Complaint Exhibit I
In the Matter of:

Eric A. Nepute, DC

August 4, 2020
2020-08-11_Zinc Zinc Zinc 8-4-20 Video

Condensed Transcript with Word Index

For The Record, Inc.
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DR. NEPUTE: Hey, good morning, good morning, good morning this morning. Happy Tuesday morning. God bless you guys. I hope you’re having a great day. I hope you’re having an awesome morning this morning. We’ll give everybody a chance to jump on.

(Shuffling through documents.)

I’ve got some stuff I want to talk about with COVID testing, some things that we know and we’re aware of we want to share with you guys. But we’ll give everybody a minute to jump on.

Hope you guys are having a great morning this morning. Hope you all are getting ready to celebrate an amazing Fourth of July weekend. I’ve got my 'Merica shirt on underneath here. Hope you’re having a great day.

Where’s everybody watching from? Let me know where you guys are watching.

(Handling documents.)

Heidi, good morning. How are you doing, Heidi, Paul?

Good morning from Vegas. Hope everything is...
Eric A. Nepute, DC 8/4/2020

But before we do that, I want to talk to you of zinc.

Talking about zinc in just a minute and the importance you guys up with some as well. We're going to be yesterday here in St. Louis, and we're going to hook on. We just launched it with our practice members new trends that we've been waiting to get our hands morning and I'm super excited because we've got some I wanted to share a few things with you this morning and I'm super excited because we've got some new trends that we've been waiting to get our hands on. We just launched it with our practice members yesterday here in St. Louis, and we're going to hook you guys up with some as well. We're going to be talking about zinc in just a minute and the importance of zinc.

But before we do that, I want to talk to you

a little bit about testing, okay, about testing. I'm having trouble trying to understand this. I'm asking other doctors; I'm asking our state representatives.

I'm actually having lunch with a couple of them today. I'm trying to understand what's going on. I'm trying to understand the fears and concerns we're having. I'm trying to understand what's happening in the world right now. So you guys, do me a favor. Hit that share button so your friends and family can see this.

Good morning from Australia.

Good morning from Michigan. Lots of Michigan folks are jumping on.

Hope you guys are having a great day. Hope you're having a great morning.

I wanted to share a few things with you this morning and I'm super excited because we've got some new trends that we've been waiting to get our hands on. We just launched it with our practice members yesterday here in St. Louis, and we're going to hook you guys up with some as well. We're going to be talking about zinc in just a minute and the importance of zinc.

But before we do that, I want to talk to you

Thirty million tests have been done, okay?

And so what are your thoughts on that? Is that a good thing or is that a bad thing? I think it's good to get tested, but the problem is now we're finding out more information about the test, lots of false positives, lots of false negatives, lots of false false, okay?

So let's just go over some of the facts that we do know. Some of the facts that we do know, number one, we know that the death rate of this thing has dropped drastically. I mean, we're already back down to the death rate that we had when COVID first came to America. That's a fact, okay? The death rate is down massively. We now know that it's a 99.5, 99.7 percent survival rate, okay? We know that point -- between .026 and .4 percent of the population are going to have a serious complication or death of this thing as of right now. But the more we test, the more positives we see, the lower that death rate's going to go.

So I think that's a great thing. But the problem is that people are freaking out. They're literally losing their mind because the mainstream media is saying, record number of tests, record number of tests have been done, record number of detections have been found, record number of infections. Do we really know if it's more infection verse detection?

Yeah, we do. We absolutely know that there are more people being detected on the PCR test, the DNA test for COVID-19.

But I want to talk to you about these tests for a minute because they're very controversial. Let me say this. Let me say this. I need you all to hear me. These tests are not FDA-approved yet, which means they haven't been validated. If you do a Cochrane study, which if any of you know what a Cochrane study is a Cochrane study is an independent group of scientists that look at all the data and research and they put a -- they put a nonbiased, for the most part, nonbiased presentation together saying here's what happening. If you do a Cochrane study for the COVID-19 testing, they will say first unequivocally that the antibody test literally means nothing right now because there's just not enough data to support it.

Also, there's a lot of questions with the PCR test, the nasal swab test. So I want to talk a little bit about that just to give you guys a little idea. But even -- even if the tests are valid and we're seeing all of these more detection of infection in our society in our culture, how is that a bad...
The COVID-19 PCR Test Scientifically Meaningless.

This is the title of the article. I’ll post it with you guys. It’s something to think about. It’s something to make you go, hmm. Something that you’re not going to see on mainstream media that’s important.

And, also, we’re going to talk a little bit about vitamins, vitamin D, zinc, and all that in just a minute, which is another thing you’re not going to hear about on mainstream media.

(The Looking down at document.)

The COVID-19 PCR Test Scientifically Meaningless.

Meaningless is what the title of this is. I just want you to think. I just want you to critically think. You make up your own mind, but I want you to critically think.

(looking down at document.)

So here’s the deal with the PCR test. The mantra -- the mantra, as of March 16th of 2020, the World Health Organization came out and said, test, test, test, test. We need to test everyone.

Well, I was in agreement originally with the testing. I said, let’s test everyone and see where we stand knowing -- but here’s the deal -- knowing -- I know and physicians know that this is not an FDA-approved test. Like, listen, this is not an FDA-approved test, which means it hasn’t gone through FDA validation. It hasn’t -- it hasn’t shown, you know, complete certainty that these tests are great.

Now, we know that no tests are ever 100 percent certain. We know that. But a test takes time. And here’s what I need you to understand. To set a test, you have to have a gold standard, right?

A gold standard. Like pregnancy test on a urine test or a blood test, the gold standard of a pregnancy test would be like a baby being delivered. You understand that, right?

Well, there is no gold standard for COVID-19. Now, with the COVID-19 test that we have now, the PCR test, where they take this six-inch swab, they go up your nose, down to your nasopharyngeal passageway where your nose and throat come together, they spin it for 14 seconds and then do the other side for 14 to 15 seconds, send that thing out and then it goes to the lab. What happens at the lab is they take that DNA and they replicate it, so they -- the whole thing is they have to separate it and they have to completely separate the COVID-19 virus, which hasn’t been done yet.

What they’re doing is they’re taking proteins. They’re measuring three proteins that are on there that they find with people that have symptoms of COVID-19. So that’s how COVID-19 is specifically being utilized. There’s a whole difference to this thing. But testing, testing, testing hasn’t been validated yet.

But even though we don’t -- we may not -- I know, some of you are saying, I don’t trust the FDA, I don’t trust the CDC, I don’t trust the World Health Organization. I understand that. It is very healthy to distrust everything. You should distrust everything I’m saying until I say here’s a copy of it and you can read it. But what they’re doing is they’re basically saying the gold standard for isolating these proteins to identify COVID-19 to correlate it with symptoms.

So like if you have a cold virus and they isolate the cold virus on a RPP tape nasal swab and they’re able to go, that virus is seen with these symptoms, runny nose, fever, and chills, that is a gold standard test for a cold, a cold virus.

For coronavirus, they don’t have -- they keep adding to the symptom list. So there’s just no gold standard. I mean, there’s just absolutely no gold standard for the COVID-19 testing. I believe -- I truly believe, you guys, I truly believe that in the years to come, we’re going to be able to go back and validate this test and realize that this test was nowhere near as accurate as we thought it was.

But here’s the deal. I don’t really care if the testing is accurate. Why? Because the death rate has gone down so much. And, ladies and gentlemen, this is a virus, just like other viruses have come through our country, come through our world, done all this other kind of stuff, these viruses, these RNA viruses have to attach to our DNA, and that’s how they...
You should be taking this all year long. You should. Zinc, copper, magnesium are also important. (Holding up document.) CoV-2 is what this is. Right here in the Journal of Nutrition -- So we need zinc for our body. (Reading from document.) Zinc -- this is out of -- this is out of the Pathogens Journal of 2010, November 6th, 2010. It shows that coronavirus' replication can be inhibited -- zinc every day. That's what we should be doing. And I know it's hard to get zinc. I know it is. That's why we get zinc for our patients. You can click that link below. I've got another 500 bottles of zinc that we got and we've got them and they're right there. If you want to get them, get them. Click on that link. I've got like 500 bottles set aside for you guys to get. And if you want them, get them.

But zinc, copper, D3, good probiotics, so important. You need to take these 24/7, year-long.
sent to me by someone that I do some work with with some laboratories.

(Reading from document.) They said, “We had seven patients that were sent to us by the health department that tested positive for COVID-19. We retested all of them three times. All three tests for all of those people were negative.” Something doesn’t sound right.

Okay, so that’s -- there’s problems.

There’s false positives and false negatives all over and it depends on the type of testing that you do. A lot of the health department testing are maybe not as accurate, at least in this case, not as accurate at detecting COVID-19 as other tests are. False positives, false negatives. Get zinc. Get magnesium. Get copper. Get iodine. Get D3.

Click on that link below. There’s a link for zinc. We’ve got a link that we’ve got -- I’ll tell you what. We’ve got 500 bottles of zinc. If you want to get them, you can have a free bottle of zinc just like I gave away the free D3. If you want the zinc, get it. Click that bottle -- that bottom, you can have it. You just got to pay the shipping on it. That’s it. That’s it. I’m only giving away 500 bottles of it.

We did 5,000 bottles of D. I love you guys, but I lost my butt on that. And God bless you, I’m trying to, you know, keep everything going here in our practice as well. So if you want that zinc, just click on that link and you can get it.

(Holding up document and reading from document.) Let me show you this, “Lack of Gold Standard.” “Lack of Gold Standard.” There’s a lack of gold standard in the COVID-19 testing. That’s a big, big deal. How accurate -- if you ask -- if you ask, according to the medical journal, the British Journal of Medicine, you ask them, how accurate is testing --

(Reading from document.) -- “Jessica Watson from Bristol University confirms in her paper interpreting the COVID-19 testing results published in the British Journal of Medicine, she writes, ‘there’s a lack of clear-cut gold standard for COVID-19 testing.’”

(Reading from document.) “But instead of classifying the test as a suitable SARS CoV-2 detective test, the diagnosis, what they’re saying is it’s pragmatically” -- “COVID-19 diagnosis itself is the only way to diagnose it.”

So we just don’t have a clear-cut diagnosis is what we’re saying.

But what I’m saying is this: Who cares if the test is positive or negative? I’m trying to understand if the test is positive or negative if the death rate is .99 -- sorry, the survival rate is 99.5 to 99.7 percent survival rate, I just don’t understand it. If the fatality rate of this is between .026 and .4 percent, according to Stanford studies, according to Oxford studies, according to what’s happening now -- and by the way, the more we see detected of COVID-19, positive COVID tests, which some are speculating as well -- some are speculating as well that these tests are giving false positives because people have had a flu shot which has coronavirus in it. So if they detected coronavirus in their DNA, which is what happens when you get an injection, that’s going to throw off these tests.

And, yes, a lot of you are commenting Dr. Oz just this last week was talking about how big of a deal zinc is. Dr. Oz was all over zinc. Zinc stops injection, that’s going to throw off these tests. -- let me just say this again. From a -- from an immune system standpoint -- by the way, zinc is needed for testosterone production, hormone production. It’s needed for digestive function; it’s needed for -- it’s needed for immune system production. It helps with so many aspects of your health.

There’s a huge study that was done in the Journal of Pathology in 2010, November 2010.

(Looking down and reading from document.) It says, “Zinc inhibits coronavirus and arterivirus RNA polymerase -- RNA polymerase,” which is what we’re testing for as well. We need -- you need to get zinc in your system. Twenty-five milligrams to 50 milligrams a day of zinc is what you need to be getting in your system and you need to do this. We need to be focusing on -- we need to be focusing on getting our body healthier. We need to be focusing on building up our immune system response.

We need to be focusing on eating good foods, clean foods. We need to be eating more vegetables, more lean, clean meats, drinking more clean healthy water, getting outside and exercising, getting 20 to 30 minutes a day of sun time during the midday sun without glasses on, without sunscreen on your body. We also need to be getting vitamin D.

Vitamin D, I just was talking to a friend of mine from the UK. One of their rag magazines came out and said vitamin D does not prevent COVID-19. Well, that’s true because there’s never been a study that
show that vitamin D prevents D3 [sic], so nobody can make that claim. But vitamin D3 is pro-hormonal. It’s part of our immune system. Every single cell in your body has a D3 receptor. So you’ve got to have enough D3 -- if you don’t have enough D3, you cannot be healthy. If you cannot be healthy, you can’t have an immune system response to fight off stuff. It’s just that simple.

Zinc is the same way. It says right here, we’ve known about this since 2006. “Zinc inhibits coronavirus and arterivirus RNA polymerase in vitro and zinc ionophores block the replication.” Zinc ionophores, things like green tea extract; zinc ionophores like tonic water that has quinine in it; zinc ionophores like ruby red grapefruit juice or grapefruit. These are all important things to do. Zinc. Get some freaking zinc, 25 to 50 milligrams of zinc every day.

Listen, yes, we have zinc. I’ll hook you up with the zinc. Yes, it’s good for your kids. They can take it as well. Yes, it’s good for adults. Yes, it’s good for diabetics. It’s good for -- there’s no contraindication for zinc. There’s no contraindication for zinc. None.

So if you want to get a bottle of zinc, we have like -- I told them 500 bottles is all I’m going to give away. Okay? We did the vitamin D3 last time because D is such a big deal. And you should be taking vitamin D3 for the rest of your life. If you’re an adult, according to Dr. Michael Holick’s work, at least 10,000 IUs a day. Now, you should be consulting your doctor and checking your blood levels, but I’m telling you I find on almost everyone low D3 and low zinc.

It’s not that difficult. Twenty-five milligrams to 50 milligrams a day of zinc is what you need to be doing. That’s what you need to be doing. And vitamin D, 10,000 IUs a day for adults; 2,000 IUs a day for children. Twenty-five milligrams a day for zinc is a good dose for everyone. Again, I can’t say this enough. “Low zinc status has an increased risk factor for pneumonia in elderly.” I can’t say this enough again, here we go.

“Results from our observational studies. In addition, the findings in the studies listed above suggest that inadequate storages of zinc are risk factors for pneumonia in elderly.” Here we go -- “Increase in intracellular zinc, concentrations of zinc ionophores can effectively impair the replication of RNA viruses, including poliovirus, influenza, SARS CoV, and other viruses.” I don’t know what to tell you other than you need to take zinc. If you want some zinc, click on that link below and get that. We only have 500 bottles. That’s all I’m giving you guys because I just -- if you want more than that, you -- 500 is what we’re giving away. You’ve got to pay shipping and handling. It’s a couple bucks.

But here’s the deal. You need to be concerned about the test. You need to be concerned about the testing. Yes, there’s false positives. Yes, there’s false negatives. You guys have all seen results that show -- the reports that show people that have -- like nurses that sent in tests that weren’t even done and they showed positive, right? They just took them out of the -- they just took them out of the kit and they put them in the shipping and sent them to the lab and they came back as a positive test. You’ve seen reports out of the United States and other countries where people swabbed fruits and vegetables and all this stuff and sent that off. You guys, how can you have a positive -- how can you have a positive test on something that’s -- it’s not human? It just doesn’t make sense. And there’s no gold standard. There’s no gold standard.

I’ll send -- I’m going to -- what I’ll do is we’ll post the link to this video today or to this article today. You need to have this. Doctors all across she world are saying this as well, that this is just -- these testings are not valid yet. They’re not valid.

Four hundred to 600 milligrams a day of magnesium is what you should be taking, okay? Please. Zinc, zinc, zinc. Vitamin D, vitamin D, vitamin D. Please, okay? Please, please, please get on that.

But what are we concerned about. I mean, I’ll put this report on. We’ll put this link on today so you can have this. This was sent to me by Dr. Sherri Tenpenny, a great friend of mine, an awesome, awesome person. Love her to death.

Somebody’s asking about zinc. The link is at the bottom. It’s myfreezinc.com. Myfreezinc.com. Go there and click on it and you just pay shipping and handling.
Eric A. Nepute, DC
8/4/2020

I take 10,000 to 15,000 IU's a day. And then I take zinc, 25 to 50 milligrams of zinc every day in addition to that. That's what I do every day.

And then I drink a lot of water, I eat clean foods, I get sunshine every day, and I do at least 20 to 30 minutes of some type of exercise plus breathing, okay, is what I do.

Here's the deal. We got to stop focusing on the fear and all the scariness and all the craziness that's happening. We got to stop focusing on that.

Numbers are being overplayed just like they were. You guys, remember, this is exactly what we were talking about. This is exactly what we were talking about before, you know, we had all the riots and everything happening, which took our attention away from COVID for a little bit.

So we had COVID come on. We found out all kinds of stuff was a lie. They were lying to us.

They were -- they were causing all kinds of problems. They were showing false information. There was all kinds of miscommunication. Numbers weren't making sense. People were -- you know, we saw that 60,000 people died that were in nursing homes. We saw that a vast majority of people that were going to hospitals, 80-plus percent of them died because they were ventilating them. So we literally were killing people because of standards of practice.

So we've got to focus on getting people healthier, getting people healthier. There's no research that shows social distancing is making a difference. There's no research. There's no random control study. Let me say that again, random-controlled study, random-controlled trial. There's none of that. There's none of that that shows that a mask is beneficial, that a mask is stopping the spread of coronavirus. There isn't any. If you want to wear one, that's a personal decision, and that's fine. I have no problem with that. But, please, for the love of God, don't shame people that don't wear one because there's just no data that supports that it works.

And by the way, why are we making such a big deal about wearing a mask now four weeks into a pandemic whenever, clearly, the death rate is going down? We've not only hit the peak, but we're down on the bottom end of this thing, clearly.

So what do we need to do? Get healthy.

We've got to get our weights under control. We know obesity, heart disease, cancer, diabetes, taking lots of medications, anxiety, all this other kind of stuff, all of these things are contributing factors, being on
medications, putting you at a comorbidity of being sick and being affected to COVID-19.

But here’s the deal. The testing, because every time they increase the -- they increase the symptoms -- the CDC just added three more symptoms of upset stomach, nauseousness and diarrhea to COVID-19. They added those. So the more the symptoms go [audio malfunction] the harder it is to pinpoint the viral detection. It’s just the way that the PCR testing works.

And by the way, the founder of the PCR test clearly stated -- now, he passed away last year, interestingly enough -- but this doctor clearly said that the PCR testing should not be the gold standard and the only way to isolate viruses like this.

There’s a lot of controversy about this, but no one’s talking about it publicly. In fact, if you YouTube right now, if you YouTube videos right now on this subject, you can’t find it. This video is most likely going to be shut down. I can promise you, which is why you need to go -- if you want to get the D and you want to get the zinc, go there.

I don’t think we have any more D that we are giving away. We may have some. But, listen, these products cost me money to buy. We bought a bunch of them and we’re getting them to you. You’re paying shipping. We’re sending them out priority. It’s like 7 to 9 bucks depending upon where in the world you guys have. Click on that link that says myfreezinc.com and get some of that stuff.

Zinc is important and it’s so hard to get and you need to get a good quality absorbable zinc. Don’t go get just crap zinc that you can buy for a dollar or two dollars. It does absolutely nothing, and you need to have zinc that has an ionophore so that it goes into the cells. If not, you’re just going to pee it out.

So vitamins that are important: D, 10,000 IU’s a day is what most adults use; vitamin C, dose to bowel tolerance every day for adults and children; vitamin -- so zinc, which is a mineral, 25 to 50 milligrams a day; taking a good probiotic, the good gut bacteria, eating fermented foods. If we don’t have enough good bacteria in our gut, our body can’t heal, our immune system doesn’t work. We need to help improve our health by getting the right foods and nutrients in our system. That’s it.

But going back to what I was originally talking about, the turmoil and the -- the tragedies that are happening, these PCR tests have not been FDA-validated. They’ve not been FDA-approved. The antibody tests are all over the place. You guys, I’m -- I’m at a loss. I’m at a loss in trying to understand. I’m at a loss of understanding if we’re testing more people, we’re detecting more infections, but the hospital rates have dropped, no hospitals are being overrun. The death rates are going down. What are we doing? Does anybody -- does this make sense to anybody? I don’t understand this.

And people are asking about good probiotics. We have a good probiotic that we use. Please make sure it has a “bifobacterium” (phonetic) in it.

“Bifobacterium.” Eat some good, healthy fermented foods, sauerkrauts. Things of that nature are really, really, really good. I’m just so confused about what’s going on.

Let me read a couple of these. These were sent to me. Let me just read some of these about the test. You think about this whatever you want and then I got to get going here in a minute.

This was sent to me by a friend of mine yesterday.

(Looking down and reading from document.) “My mom was not feeling well and in Arizona, she has -- she has to meet with her doctor virtually before they would schedule an in-person appointment. With no physical examination or testing, he declared she had COVID. That was yesterday. She went online to check her medical file and, sure enough, it said, in big letters ‘COVID patient.’ Again, no test. She then called the testing location and set up an appointment to get tested. They told her that if she came back positive for antibodies, regardless of whether or not she was ill, they would count her as a positive case. She then had to come back in 14 days and get retested.”

By the way, here’s another thing. People that are in the hospitals, they’re getting tested every other day or every day. Those tests all get counted towards the positive numbers that are out there. So if one person could get five or six or eight tests. Just understand that, that’s the way it is. Most people don’t understand that.

Let’s see, what do they say. (Looking down and reading from document.) “They said that she should quarantine herself for the next 14 days.” So they’re basically counting her twice for the same person. Then she said, because she -- she -- they counted -- yeah.

They’re just -- the guy’s pissed. He’s stunned.
(Looking down and reading from document.)

Then she asked, “What’s the point of even getting tested. They had no answer and they acted like they never thought about that before. So basically, in addition to increasing testing, Arizona is double-counting patients. Many of our states are doing the same thing. People need to wake up and understand the spike is a lie.”

Okay. Well, I mean, I can understand that people are getting tested more and we’re seeing more detection. (Looking down and reading from document.)

Here’s another one. This was sent to me yesterday as well. “My sister is an ICU cardiac nurse and she shared on a site most exclusively used by nurses around the country and re-sent positives. Many, many nurses have shared CoV positive patients is retested often during their hospital stay, two to three to five times, as long as they’re there. One example, she had a patient that was tested seven times, seven times positive. That all went to the CDC as positives.”

Let’s see. Oh, yeah, look at this. (Looking down and reading from document.)

“They also were surprised” -- and this is what they said. I don’t have proof of this. This is just anecdotal is what they’re saying. Do not hurt me on this, okay? (Looking down and reading from document.)

Here’s the deal. “They also said that they were surprised by many tests being positive. One nurse sent two unswabbed results and they came back positive,” which that doesn’t even make any sense. Because if there’s no DNA on there, how can they possibly test it? If there’s no DNA on the swab, how could they test it? If there’s no DNA on the swab, how could they test it? Unless there’s something fishy going on, there’s a mistake, or there’s already DNA on the swab. (Looking down and reading from document.)

This is the last one I’m going to read. “So I shared a story today. A nurse contracted COVID, and in order to return to work, she had to have two consecutive tests come back negative. I don’t know how often she was tested. She had seven positive tests before her two negatives came back. So she has seven separate positive cases. I heard this is the third person. I cannot confirm, but I have heard this -- a couple stories like this.”

Who knows? Who knows? But the states are shutting down again. By the way, your states are shutting down again because you have an increased detection rate, you have a decreased death rate, you have a decreased hospital rate. But, yet, they’re shutting down.

Why did we shut down in the first place? We shut down in the first place so that we can actually reduce the load of the hospitals, slow the curve of the hospitals. Flatten the curve is what we did. But we never spiked anything in the hospitals. Hospital attendances are going back up to where they were this time last year. I don’t understand it. Can someone make sense of this?

By the way, we need healthy people to get exposed to this. Why? So that we can develop an immune system to it. That’s herd immunity.

You guys are saying they’re trying to get the zinc but the page is spinning. I’m sure that’s because everybody’s going on there right now to try to get it. Just keep trying. Got to myfreezinc.com, myfreezinc.com. And just try it later if you can’t do it right now. But please do that and then what I’ll do is I’ll get this article and I’ll put this out so you guys can get it today so you can do some reading on it and -- yourself to learn more about what these tests test for, what you should and shouldn’t understand and know about them and the truth. Because the truth will set you free, you guys. I don’t know what to say other than none of this makes sense to me. Common sense is not that common in the world anymore.

Please, for the love of God, please, for the love of God, get yourself healthier. Please drink water. Please eat clean foods, vegetables, lean, healthy meats, lots of water, 20 to 30 minutes outside of daytime peak-type sun. Please get vitamin D, 10,000 IUs a day if you’re an adult. Zinc, 25 to 50 milligrams a day of zinc. Please get a good probiotic that you’re taking every day. Start eating some fermented foods, start taking oral vitamin C every day, a dose that’s a bowel tolerance. Do that every day. That’s what you need to be doing right now.

Exercise, turn off your TV so that you don’t -- so that you don’t freak out about what’s going on in the world and know this, too, shall pass, just like SARS, just like MERS, just like all this stuff, and know that we will get through this truly together.

But we have got to be -- we’ve got to be doing this together. And not just -- that’s not just a slogan to make people feel guilty to wear a mask. Masks have
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1 not shown -- there’s not been one randomized
2 controlled study that shows that masks slow or stop
3 the spread of coronavirus, COVID-19. That’s just the
4 truth.
5 And if anybody can find me any randomized
6 controlled studies that show that, please send them to
7 me and I’ll stop talking about it. But I’ve scoured
8 and looked. I can’t find any. I’ve talked to some
9 virologists. They can’t find any. I’m talking to
10 several other doctors. They can’t find any. So I’m
11 just trying to find out the truth.
12 So I got to get going. If you guys want to
13 get some zinc, please get some zinc and some vitamin
15 stuff 365. Nonstop is what you need to do.
16 I got to get going. I got some patients I
17 got to take care of. I love and appreciate you all.
18 God bless you, God bless America. I’ll see you all
19 later today. Be blessed everyone.
20 (The recording was concluded.)

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transcribed; and further, that I am not a relative or
employee of any attorney or counsel employed by the
parties hereto, nor financially or otherwise
interested in the outcome of the action.

DATE: 9/4/2020  s/Elizabeth M. Farrell
ELIZABETH M. FARRELL, CERT
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