

27 June 2022

*The Hon Reginald Blanch AM QC*

*Chief Commissioner of the Law Enforcement Conduct Commission*

*Level 3, 111 Elizabeth St Sydney NSW 2000*

**Complaint Reference CASE20224240**

**Reference:** A. Email, BRINGING TO JUSTICE THOSE PERSONS WHO ARE GUILTY OF MURDER, MANSLAUGHTER, OFFICIAL MALFEASANCE AND RECKLESS GRIEVOUS BODILY HARM IN COMPANY, LtCol Loughrey(Ret'd), 22 June 2022

Thank you for your speedy action regarding the complaint I have lodged per Reference A.

**As indicated in Ref A, this complaint is part of a larger action that I wish to pursue with your cooperation, advice and assistance. I would be very grateful if you could find the time for us to have a face to face conversation on this matter. I would be happy to travel to Sydney for this purpose.**

My complaint presently centres on the fact that successive Police Commissioners and their Senior Management Team, with the investigative resources at their disposal, had the ability, with little effort, to obtain facts that would have immediately indicated nefarious activity with respect to the management of, and policies pertaining to, COVID-19. That being indicated, I believe it is reasonable they should have ordered this matter be researched thoroughly to determine the (extreme) risks and the (dubious) benefits of mandating that the members of the NSW Police Service must subject themselves to what is an invasive and potentially deadly medical procedure in the form of Anti-COVID Injections (ACIs).

In failing to do this they have been reckless and the injuries the members of the NSW Police Service have now sustained (which, if the Senior Management Team had exercised due diligence, would have been found to be unjustified) amount to grievous bodily harm. The fact they did this as an organised group means that they have committed what I believe is a serious offence in company.

With respect to that complaint I can provide you with an introduction to the following expert informants who will provide supporting facts to substantiate the concerns I have brought to your attention per the following:

<b>Allegation</b>	<b>Expert Informant</b>
1. None of the ACIs being promoted by health authorities were properly tested in accordance with Australian Standards.	Dr Phillip Altman BPharm(Hons), MSc, PhD Clinical Trials and Regulatory Affairs Consultant  Dr Michael Yeadon (ex-Pfizer Vice President)
2. Previous experiments utilising mRNA technology on animals resulted in all of the test subjects dying.	Prof Dr Dolores Cahill (Microbiology/Immunology researcher, ex Dublin University)

	<p>Dr Michael Yeadon (Ex Pfizer Vice President)</p> <p>Dr Robert Malone (Inventor of mRNA technology)</p>
<p>3. The rate of "All Cause Mortality" in all countries where these ACIs are being employed has gone well beyond the point of what is considered normal. These elevated rates of death and the roll-out of ACIs strongly suggests a temporal relationship exists between the two events.</p>	<p>LtCol Dr Theresa Long (US Army Flight Surgeon)</p> <p>LtCol Dr Peter Chambers (US Army Special Forces)</p> <p>Mr Steve Kirsch (Investigative Journalist focused on COVID-19 ACI injuries and deaths)</p>
<p>4. Medical experts around the world, many of whom were intimately involved in the development and testing of mRNA technology, were of the opinion that the risks attendant with these ACIs far outweighed any possible benefit they might confer. These persons still adamantly maintain that view.</p>	<p>Dr Robert Malone (inventor of mRNA technology)</p> <p>Dr Michael Yeadon (ex-Vice President of Pfizer.)</p> <p>Prof Dr Geert Vanden Bossche (Independent virologist and vaccine expert)</p>
<p>5. The progenitors and vendors of these products have a long history of fraudulent and criminal behaviour and have been made to pay billions of dollars in compensation to the people their products have injured and to the families of those persons their products have killed. Accepting their data without proper audit demonstrated culpable indifference tantamount to recklessness.</p>	<p>Dr Michael Yeadon (ex-Pfizer Vice President)</p> <p>Dr Judy Wilyman PhD</p>
<p>6. COVID-19, <u>if treated early</u>, does not represent a serious health threat to the public and certainly does <u>not</u> represent a significant health threat to the members serving in the NSW Police Service such that it justifies such extreme measures as the mandatory immunisation of all members using a technology that has not been fully tested in accordance with Australian Standards and for which the long-term consequences are unknown.</p>	<p>Prof Dr John Ioannidis (Epidemiology, Stanford University)</p> <p>Prof Dr Harvey Risch (Depart of Epidemiology and Public Health, Yale School of Public Health &amp; Yale School of Medicine)</p> <p>Dr Tess Lawrie (Specialist in Evidence Based Medicine)</p> <p>Mr John Clark (Engineer, Data Analyst)</p>
<p>7. Australian Medical authorities at Federal, State and Territory level, actively assisted by politicians, obstructed and/or banned</p>	<p>Dr Phillip Altman PhD</p>



<p>the use of low-cost, readily available therapeutics for the early treatment of this disease. These therapeutics have a long and proven record of safety when taken as directed under the supervision of an appropriately qualified health-care professional. Many doctors around the world, who are regularly treating persons suffering from COVID-19, have reported great success using sequenced combinations of these medicines; the practice of which has been banned here in Australia. Doctors who have publicly objected, citing the danger ACIs present, and who have advocated early treatment, have been deregistered by the Australian Health Practitioners Regulatory Agency(AHPRA). <u>By doing this, the politicians and public health authorities and agencies have been directly responsible for the needless deaths of hundreds of Australians and, through their actions, may have caused over 90% of the Australian population to suffer irrevocable medical injury as a consequence of the now-proven adverse effects of ACIs.</u></p>	<p>Prof Dr Thomas Borody (Centre for Digestive Diseases)</p> <p>Prof Dr Robert Clancy (Australian clinical immunologist and a pioneer in the field of mucosal immunology.)</p> <p>Prof Dr Peter McCullough (Cardiologist and Epidemiologist, Austin Texas)</p> <p>Dr Brian Tyson (Early Treatment Doctor, success in treating thousands of COVID-19 patients and preventing the vast majority from hospitalisation and death)</p> <p>Dr Pierre Kory (US critical care physician, President and co-founder of the Front Line COVID-19 Critical Care Alliance. )</p>
<p>8. Australian doctors who have publicly objected, citing the danger ACIs present, and who have advocated early treatment, have been deregistered by the Australian Health Practitioners Regulatory Agency(AHPRA).</p>	<p>Dr Robert Brennan MBBS (Qld)</p> <p>Dr Mark Hobart MBBS (Vic)</p>

**This list is by no means exhaustive.**

I look forward to us meeting in the near future.

Sincerely

Kevin Loughrey

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K.A.LOUGHREY LtCol(Ret'd) BE Mech(hons), psc, jssc, Grad Dip Strategic Studies