



April 14, 2020

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1600 PENNSYLVANIA NW
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President Donald J. Trump
The White House
1600 Pennsylvania Ave NW
Washington, DC 20500
202-456-1111

Subject: The Most Difficult Decision of your First Term (1 May 2020)
Reference: My Letter/Contents to First Lady Melania Trump of 23 March 2020

Dear Mr. President:

On this most holy of days among believers, Easter Sunday, I hope this finds you and yours well.

Indeed the context of this letter is my suggestion that you add to your decision criteria the inner source of those currently advising you; their context as merely “experts” is questionable.

We begin with a quote from Mr. Anthony Fauci:



“There will be a challenge (for) the coming Administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease, and we have certainly a large burden of that, but also there will be a surprise outbreak.”

(Please confer with Mr. Fauci for the exact date, approx January 2016.)

“**Surprise outbreak**”?! During the last four years, to the best of my knowledge, no mainstream media news outlet has examined / reviewed this quote with Mr. Fauci.

These types of declarations were also parroted, in the same timeframe, by Mr. Bill Gates, Dr. Zeke Emanuel, and many other vested interests . . . again, as implied by the Fauci quote, these proclamations occurred **prior** to your swearing in as our 45th president.

The following chart is from, ***“What I think COVID-19 Really Is,”*** by Dr. Andrew Kaufman:

	Exosomes	COVID-19
Diameter inside cell	500 nm (MVE)	500 nm
Diameter outside cell	100 nm	100 nm
Receptor	ACE-2	ACE-2
Contains	RNA	RNA
Found in	Bronchoalveolar (lung) fluid	Bronchoalveolar (lung) fluid

It is unlikely that Fauci, Gates, or Emanuel have advised that you confer with Dr. Kaufman. Still surviving YouTube censorship, Kaufman’s video details the genesis of that chart, and what really happened in Wuhan, China. These details have been censored from MSM dissemination; details that I recommend you consider prior to May 1.



It is also unlikely that vested interests . . . have consulted with or advised that ***you*** consult with . . . the many doctors who have been dispensing hydroxychloroquine **with near 100% success**. Dr. Vladimir Zelenko practices in Monroe, New York; about **an hour drive from where you and I were born, New York City; the so-called epicenter of “COVID-19.”**

Dr. Zelenko’s hydroxychloroquine video did not survive YouTube censorship . . . but he was later interviewed by Mr. Rudy Giuliani; that video discusses your actions and remains available.

In the Giuliani interview, Dr. Zelenko explains that his treatments are in the hundreds, but emphasizes that he is merely prescribing dosages and medicines of a **“known safety profile.”**

In contrast to the billions that vested interests have already exacted, Dr. Zelenko’s typical patient billing is \$20.00 In that context the doctor opines, in essence, about the subject of this letter . . . perhaps you should meet with him prior to May 1. In their deeply committed interest to serve New Yorkers, perhaps Mayor Bill de Blasio and Governor Andrew Cuomo would vie to join you.

The True “Surprise Outbreak”?



It is doubtful . . . that the prescribing and dispensing of hydroxychloroquine, zinc and other health-oriented supplements was the “**surprise outbreak**” that Fauci, Gates and Emanuel had anticipated, during their years of vested-interest planning and speeches:

1. Related, it is also doubtful that Governor Gretchen Whitmer has any intention of investigating how many Michigan residents have suffered unnecessarily or died as a result of her politicization of subjects with which she has zero expertise.
2. For example, Whitmer has avoided **Democratic Michigan State Representative Karen Whitsett**, who openly thanked you and hydroxychloroquine for saving her life!
3. But . . . question . . . were the slanders/libels that you endured, regarding everything from travel restrictions to your positive remarks about hydroxychloroquine; viciously criticized by Governor Whitmer, merely “anecdotal”? **Or is there a deeper, more insidious underbelly that is intrinsic to this diatribe?**

The Fauci-Gates Tattoo and ID 2020 versus the US Constitution

Vested interests have mouthpieces declaring to the global population that their sole motivation is to “*protect the health and the welfare of the American people.*” Is that true? Instead should we rely on direct quotes from the vested interests? **On Reddit, Gates openly declared:**

“Eventually we will have some digital certificates to show who has recovered or been tested recently or when we have a vaccine who has received it.”

“We”? Existence of an injectable chemical tattoo was confirmed by MIT News on December 19, 2019, just prior to your “xenophobic” travel restrictions. But that MIT confirmation also confirms that the funding for the chemical version of Huawei came from . . . Bill Gates.

Gates funded **ID 2020**, a global vaccination consortium which pushes “digital identities” for the global population; ID 2020 would “recommend” Gates-funded/patented vaccinations.

Appearances . . . a highly thrifed listing:

1. Enter the Fauci “**surprise outbreak**” precursor all the way back in 2016,
2. The ongoing conscious **and rigorous avoidance** of the fundamentals of rt-PCR test protocols, and the definitions/methodologies/applications declared for such by its inventor, Nobel Prize winner Dr. Kary Mullis,
3. Appearance of the so-called “COVID-19 virus” in late 2019 (which is not testable under rt-PCR protocols (**well-known to Fauci**), and are in-truth most likely exosomes,
4. The deafening silence on the Wuhan-specific analysis of Dr. Andrew Kaufman,
5. The “18 month shut down” demand from Zeke Emanuel proclaimed on CNN, etc.
6. The Gates “*when we have a vaccine*” Reddit quote above, which was parroted by Emanuel in #5 above (and vice-versa!),
7. Vicious, highly motivated attacks **against you** for mentioning **hydroxychloroquine**,
8. The censoring of the good work of Dr. Vladimir Zelenko, there are many others,
9. April 3, 2020 WSJ rant, “*The Coronavirus Pandemic will Forever Alter the World Order,*” by Henry Kissinger of National Security Study Memorandum 200. Focused on “lesser developed countries,” in NSSM-200 he advocated for population control through war, disease, abortion, and famine; in his recent rant he once again demands we submit to his ideas about a “new world order,” now being marketed as the “**post coronavirus order.**”



10. The internal Microsoft meeting focused on ID 2020 **and its edict of global vaccinations** and digital identities, mascaraed as closing an “identity gap”:



11. In contrast to 1 -10, the report **“Montana Physician Dr. Annie Bukacek Discusses How COVID-19 Death Certificates Are Being Manipulated,”** reveals extensive criminal activity. Similar to their previous agenda-driven practice, wherein AIDS was listed as the COD, Fauci and other vested interests have now transferred their ruse to “COVID-19.”



Should “COVID-19” be reported on the death certificate only with a confirmed test?

COVID-19 should be reported on the death certificate for all decedents where the disease caused or is assumed to have caused or contributed to death. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)

Steven Schwartz, PhD
Director – Division of Vital Statistics
National Center for Health Statistics
3311 Toledo Rd | Hyattsville, MD 20782

The image shows a white rectangular box with a black border. Inside, there is a question at the top, followed by a paragraph of text. At the bottom, there is a black rectangular area with white text providing contact information for Steven Schwartz, PhD.

The Fauci-Gates Tattoo and ID 2020 versus the US Constitution - Conclusion

It should not surprise you, as primary guardian and representative of the US Constitution, that infiltration of ideas ranging from NSSM-200 to ID 2020 to **“post coronavirus order”** can only be fortified by secretive or even criminal activity. It should not surprise you that these tyrannical ploys are now being escalated; thrust into nations and peoples not protected by our founding document and its implicit protections against abuses wrought by the rich and the powerful . . . the latter relevantly referred to herein as “vested interests.”

Vested Interests versus the White House Coronavirus Task Force

That vested interests have undue or illegal influence on policy formation is well known, and remains very active. Regarding the subject, the most difficult decision of your first term, you should consider that some persons of your Coronavirus Task Force are connected, now or in the past, directly or one-layer-removed, to the Bill and Melinda Gates Foundation.

Alternatively, and relating to the Reference, and therefore notably, our esteemed Vice President, a Believer, **is not one of them**:



Conclusion and Request

Given his employment history and priorities, it does not surprise me that Mr. Fauci would thrust a dagger into your back, his boss, and do so very publically. That such behavior occurs from him with a haughty presumed immunity is indicative of the illicit character of the Deep State.

But perhaps you could ask Fauci a simple question for me, and in behalf of the nation as a whole. **This question relates to the Dr. Andrew Kaufman chart shown on Page 2 above.**

The formulations for hydroxychloroquine date to the 1950s. The primary ailment target was malaria. Later the hydroxychloroquine class was prescribed to treat the symptoms of lupus and rheumatoid arthritis. Please remind Mr. Fauci of the following facts:

- (1) Malaria is not caused by a virus
- (2) Lupus is not caused by a virus
- (3) Rheumatoid arthritis is not caused by a virus

So (vaccination rants in the Washington Post aside), if the “COVID-19 pandemic” is the result of a virus, why would hydroxychloroquine and other supplements of “**known safety profiles**” be having so many positive outcomes? Remind Mr. Fauci and his comrades at the Washington Post that we are referring to a 95% range of total recovery.

As a matter of his employment history . . . Please remind Mr. Fauci that Arthur Ashe and, in stark contrast, Magic Johnson would also like to hear his response to my simple question.

Recommendation

Regarding the subject, The Most Difficult Decision of your First Term (1 May 2020), please do not fail to consult with the subject matters presented to the First Lady in the Reference. The Vice President and SLOTUS can also be of service in this specific regard. I do believe that such has already been occurring. **Godspeed.**

Respectfully yours,

Paul V. Sheridan

ATTACHMENT 1

President Donald J. Trump
The White House
1600 Pennsylvania Ave NW
Washington, DC 20500
202-456-1111

Subject: The Most Difficult Decision of your First Term (1 May 2020)
Reference: My Letter/Contents to First Lady Melania Trump of 23 March 2020

Preliminary Recommended Conferees

Jesus the Messiah
Mary Our Lady of Fatima

Dr. Annie Bukacek (please see Attachment 2)
Dr. Vladimir Zelenko
Dr. Anthony Cardillo
Dr. Andrew Kaufman
Dr. Cameron Kyle-Sidell
Dr. Kary Mullis (the work of, statements by, deceased)

Mayor Rudy Giuliani
Robert F. Kennedy, Jr.
Democratic Michigan State Representative Karen Whitsett
Magic Johnson



COVID-19 Alert No. 2
March 24, 2020

Attachment 2

New ICD code introduced for COVID-19 deaths

This email is to alert you that a newly-introduced ICD code has been implemented to accurately capture mortality data for Coronavirus Disease 2019 (COVID-19) on death certificates.

Please read carefully and forward this email to the state statistical staff in your office who are involved in the preparation of mortality data, as well as others who may receive questions when the data are released.

What is the new code?

The new ICD code for Coronavirus Disease 2019 (COVID-19) is U07.1, and below is how it will appear in formal tabular list format.

U07.1 COVID-19

Excludes: Coronavirus infection, unspecified site (B34.2)
Severe acute respiratory syndrome [SARS], unspecified (U04.9)

The WHO has provided a second code, **U07.2**, for clinical or epidemiological diagnosis of COVID-19 where a laboratory confirmation is inconclusive or not available. Because laboratory test results are not typically reported on death certificates in the U.S., NCHS is not planning to implement U07.2 for mortality statistics.

When will it be implemented?

Immediately.

Will COVID-19 be the underlying cause?

The underlying cause depends upon what and where conditions are reported on the death certificate. However, the rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not.

What happens if certifiers report terms other than the suggested terms?

If a death certificate reports coronavirus without identifying a specific strain or explicitly specifying that it is not COVID-19, NCHS will ask the states to follow up to verify whether or not the coronavirus was COVID-19. As long as the phrase used indicates the 2019 coronavirus strain, NCHS expects to assign the new code. However, it is preferable and more straightforward for certifiers to use the standard terminology (COVID-19).

What happens if the terms reported on the death certificate indicate uncertainty?

If the death certificate reports terms such as “probable COVID-19” or “likely COVID-19,” these terms would be assigned the new ICD code. It is not likely that NCHS will follow up on these cases.

If “pending COVID-19 testing” is reported on the death certificate, this would be considered a pending record. In this scenario, NCHS would expect to receive an updated record, since the code will likely result in R99. In this case, NCHS will ask the states to follow up to verify if test results confirmed that the decedent had COVID-19.

Do I need to make any changes at the jurisdictional level to accommodate the new ICD code?

Not necessarily, but you will want to confirm that your systems and programs do not behave as if U07.1 is an unknown code.

Should “COVID-19” be reported on the death certificate only with a confirmed test?

COVID-19 should be reported on the death certificate for all decedents where the disease caused **or is assumed to have caused or contributed to death**. Certifiers should include as much detail as possible based on their knowledge of the case, medical records, laboratory testing, etc. If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II. (See attached Guidance for Certifying COVID-19 Deaths)

Steven Schwartz, PhD

Director – Division of Vital Statistics

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