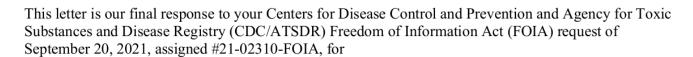


Centers for Disease Control and Prevention (CDC) Atlanta GA 30333 October 26, 2021

SENT VIA EMAIL



This is a formal request for access to general records, made under the *Freedom of Information Act*.

Please note: this request is very similar to another request CDC/ATSDR responded to in March, 2021 where I had **specified** purification *via maceration*, *filtration and use of an ultracentrifuge*.

The difference with this new request is that it does **not specify** maceration, filtration and use of an ultracentrifuge; it only mentions filtration, ultracentrifugation and chromatography by way of an example.

My request also includes the language of 'variants' to ensure that records would match all related alleged SARS-COV-2 viruses.

Description of Requested Records:

All studies and/or reports in the possession, custody or control of Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) describing the **purification** of any "COVID-19 virus" (aka "SARS-COV-2", including any alleged "variants" i.e. "B.1.1.7", "B.1.351", "P.1") (for example: via filtration, ultracentrifugation and chromatography), directly from a sample taken from a diseased human where the patient sample was not first combined with any other source of **genetic** material (i.e. monkey kidney cells aka Vero cells; fetal bovine serum).

Please note that I am not requesting studies/reports where researchers failed to **purify** the suspected "virus" and instead:

- cultured an unpurified sample or other unpurified substance, and/or
- performed an amplification test (i.e. a PCR test) on all the RNA from a patient sample or from a cell culture, or on genetic material from any unpurified substance, and/or
- fabricated a "genome" by editing/assembling/aligning sequences detected in the total RNA from a patient sample or from a cell culture or from any unpurified substance, and/or
- produced electron microscopy images of unpurified things.

For further clarity, please note I am already aware that according to virus theory a "virus" requires host cells in order to replicate, and I am **not** requesting records describing the **replication** of a "virus" without host cells.

Further, I am **not** requesting records that describe a suspected "virus" floating in a vacuum; I am simply requesting records that describe its **purification** (**separation** from everything else in the patient sample, as per standard laboratory practices for the purification of other very small things).

Please also note that my request is **not limited** to records that were authored by CDC/ATSDR or that pertain to work done at/by CDC/ATSDR. Rather, my request includes any record matching the above description, for example (but not limited to): any published peer-reviewed study authored by anyone, anywhere, ever that has been downloaded or printed by CDC/ATSDR and relied on as evidence of a disease-causing "virus".

If any records match the above description of requested records and are currently available to the public elsewhere, please provide enough information about each record so that I may identify and access each one with certainty (i.e. titl e the public may access it). Please provide URLs where possible.

For administrative convenience and to fully respond to your request, program staff have provided the following information below with corresponding web links.

SARS-CoV-2 is the virus that causes coronavirus disease 2019 (COVID-19). Active infection with SARS-CoV-2 is detected by <u>diagnostic tests</u>. Currently there are two types of diagnostic tests — molecular tests that detect the virus's genetic material and antigen tests that detect specific proteins on the surface of the virus. For current data showing the total number of SARS-CoV-2-positive cases and deaths, visit the <u>CDC COVID-19 Data Tracker</u>, which shows cases and deaths in the United States broken down by state and county, daily trends in the number of cases by state, and other parameters.

Evidence of SARS-CoV-2 infection can be found in a study entitled, <u>Pathology and Pathogenesis of SARS-CoV-2 Associated with Fatal Coronavirus Disease</u>, which includes electron microscopy images of SARS-CoV-2 in infected lung and upper airway tissues as well as staining of lung and upper airway tissues using an antibody against SARS-CoV-2.

The specimens analyzed in this study were from patients with common signs and symptoms associated with COVID-19, including fever, cough, and shortness of breath. All patients had abnormal findings on chest radiographs.

There are other similar studies publicly available online. To aid in locating other related studies, please see the articles suggested in the "Similar Articles" and "Cited by" section on the manuscript's PubMed entry.

The SARS-CoV-2 virus, whether the original strain or variants of the virus, may be isolated from human clinical specimens by culturing in cells. In January 2020, CDC <u>isolated the SARS-CoV-2 virus</u> from a clinical specimen from the first confirmed case of COVID-19 in the United States. There are other similar studies published describing the isolation and characterization of SARS-CoV-2 from human clinical specimens. To aid in locating other related studies, please see the articles suggested in the "Similar Articles" and "Cited by" section on the manuscript's <u>PubMed entry</u>. There are also <u>several publications</u> documenting SARS-CoV-2 infection and transmission among pre-symptomatic and asymptomatic individuals.

For information about the SARS-CoV-2 genome sequence, see the NIH GenBank website (https://www.ncbi.nlm.nih.gov/genbank/sars-cov-2-seqs/), which includes over 1 million sequences.

For more information about specific variants, searches can be performed on PubMed and other databases. Additionally, users can filter millions of genomic sequences by variant on genomic sequence databases like GISAID (https://www.gisaid.org/hcov19-variants/) and GenBank (<a href="https://www.ncbi.nlm.nih.gov/labs/virus/vssi/#/virus?SeqType_s=Nucleotide&VirusLineage_ss=SARS-CoV-2,%20taxid:2697049).

If you need any further assistance or would like to discuss any aspect of the records provided please contact either our FOIA Requester Service Center at 770-488-6399 or our FOIA Public Liaison at 770-488-6277.

Sincerely,

Roger Andoh

CDC/ATSDR FOIA Officer

Office of the Chief Operating Officer

Phone: (770) 488-6399 Fax: (404) 235-1852

21-02310-FOIA