Lou:

Thank you for taking my call last night.

My letter to Fauci is at-bottom of this enclosure.

Note that I had forwarded a copy to Governor DeSantis . . . In a hand-written note to him, I emphasized pages 10 and 11 . . . which I emphasize with you and your clients. Note that I discuss "amplification" with Fauci . . .

According to the Nobel Prize winning inventor of PCR, Dr. Kary Mullis, that process cannot be used to diagnose presence of a complete virus . . . hence the ONLY way to get any type of reportable results (coy wording on my part) is to use cycle after cycle after cycle . . . the industry uses the esoteric term "amplification."

So . . . the PCR test that Fauci, and hence DeBlasio and Cuomo, declares as the "gold standard," is in truth an UTTER FRAUD, and they all know it.

Note that Governor DeSantis has JUST released his dogs-of-war on this entire FRAUD in Florida . . . this could be pivotal. The "cases" have been one of their linchpins for the lockdowns and their extended lockdowns . . . all a bunch of CRAP.

The page 10/11 Fauci excerpt attached.

Paul Sheridan

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Scott A. Rivkees, MD State Surgeon General

Vision: To be the Healthiest State in the Nation

Mandatory Reporting of COVID-19 Laboratory Test Results: Reporting of Cycle Threshold Values

December 3, 2020

Laboratories are subject to mandatory reporting to the Florida Department of Health (FDOH) under section 381.0031, Florida Statutes, and Florida Administrative Code, Chapter 64D-3.

- All positive, negative and indeterminate COVID-19 laboratory results must be reported to FDOH via electronic laboratory reporting or by fax immediately. This includes all COVID-19 test types—polymerase chain reaction (PCR), other RNA, antigen and antibody results. For a list of county health departments and their reporting contact information, please visit www.FLhealth.gov/chdepicontact.
- Cycle threshold (CT) values and their reference ranges, as applicable, must be reported by laboratories to FDOH via electronic laboratory reporting or by fax immediately.

As per Florida Administrative Code, rule 64D-3.031, laboratories must report all of the following:

- o The patient's:
 - First and last name, including middle initial
 - Address (including street, city, state and ZIP code)
 - Telephone number (including area code)
 - Date of birth
 - Sex
 - Race
 - Ethnicity (Hispanic or non-Hispanic)
 - Pregnancy status, if applicable
 - Social Security number
- The laboratory:
 - Name, address and telephone number of laboratory performing test
 - Type of specimen (e.g., stool, urine, blood, mucus, etc.)
 - Date of specimen collection
 - Specimen collection site (e.g., cervix, eye) if applicable
 - Date of report
 - Type of test performed and results, including reference range, titer when quantitative procedures are performed and all available results on speciation, grouping or typing of organisms
- The submitting provider's:
 - Name
 - Address (including street, city, state and ZIP code)
 - Telephone number (including area code)
 - National provider number (NPI)

If your laboratory is not currently reporting CT values and their reference ranges, the lab should begin reporting this information to FDOH within seven days of the date of this memorandum. If your laboratory is unable to report CT values and their reference ranges, please fill out the brief questionnaire attached to this memorandum and submit by facsimile to the FDOH's Bureau of Epidemiology confidential fax line at 850-414-6894, within seven days of the date of this memorandum



4052 Bald Cypress Way, Bin A-12 • Tallahassee, FL 32399 PHONE: 850/245-4401 • FAX: 850/413-9113





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Mandatory Reporting of COVID-19 Laboratory Test Results: Reporting of Cycle Threshold Values

Attachment

Nan	ne of person completing questionnaire	
Nan	ne of laboratory	
Stre	et address	
City	, state and ZIP code	
	Is your laboratory a CLIA-certified laboratory performing diagnostic molecular testing for the detection of SARS-CoV-2? □ Yes □ No	
2.	oes your laboratory perform multiple assays for the molecular detection of SARS-CoV-2? ☐ Yes ☐ No	
3.	Please list all the platforms/assays that ye	our laboratory uses.
	Do the molecular assays your laboratory performs include real-time PCR with the test result being based on a CT value? ☐ Yes ☐ No (Your survey is complete, please fax to 850-414-6894)	
5.	Please select all the reason(s) why your laboratory is not able to report the CT value to FDOH. Although the qualitative result is generated based on a CT value, the assay/instrument does not provide the user with the actual CT value—it only provides the qualitative result The laboratory does not have a separate mechanism to report the CT value to FDOH since the CT value does not get reported to the submitting provider Other (please list the reasons)	

Fax to 850-414-6894

Florida Department of Health
Division of Disease Control and Health Protection
Bureau of Epidemiology

4052 Bald Cypress Way, Bin A-12 • Tallahassee, FL 32399 PHONE: 850/245-4401 • FAX: 850/413-9113

FloridaHealth.gov



Tallahassee, FL, 32304



Dear Customer,

The following is the proof-of-delivery for tracking number: 128318100005388

Delivery Information:

Status: Delivered

Signed for by: ALEVELL Delivery Location: 813 LAKE BRADFORD RD

Service type: FedEx Ground

Special Handling: Delivery date: Jul 27, 2020 12:56

Shipping Information:

Tracking number: 128318100005388 **Ship Date:** Jul 24, 2020

Weight: 0.4 LB/0.18 KG

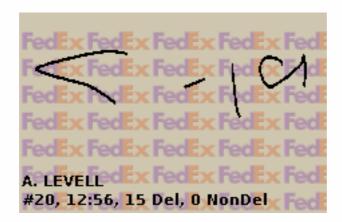
Recipient:

Governor Ron DeSantis

The Capitol 400 S. Monroe St Tallahassee, FL 32399 850-717-9337 Shipper:

Delivered To:

SHERIDAN, PAUL V 22357 COLUMBIA ST DEARBORN, MI, US, 481243431



EXCERPT

From letter sheridan2fauci-1-21july2020

Pages 10 & 11 of 36, section title:

SARS-CoV-2 "Viral Tests," SARS-CoV-2 "Anti-Body Tests," "Confirmed COVID-19 Cases" the So-Called "Second Wave" and ZERO PROOF

Complete sheridan2fauci letter available here:

http://pvsheridan.com/sheridan2fauci-1-21july2020.pdf

SARS-CoV-2 "Viral Tests," SARS-CoV-2 "Anti-Body Tests," "Confirmed COVID-19 Cases" the So-Called "Second Wave" and ZERO PROOF

The precipitous and dangerous erosion of basic human rights, and the accompanying media hype about a concern for "health," is derived from the alleged validity of the SARS-Cov-2 tests, and related statistics which are promoted as "confirmed COVID-19 cases."

Through erudition, I am familiar with the Polymerase Chain Reaction (PCR) test developed by **Nobel Prize winner Dr. Kary Mullis**. My interest piqued when he was vilified, by you and others, then and ongoing, for asking simple questions, but making a very relevant and ethical request regarding the alleged connection between HIV and AIDS. The Nobel Prize winner Dr. Mullis:

"The first time I really questioned it, I was working on a project where we were measuring HIV in people's blood . . . At some point we needed to re-up our grant from the NIH (National Institute of Health), to work on that, and I had to write it.

And so, the first line of that was 'HIV is the probable cause of AIDS.' I wrote that, and then I said, well I need a paper, some kind of scientific paper to reference that statement. Because when you make a scientific statement like that, that's like a fact. You need to say here's how come I know that . . . here's a paper by somebody that describes why that statement is true . . . What is that paper, who do I go to for that? . . . How do I know that? . . . It turned out that nobody knew that, there was not a scientific reference, like a paper that someone had submitted, with experimental data in it, and a logical discussion, and said, 'Here is how come we know that HIV is the probable cause of AIDS.' There was nothing out there like that. Nothing!"

You assumed your current career position in 1984, and had personally met with Dr. Mullis. You were central to the HIV = AIDS hypothesis.

As you are aware, upon his death last August 2019, the global censoring of Dr. Mullis' work in this area has already begun **with vigor!** This historical/ongoing behavior amongst the so-called medical community is familiar to you.

To the best of my knowledge, you were unable to offer Dr. Mullis the reference he sought. I would be happy to receive an update from you on that specific point.



The two main "COVID-19 tests" currently deployed are based on PCR/Antigen ("viral test"), and the antibody test (Serology). We review the validity/efficacy of those tests next.

(1) Dr. Andrew Kaufman explains that the DNA sequence of the chimpanzee accumulates a full 97% of the human DNA. A crucial 3% difference determines the expression of the life form.

Samples in PCR ("viral test") are impure and originate from multiple bodily and external sources. PCR involves "amplification," where mere fragments of DNA/RNA are replicated/repaired. In the COVID-19 protocol, even after amplification, **PCR can only detect 80% of the targeted RNA sequence.** It is off by 20%, not 3%. We would never declare that chimpanzee DNA is "close enough," and such is therefore confirmation of a human. Yet these percentages have been promoted as confirming the presence of SARS-CoV-2.

That is Dr. Fauci, <u>at no time</u> during this pandemic has the PCR test detected the SARS-CoV-2 RNA-based virus particle, only ~80% fragments are confirmed.

Despite this, innocent victims who fund and rely upon your expertise, a vast majority with zero symptoms, are being told that they are "positive for the virus that causes COVID-19."

(2) The "anti-body test" is equally egregious. Reliance on the "anti-body test" is based upon the claim that immune system response to SARS-CoV-2 manifests specific anti-bodies that you declare are <u>specific to SARS-Cov-2</u>. Utter nonsense.

Victims of this ruse, with prior flu-shots or prior common flu virus infection (corona and otherwise), even the fully recovered, have and will test "positive for the virus that causes COVID-19."

That is Dr. Fauci, <u>at no time</u> during this pandemic has the "anti-body test" confirmed presence of the SARS-CoV-2 RNA virus particle; it is only capable of detecting an antibody load (long-lived IgG) that is <u>claimed</u> to be responsive to SARS-CoV-2. This is the exact same protocol you declared in the HIV = AIDS era.

Without these "SARS-CoV-2 Tests," and without the "positive for the virus that causes COVID-19" prognosis, you will not be able to assert, on the basis of statistics, your "Second Wave." These official tests/prognoses are not merely reckless; such are probably actionable.

You show little concern for the effect these tests have had on the psychological/sociological well-being of America. Your promotions of a "Second Wave" and vaccines reinforce this view.

QUESTIONS 4

- 1. The faulty COVID-19 test/prognosis is **now admitted by the CDC**. Given your commitment to "speaking the truth at all times," will you publically clarify/correct for the taxpayer, the precise limitations of the PCR and anti-body tests, and what those limitations portend for **(1)** what you alleged are "confirmed COVID-19 cases," and **(2)** your so-called "Second Wave"?
- 2. Are you in a position to offer President Trump, and the world, actual scientific proof that these "viral" and the "anti-body" tests are valid for SARS-CoV-2, and therefore the political actions from lockdowns to suspension of the US Constitution are justified? If you have any questions, you might wish to confer with President John Magufuli of Tanzania.