

## Affidavit

I, a woman, Christine known as Christine Massey, the undersigned, do hereby say and am willing to testify under penalty per jury that:

1. My home is currently on the land known as Brampton, Ontario, Canada.
2. I am fully competent to make this declaration and I make it voluntarily.
3. My statements herein are based on my own personal knowledge unless I state same to be based upon information and belief, in which case I will set forth the source of same, which I verily believe to be true.
4. I trained and worked professionally in the past as a biostatistician with a master's degree in biostatistics from the Dalla Lana School of Public Health, University of Toronto.
5. I first became aware of criticisms of virology in 2017 when I heard Dr. Stefan Lanka discussing the illogical methodologies employed, and the illogical assumptions made, by virologists.
6. In early 2020 I viewed a presentation by Dr. Andrew Kaufman and started gaining a better understanding of the serious flaws in the methodologies.
7. According to men and women who act as virologists, government agents, "vaccine" manufacturers, mainstream reporters, etc. the alleged "SARS-COV-2" is an infectious, replication-competent, obligate intracellular parasite that consists of a genome surrounded by a proteinaceous shell, which is in turn surrounded by an "envelope" with "spike proteins", with the

- proteins purportedly encoded by the alleged “genome”, and this alleged “virus” spreads from host to host through natural exposure routes, infects and hijacks cells, replicates and causes “COVID-19” symptoms.
8. Logically, the burden of proof lies on the one making the positive claim that something does exist and/or causes an effect.
  9. Refutation is logically independent of, and does not require the offering of, an alternative explanation for observations (i.e. of respiratory symptoms, death, etc.).
  10. Logic dictates that one cannot have valid scientific evidence of an alleged “virus” causing respiratory illnesses in people without the alleged “virus” having been found in and purified from the bodily fluid, tissue or excrement of “hosts” as a preliminary step, followed by sequencing, characterization and valid, rigorous controlled experiments that test falsifiable hypotheses.
  11. The mere appearance of an apparent particle, claimed by some to be a “virus”, in an electron microscopy image is not proof that the apparent particle actually functions as a “virus” or that it has an RNA or DNA genome or specific proteins.
  12. Logically, one must sequence the genome, if the apparent particle has a genome, and one must characterize the apparent particle, in order to know its genome and proteins and not confuse it with other particles that may have a similar appearance.
  13. Per logic, particles alleged to be a “virus” must be purified in order for valid sequencing to take place, so that the provenance of the sequenced “genetic” material is known to be those specific particles and not merely

declared as such.

14. Purification of particles must be confirmed via electron microscopy imaging and not merely assumed, otherwise pseudoscience and illogic takes place.
15. Assembling millions of in silico (computer) codes (that represent “genetic” sequences purportedly detected in a clinical sample or in cell culture supernatant) into a longer computer code and declaring that the result is a “viral genome” is very different from scientifically identifying an actual “virus” and sequencing it.
16. Yet, the former is done in virology and it appears based on the virology literature and FOI responses that the latter has never been done in the history of virology.
17. Particles alleged to be a “virus” must be purified before reliable characterization can take place, so that the provenance of proteins is known to be those specific particles and not merely declared as such.
18. One cannot logically even attempt to show that any “genetic” sequence or protein is specific to a purported “virus” without first showing that the purported virus exists and that its genome contains the sequence and/or protein in question.
19. Application of the scientific method in the natural sciences requires observation of a natural phenomenon and repeatable, rigorous testing of falsifiable hypotheses via valid controlled experiments to investigate causation of said phenomenon.

20. Logically, particles alleged to be a “virus” must be found and purified before hypotheses regarding their effects can be scientifically tested via valid, rigorous controlled experiments.
21. A valid, rigorous scientific experiment requires a valid independent variable with all other factors held constant.
22. Purified particles suspected of being a “virus” are the necessary independent variable in a valid controlled experiment investigating whether the particles in question cause disease.
23. Logically, a valid rigorous controlled experiment testing whether a potential “virus” particle causes illness must use an exposure route that reflects the way that the potential “virus” is hypothesized to spread from “host” to “host” in nature (i.e. breathed in naturally, not forced in or injected).
24. Rigorous, adequate controls are also necessary when performing procedures such as sequencing and characterization.
25. Procedures used in controlled experiments must be valid and logical, otherwise even with purified particles and controls pseudoscience and illogic takes place.
26. Finding and purifying particles hypothesized to be a “virus”, from many samples of bodily fluid/tissue/excrement, followed by characterization, sequencing and repeated valid, rigorous controlled experiments is necessary before one can logically and scientifically conclude that particles of a particular size and density and with a specific “genome” and proteins are circulating in people and causing a disease, regardless of whether the purported particles are suspected of

being natural or manmade (“gain of function”/“bioweapon”) “viruses”.

27. Logically, it is impossible to validate any surrogate/ indirect “test”, including a “PCR test”, “antigen test” or “antibody test” without a valid gold standard.
28. It is impossible to validate any “test” that is claimed to “confirm” the presence of an alleged “virus” or a “viral infection” or a “viral disease” before the alleged “virus” has been shown to exist.
29. It is impossible to validate any “test” claimed to “confirm” a “viral disease” before the alleged “virus” particle has been 1) proven to exist, and 2) shown to cause the disease.
30. Published studies wherein authors claimed to have “isolated” the alleged “SARS-COV-2” or any other alleged “virus” do not describe isolation/purification of particles alleged to be a “virus” from patient samples or from anything else followed by valid sequencing, characterization and valid, rigorous, repeatable controlled experiments that demonstrate causation of symptoms.
31. Published studies, including the foundational “SARS-COV-2” “isolation” and “sequencing” studies from China (including by Fan Wu et al.), also do not show that the alleged particle hijacked cells and created copies of itself or that an alleged “virus” caused anything to happen.
32. Published studies, including the foundational “SARS-COV-2” studies from China, wherein authors claimed to have “sequenced” the alleged “SARS-COV-2” or any other alleged “coronavirus” do not describe extraction of genetic material from a purified sample of particles alleged to be a “virus”

or discovery/determination of a “genome”.

33. Published studies describe the construction of meaningless, hypothetical, in silico sequences, mere computer models, that authors nevertheless refer to as a "viral genomes" but have never been shown to correspond to anything in the physical realm, let alone any specific particle fitting the definition of a “virus”.
34. In May of 2020, I began filing “freedom of information requests” (hereafter referred to as “FOIs”) with Canadian health and science institutions for all studies/reports in their possession/custody/control that describe the isolation/purification of the alleged "COVID-19 virus" also known as “SARS-COV-2”, directly from the bodily fluid, tissue or excrement of a sick person where the sample was not first combined/contaminated with another source of genetic material such as monkey kidney cells or cow serum.
35. I clarified in my FOIs that I was use the word "isolation" or “purification” in the every-day sense of separating the alleged “virus” from everything else in a patient sample of bodily fluid, tissue or excrement.
36. I clarified that I was not seeking records where "isolation" refers instead to the so-called “culturing” of something or to the performance of an amplification “test” or to the so-called “sequencing” of something.
37. I clarified that my FOIs were not limited to records that were authored by people working at the institution in question and were not limited to records that describe work done by people at the institution in question, but included any such study or report held by the institution, authored by anyone, anywhere (including China).
38. In each FOI, I requested that if any record held by the institution matched my

- request but was currently available to the public elsewhere, I be given enough information about it so that I may identify and access it with certainty.
39. In many of my communications, I also clarified that I was not seeking private patient records or records that describe the replication of an alleged “virus” without host cells, and that I sought records of purification per standard laboratory procedures for the purification of very small things.
  40. After the first alleged “variant” was announced in December of 2020, in most of my FOI communications I specified that they applied to any alleged “variants” as well as to the original alleged “virus”.
  41. I filed 2 separate FOIs to the Public Health Agency of Canada; the first was as stated above; the second was specifically regarding purification of the alleged “UK variant” also known as “the alpha variant” or “B.1.1.7”.
  42. I also filed FOIs as described above with numerous police services including the Royal Canadian Mounted Police and the Ontario Provincial Police after agents of said services enforced “COVID-19” rules/legislation/orders, to find out if they could possibly have logical, valid scientific evidence of the existence of the alleged “virus”.
  43. I have personally obtained responses from over 3 dozen Canadian institutions and all have failed to provide or cite even 1 record that describes the alleged “SARS-COV-2” being found in and purified from any patient sample, by anyone, anywhere on the planet, ever.
  44. In the vast majority of responses from Canadian institutions it was explicitly confessed that the institution had no such record.
  45. In an initial response letter labelled “PHAC-A-2020-000110/TTL”, emailed to me by Tammy Turpin-Loyer on December 7, 2020, Curtis Mathews acting as

Manager, Access to Information and Privacy Division at Public Health Agency of Canada (PHAC) provided me with 1 study written by Jared Bullard et al. that had been supported by Manitoba Health, Cadham Provincial Laboratory, the Public Health Agency of Canada and more specifically the National Microbiology Laboratory, and with several emails that he claimed were responsive to my FOI.

46. Jared Bullard et al. stated in the abstract of their study that “RT- PCR detects RNA, not infectious virus”.
47. As admitted in the “CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel” and other “official” publications, “PCR tests” could not possibly confirm the presence of a replication-competent “virus” even if the alleged “virus” had been shown to exist.
48. The study by Jared et al. and the emails provided to me by PHAC did not describe purification of an alleged “virus” from a patient sample or from anything else.
49. I responded via email to Tammy Turpin-Loyer of PHAC that same day and pointed out that none of the records provided to me describe anyone finding and separating the alleged “virus” from everything else in a patient sample.
50. In a revised response to that same FOI, emailed to me on February 2, 2021 and labelled “PHAC-A-2020-000110/TTL”, Christine Smith acting as Team Leader, Access to Information and Privacy Division, PHAC indicated that my FOI resulted in a “No Records Exist”.
51. Christine Smith claimed that the gold standard to determine the presence of intact “virus” in patient samples is visible “cytopathic effects” on cells in a cell culture.

52. This was an unscientific, illogical claim based on circular reasoning (“if A then B; B therefore A”; “if a virus is present, cytopathic effects will be observed; cytopathic effects were observed therefore a virus is present” – which is akin to “if Santa visits there will be presents under the tree; there are presents under the tree therefore Santa was here”).
53. Christine Smith also stated that “in the case of SARS-COV-2 isolation” kidney epithelial cells extracted from an African green monkey also known as “Vero cells”, combined with minimal essential medium (MEM), were used because they are essential to support viral replication and cell growth.
54. This was an irrational, illogical and nonsensical claim to make about an alleged “virus” that is purported to infect people and not the kidneys of African green monkeys.
55. This FOI response indicated a complete lack of scientific evidence for the existence of “SARS-COV-2” or the purported “coronavirus disease” aka “COVID-19” at the Public Health Agency of Canada.
56. This FOI response also indicates negligence and incompetence at the Public Health Agency of Canada - unless the purpose of PHAC is to engage in scientific fraud and contribute to widespread fear and harm.
57. In the revised response from PHAC, Christine Smith also claimed that “PCR further confirms that intact virus is present”.
58. This would be impossible even if the alleged “virus” had been shown to exist because even under the most rigorous conditions “PCR tests” could only provide indirect evidence of the presence of the tiny “genetic sequence” targeted by the test, not an intact “virus” or even a full length “genome”.

59. In a letter labelled “PHAC-A-2020-000393 / TTL” and dated June 23, 2021 in response to my second FOI to the Public Health Agency of Canada, Andrea Burrows of the Access to Information and Privacy Division indicated that they were unable to locate any records that describe purification of the alleged alpha/UK variant from any sample of bodily fluid/tissue taken from a patient.
60. Andrea’s exact words were “Having completed a thorough search, we regret to inform you that we were unable to locate any records responsive to your request”.
61. Andrea also repeated the earlier illogical claims that Christine Smith had made.
62. This further demonstrated the complete lack of scientific evidence at PHAC.
63. Other Canadian institutions that responded to my FOIs but failed to provide or cite any record matching my request include but are not limited to: Health Canada (A-2020-000208/BH), National Research Council of Canada (A2020-0010), Royal Canadian Mounted Police (A-2021-08921, A-2021-09261), Patented Medicine Prices Review Board (A-2021-09261 / JG), the Ontario Ministry of Health (A-2020-00064 / RK, A-2021-00236 / CG), Public Health Ontario also known as Ontario Agency for Health Protection and Promotion (2020-08), University Health Network (2021-011), Alberta Health Minister’s Office and The Office of the Chief Medical Officer (2021-G-0658), Alberta Premier’s Office (EC000-2021-G-102), Ontario Ministry of the Solicitor General which includes the Ontario Provincial Police (SOLGEN-A-2021-05173), the Kingston, Frontenac, Lennox and Addington Public Health unit - while Kieran Moore who now acts as Chief Medical Officer of Health for Ontario was still acting as Medical Officer of Health (M001-21), Dalhousie University (FOIPOP-2021-486), University of Waterloo (UW21-22), University of Ottawa (A2021-

- 13), and all 5 of the Canadian institutions where researchers claimed to have “isolated” the alleged “SARS-COV-2” - which includes the Vaccine and infectious Disease Organization-international Vaccine Centre also known as ViDO- interVac at University of Saskatchewan (2020-006), University of Toronto (on June 2, 2020 Lindsay G. Mills acting as Coordinator, Freedom of Information and Protection of Privacy Office advised that my request would be transferred to Sunnybrook Health Sciences Centre and did not provide a reference number; on July 15, 2020 Jeffrey Cutler acting as Privacy and Freedom of Information Coordinator at Sunnybrook advised me that no responsive records were identified at the University of Toronto), McMaster University (2020-GR-010), Mount Sinai Hospital aka Sinai Health (# 20-03) and Sunnybrook Health Sciences Centre (2020-0004).
64. Regarding Health Canada specifically, on June 11th, 2020 at 11:42 AM Barbara Haase, acting as Senior ATiP Analyst, Access to information and Privacy, stated in an email to me labelled “A-2020-000208/BH” that Health Canada would not typically evaluate the type of information I had sought.
65. On June 23, 2020, in another email labelled “A-2020-000208/BH”, Barbara Haase told me that Health Canada’s role is only to review evidence provided by sponsors in order to make regulatory decisions to approve products and authorize clinical trials and that I may wish to contact the sponsors of clinical trials and/or companies in order to get the information I was seeking.
66. This indicated a complete lack of scientific evidence of the alleged “SARS-COV-2” and “COVID-19” at Health Canada.
67. Health Canada’s response also indicated negligence and incompetence - unless the purpose of Health Canada is to engage in scientific fraud and contribute to widespread fear and harm.

68. Mount Sinai Hospital (Toronto) is one of the institutions whose researchers claimed to have jointly “isolated SARS-COV-2” along with researchers from other Canadian institutions.
69. In a response letter from Jesstina McFadden acting as Director, Privacy and Information Access (Interim), dated August 24, 2020 and labelled “Freedom of Information Request # 20-03”, Jesstina stated that she had engaged with “experts at Sinai Health” and that the “experts” had told her that isolation/purification is not possible for any “virus” to their knowledge and that it is not within the scope of current scientific processes.
70. This indicated a complete lack of scientific “SARS-COV-2” or “COVID-19” evidence at Mount Sinai Hospital and suggests that virology is wholly pseudoscientific.
71. Jesstina McFadden’s response also indicated negligence and incompetence - unless the purpose of research at Mount Sinai Hospital is to engage in scientific fraud and contribute to widespread fear and harm.
72. In another letter dated September 18, 2020 and labelled “Freedom of Information Request # 20-03”, Jesstina told me that she had engaged again with “experts at Sinai Health” and that they had told her again that isolation/purification of “viruses” is outside the scope of current scientific processes.
73. This response from Mount Sinai Hospital in Toronto highlights the absurdity of virology with “experts” claiming to know for a fact that specific submicroscopic particles exist in abundance in “hosts”, have been characterized and studied scientifically, can be tested for and prevented with “vaccines”, and are a threat to humanity, but also that no one has ever found these purported particles at

- their alleged locations and purified them, even though 1) other particles the same size or smaller are purportedly purified and 2) pure samples are necessary in order for valid sequencing, characterization and scientific investigation to take place.
74. Numerous people have provided me with additional documents that appear to me to be legitimate freedom of information responses from additional Canadian health and science institutions, in response to the same, or similar, FOIs for records that describe purification of the alleged “SARS-COV-2”.
75. In most cases I was provided the original, un-redacted communications and I redacted the name of the man/woman who filed the FOI in order to protect their privacy in the cases where the man/woman wanted their name redacted.
76. In every instance the institution failed to provide or cite even 1 record that describes purification of the alleged “SARS-COV-2” from a patient sample, by anyone, anywhere, ever, let alone proof of “its” existence.
77. These Canadian institutions include but are not limited to Health Canada (2021-000768 / CS, A-2021-000719 / CS), the Public Health Agency of Canada (A-2021-000381), Canadian Institutes of Health Research (A-2020-0029), Natural Sciences and Engineering Research Council of Canada (A-2020-00029), Institut National de Sante Publique du Quebec (6410/2020-58, 6410/2021-80), Ministry of Health in British Columbia regarding the alleged “B.1.1.7” aka “Alpha” aka “UK” variant (292-30/HTH-2020-07437), British Columbia Centre for Disease Control (PHSA F21-0098), British Columbia Provincial Health Services Authority (PHSA F20-0844, PHSA F20-0855), Vancouver Coastal Health Authority regarding the alleged Alpha variant (2020-F-183), Newfoundland Labrador Department of Health and

Community Services (COR/2021/140051), Department/Ministry of Health in New Brunswick (April 27, 2021 response from “K. Dorothy Shephard, Minister”, no reference number provided), and McGill University (October 23, 2020 response from “Edyta Rogowska, Secretary-General”, no reference number provided).

78. In total I have in my possession and have made publicly available on my website FOI responses from 53 Canadian institutions, all of which have failed to provide or cite even 1 record of the alleged “SARS-COV-2” being found in and purified from any patient sample.
79. I also filed FOIs to institutions outside of Canada for records that describe purification of the alleged “SARS-COV-2”.
80. I received responses from numerous institutions outside of Canada, including but not limited to: the U.S. Centers for Disease Control and Prevention jointly with the U.S. Agency for Toxic Substances and Disease Registry (“CDC” and “ATSDR”) (#21-01076-FOIA, #21-01986-FOIA), the U.S. Department of Health and Human Services (2022-00537-FOIA-PHS), the U.S. National institute for Allergy and infectious Diseases (Case No. 56595), the U.S. Food and Drug Administration (January 3, 2022 response from Sarah B. Kotler, J.d., Director, Division of Freedom of Information, no reference number provided), the U.S. Department of Labor / Occupational Safety and Health Administration (2022-F-01464), Imperial College London (IMPFOI-21-151), the Norwegian Directorate of Health (April 25, 2021 response from Torunn Janbu, Department Director, Department of Specialist Health Services, Quality and Course Division, no reference number provided), the University of Western Australia (F21/1125), the University of New South Wales in Australia – workplace of John Shine who acts as President of the Australian Academy of Science (ND7149), UK’s Metropolitan Police

(01/FOI/22/023689), London Mayor's Office for Policing And Crime ("FOI response 445 Christine Massey "SARS-COV-2" purification 08.03.2022").

81. All of the institutions outside of Canada also failed to provide or cite even 1 record that describes purification of the alleged "SARS-COV-2" from a sample of bodily fluid, tissue or excrement, by anyone, anywhere, ever.
82. I also filed a FOI with the U.S. Centers for Disease Control and Prevention ("CDC") and the Agency for Toxic Substances and Disease Registry for records ("ATSDR") authored by anyone anywhere ever describing purification of the alleged "SARS-COV-2" from a cell culture.
83. In the CDC's response letter dated November 17, 2022 and labelled "23-00125-FOIA" the CDC failed to provide or cite any such record.
84. I also filed a FOI with the CDC and the U.S. Agency for Toxic Substances and Disease Registry for records authored by anyone anywhere ever that contain scientific proof of the existence of the alleged "SARS-COV-2" or the alleged "HIV" based on valid controlled experiments using purified particles.
85. In the CDC response letters dated October 20 and October 21, 2022 labelled "23-00007-FOIA" they failed to provide or cite any such records.
86. Instead, the CDC's response letter cited web pages and studies purported to contain information about "SARS-COV-2" or "HIV" but not even purporting to describe valid controlled experiments with purified particles.
87. I also filed an FOI with the CDC and the U.S. Agency for Toxic Substances and Disease Registry for records describing the alleged SARS-COV-2 spike protein being found in anyone and purified (as opposed to "recombinant" "spike

- protein” being created in a laboratory and then studied, or studies based on indirect tests).
88. The CDC and the U.S. Agency for Toxic Substances and Disease Registry failed to provide or cite any such records (#23-00196-FOIA, #23-00431-FOIA).
  89. I also filed an FOI with the CDC and the U.S. Agency for Toxic Substances and Disease Registry for studies wherein authors either tested for the alleged “SARS-COV-2 spike protein” in the blood of “vaccinated” and “unvaccinated” people and compared the results to look for indirect evidence that the “mRNA vaccines” actually cause bodies to create the spike protein, or compared “antibody” levels for “vaccinated” people and people injected with other toxins (i.e. other “vaccines”) to assess specificity of the purported “SARS-COV-2 antibodies”.
  90. The CDC and the U.S. Agency for Toxic Substances and Disease Registry failed to provide or cite any such records (#23-00723-FOIA).
  91. I also filed an FOI with the CDC and the U.S. Agency for Toxic Substances and Disease Registry for all records containing specific important details of the so-called “virus isolation” and “whole genome sequencing” procedures employed by CDC agent Jennifer Harcourt and her colleagues in their 2020 study titled "Severe Acute Respiratory Syndrome Coronavirus 2 from Patient with Coronavirus Disease, United States".
  92. The CDC and the U.S. Agency for Toxic Substances and Disease Registry failed to provide or cite any such records and provided irrelevant records instead (#22-00578-FOIA).

93. I also filed an FOI with the CDC and the U.S. Agency for Toxic Substances and Disease Registry for all records wherein the alleged “SARS-COV-2” was purportedly “sequenced” and “negative controls” were implemented by doing the same process with clinical samples taken from people not suspected of having the alleged “virus”.
94. The CDC and the U.S. Agency for Toxic Substances and Disease Registry failed to provide or cite any such records (#23-00036-FOIA).
95. Numerous people have provided me with additional documents that appear to me to be legitimate freedom of information responses from additional health, science and political institutions from outside of Canada, in response to the same, or similar, requests for records that describe purification of the alleged “SARS-COV-2” and/or evidence of “SARS-COV-2” existence and/or causation of “COVID-19”.
96. In most cases I was provided the original, un-redacted communications and I redacted the name of the man/woman who filed the FOI in order to protect their privacy if they wanted it protected.
97. In every instance the institution failed to provide or cite even 1 record that describes the finding and purification of the alleged “SARS-COV-2” from a patient sample, by anyone, anywhere, ever, let alone scientific evidence of “its” existence.
98. These institutions from outside of Canada include but are not limited to: the U.S. Centers for Disease Control and Prevention jointly with the U.S. Agency for Toxic Substances and Disease Registry (#20-02166-FOIA, #21-00464-FOIA, #21-00795-FOIA, #21-02117-FOIA, #21-02310-FOIA), the U.S. National Institutes of Health (57010), the U.S. National Institute of Allergy and Infectious Diseases (56905), the U.S. Department of Health and Human

Services (2021-01625-FOIA-OS), New York State Department of Health (#21-02-073), Arizona Department of Health Services ("Response-August 16, 2021 Public Records Request"), Arkansas Department of Health (August 9, 2021 response from Reginald A. Rogers, Deputy General Counsel, no file number), California Department of Public Health (#P015815-051222, #P018643-052823), Commonwealth of Massachusetts Department of Health (BIDLS-2021-140, BIDLS-2021-221), Commonwealth of Virginia Department of General Services (September 2, 2021 response from Dena Potter, Director of Communications, no reference number), Florida Department of Health (P073269-100421), Michigan Department of Health and Human Services (#H012477-080421), Oregon Health Authority (2022-0033, and a March 30, 2021 FOI response from Jeanne Windham, Public Records and Internal Litigation Process Coordinator), Oregon Health and Science University (August 26, 2021 response from Reba Kuske, OHSU Public Records Coordinator, no file number), Pennsylvania Department of Health (DOH-RTKL-COV-150-2021, Washington DC Department of Health (2021-FOIA-07248), University of Illinois (22-226), Illinois' Officer of the Governor (#2021-268), Clemson University South Carolina (October 23, 2021 response from Robert W. Wilkins, Assistant General Counsel, no file number), Wisconsin's Governor and Department of Health Services (September 24, 2021 response from Stephanie Hunnicutt, Paralegal, OFFICE OF LEGAL COUNSEL, no file number), Israel's Ministry of Health (responses to Amit Sade late 2020 - early 2023), New Zealand's Institute of Environmental Science and Research (March 9, 2021, August 26, 2021, July 19 and 22, 2022 and August 17, 2022 responses from Jill Vintiner, Joint General Manager Health and Environment Group – Health, no file numbers), New Zealand's ("NZ") Ministry of Health (H2022007956, H2022009478, H202110807, H202005599, H202007576, H202102878), NZ Prime Minister Jacinda Ardern's Office (PMO 2021-053), New Zealand's Department of the Prime Minister & Cabinet (OIA-2020/21-0182), New

Zealand's Ministry of Justice (OIA 92901), New Zealand Associate Minister of Health Jenny Salesa (20-317), New Zealand Associate Minister of Health Julie Anne Genter (undated response to October 15, 2020 FOI), New Zealand Associate Minister of Health Peeni Henare (H202007852), New Zealand Associate Minister of Health Ayesha Verrall (AVOIA102), New Zealand Department of Internal Affairs (April 29, 2022 response from Michelle Reed, Lead Advisor Official Correspondence), New Zealand's Minister of Internal Affairs (May 3, 2022 response from Jan Tinetti, no file number), New Zealand's Defence Force (OIA-2021-4275), New Zealand's University of Auckland (August 9, 2022 response from Landon Watt, Legal Advisor, no file number; September 9, 17 and 18, 2020 responses from Rebecca Ewert, General Counsel, no file number), New Zealand's University of Waikato (October 13, 2021 and August 1, 2022 responses from Jim Mercer, Chief Operating Officer, no file numbers), New Zealand's University of Otago where researchers claimed to have "isolated SARS-COV-2" (September 22, 2021, June 22, 2022, August 3, 2022 responses from Kelsey Kennard, Official Information and Compliance Coordinator, no file numbers; October 6, 2020 response from Chris Stoddard, Registrar and Secretary to the Council, no file number; March 30, 2021 response from Mayhaka Mendis, Manager, Policy and Compliance, Office of the Registrar, no file number), New Zealand's University of Canterbury (22.45), New Zealand's Ministry of Business, Innovation and Employment (DOIA 2223-0137), New Zealand's Serious Fraud Office (CON0010004), New Zealand's Security Intelligence Service (January 28, 2022, Rebecca Kitteridge, Director-General of Security, no file number), New Zealand's Government Communications Security Bureau (January 28, 2022 response from Andrew Hampton, Director-General, no file number), New Zealand Police (IR-01-21-30354), Australia's Department of Health (FOI 1937, FOI 2645, FOI 3054), Australia's Peter Doherty Institute for Infection and Immunity where researchers claimed to have "isolated SARS-COV-2"

(September 29, 2020 response from Sharon Lewin AO, FRACP, PhD, FAAHMS Director, no file number), “Australia’s national science research agency” the Commonwealth Scientific and Industrial Research Organisation (FOI2022/37, FOI 2020/50, FOI2021/13, FOI2021/42, FOI2022/1), Australia's Hon Greg Hunt MP Minister for Health and Aged Care (MC21-035712), Australian's Department of Health and Aged Care (FOI-3867), Government of the Australian Capital Territory / Canberra Health Services (FOI21-10 and March 19, 2021 response from Bernadette McDonald, Chief Executive Officer, no file number), New South Wales Ministry of Health (GIPA21/60), South Australia Minister for Health and Wellbeing (MHW-H21-1039), Western Australia Minister & Department of Health (FOI 1937), Australia's Northern Territory Department of Health (FOI2023/254), Argentina’s National Administration of Laboratories and Health institutes "Dr. Carlos Malbrán" (NO-2021-110689800-APN-DNSPP#MS), Argentina’s Ministry of Health (“respuestas\_EX-2021-39668649-APN-DD#MS Acceso a la Información Pública – DAVEREDE, Ana María”), Brazil’s Health Regulatory Agency Anvisa (25072.018642/2021-85), Brazil’s Ministry of Health (25072.019256/2021-19), the Czech Republic’s Univerzita Karlova (UKRUK/68296/2021), the Czech Republic’s Ministry of Health (MZDR 55403/2020-11/MIN/KAN), Denmark’s Statens Serum institut (22/03077, 20/08162), Denmark’s Sundhedsstyrelsen (Case no. 04-0100-869), Royal Norwegian Ministry of Health and Cares Services and subordinate agency the Directorate of Health (January 13, 2021 response from Med vennlig hilsen), Finland’s Institute for Health and Welfare “THL” (THL / 4635 / 3.10.00 / 2021 and March 2022 response from Tuuli Karppinen, Lawyer, Department of Health and Welfare), National Institute of infectious Diseases “Lazzaro Spallanzani” in Italy where researchers claimed to have “isolated SARS- COV-2” (June 21, 2021 response from Dr. Maria Rosaria Capobianchi to Dr. Fabio Franchi), Lithuania’s National Public Health Laboratory (September 17, 2021 response from Rosita Marija Balčienė, acting Director), the

Netherlands' Ministry of Health, Welfare and Sport (April 26, 2021 2350619-1007570-WJZ and July 2, 2020 1712361-207520-WJZ responses and March 15, 2022 3334863-1026144-WJZ), the Philippines' Research Institute for Tropical Medicine (August 17, 2021 response from "CELIA C. CARLOS, Director", no file number), Spain's Ministry of Health (001-053660, 001-059144), India's Council of Medical Research where researchers claimed to have "isolated SARS-COV-2" (INCMR/R/T/21/01307, appeal INCMR/A/E/21/00228 and INCMR/R/E/21/01028, NIOVP/R/E/21/00083, NIOVP/R/E/21/00038, INCMR/R/E/21/00508, INCMR/R/E/21/00110, NIOVP/R/E/21/00011 NIOVP/R/E/21/00085 and N1OVP/R/T/21/00005 and NIOVP/R/E/21/00038 and MOHFW/R/E/21/01906 and INCMR/R/T/21/00241 and No.1/8/2005/rti/Admn./XVII-150g), the United Kingdom's ("UK") Department of Health and Social Care (FOI-1247803, FOI-1243364, FOI-1266157, FOI-1360708, FOI-1282095), UK Cabinet Office (FOI2020/10121, FOI2021/23894), UK Government Office for Science (GOS-COV-110921-0247, GOS-COV-040920-0068, GOS-COV-010122-0296), UK's House of Commons (F20-353), UK House of Lords (FOI 3464, FOI 3462), UK Medicines & Healthcare Products Regulatory Agency (FOI 20/404), UK Health Security Agency (06/06/22/HD/319 and Case ref: 1409 and 13/06/22/HD/340), Britain's Health and Safety Executive (202010343), University of Warwick (F352.20-21), Public Health England (04/09/kl/1184, 25/07/hf/878, 25/07/hf/878, 28/07/cs/904, 11/08/21/ag/1028, 18/09/21/ag/1345, 11/09/21/ag/1287), the Republic of Colombia's Ministry of Health and Social Protection (202142400025922), the Republic of Ireland's National Virus Reference Laboratory at University College Dublin (FOI12\_1\_544 Internal Review, FOI 12\_1\_988), and Republic of Ireland's Health Service Executive (C839/20), the Republic of Serbia's Ministry of Health (MOH number 500-01-1144 / 2021-16), Public Health Scotland (2020-000133, 2020-000158, 2021-000848), Scottish Directorate for COVID Public Health (202200277454), Public Health Wales (2020 FOI 532, 2020 FOI

453), Slovenia's Department of Health (09D-77/2020/2), Slovenia's Faculty of Medicine and Institute of Microbiology and Immunology at the University of Ljubljana (074-4/2020-9), Slovenia's University Medical Centre Ljubljana (ZDIJZ-2021-20 045-0020/2021/0002), Slovenia's National Laboratory for Health, Environment and Food (161-0-7-IJZ-3/2021), Sweden's Karolinska Institute (October 18, 2021 REFID: KIB0123839), Sweden's Public Health Authority (August 24, 2021 response to John Blaid), the Ministry of Health in the Ukraine (No. 13/216-R/178-R/21), Uruguay's Ministry of Public Health (Ref. Nº 001-3-2902-2021), Uruguay's Clemente Stabile Biological Research Institute (May 25, 2021 response to María Bettina Galo), Uruguay's Faculty of Chemistry at the University of the Republic (UdelaR) (Prof. Dr. Alvaro W. Mombru's response to María Bettina Galo), Switzerland's Federal Office of Public Health (FOPH) (November 2021 response from Lorenz Overhage, MLaw), Switzerland's Institute of Virology and Immunology (IVI) (January 2022 response from Barbara Wieland, Dr. med. vet, PhD), Switzerland's Spiez Laboratory (Federal Department of Defence, Civil Protection and Sports, January 2022 response from Eliane Brogini) and the European Centre for Disease Prevention and Control (DPR-2020-OUT-3176-KEEIKh).

99. Researchers at numerous of these institutions had publicly claimed to have “isolated SARS-COV-2” and/or they worked on the development and/or approval of various “COVID-19” injections/drugs/diagnostic tests and other products.
100. In a letter dated March 1, 2021 and labelled “21-00464-FOIA”, addressed to my colleague Michael S., Roger Andoh, acting as FOIA Officer at the Centers for Disease Control and Prevention (CDC), indicated that a “subject matter expert” at the CDC had offered an excuse for why the CDC has no record of the alleged “SARS-COV-2” being found in and purified from any alleged host.

101. The excuse was that separation of an alleged “virus” from everything else is outside of what is possible in virology because “viruses” needs cells to replicate.
102. This excuse does not make sense because purification does not involve replication and also because if a particle is not able to leave a cell then it is not able to enter another cell or another “host”.
103. This same colleague, Michael S. shared with me the response that he received from the CDC (21-01704-FOIA) to his FOI for records containing specific important details of the so-called “virus isolation” and “whole genome sequencing” procedures employed by CDC agent Jennifer Harcourt and her colleagues in their 2020 study titled "Severe Acute Respiratory Syndrome Coronavirus 2 from Patient with Coronavirus Disease, United States".
104. The CDC failed to provide or cite any such records and provided irrelevant records instead.
105. A colleague Louis Stephen shared with me the response that he received from the CDC to his FOI for records containing proof of the existence of the alleged “SARS-COV-2 spike protein” or proof of claims regarding so-called “SARS-COV-2 antibodies” wherein the CDC failed to provide or cite any such records (23-00587-FOIA).
106. Steven Gardner forwarded to me the FOI response that he received dated February 18, 2021 from Debbie Hay acting as FOI Coordinator for the Isle of Man’s Department of Health and Social Care stating that “Regarding SARS-CoV-2 the virus is not isolated”, “Regarding SARS-CoV-2 it is not purified”,

“The amplification is 45 cycles” for the Isle’s “PCR tests”.

107. Debbie Hay also illogically claimed that “Yes, the sequence in the PCR test is SARsCov2” despite the fact that the alleged “SARS-COV-2” is not claimed to be a mere tiny sequence targeted by a “PCR test” (ref. 1646813).
108. This response showed that the Isle of Man’s Department of Health and Social Care had no scientific evidence of “SARS-COV-2” or “COVID-19” whatsoever, let alone a validated test.
109. This response also showed that the Isle of Man’s Department of Health and Social Care didn’t even have a reliable test for detecting the purported sequences targeted by “PCR tests”.
110. Courtenay Adam-Lawrence forwarded to me the FOI responses that he received dated January 19, 2022 from Rebecca Evans acting for the Corporate Services section of the Isle of Man’s Department of Health and Social Care.
111. The response confirmed that the department had no method statement of how the alleged “Omicron” or “Kent” variants of the alleged “SARS-COV-2” were (allegedly) isolated/purified, or records of their alleged whole genome sequences, or records of the test procedures used to identify the alleged variants, or evidence of contagion in men and women, or records of unique sequences obtained from saliva, mucus, blood or urine from a man, woman or animal, or confirmation that the alleged variants were not simply made-up in silico computer models (refs 2161889 and 2161990).
112. This further showed that the Isle of Man’s Department of Health and Social Care had no scientific evidence of “SARS-COV-2” or “COVID-19” whatsoever,

let alone a validated test.

113. Between March 12 and March 14, 2024 I challenged Michelle Haywood, a Member of the Isle of Man House of Keys with an extensive background in “virus” and “vaccine” research, via email to cite valid primary and scientific evidence showing that "SARS-COV-2" exists and causes the nonspecific symptoms that are passed off as "covid-19" symptoms, as well as valid scientific evidence of other alleged "coronaviruses" and contagion.
114. Michelle Haywood responded to me several times but failed to cite any valid, scientific evidence of any alleged “virus” or contagion and instead cited official dogma, images of tiny particles never shown to be a “virus” and a Wikipedia entry and she tried to reverse the burden of proof.
115. All of these records are publicly available on my website and as of August 12, 2024 the collection includes responses from 224 institutions in 40 countries on the topic of “SARS-COV-2” purification and existence, with multiple responses from several of the institutions.
116. The FOI responses described above show that the people working in hundreds of governmental and health/science institutions in over 3 dozen countries have uniformly failed to provide or cite even 1 record that describes purification of the alleged “SARS-COV-2” from a sample of bodily fluid, tissue or excrement taken from a sick patient, by anyone, anywhere on Earth or valid scientific evidence of “its” existence.
117. No one from the World Health Organization responded to my FOI-type query sent to [informationrequest@who.in](mailto:informationrequest@who.in) on February 22, 2022 seeking any records that describe any alleged “SARS-COV-2” being found in the bodily

- fluid/tissue of anyone on Earth and purified, by anyone, anywhere, ever.
118. Someone who prefers to remain anonymous forwarded to me the email they received from the World Health Organization in response to their FOI-type request for any record of the alleged “SARS-COV-2” being found in and purified from any sick person on the planet.
  119. The email dated November 28, 2022, 11:15 am from [informationrequest@who.int](mailto:informationrequest@who.int) was signed "Ethics Team, WHO/DGO/CRE/Ethics Unit" and told the requester to "please find the latest information regarding COVID-19 including research at the WHO homepage (see link)".
  120. The hyperlink provided in the email contains this URL/address:  
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/phsm>.
  121. At the URL/address was an irrelevant webpage about a so-called “global database of public health and social measures applied during the COVID-19 pandemic”.
  122. That URL now automatically redirects to a different URL/address:  
<https://www.who.int/initiatives/who-public-health-and-social-measures-initiative>.
  123. At that URL another irrelevant webpage currently loads that is titled “Public health and social measures during health emergencies” and has a cartoon image of people wearing masks.

124. In 2020, Ron Bublitz provided me with the text and a screenshot of the response he received from Kara M. Harris, MPH Section Chief for Controlled Correspondence and Public Inquiries, Legislative Affairs and Correspondence Management Branch, Office of Communications and Government Relations, National Institute of Allergy and Infectious Diseases (NIAID), National Institutes of Health (U.S.) in response to his May 25, 2020 query about the images purportedly showing “SARS-COV-2” and published by NIAID.
125. Ron had asked “I see that you have released images of the electron microscope view of C19 virus. I would like to know how you are certain that is the virus? How was it isolated? Have you followed Koch's Postulates in order to be completely certain that is the pathogen that causes disease?”
126. Kara M. Harris responded evasively on July 15, 2020 and referred Ron to the aforementioned pseudoscientific study by Jennifer Harcourt et al.
127. On April 10, 2023 I filed an FOI with the U.S. Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry for all studies/reports that they hold that scientifically demonstrate contagion of any respiratory disease.
128. As usual with my FOIs, I asked that if such records are held by the institution and are already publicly available, that I be provided citations so that I may find and access the studies.
129. This FOI was acknowledged several times and given the file number #23-00999 and it was later narrowed to respiratory illnesses claimed to be caused by “coronaviruses” or “influenza viruses”.

130. I followed up with the CDC many times asking how the search was going after several months had passed without a final response, and most of my emails were ignored.
131. On August 16, 2023 “Carolyn Sanchang-Fon Okpewho, CDC/ATSDR Government Information Specialist, Freedom of Information Act Office” told me via email: “This is to notify you that a search is currently being conducted by the National Center for Immunization and Respiratory Diseases (NCIRD) staff for the documents you requested. When the search is completed, a thorough document review will be conducted by the CDC FOIA staff, and all releasable records will be provided. Please be assured, however, that a response will be sent to you immediately when ready.”
132. On October 14, 2023 I had not received any further communications from the CDC/ATSDR and so I emailed them saying “If I don't receive records by 5pm on Tuesday October 17th, I'll be publishing an article about this FOI request and the long delay (6 months already) in getting a response.”
133. I waited until November 26, 2023 and published an article about the non-response from the CDC and ATSDR, having never received any further communication from the CDC or ATSDR about the request.
134. To this day, no one from the CDC or ATSDR has ever followed up with me about this request (#23-00999); no records or citations have ever been provided.
135. I firmly believe this is because there is no scientific evidence of contagion of any respiratory illness.

136. In December 2023 I filed an FOI with CDC and ATSDR for all studies/reports held that scientifically demonstrate contagion of any symptom/illness that is claimed by the CDC to be caused by the alleged: "Rubella virus" (German measles virus), "measles virus", "chickenpox virus", "monkeypox virus", or "smallpox virus".
137. As usual, I asked that if such records are held by the institution and are already publicly available, that I be provided citations so that I may find and access the studies.
138. This request was given the file number #24-00277-FOIA.
139. On January 18, 2024, Roger Andoh acting as CDC/ATSDR FOIA Officer, Office of the Chief Operating Officer provided his final response letter citing my request but making no further mention of contagion.
140. In Roger's letter no specific studies or reports were cited and instead he gave me hyperlinks to web pages called "Pink Books" that did not cite relevant studies and that no longer load at the URLs.
141. Roger claimed that the "Pink Books" provide physicians, nurses, nurse practitioners, physician assistants, pharmacists, and other healthcare professionals "with the most comprehensive information on routinely used vaccines and the diseases they prevent".
142. Roger also referred me to 3 additional web pages with pictures of sick children and babies that did not reference any studies at all.

143. On January 18, 2024 I wrote back to Roger and asked for a response to my actual request but Roger never responded.
144. Someone sent me the documentation of a request they had filed with India's Council of Medical Research (INCMR/R/E/21/00508) for research material proving that "COVID-19" is contagious.
145. Dr Nivedita Gupta told this person to search google and that "there are hundreds of such publications available".
146. On appeal, "Dr Samiran Panda<sup>1</sup>" told this person that the original response was "in order and satisfactory" and gave them a link to a W.H.O. webpage (<https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-how-is-it-transmied>) that does not contain the requested material.
147. Ana Maria Daverede forwarded to me the June 18, 2021 response she received from Argentina's Ministry of Health wherein it was admitted that a "PCR test" used to diagnose "COVID-19" "does not serve to discriminate carriage, infection, disease, contagiousness, transmissibility..."
148. Colleagues of mine filed FOIs with the CDC and various other institutions, for any record that describes isolation/purification of the alleged 2003 "SARS virus" or any alleged common cold coronavirus from a sample taken from a sick patient, and in each case the institution failed to provide or cite any such record authored by anyone, anywhere on Earth, ever.
149. One such example is the CDC's response dated December 30, 2020 to FOI request #21-00394-FOIA.

150. I have filed many FOIs with the CDC for records regarding purification of many other specific alleged “viruses”, including but not limited to: any alleged “virus” that is allegedly addressed by a so-called “vaccine” on the CDC’s “vaccination” schedule (#22-00402-FOIA), influenza virus (#22-00036-FOIA), avian influenza virus (#22-01384-FOIA), Ebola virus (#22-00390-FOIA), Epstein-Barr virus (#22-02243-FOIA), Hepatitis C virus (#24-01072-FOIA), herpes type 1 or 2 virus (#23-00840-FOIA), HIV (#23-00007-FOIA), HPV (#22-00117-FOIA), Marburg virus (#22-00618-FOIA), MERS virus (#21-01213-FOIA), measles virus (#23-00464-FOIA), monkeypox virus (#22-01542-FOIA), nipah virus (#22-00185-FOIA), polio virus (#21-01016-FOIA), rabies virus (#22-00417-FOIA), smallpox virus (#22-00343-FOIA), West Nile virus (#21-01616-FOIA), zika virus (#23-00386-FOIA), respiratory syncytial virus (#23-00263-FOIA), rubella virus, adenovirus (#22-00399-FOIA), yellow fever virus (#24-00144-FOIA), cowpox virus (#24-00653-FOIA), dengue virus (#23-01463-FOIA), encephalitis virus (#24-00485-FOIA), any simian virus (#23-01285-FOIA), lentivirus (#22-02065-FOIA), Alaskapox virus (#24-00653-FOIA), Crimean-Congo hemorrhagic fever virus or any alleged Bunyavirus (#23-01452-FOIA), canine parvovirus (#24-00798-FOIA), XMRV (#21-00925-FOIA).
151. In every instance the CDC failed to provide or cite any such record authored by anyone, anywhere on Earth, ever.
152. In the CDC’s March 11, 2022 response to my FOI for any alleged virus that is allegedly addressed by a so-called “vaccine” on the CDC’s “vaccination” schedule (#22-00402-FOIA), Roger Andoh acting as CDC/ATSDR FOIA Officer, Office of the Chief Operating Officer provided only 5 studies, all on the topic of the alleged “rotavirus”, none on any other alleged viruses, and none of the studies he provided matched my request.

153. In some of the FOIs listed above I also asked explicitly for records containing scientific evidence of the existence of the alleged virus, in addition to records describing purification and no such records were provided or cited.
154. In some FOI responses, I and others have been provided or referred to specific studies or web pages but in no case has the study or web page matched the request and none of the web pages contained references to studies matching the requests.
155. On February 4, 2021 Australia's Commonwealth Scientific and Industrial Research Organisation ("CSIRO", "Australia's national science research agency") responded to FOI request FOI2021/2 for records describing the isolation/purification of any alleged "virus" allegedly covered by Australia's National Immunization Program Schedule.
156. The response from CSIRO was that "despite an extensive search, CSIRO has been unable to identify any document relevant to your request".
157. On May 23, 2022, a FOI response from New Zealand's Ministry of Health (ref: H202205674) stated that the Ministry did not hold any record of any alleged "virus" associated with any "vaccine" on the NZ "immunization" schedule having been found in and purified from the bodily fluid/tissue/excrement of any diseased human.
158. On December 17, 2020, Jill Vintiner acting for NZ's crown research institute, the Institute of Environmental Science and Research, responded to an FOI (no file number provided) for records of any alleged "virus" on the NZ "immunization" schedule having been found in and isolated ("in the everyday sense of the word") from any patient sample by anyone, ever, by

conflating “isolation” with “culturing” and failing to provide or cite any responsive records.

159. On January 21, 2021 Jill Vintiner acting for NZ’s Institute of Environmental Science and Research responded again and this time referenced the oxymoronic notion of “a pure viral growth cultured in a broth of living cells” and admitted that “Using the definition of ‘isolation’ that you refer to in your requests, ESR does not hold any records describing ‘isolation’ of viruses on the New Zealand vaccination schedule, SARS-CoV-1 or vaccines.”
160. Colleagues Danni and Tonny in Denmark provided me with documentation from the FOIs that they filed for records of any “virus” that “experts” there recommend children to be “vaccinated” against being isolated/purified.
161. Danni and Tonny described the responses in English as follows: “A doctor from Sundhedsstyrelsen says they don’t hold scientific evidence. They base the recommendations on the fact that they’ve been vaccinating children for decades. And a lawyer from Statens Serum Institut searched the journal database and came up with nothing. He could not find anything matching my request. I had used the template from one of your FOIs on SARS COV 2.”
162. The response letter from Statens Serum Institut includes what appears to be a file number: “22/03077”.
163. I filed an FOI with the Public Health Agency of Canada for any record that describes isolation/purification of any alleged “virus” that is alleged to infect humans, and the response from Andrea Burrows dated December 20, 2021 and labelled “PHAC-A-2021-000501 / CS” did not include any responsive

records or citations of responsive records and was nonsensical.

164. Andrea Burrows of PHAC implied that my FOI excluded records wherein any substance was combined with the patient sample when in fact I had only excluded records involving the addition of sources of genetic material.

165. Andrea Burrows of PHAC then used a logical fallacy known as “begging the question”, referencing detection of “genetic” material that is labelled “viral” in origin based on unscientific, illogical assumption and not on logical, scientific evidence.

166. On June 11, 2024, Roger Andoh acting as CDC/ATSDR FOIA Officer, Office of the Chief Operating Officer confessed to me in a FOI response (#24-01072-FOIA) that the agencies have no studies/reports that scientifically prove/provide evidence of the existence of any alleged “hepatitis C virus”, or that describe purification of particles that are alleged to be said virus directly from bodily fluid, tissue or excrement of “hosts”, or that describe the purported genome of this alleged virus being found intact as opposed to fabricated in silico aka modelled on a computer, or that scientifically demonstrate contagion of symptom(s) allegedly caused by this purported virus.

167. On February 29, 2024, Roger Andoh acting as CDC/ATSDR FOIA Officer, Office of the Chief Operating Officer confessed to me in a FOI response (#24-00653-FOIA) that the agencies have no studies/reports that scientifically prove/provide evidence of the existence of any alleged “cowpox virus” or “Alaskapox virus”, or that describe purification of particles that are alleged to be either of said viruses directly from bodily fluid, tissue or excrement of “hosts”, or that scientifically demonstrate contagion of symptom(s) allegedly

caused by either purported virus.

168. On July 29, 2024, Sarah Kotler ("J.D.") acting as Director, Division of Freedom of Information for the US Food and Drug Administration (FDA) confessed to me in a FOI response (FDA FOIA 2024-6486) that the institution has no studies/reports that scientifically prove/provide evidence of the existence of any alleged "avian influenza virus", or that describe purification of particles that are alleged to be said virus directly from bodily fluid, tissue or excrement of "hosts", or that describe the purported genome of this alleged virus being found intact as opposed to fabricated in silico aka modelled on a computer, or that scientifically demonstrate contagion of symptom(s) allegedly caused by this purported virus.
169. On May 3, 2024 Roger Andoh acting as FOIA Officer in the Office of the Chief Operating Officer confessed (24-00798-FOIA) that the U.S. Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry have no studies/reports that scientifically prove/provide evidence of the existence of the alleged "canine parvovirus" (showing that the alleged particles exist and cause the illness/symptoms that they are alleged to cause), or even records that describe purification of particles that are alleged to be "canine parvoviruses" directly from bodily fluid/tissue/excrement of alleged "hosts" with purification confirmed via EM imaging, or records that demonstrate contagion of the disease / symptoms that are allegedly caused by said alleged "virus".
170. On July 9, 2024, Yashoda Maliah acting as Junior Analyst, Access to Information and Privacy for Canadian Food Inspection Agency emailed me a nonsensical letter (A-2024-00028/YM) "digitally signed by Joannis, Helene" in response to my FOI for studies held by the institution authored by

anyone, anywhere that scientifically prove/provide evidence of the existence of “H5N1”, studies that describe purification of particles that are alleged to be “H5N1” directly from bodily fluid/tissue/excrement of “hosts”, studies wherein the purported “genome” of this alleged “virus” was found intact as opposed to fabricated ‘in silico’ aka a computer model and studies that scientifically demonstrate contagion of the symptoms allegedly caused by said purported “virus”.

171. Attached with the response letter was a 4 page “Release Package” that contained zero studies, zero sentences from any studies and zero complete citations of any published studies.
172. The “Release Package” provided the titles of 2 purported studies, neither of which could I find listed on Pubmed, Sci-Hub, google, Yandex or the website of the relevant journal mentioned.
173. The response letter and “Release Package” provided no information regarding purported publication dates, journal volumes/issues, DOIs or URLs and I do not believe that these purported studies had been published and wonder whether they even exist.
174. The titles of the 2 purported studies suggest that they are not responsive to my request even if they do exist.
175. On May 10, 2023, Emily Blinn acting as Team Leader, Access to Information and Privacy for the Canadian Food Inspection Agency confessed that the institution has no scientific proof of the existence of any alleged “virus” that they claim has ever affected livestock in Canada (A-2022-00201 / MD).

176. This confession from the Canadian Food Inspection Agency is despite their role in the mass culling of countless animals over the years based on claims of “viral infections”.
177. I had numerous communications with Ricardo Maarman, a gentleman in the Republic of South Africa who challenged the government there via FOIs to provide evidence justifying their devastating “COVID-19” lockdown.
178. Ricardo also initiated an action in the High Court of South Africa (Western Cape Division “CASE NO: 5-852/21”) asking the government to provide proof of the alleged “SARS-COV-2” since it was the cited premise for the lockdown, and he asked for the matter to be treated as urgent.
179. According to the responding affidavit of Professor Andrian J Puren on behalf of The National Department of Health, the respondents claimed that “the urgency in this matter appears to be self-created”.
180. Professor Puren cited no scientific evidence for the existence of the purported “virus”.
181. Professor Puren expressed logical fallacies including appeals to authority.
182. Professor Puren made false and illogical statements such as “The nature of the SARS-COV-2 has been established not only through RT-PCR in sequencing but also in electron microscopy.”
183. Professor Puren cited Koch’s Postulates and the Bradford-Hill criteria, but cited no valid evidence that the alleged “SARS-COV-2” particle had even been discovered let alone fulfilled Koch’s Postulates or the Bradford-Hill criteria.
184. “NZIWENI, AJ” ruled that “The Applicant has not made a case for urgency. Consequently the matter is struck off the role.”

185. Since May 2020, hundreds of governmental and health/science institutions in 40 countries have all failed when challenged to provide or cite any study or report published by anyone, anywhere on Earth, that describes the alleged “SARS-COV-2” being isolated/purified directly from the bodily fluids of a sick man or woman, and then characterized and sequenced and scientifically shown to cause disease in people or animals.
186. Hundreds of governments and health/science institutions have shown that they disregard the scientific method when it comes to alleged “viruses” and are unable to demonstrate the existence of the alleged “SARS-COV-2” or any alleged “variant”.
187. Hundreds of governments and health/science institutions have shown that they cannot even demonstrate that alleged “viral genomes” have any existence beyond computer models and imaginations.
188. Hundreds of governments and health/science institutions have demonstrated that they are unable to scientifically demonstrate that the alleged “SARS-COV-2” or any alleged “variant” is the cause of any illness, new or old.
189. Hundreds of governments and health/science institutions have demonstrated that they have absolutely no “COVID-19” scientific evidence whatsoever.
190. These failures/inabilities to provide or cite any scientific evidence are consistent with the illogical, irrational, pseudoscientific methods described by virologists in all of the “virus isolation/sequencing” publications that I

have read.

191. All of the above-mentioned FOI requests and responses and dozens more failed “virus”-related FOI responses and court documents from the Republic of South Africa are publicly available on my website at the following URLs:

<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-around-the-world-have-no-record-of-sars-cov-2-isolation-purification/>

<https://www.fluoridefreepeel.ca/fois-reveal-that-health-science-institutions-have-no-record-of-any-virus-having-been-isolated-purified-virology-isnt-a-science/>

<https://www.fluoridefreepeel.ca/freedom-of-information-responses-re-contagion/>.

192. Colleagues and I have also filed FOIs with various institutions for records containing details regarding the complete lack of controls and/or inadequate “controls” used by virologists in specific studies, the hypotheses tested by virologists in specific studies, the construction of in silico “genomes” in specific studies, etc. and met with what appears to me bizarre excuses and obfuscation.

193. These institutions include but are not limited to: the CDC (#21-01704-FOI, #22-00578-FOIA, #23-00007-FOIA, #23-00036-FOIA), the UK Health Security Agency (25/01/2022/ag/2334), the University of Toronto (#22-0003), New Zealand’s crown research corporation known as the Institute of Environmental Science and Research (the May 23, 2022 response did not

include a reference number), New Zealand's University of Otago (no reference numbers were provided to the requester in the June 2022 or August 3, 2022 responses), Australia's Commonwealth Scientific and Industrial Research Organisation ("Australia's national science research agency") (FOI2022/1).

194. Marvin Haberland of Germany shared with me the February 2022 response he received from Eugene Toh acting as Information Regulation Officer for The University of Melbourne in response to an FOI request for records from the Peter Doherty Institute for Infection and Immunity containing details of any "control" experiments implemented by Caly et al. in their study titled 'Isolation and rapid sharing of the 2019 novel coronavirus (SARS-CoV-2) from the first patient diagnosed with COVID-19 in Australia'.
195. This study by Caly et al. was the first study from outside China wherein researchers claimed to have "isolated SARS-COV-2".
196. On February 22, 2022, Eugene Toh advised Marvin that Caly et al. had not conducted a negative control for their (faux) "sequencing" procedure (no reference number was provided to Marvin).
197. Marvin publicly announced his intention to use this admission from the Peter Doherty Institute for Infection and Immunity as evidence in court to defend against the "COVID-19" tickets he had received for not wearing a face covering.
198. On April 26, 2023, the day that Marvin was scheduled to appear in court in Hamburg with many people attending as witnesses to the proceeding, he was prevented from presenting the evidence by way of a last-minute

- withdrawal of the charges against him.
199. Further details and documentation about Marvin's case can be found via my newsletter of April 26, 2023 at the URL <https://christinemasseyfois.substack.com/p/victory-in-court-virology-indefensible>.
  200. Michael S. emailed Zhengli Shi, the corresponding author of an early "SARS-COV-2" study by Zhou et al. in China, published February 3, 2020, titled "A pneumonia outbreak associated with a new coronavirus of probable bat origin".
  201. Michael S. shared the resulting correspondence with me.
  202. Per the emails, Zhengli Shi admitted to Michael in writing that Zhou et al. had used double the amount of anti-biotic and anti-fungal in their experimental group as compared to their "control" group during one phase of their pseudoscientific experiment that did not even have a valid independent variable to study.
  203. These FOIs and emails with study authors regarding "controls" are also freely accessible on my website and they also highlight the absurdity of virology:  
<https://www.fluoridefreepeel.ca/do-virologists-perform-valid-control-experiments-is-virology-a-science/>.
  204. All "COVID-19" tests, diagnoses, statistics, projections, models, analyses, injections, restrictions, requirements, "measures", "counter-measures" and interferences of every kind were and are invalid and ultimately based on

delusion, misconception, misinterpretation, ignorance, incompetence,  
incomplete information and/or intentional fraud.

205. It is clear to me that virologists practice pseudoscience and that people acting as so-called "scientists", "public health" officials, politicians and mainstream news reporters have misled people across the world.

206. It is clear to me that immeasurable harm, loss, suffering and damage has occurred as a result of this false "virus"/contagion paradigm.

I affirm that the foregoing is written in good faith and for the benefit of man and is true to the best of my knowledge.

Use of a Notary Public does not stipulate to an election to submit to a jurisdiction.

All rights reserved.

12 day of August, 2024

Christine Masey Deponent

I certify that the deponent has acknowledged that she knows and understands the contents of this affidavit which was signed and affirmed before me at BRAMPTON, ON, CANADA this the 12<sup>th</sup> day of August 2024.

Shahid  
Notary Public

AUG 12 2024

**SHAHID HAMID**  
Barrister, Solicitor & Notary Public  
in and for the Province of Ontario.  
My commission is of unlimited duration.  
No legal advice given.

