Katie Ely

080606

From: Sent: To: Cc: Subject: Ellen Plendl Thursday, February 26, 2009 8:13 AM Kimberley Pena Katie Ely FW: Florida's PSC can stop the F crime

Docket 080606-WU

Email received.

----Original Message----From: Todd Gastaldo [mailto:tgastaldo@earthlink.net] Sent: Thursday, February 26, 2009 7:18 AM To: Office of the Chairman; Office of Commissioner Argenziano; Office Of Commissioner Edgar; Office of Commissioner McMurrian; Office of Commissioner Skop; Consumer Contact Cc: chiro-list@yahoogroups.com; fluoride@yahoogroups.com; chiro-list3@yahoogroups.com Subject: Florida's PSC can stop the F crime

FLORIDA'S PSC CAN STOP THE F CRIME

The F crime is forced medication with FSA/fluoride,arsenic,lead hazardous waste, most of it derived from phosphate fertilizer production in Florida. See www.fluoridealert.org.

The Florida Public Service Commission can simply stop the mass forced medication euphemistically known as "fluoridation."

OPEN LETTER archived for global access; see below.

Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL 32399-0850 1-800-342-3552

Chairman Matthew M. Carter, II Via Chairman@psc.state.fl.us

Commissioner Nancy Argenziano Via Commissioner.Argenziano@psc.state.fl.us

Commissioner Lisa Polak Edgar Via Commissioner.Edgar@psc.state.fl.us

Commissioner Katrina J. McMurrian Via Commissioner.McMurrian@psc.state.fl.us

Commissioner Nathan A. Skop Via commissioner.skop@psc.state.fl.us

COMMISSIONERS,

Please simply stop the mass forced medication euphemistically known as "fluoridation."

Fluoride polluters may be attempting an end run via "intergovernmental authority" and "interlocal agreements"...

HB 691: A FOUR YEAR EXEMPTION FROM REGULATION BY THE COMMISSION

HB 691 EXEMPTION, "[A system owned, operated, managed, or controlled by an intergovernmental authority within the first 48 months after the authority obtains ownership, operation, management, or control of the system <code>lell_Minot HubleCtOre</code> regulation

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FPSC-COMMISSION CLERK



by the commission as a utility nor are they subject to the provisions of this chapter, except as expressly provided.....This act shall take effect July 1, 2009."

REMEMBER: "An interlocal agreement may not be used to convey power not already possessed by each party..." http://www.locgov.org/deskbook/chapter10/ch10.pdf

Government agencies simply do not possess the power to impose mass forced medication.

QUILES

You may not be aware that the Florida Supreme Court rubberstamped a lower court's preposterous decision in QUILES that Florida cities are not medicating because the "fluoridation" medication is intended for FAUCETS - not bloodstreams. Let me know if you wish further details about QUILES.

CDC now admits, in effect, that the poison never needed to be in bloodstreams. Its effect - if any - is primarily TOPICAL. Parents who want the poison for their children's teeth can buy poisoned toothpaste - and I do mean POISONED - each tube of "fluoridated" toothpaste sold in the US carries a POISON WARNING.

CDC also warns that infants should not receive formula reconstituted with "fluoridated" water. (Are you mandating that water utilities inform parents of this?)

CDC says that 1 in 3 children manifest fluoride toxicity - "dental fluorosis" - and severe dental fluorosis can CAUSE dental decay. See www.fluoridealert.org.

IMPORTANT NOTE: The mass forced medication euphemistically known as "fluoridation" would still be a crime even if it PREVENTED problems it may cause (from dental decay to bone cancer; see below).

Regarding the problems the F crime may cause, see the latest science [NRC 2006]:

FLUORIDE IN DRINKING WATER A SCIENTIFIC REVIEW OF EPA'S STANDARDS Committee on Fluoride in Drinking Water Board on Environmental Studies and Toxicology Division on Earth and Life Studies NATIONAL RESEARCH COUNCIL OF THE NATIONAL ACADEMIES THE NATIONAL ACADEMIES PRESS Washington, D.C. 2006 http://books.nap.edu/openbook.php?record_id=11571&page=R1

PLEASE NOTE: Instead of using the latest science [NRC 2006, just cited], the Commission is still using a CDC document that is over 20 years old: Water Fluoridation: A Manual for Engineers and Technicians, September 1986...

On January 29, 2009, the Office of Commission Clerk (Cole) received the following from Division of Economic Regulation (Walden) and Office of the General Counsel (Hartman)

"[T]he requirements and standards contained in the following technical publications are hereby incorporated by reference and shall be applied in determining whether permits to construct or alter public water system components, excluding wells (but including well pumping equipment and appurtenances), shall be issued or denied...Water Fluoridation: A Manual for Engineers and Technicians, September 1986, Thomas G. Reeves, P.E. Published by the U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control, Dental Disease Prevention Activity, Atlanta, GA 30333." http://www.floridapsc.com/agendas/archive/090210cc/09021013.html

Please "incorporate by reference" NRC 2006.

PLEASE NOTE: Over 2000 professionals (MDs, PhDs, RNs, DCs, dentists, NDs and lawyers) have signed the following petition which begins with a brief discussion of the 2006 NRC report...

http://www.fluoridealert.org/statement.august.2007.html

AUGUST 9, 2007

We, the undersigned professionals, come from a variety of disciplines but all have an abiding interest in ensuring that government public health and environmental policies be determined honestly, with full attention paid to the latest scientific research and to ethical principles.

EIGHT recent events make action to end water fluoridation urgent.

1. The publication in 2006 of a 500-page review of fluoride's toxicology by a distinguished panel appointed by the National Research Council of the National Academies (NRC, 2006). The NRC report concluded that the US Environmental Protection Agency's (EPA) safe drinking water standard for fluoride (i.e. maximum contaminant level goal or MCLG) of 4 parts per million (ppm) is unsafe and should be lowered. Despite over 60 years of fluoridation, the report listed many basic research questions that have not been addressed. Still, the panel reviewed a large body of literature in which fluoride has a statistically significant association with a wide range of adverse effects. These include an increased risk of bone fractures, decreased thyroid function, lowered IQ, arthritic-like conditions, dental fluorosis and, possibly, osteosarcoma.

The average fluoride daily intakes (*) associated with many of these adverse effects are reached by some people consuming water at the concentration levels now used for fluoridation -- especially small children, above average water drinkers, diabetics, people with poor kidney function and other vulnerable sub-groups. For example, the average fluoride daily intake associated with impaired thyroid function in people with iodine deficiency (about 12% of the US population) is reached by small children with average consumption of fluoridated water at 1 ppm and by people of any age or weight with moderate to high fluoridated water consumption. Of special note among the animal studies is one in which rats fed water containing 1 ppm fluoride had an increased uptake of aluminum into the brain, with formation of beta-amyloid plaques, which is a classic marker of Alzheimer's disease pathology in humans. Considering the substantial variation in individual water intake, exposure to fluoride from many other sources, its accumulation in the bone and other calcifying tissues and the wide range of human sensitivity to any toxic substance, fluoridation provides NO margin of safety for many adverse effects, especially lowered thyroid function.

* Note: "Daily intake" takes into account the exposed individual's bodyweight and is measured in mg. of fluoride per kilogram bodyweight.

2. The evidence provided by the US Centers for Disease Control and Prevention (CDC) in 2005 that 32% of American children have dental fluorosis - an abnormal discoloration and mottling of the enamel. This irreversible and sometimes disfiguring condition is caused by fluoride.

Children are now being overdosed with fluoride, even in non-fluoridated areas, from water, swallowed toothpaste, foods and beverages processed with fluoridated water, and other sources. Fluoridated water is the easiest source to eliminate.

3. The American Dental Association's policy change, in November 2006, recommending that only the following types of water be used for preparing infant formula during the first 12 months of life: "purified, distilled, deionized, demineralized, or produced through reverse osmosis." This new policy, which was implemented to prevent the ingestion of too much fluoride by babies and to lower the risk of dental fluorosis, clearly excludes the use of fluoridated tap water. The burden of following this recommendation, especially for low income families, is reason alone for fluoridation to be halted immediately. Formula made with fluoridated water contains 250 times more fluoride than the average 0.004 ppm concentration found in human breast milk in non-fluoridated areas (Table 2-6, NRC, 2006). 4. The CDC's concession, in 1999 and 2001, that the predominant benefit of fluoride in reducing tooth decay is TOPICAL and not SYSTEMIC. To the extent fluoride works to reduce tooth decay, it works from the outside of the tooth, not from inside the body. It makes no sense to drink it and expose the rest of the body to the long term risks of fluoride ingestion when fluoridated toothpaste is readily available.

Fluoride's topical mechanism probably explains the fact that, since the 1980s, there have been many research reports indicating little difference in tooth decay between fluoridated and non-fluoridated communities (Leverett, 1982; Colquhoun, 1984; 1985 and 1987; Diesendorf, 1986; Gray, 1987; Brunelle and Carlos, 1990; Spencer, 1996; deLiefde, 1998; Locker, 1999; Armfield and Spencer, 2004; and Pizzo 2007 - see citations). Poverty is the clearest factor associated with tooth decay, not lack of ingested fluoride. According to the World Health Organization, dental health in 12-year olds in non-fluoridated industrialized countries is as good, if not better, than those in fluoridated countries (Neurath, 2005).

5. In 2000, the publication of the UK government sponsored "York Review," the first systematic scientific review of fluoridation, found that NONE of the studies purporting to demonstrate the effectiveness of fluoridation to reduce tooth decay were of grade A status, i.e. "high quality, bias unlikely" (McDonagh et al., 2000). 6. The publication in May 2006 of a peer-reviewed, case-controlled study from Harvard University which found a 5-7 fold increase in osteosarcoma (a frequently fatal bone cancer) in young men associated with exposure to fluoridated water during their 6th, 7th and 8th years (Bassin et al., 2006). This study was surrounded by scandal as Elise Bassin's PhD thesis adviser, Professor Chester Douglass, was accused by the watchdog Environmental Working Group of attempting to suppress these findings for several years (see video). While this study does not prove a relationship between fluoridation and osteosarcoma beyond any doubt, the weight of evidence and the importance of the risk call for serious consideration. 7. The admission by federal agencies, in response to questions from a Congressional subcommittee in 1999-2000, that the industrial grade waste products used to fluoridate

over 90% of America's drinking water supplies (fluorosilicate compounds) have never been subjected to toxicological testing nor received FDA approval for human ingestion (Fox, 1999; Hazan, 2000; Plaisier, 2000; Thurnau, 2000).

8. The publication in 2004 of "The Fluoride Deception" by Christopher Bryson. This meticulously researched book showed that industrial interests, concerned about liabilities from fluoride pollution and health effects on workers, played a significant role in the early promotion of fluoridation.

Bryson also details the harassment of scientists who expressed concerns about the safety and/or efficacy of fluoridation (see Bryson interview).

We call upon Members of Congress (and legislators in other fluoridating

countries) to sponsor a new Congressional (or Parliamentary) Hearing on Fluoridation so that those in government agencies who continue to support the procedure, particularly the Oral Health Division of the CDC, be compelled to provide the scientific basis for their ongoing promotion of fluoridation. They must be cross-examined under oath if the public is ever to fully learn the truth about this outdated and harmful practice.

We call upon all medical and dental professionals, members of water departments, local officials, public health organizations, environmental groups and the media to examine for themselves the new documentation that fluoridated water is ineffective and poses serious health risks. It is no longer acceptable to simply rely on endorsements from agencies that continue to ignore the large body of scientific evidence on this matter -- especially the extensive citations in the NRC (2006) report discussed above.

The untold millions of dollars that are now spent on equipment, chemicals, monitoring, and promotion of fluoridation could be much better invested in nutrition education and targeted dental care for children from low income families. The vast majority of enlightened nations have done this (see statements).

It is time for the US, and the few remaining fluoridating countries, to recognize that fluoridation is outdated, has serious risks that far outweigh any minor benefits, violates sound medical ethics and denies freedom of choice. Fluoridation must be ended now.

>>>>END PROFESSIONALS' STATEMENT CALLING FOR AN END TO WATER >>>>FLUORIDATION

Again that IMPORTANT NOTE: The mass forced medication euphemistically known as "fluoridation" would still be a crime even if it PREVENTED the problems it may cause.

Commissioners, please simply stop the mass forced medication euphemistically known as "fluoridation."

Thanks.

Sincerely,

Todd

Dr. Gastaldo Hillsboro, Oregon USA todd@chiromotion.com

INTERLOCAL AGREEMENTS and INTERGOVERNMENTAL AUTHORITIES...

"FOR THE IMPROVEMENT OF THEIR HEALTH ... "

"HB 691...An act relating to state oversight of utility services provided by

intergovernmental authorities...'Intergovernmental authority' means a separate legal entity created by interlocal agreement^{^^} under s. 163.01(7)(g)***...The accomplishment of the authorized purposes of a legal entity created under this paragraph is in all respects for the benefit of the people of the state, for the increase of their commerce and prosperity, and for the improvement of their health and living conditions...367.022 Exemptions.--[A system owned, operated, managed, or controlled by an intergovernmental authority within the first 48 months after the authority obtains ownership, operation, management, or control of the system is]...not subject to regulation by the commission as a utility nor are they subject to the provisions of this chapter, except as expressly provided.....This act shall take effect July 1, 2009."

^^^INTERLOCAL AGREEMENTS. 1.Definition. An interlocal agreement is an agreement entered into pursuant to the Florida Interlocal Cooperation Act of 1969, Section 163.01 (the "Act") and Florida Statutes. Section 163.01(3)(a), Fla. Stat. 2. Purpose of the Act. The Act 'was enacted to permit local governmental units to make the most efficient use of their powers by enabling them to cooperate with other localities on the basis of mutual advantage and thereby to provide services and facilities in a manner and pursuant to forms of governmental organization that will accord best with geographic, economic, population, and other factors influencing the needs and development of local communities.' Section 163.01(2), Fla. Stat. 3.Common Power, Privilege or Authority. a. The Act provides that a public agency of the state may exercise jointly with any other public agency of the state, of any other state, or of the United States Government any power, privilege or authority which such agencies share in common and which each might exercise separately. Section 163.01(4), Fla. Stat. b.An interlocal agreement may not be used to convey power not already possessed by each party..."

http://www.locgov.org/deskbook/chapter10/ch10.pdf

***"Section 163.01(7)(g), Fla. Stat., added by Chapter 97-216, Laws of Florida, allows a separate legal entity created under that section to acquire, construct and operate public facilities related to a governmental function or purpose, including but not limited to wastewater facilities, water or alternative water facilities and water reuse facilities, which may serve populations within or outside of the members of the entity. See Chapter 2004-336, Laws of Florida Providing Protection for the 'Host Government' in the event of proposed acquisition of a utility system and which allows special districts to take the part in the creation of separate legal entity for the purposes set out in Section 163.01(7)(g), Fla. Stat."

http://www.floridapsc.com/agendas/archive/090210cc/09021013.html

DATE: January 29, 2009 TO: Office of Commission Clerk (Cole) FROM: Division of Economic Regulation (Walden) Office of the General Counsel (Hartman) RE: Docket No. 080606-WU - Application for amendment of water tariff by O & S Water Company, Inc. to implement Florida Department of Environmental Protection's requirement under Rule 62-555.360, F.A.C., that backflow prevention devices be tested on an annual basis. County(ies): Osceola AGENDA: 02/10/09 - Regular Agenda - Tariff Filing - Interested Persons May Participate COMMISSIONERS ASSIGNED: All Commissioners PREHEARING OFFICER: Skop CRITICAL DATES: May 24, 2009 (8-Month Effective Date) SPECIAL INSTRUCTIONS: None FILE NAME AND LOCATION: S:\PSC\ECR\WP\080606A.RCM.DOC

"...62-555.330 Engineering References for Public Water Systems...In addition to the requirements of this chapter, the requirements and standards contained in the following technical publications are hereby incorporated by reference and shall be applied in

determining whether permits to construct or alter public water system components, excluding wells (but including well pumping equipment and appurtenances), shall be issued or denied... The specific requirements contained in this chapter supersede the requirements and standards contained in these publications. Where there are conflicts between these publications, suppliers of water and construction permit applicants shall comply with any one of the publications. Where there are multiple options or alternatives in these publications, suppliers of water and construction permit applicants shall comply with any one of the options or alternatives. The Department shall allow exceptions to the requirements and standards in these publications if suppliers of water or construction permit applicants provide justification for each exception and provide alternative design and construction features that achieve the same purpose and that afford a similar level of strength, durability, reliability, and public health protection...Water Fluoridation: A Manual for Engineers and Technicians, September 1986, Thomas G. Reeves, P.E. Published by the U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control, Dental Disease Prevention Activity, Atlanta, GA 30333."

http://www.floridapsc.com/agendas/archive/090210cc/09021013.html

NOTE: Stopping the F crime is not my primary work. My primary work is stopping OTHER mass medical crimes.

See for example: Tufts reimburses CRIMINAL chiropractic for babies (performed routinely by MDs) http://health.groups.yahoo.com/group/chiro-list/message/3090

And see: The F Crime: Violation of the Sanctity of Human Blood http://health.groups.yahoo.com/group/chiro-list/message/3064

My thanks to Elaine Nichols for posting:

ATTENTION: Water oversight legislation to be aware of HB 691/SB 1192 http://groups.yahoo.com/group/fluoride/message/3750

This post will be archived for global access. Search for it at http://health.groups.yahoo.com/group/chiro-list/