, ~Reiner Fuellmich, and is 'weighted by' the elderly and immuno-compromised. That is: the figure is worked out by counting those who've died from the flu or covid-19 who are already vulnerable to the disease.

Therefore, from a logical, health view-point, the use of the covid-19, mRNA vaccines in this case of catching the flu or covid-19, is not warranted for healthy people - especially considering that the vaccine [may make the recipient contagious](#) - nor especially is it warranted for those who are vulnerable to it's adverse reactions which is everyone!

For, by the occurrence of adverse reactions that have been [recorded for America](#) and that are [now happening in Australia](#), anyone can claim a case of having a contra-indication against taking the vaccine.

The Australian Federal Government's, Department of Health's, Australian Immunisation [Handbook](#) states that “vaccines should not be given if there is a contra-indication”, which is a pre-existing medical condition that predisposes that person to injury, damage or disease by the vaccine.

Therefore, due to the incidence of adverse reactions, anyone could claim that even in our natural, healthy state we have the contraindication of being prone to adverse reactions to the vaccine. This information about the Immunisation Handbook's criteria for contraindications and more is contained in a previous write-up I've compiled named: [Personal Rights Claim](#).

The potential for mandating vaccinations is one thing, but forcing 'containment measures' and quarantine on a population-wide scale, may be lawful in the early stages of a claimed pandemic, but must be held to the requirement of a Biosecurity Control Order for individuals later on.

In the sad, sad extreme, it may become necessary that those who have been vaccinated, due to the possibility of the vaccine making them contagious, may be required to have a Control Order issued against each one. Do you think that a person vaccinated with the mRNA vaccine could be listed as a Listed Disease according to our Biosecurity Act?



By the reports that are [coming out](#), these outcomes so postulated, [could well be](#) the result.

But let's end on the good news.

Regarding the pioneering, lawful work of Reiner Fuellmich, it seems that the abuse of our laws is being curtailed, but taking into account the ways this analysis reveals our laws are being abused, there's much room for improvement, urgent improvement!

It's my prayer that this awareness will help to change how our laws are honoured and that they will be reformed where-need-be. Please pray too.

Considering that hundreds of police officers and military personnel have signed the Policemen's Open Letter and that Reiner Fuellmich paints a bright picture for "after the pandemic" even though many are dying, we have a future to face up to - one that's going to require perseverance - but once perseverance has her work, we will experience a world purged of lawlessness.

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