

IMPORTANT

17 November 20

John Campbell QPM, LLB, MBA
The Chief Constable
Thames Valley Police
Headquarters
Oxford Road
Kidlington
Oxfordshire OX5 2NX

The letter to John Campbell is reproduced below – see page 2

Dear interested parties and media platforms

I have enclosed a copy of a communication sent anonymously to the above-named Chief Constable, containing a dossier received from a whistleblower. The whistleblower is hereafter referred to as the Source.

This disclosure is made to you today because of its overwhelming importance to the citizens of this country alone, without mention of the wider global population. Additionally, due to the lack of evidenced response from the Chief Constable named, the matter cannot be left unrecorded any longer. Due to the life and death consequences relating to this disclosure, consequences which distil from a lack of action, the disclosure is shared with you in the public interest.

I can advise that the communication to John Campbell is now being shared with you and with other outlets, commentators and media platforms, both large and small, over the coming days and weeks.

I am duty bound to say, the references contained in the dossier should in your own interest be assessed by you - and your office - prior to making any of the contents public through your own channel, should you wish to do so. I am sure however, that it is wholly unnecessary for me to mention this point.

As acting agents for the Source, we ourselves have no doubt about the facts contained therein, or any inferences made. The sheer volume of self-supporting documentation - which makes for a damning case against those named in the disclosure - is beyond considerable.

We have chosen to share this evidence with you and your platform because of your outspoken commitment to pursuing the truth - a commitment which will benefit all of mankind at a most crucial time in our history.

THE LETTER READS:

Dear John Campbell

I write to you as agent for a whistleblower.

I will refer to the person concerned hereafter as the Source.

Given the particular nature of the accusation I am bringing to your attention, both the Source and I wish to remain anonymous for the time being.

The identity of the Source is assessed as highly sensitive, due to their position, hence the route we are both taking to conceal identities, at least for the moment.

What is revealed here, in a dossier contained with this first communication, is nothing which has not already been posted in the public domain – albeit marginalised, concealed or since deleted by those with that authority or power.

DOSSIER - ONE

The detailed background information and facts provided within the dossier support the accusation being made. The dossier contains, in professional opinion, sufficient information to justify the urgent commencement of a formal investigation. Further information will be supplied to you confidentially later. This will be done by me personally, the Source or by an associate.

The accusation being brought to your attention refers to an act of conspiracy. That act potentially has three limbs, being:

1. a conspiracy to cause harm
2. a conspiracy to effect manslaughter
3. a possible conspiracy to commit murder

These acts all relate to a medical trial led by:

**Prof Peter Horby Chief Investigator - and
Prof Martin Landray - Deputy Chief Investigator.**

The trial was named the Recovery Trial and was conducted by:
The Nuffield Department of Population Health – part of the
Medical Science Division at Oxford University in Headington.

The above-named persons are deemed complicit in running a trial which was known to either cause harm or to be likely to cause harm. Due to known facts about the drug used in the trial and, in particular, the widely known and documented safe doses recommended to avoid toxic reactions, it is more than conceivable that the trial would prove fatal to some, if not to all, those involved. Official documentation records fatalities on the trial were actually 421 souls. 1561 patients took part in the HCQ trial within 175 hospitals around the UK.

Doctors administering the drug to hospital patients, who may not have given their consent to being on the trial and/or were not made aware of the over-doses prescribed by the trial regime, may also be complicit in the conspiracy to commit harm. Their position, expertise and own awareness would likely make them so.

The trial itself is but one source of information which the government had been monitoring since the COVID pandemic arrived in the UK. It is *inconceivable* that the government were *not* aware of other publicised studies with the same drug, whether they be current and on-going or placed on record from past research.

It is also *inconceivable* that the government were *not* aware of commentary on use of the drug by eminent doctors located around the world, including in the USA and Australia. Further, it is *inconceivable* that the government was *not* aware that the doctors' commentary was in direct conflict with the trial results. Despite documented clinical notes from frontline clinicians, coupled with their visual and written commentary on their experiences, the government has clearly shown its choice to suppress the positive information those doctors disclosed.

Given the circumstances, the government failed to launch its own investigation to discover the reason for the conflicting reports and commentary. A failure which, given the potential – and actual – consequences, is a failure of monumental significance. It would have been – and still is – seen by anyone, as exactly that.

The lack of any comment on the topic within the government's own publications, or in shared information with the media, more than suggests that the reason for suppressing the positive information was to prevent people becoming aware of the safe, tested and available treatment through use of the drug in question.

In fact, formal record shows that the government's long-held view on the treatment against COVID is but one single solution. That solution being a vaccine – and one rushed to market at warp speed, ignoring all tests and trials which is globally accepted and understood to take years to complete – and for wholly undisputed very good reasons.

The story behind the vaccine solution forms a part of the story background, but it is not included – except in reference – within this dossier, Dossier ONE.

As regards the government, and due to the status described, it is assessed that senior ministers in the government and certainly in the government's frontline on COVID policy making, were, without doubt, well aware **of all the facts** contained within this communication. Given the fact that the government has acted in the way it has, and not in the way informed persons would, given the expertise and channels available to them, it is more than clear that senior ministers were also complicit in knowingly causing harm to those persons on the Recovery Trial.

The primary government ministers identified without doubt to be complicit are:

Matt Hancock – Health Secretary
Boris Johnson – Prime Minister

Additionally, the following advisors are also identified to be complicit, and are:
Prof Chris Whitty – Chief Medical Advisor to the government
Sir Patrick Vallance – Chief Science Advisor to the government

The fact that a safe and effective treatment has been, and still is, available to citizens of Oxfordshire and the wider country, means that the good health and survival of thousands of people has been denied to them and done so over the months since January this year.

At the date of writing, Public Health England reports that COVID-19 deaths in the UK now total 52,000 souls. Given that the drug has been found to be extremely effective and safe in the successful treatment of patients with COVID symptoms – when used according to correct protocols and in combination with additional treatments – PLUS is also found to be effective as a prophylaxis – preventing infection – it is seen that the 52,000 deaths could and should have been avoided.

The reality of this and the consequences are earth shattering in the extreme. The matter cannot be left any longer without a full criminal investigation being rapidly conducted and commissioned forthwith.

This situation continues – hence the need to take immediate and urgent action.

FURTHER COMMUNICATIONS

Whichever contact route is used in future to communicate with you, whether it be by:

- Email
- Land mail
- Phone or
- Text message

the communication will again be anonymous.

So you can be sure it originates from the same Source, the following line from a particular song by Chris Isaak will be quoted.

“Baby did a bad bad thing”

Given the nature of the information contained in the dossier, it is expected that your officers will need time to complete a preliminary and urgent assessment, prior to launching a formal investigation.

In order that the Source knows that you have acted on this information, in the way the evidence demands that you do, it is requested that you make a public statement – at least on the constabulary’s website, if not in mainstream media – that an investigation has been initiated by Thames Valley Police.

It is believed this should be done not later than **Friday 27 November 20.**

If on the other hand such an announcement is not made by the said day, **Friday 27 November 20**, then failure to act in the way deemed necessary will be taken by the Source to mean you will not be taking these matters forward.

At a point in time, this note and contents will be shared with other key individuals and organisations so to provide a public record of the action taken by all those directly aware or directly involved.

Your decision to act and to act quickly will - **DAILY** – either have life-saving, or life-ending, consequences for an untold number of citizens.

We both thank you for acting urgently in the interest of all our citizens.

Yours sincerely

An agent for the Whistleblower

	TIMELINE – NOTEABLE POINTS
Mar 25	Recovery Trial was started
Apr 06	Prof Nicholas White says HCQ is harmless BUT dangerous in overdose
Apr 23	Bill Gates declared that it appears that the benefits of HCQ will be modest at best
Apr 28	Matt Hancock announces Recovery Trial to test HCQ against Covid
May 12	Principle Trial rolled out across the UK
May 21	40,000 health care workers being trialled by Oxford Uni as a prophylaxis in a 3 rd Trial called COPCOV and being a double-blind placebo study
Jun 05	HCQ was stopped being used in the trial under instruction from the MHRA
	Other trials in HCQ were terminated shortly thereafter
Jun 06	Interview of trial lead investigation Martin Landray with France Soir
Jul 27	American Frontline doctors first speak out about the positive effects of HCQ
Oct 13	Prof Raoult says the trial was designed without understanding that different medication is needed to treat each stage of Covid

	FACTS – ADDITIONAL and NOTEABLE
1	The Recovery Trial involved all major hospitals [175] in the UK and 3500 NHS staff
2	The Recovery Trial was part funded by the Bill Gates Foundation
3	Number of deaths recorded in the Trial was 421, which included deaths of people dying within 28 days of involvement in the trial
4	Within 3mths of start it formerly reported HCQ was ineffective
5	Prof Nicholas White is the Recovery Trial Director
6	HCQ has been sold under its market name as "Plaquenil"

DOSSIER ONE

17 November 2020

CONTENTS

1	PRIMARY ARTICLES and references
2	SUPPORTING ARTICLES and references
3	HYDROXYCHLOROQUINE: How a False Narrative Was Created
4a	TIMELINE – NOTEABLE POINTS
4b	FACTS – ADDITIONAL and NOTEABLE
	TO FOLLOW: SIGNATORIES of DOCTORS and SCIENTISTS