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U.S. coronavirus death toll rises; New York, Los Angeles region confirm new cases

Southern DAILY Make Today Different

Southern Daily News is published by Southern News Group Daily

Wednesday April 1, 2020 | www.today-america.com | Southern News Group



Inside C2

World's busiest border falls quiet with millions of Mexicans barred from U.S.



A general view of the Paso del Norte International Border Bridge, where the flow of people has decreased as new travel restrictions aimed at containing coronavirus disease (COVID-19) have stopped millions of Mexicans living close to the U.S. border from crossing back and forth, in Ciudad Juarez, Mexico March 30, 2020. REUTERS/Jose Luis Gonzalez

TIJUANA/CIUDAD JUAREZ, Mexico (Reuters) - The world's busiest land border has fallen quiet as restrictions to contain the coronavirus prevent millions of Mexicans from making daily trips north, including many who work in U.S. businesses.

At least 4 million Mexicans residing in cities along the 1,954-mile (3,144-km) border have been hit hard by the restrictions on non-essential travel. The measures effectively invalidate visas allowing short crossings into U.S. cities to visit family, get medical care or shop.

While such B1/B2 "border crossing cards" are officially recreational, Reuters spoke to nearly two dozen residents of Tijuana, Nogales and Ciudad Juarez who use their cards to reach jobs or to care for relatives on the U.S. side of the frontier.

All said they could no longer make the crossing, dealing another blow to businesses already suffering from shutdowns on the U.S. side of the border, including vital industries like agriculture.

"I don't know what I'm going to do without money. I'm just waiting for a miracle," said 28-year-old Rosario Cruz, a mother of two young children who works for a cleaning company that subcontracts with major retailers in California.

The coronavirus restrictions prohibit all non-essential travel across the border. However, the restrictions have not been widely imposed on U.S. citizens traveling to Mexico.

The U.S. Immigration and Customs Enforcement agency said it did not have an estimate of how many Mexican tourism-related visa holders work without permission in the United States. But U.S. and Mexican immigration experts say the practice is common.

According to the U.S. State Department Report of the Visa Office more than 4 million border cards have been issued since 2015. The cards are valid for 10 years.

A general view of the Paso del Norte International Border Bridge, where the flow of people has decreased as new travel restrictions aimed at containing coronavirus disease (COVID-19) have stopped millions of Mexicans living close to the U.S. border from crossing back and forth, in Ciudad Juarez, Mexico March 30, 2020. REUTERS/Jose Luis Gonzalez
Before the coronavirus restrictions, over 950,000 people entered the United States from Mexico on foot or in cars on a typical day, according to 2019 U.S. Customs and Border Protection (CBP) agency data.

Andrew Selee, president of the Washington-based Migration Policy Institute, said limiting transport to contain the epidemic

was understandable, but in cities such as San Diego or El Paso "businesses that really should be open in the middle of a crisis might find that they don't have employees."

"We're talking about farm work, we're talking about caregiving, and probably food production like canning and warehousing operations," he said.

RIPPLE EFFECT?

Once teeming border crossings used by pedestrians and cars have emptied because of the measures, and people's fear of catching the virus. In U.S. border cities like El Paso and San Diego, the impact is already being felt.

Cindy Ramos-Davidson, chief executive of the El Paso Hispanic Chamber of Commerce, said the lack of Mexican shoppers was "devastating" for retail businesses downtown. She was also concerned about day labor for nearby farms that grow chiles, tomatoes, hay, and alfalfa.

"They depend on farm workers, the day workers," she said, adding that some of these employees use tourism-related visas to enter the United States.
Farm workers are designated "essential" travelers under the new DHS rules, but only those with the right paperwork. Workers usually able to cross using border cards are now stuck on the Mexican side.

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LOCAL NEWS

With hospitals under siege, U.S. to build hundreds of temporary coronavirus

WASHINGTON/NEW YORK (Reuters) - The United States aims to build hundreds of temporary hospitals to ease pressure on medical centers struggling to keep up with a surge of coronavirus patients, officials said on Tuesday, a day after the number of U.S. deaths hit a new daily high.

The U.S. Army Corps of Engineers, which converted a New York convention center into a 1,000-bed hospital in the space of a week, is searching for hotels, dormitories, convention centers and large open space to build as many as 341 temporary hospitals, the chief of corps said on Tuesday.

"The scope is immense," Lieutenant General Todd Seemonite of the corps told the ABC News "Good Morning America" program. "We're looking right now at around 341 different facilities across all of the United States."

The U.S. caseload rose by more than 20,000 confirmed cases on Monday, overwhelming hospitals that are running out of doctors, nurses, medical equipment and protective gear.

A record 575 people died, pushing the death toll past 3,000 on Monday, more than the number killed in the attacks of Sept. 11, 2001, as the caseload rose to more than 163,000, according to a Reuters tally of official statistics.

RELATED COVERAGE

New York governor says brother, CNN anchor Chris Cuomo, has coronavirus

U.S. coronavirus deaths reach 3,393, exceeding death toll in China: Reuters tally

U.S. officials estimate the death toll could reach 100,000 to 200,000.

The corps, the engineering arm of the U.S. Army, joined with New York state officials to convert New York's Jacob Javits Convention Center into a facility to treat non-coronavirus patients. The conversion will relieve the pressure on hospitals treating patients with COVID-19, the respiratory ailment caused by the novel coronavirus.



In addition, construction of a 68-bed field hospital began on Sunday in Manhattan's Central Park. Provided by the Mount Sinai Health System and non-profit organization Samaritan's Purse, the makeshift facility is expected to begin accepting patients on Tuesday, Mayor Bill de Blasio said.

The converted convention center is blocks away from the Hudson River pier where the U.S. Navy hospital ship Comfort docked on Monday. The floating hospital will take up to 1,000 non-coronavirus patients starting on Tuesday. Another temporary New York hospital is planned for the USTA Billie Jean King National Tennis Center where the U.S. Open is played.

In Los Angeles, the USNS Mercy, similar

to the Comfort, is already treating patients. Authorities in New Orleans, Los Angeles and Chicago were setting up field hospitals and convention centers in their cities.

EMOTIONAL TOLL

In the New York City suburbs, nurses are bracing for a surge of patients.

The medical surgery unit at New York-Presbyterian Hospital's Hudson

Stay home!

BUSINESS

Work safe!

J&J To Begin Human Trials Of Covid-19 Vaccine By September And Could Have Product Ready By Early 2021

U.S. Has Signed A \$450 Million COVID-19 Vaccine Contract With Johnson & Johnson

Johnson & Johnson



Researcher Xinhua Yan works in a lab at Cambridge, Maryland, February 28, 2020. (Photo/Boston Globe Via Getty Images)

Compiled And Edited By John T. Robbins, Southern Daily Editor

The Trump administration is spending nearly half a billion dollars on one company in the race to find a coronavirus vaccine.

That's according to a \$456 million order with Johnson & Johnson's Pharmaceuticals arm Janssen, which specified a "new vaccine asset for 2019 Novel Coronavirus (COVID-19)," Forbes found. It's the largest reported amount spent on a vaccine project to date, even though the pharma giant hasn't yet started any clinical trials as other firms have.

The deal was signed with the Health and Human Services Office of the Assistant Secretary for Preparedness and Response (ASPR) on March 27, 2020. It followed another order, made as part of the same contract with Janssen, for \$150 million on March 20, 2020, for a "new antiviral" for COVID-19.

A spokesperson from Johnson & Johnson didn't provide any more details on the specific order, but confirmed the \$456 million award related to a collaboration

with ASPR's Biomedical Advanced Research and Development Authority (BARDA), as announced in February.

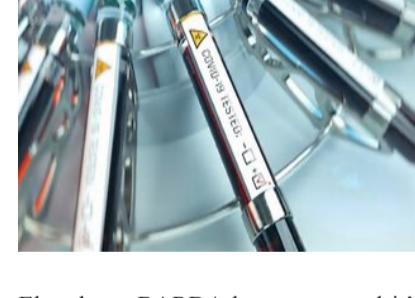


That work was built on previous contracts for developing countermeasures for other influenzas. The value of the coronavirus-specific work hadn't previously been revealed and is the largest known contract for a coronavirus vaccine to date.

It forms part of a deal between the U.S. government and Johnson & Johnson to co-invest \$1 billion into vaccine research, development and clinical testing. The company says it now expects human clinical studies for its vaccine candidate to go ahead, at the latest, by September

2020. It anticipates the first batches of vaccine to be available for emergency use in early 2021.

Earlier this month, Johnson & Johnson also announced a collaboration with the Beth Israel Deaconess Medical Center in developing potential preventive vaccine candidates for COVID-19. The company is looking to use the same technologies it used for developing vaccine candidates for Ebola, Zika and HIV. At the time, the firm announced it hoped to identify a vaccine candidate by the end of the month for clinical trials. A spokesperson confirmed Johnson & Johnson still hoped to announce progress on that before the end of the week.



Elsewhere, BARDA has announced it's working with another pharma company, Sanofi Pasteur, on a different kind of vaccine. As described by BARDA, Sanofi will create an exact genetic match to proteins of the virus. "The protein's DNA will be combined with DNA from a virus harmless to humans and used to rapidly produce large quantities of antigen, which stimulate the immune system to protect against the virus."

Vaccine trials already happening

Despite those contracts, neither Johnson & Johnson nor Sanofi have actually tested any potential vaccine.

Others have progressed further. In mid-March, the first phase of a clinical trial evaluating an investigational vaccine kicked off at Kaiser Permanente Washington Health Research Institute in Seattle, Washington. It was developed by scientists at the National Institute of Allergy and Infectious Diseases (NIAID) with Massachusetts-based biotech company Moderna.



U.K. Prime Minister Boris Johnson is now a COVID-19 patient.

U.K. Prime Minister Boris Johnson—now a COVID-19 patient—announced a record £210 million funding to the Coalition for Epidemic Preparedness Innovations (CEPI), which is supporting the development of vaccines to make them globally available and is seeking \$2 billion to do so. Elsewhere in the U.K., the University of Oxford announced last week that its researchers had started screening volunteers for an upcoming vaccine trial. Imperial College London has also announced work on a vaccine. According to the World Health Organization (WHO), there are only two vaccines going through trials: the NIAID-backed treatment and another in China from CanSino Biological and the Beijing Institute of Biotechnology.

Despite the global rush to get a vaccine out as soon as possible, it's highly unlikely anything will be made available this year. Though it'll be rolled out much faster than a typical preventative medicine, Dr. Richard Hatchett, CEO at CEPI,

has previously said it'll take somewhere between a year and 18 months before the world has access to a coronavirus vaccine.

The COVID-19 coronavirus pandemic poses a unique challenge for healthcare providers. There are no approved treatments for this disease, nor are there any approved vaccines.



Dr. Rhonda Flores studies protein samples at Novavax labs in Rockville,

Maryland, March 20, 2020. (CABELLO-REYNOLDS/ AFP VIA GETTY IMAGES)

That's put big drug companies, universities and biotech startups on the hot seat. Since the 2003 outbreak of SARS, another variety of deadly coronavirus, they've been researching ways to handle diseases that can be produced by this family of viruses. When a coronavirus is capable of infecting humans, it typically attacks the respiratory system, which can make them particularly deadly.

It usually takes about 10 to 15 years to develop a vaccine. The good news: leaps in technology, such as the ability to rapidly sequence virus genomes and to create vaccines out of messenger RNA, are speeding up the process of development. Developing new drug treatments can also take time—about a decade from discovery to getting on the market. But here technology also provides an advantage. New types of antiviral drugs and immunotherapy treatments can treat a wide range of diseases. Which means that drugs already in the development pipeline or already treating diseases in patients could be useful to fight COVID-19, shortening the time it will take to make an effective medicine. (Courtesy <https://www.forbes.com/>)



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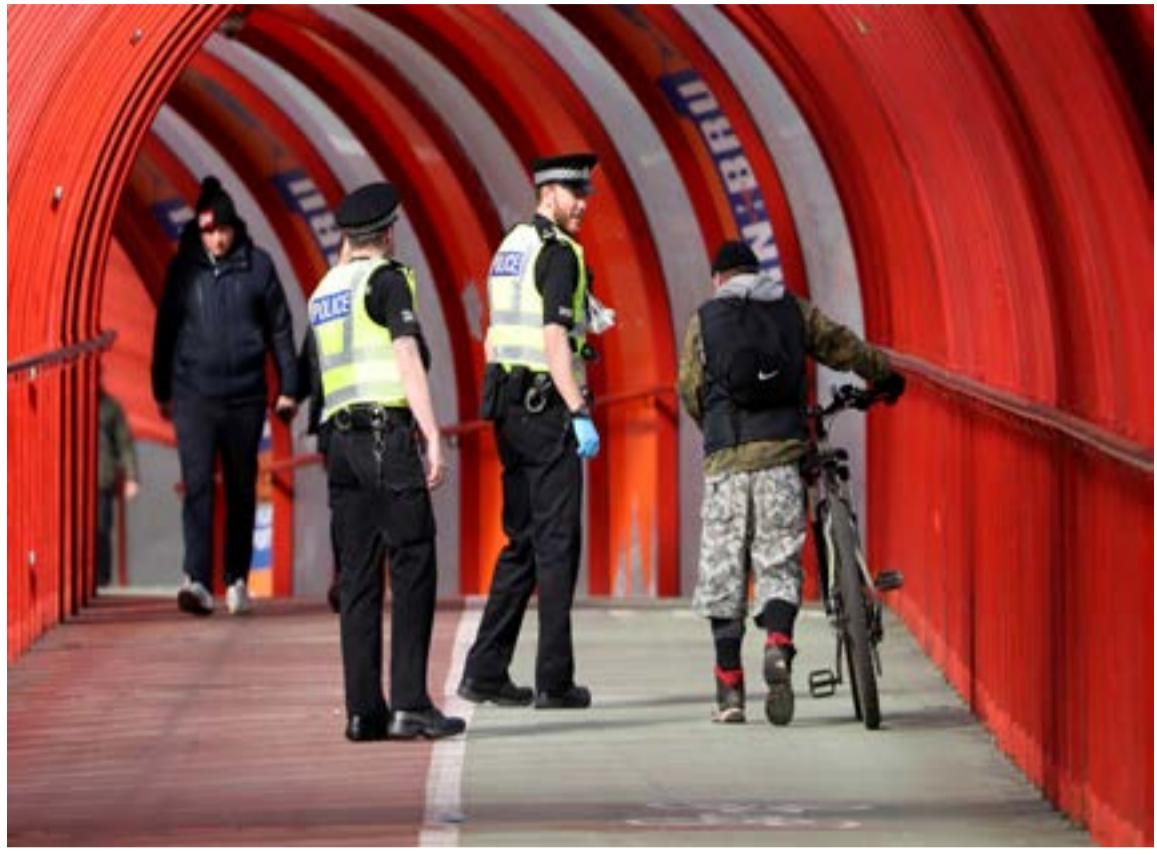
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Wednesday, April 1, 2020

Editor's Choice



Cyclists on Buchanan Street in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne



Police talk to cyclists near the SEC Centre in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne



General view of George Square in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne



Luz Vidal, president of the SINTRACAP union which represents 500 nannies, is seen outside the house where she works to talk with Reuters after Chilean government announced a total quarantine for wealthy areas of the capital Santiago, following the outbreak of coronavirus disease (COVID-19) in Santiago, Chile March 30, 2020. Picture taken March 30, 2020. REUTERS/Ivan Alvarado



Residents on Coral Street sing and dance from their homes as the spread of the coronavirus disease (COVID-19) continues, Saltburn by the Sea, Britain, March 31, 2020. REUTERS/Lee Smith



People leave the subway after Mexico declared a health emergency and issued stricter rules aimed at containing the coronavirus disease (COVID-19), in Mexico City

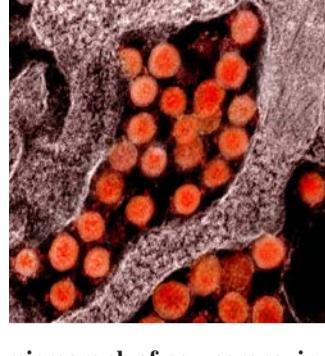


Medical staff assess for COVID-19 at public Victoria Health Unit, BC



Police outside the SEC Centre in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne

FDA Approves Five-Minute COVID-19 Test From Abbott Labs



Transmission electron micrograph of new coronavirus particles, isolated from a patient. (Photo/National Institute of Allergy and Infectious Diseases-Rocky Mountain Laboratories)

Overview

The FDA has approved emergency use of a new coronavirus test that delivers positive results in 5 minutes and negative results in 13

Compiled And Edited By John T. Robbins, Southern Daily Editor

Abbott Laboratories is unveiling a coronavirus test that can tell if someone is infected in as little as five minutes, and is so small and portable it can be used in almost any healthcare setting. The medical-device maker plans to supply 50,000 tests a day starting Wednesday, said John Frels, vice president of research and development at Abbott Diagnostics.

The molecular test looks for fragments of the coronavirus genome, which can quickly be detected when present at high levels. A thorough search to definitively rule out an infection can take up to 13 minutes, he said.

Abbott has received emergency use authorization from the U.S. Food and Drug Administration "for use by authorized laboratories and patient care settings," the company said Friday.



The U.S. has struggled to supply enough tests to detect the virus, even as the

outbreak threatens to overwhelm hospitals in New York, California, Washington and other areas. After initially restricting testing to high-risk people, and problems with a test designed by the Centers for Disease Control and Prevention, U.S. regulators have rushed out diagnostics made by the world's leading commercial-testing companies.

"This is really going to provide a tremendous opportunity for front-line caregivers, those having to diagnose a lot of infections, to close the gap with our testing," Frels said. "A clinic will be able to turn that result around quickly, while the patient is waiting."

The technology builds on Illinois-based Abbott's ID Now platform, the most common point-of-care test currently available in the U.S., with more than 18,000 units spread across the country. It is widely used to detect influenza, strep throat and respiratory syncytial virus, a common bug that causes cold-like symptoms.



The test starts with taking a swab from the nose or the back of the throat, then mixing it with a chemical solution that breaks open the virus and releases its RNA. The mixture is inserted into an ID Now system, a small box weighing just under seven pounds that has the technology to identify and amplify select sequences of the coronavirus genome and ignore contamination from other viruses. The equipment can be set up almost anywhere, but the company is working with its customers and the Trump administration to ensure the first cartridges used to perform the tests are sent to where they are most needed. They are targeting hospital emergency rooms, urgent-care clinics and doctors' offices.

Abbott's m2000 RealTime system recently got U.S. Food and Drug Administration approval for use in hospitals and molecular laboratories to diagnose the infection. That system can churn through more tests on a daily basis, up to 1 million a week, but it takes longer to get the results.



Abbott plans to provide at least 5 million tests a month between the two systems. Other companies are also rolling out faster testing systems. Henry Schein Inc. on Thursday said its point-of-care antibody test, which looks for evidence that a person's immune system has already fought off the infection, was available. The blood test can be given at the point of care and delivers results in about 15 minutes, though it can't be used to definitively diagnose a current infection. The medical device is small and compact enough that it can be used in nearly any healthcare setting, expanding the number

of places it can be used to detect the novel virus. The medical device, which is about the size of a toaster, is portable and can be set up anywhere, from a physician's office to an urgent care clinic, the company boasted in a press release. Abbott Laboratories claims its ID NOW COVID-19 test could dramatically change the battle against the novel coronavirus in the US. The test runs on Abbott's ID NOW platform, which is the most common point-of-care test in the US. It is also used to test other viruses including Influenza A&B, Strep A and respiratory syncytial virus (RSV) testing.



Abbott has received emergency use authorization (EUA) from the U.S. Food and Drug Administration (FDA) for the fastest available molecular point-of-care test for the detection of novel coronavirus. (Photo/Abbott Laboratories)

After Abbott Laboratories received approval from the FDA for its ID NOW COVID-19 test on Friday, the medical device company announced that it would be ramping up its production to make 50,000 units per day starting next week. According to a spokesperson from Abbott, the tests will be available beginning on April 1.

The FDA also approved Abbott's m2000 RealTime system for coronavirus detection last week. With the two systems combined, the medical device company claims it will produce about 5 million tests for the novel virus in April. Abbott Laboratories is working with the Trump Administration to deploy the tests to sites where they will have the most impact and will likely target hospital emergency departments, urgent-care clinics, and physicians' offices.

The Abbott ID NOW COVID-19 detects the presence of nucleic acid from

SARS-CoV-2 by "identifying a small section of the virus' genome, then amplifying that portion until there's enough for detection."

The molecular testing technology delivers COVID-19 results in minutes. Other coronavirus testing methods require health workers to take samples from possible coronavirus patients to be delivered to testing labs, taking hours or even days to get results. However, Abbott noted that ID NOW COVID-19 EUA is not FDA cleared or approved, meaning it can only be used by authorized laboratories and patient care settings.

According to Abbott Laboratories, its ID NOW COVID-19 test is the fastest available molecular point-of-care test. However, other companies producing medical devices with even faster testing capabilities are racing to receive approval from the FDA. Henry Schein Inc. is developing a point-of-care antibody test, however, it cannot definitely diagnose an infection, Bloomberg reported.

The US government has been criticized



for its lagging response to the coronavirus, including its low testing capabilities after weeks and delays in producing its own coronavirus test. However, the testing capabilities in the US are finally beginning to catch up, resulting in a surge of confirmed cases across the country going from 32,000 on March 22 to over 100,000 today.

While the US testing capabilities are now in a better place, the healthcare system still faces extreme shortages of critical medical supplies to treat COVID-19 patients, including ventilators and personal protective gear for health workers, including masks.

(Courtesy <https://www.latimes.com/> and businessinsider.com)

SC 休城社區 Daily News

1200元派錢何時收到？財政部長：預計這三周



【美南新聞記者蕭永群報導】國會與美國總統特朗普於上周五完成歷史鉅額2兆元的經濟刺激方案的簽署，以因應疫情造成的經濟衝擊。其中最直接攸關民衆的，就是過去持續討論的「派錢」議題，擴增失業補

(Steven Mnuchin)於29日表示，民衆可以期待支票將在這三周內匯入戶頭，雖然不少專家認為實際執行應該要花更長時間，民衆才能拿到錢。

糖城首個冠狀病毒檢測站啓用

【美南新聞記者蕭永群報導】面對冠狀

病毒疫情升溫，全州開始大規模檢測，如今一處新的公家冠狀病毒檢測站，於今日在糖城的Smart Financial Cen-

tre啓用，一早現場已排起長長車潮。

檢測點進行測試。也就是說，如今只

要出現症狀需要檢查的人，不用再先

上網做事前線上檢測、也不需要有驗

證碼才能接受檢查。

若想要做檢查，民衆可以直接到現場，

會有專業醫療人員

進行症狀評估、旅遊史調查，來決定你需

不需要進一步測試。

然而，測試仍然是

優先給有出現症狀者、高危險族群檢查。

若被認為是需要

進一步檢查，現場能

夠直接提供一條龍

服務，讓民衆現場註冊、移至檢測蓬。

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助範圍、以及3500億的小企業貸款方案。

此次派錢的款項便是從這筆2兆元的

刺激方案中而來，美國財政部長史蒂芬·姆努欽

此前表示，每位民衆將會收到1200元的支票，配偶的話一共2400元，若是有孩子，每位孩童則會有額外500元。

但若是年收入高於7萬5000元的個人將會收到較少款項，也就是說，只要收入大於7萬5000元，每多出一百元就會少5元的紓困金，但凡年收高於9萬9000元者，就不會收到這筆補助金。

此外，值得注意的是，必須要有「社安號」(SSN)，才有辦法領取這個補助。「非居民外國人」(non-resident aliens)則是完全被排除在補助範圍。

目前仍不確定官方需要多長時間才能核發款項，但姆努欽上周日表示，預計在法案

簽署後的三周派出第一筆款項。法案中也指出，這筆錢應該「越快送出

越好」。姆努欽表示，到時若是有人沒有收到這筆錢，可以到網上進行個人資料登記，讓國稅局(IRS)核對。

然而不少專家認為應該會耗時更久，2001年美國國稅局根據新的減稅計劃，發出了退稅支票，花了6週的時間。而在2008年，刺激方案簽署後，花了3個月的時間。

然而，這次的支票應該會比以往來的快，越來越多民衆通過電子系統報稅，並把銀行信息提供給了IRS，這些納稅人可能會更快地收到這筆錢。

姆努欽指出，他的首要目標就是「提供給美國勞工和公司所需的資金，希望讓美國經濟渡過接下來的八到十週。」他也對小企業商家喊話：「快回去僱用你們的員工，因為政府付錢給你這麼做。」

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但若是年收入高於7萬5000元的個人將會收到較少款項，也就是說，只要收入大於7萬5000元，每多出一百元就會少5元的紓困金，但凡年收高於9萬9000元者，就不會收到這筆補助金。

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目前仍不確定官方需要多長時間才能核發款項，但姆努欽上周日表示，預計在法案

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然而不少專家認為應該會耗時更久，2001年美國國稅局根據新的減稅計劃，發出了退稅支票，花了6週的時間。而在2008年，刺激方案簽署後，花了3個月的時間。

然而，這次的支票應該會比以往來的快，越來越多民衆通過電子系統報稅，並把銀行信息提供給了IRS，這些納稅人可能會更快地收到這筆錢。

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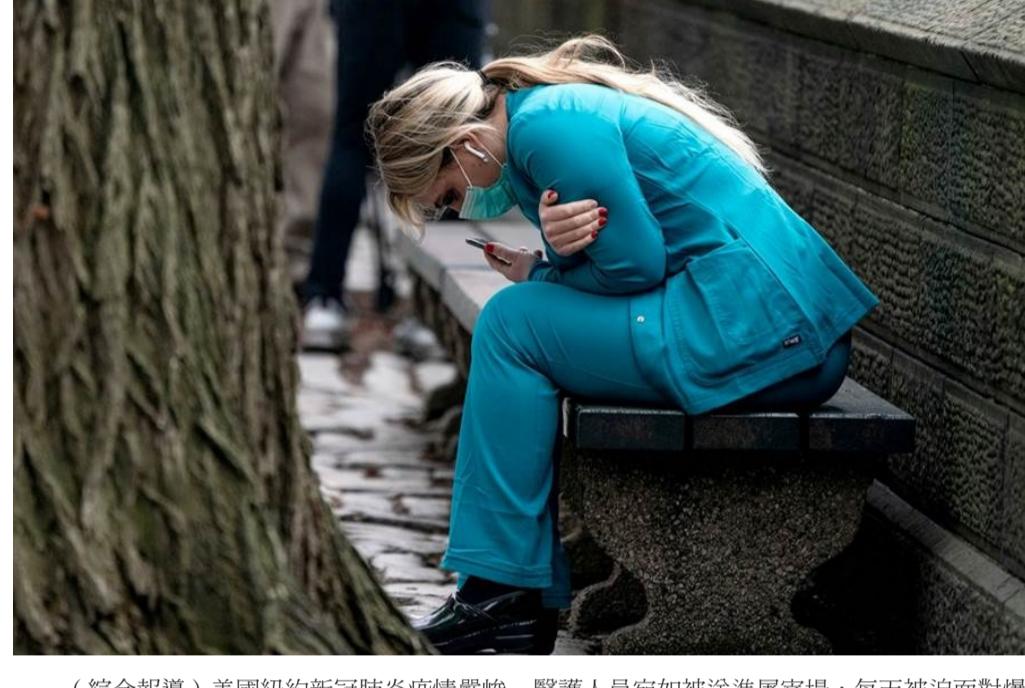
川普自誇懂韓國 結果被韓媒打腫臉

(綜合報導)美國總統川普在疫情記者會自誇比誰都懂韓國，卻說首爾有3800萬人口。韓媒SBS新聞指出，根據韓國政府統計，截至2月底，首爾人口為973萬，是川普所謂「3800萬人口」的四分之一。

韓國topstarnews酸說，川普可能把首爾緯度38度誤以為是3800萬人口。韓國《每日經濟》則直接在標題吐槽：「自稱熟悉韓國的川普，卻說首爾有3800萬人口，我的天啊。」

當天發佈會上一位元美媒記者提問，美國的檢測數量在增加，但人均檢測數不如韓國等

醫護相繼病倒 紐約護士曝：被逼帶病上陣



(綜合報導)美國紐約新冠肺炎疫情嚴峻，除了醫療資源大缺，更慘的是，醫護人員也相繼感染病毒，更有護士爆料，被逼迫代病上陣。

紐約成為全美疫情中心，情況持續惡化，醫療資源大缺，醫護人員嚴重不足，紐約州長古莫(Andrew Cuomo)30日公開疾呼，希望全美各州醫護人員幫幫紐約！

古莫公開求救並非沒有道理，因為紐約醫護人員已相繼感染新冠肺炎病倒。《紐約時報》(New York Times)報導，哥倫比亞大學厄文醫學中心(Columbia University Irving Medical Center)的一名主管要求外科醫生到前線作戰，因為半數重症加護病房的醫護人員已經感染新冠病毒，這名主管形容，「加護病房正在爆炸。」

威爾康乃爾醫學中心(Weill Cornell Medical Center)一名醫生描述經過一名重症、已經插管的同仁身旁，擔心自己就是下一個躺在病床上的人。另外一名在紐約市大醫院服務的醫生指出，院內有超過200名醫護病倒。

紐約市至今有2名護士死於新冠肺炎，不過究竟有多人染病，礙於當地醫療系統雜亂無章，目前尚沒有確切數字，掌管紐約市公共醫療體系的健康醫療總局(Health and Hospitals Corporation)發言人表示，現階段不會公布當地醫護人員確診數字。

唯一可以確定的是，紐約醫護人員人心惶惶，內部瀰漫著恐慌氣氛，不僅擔心自己染疫，可能進一步將病毒傳染給病人，更憂心將病毒帶回家，傳染給家人。紐約布朗克斯區(Bronx)雅柯比醫療中心(Jacobi Medical Center)護士萊利(Thomas Riley)就描述，

無視禁令！40人群聚開趴「警站一排」強制驅離…全都沒戴口罩

(綜合報導)新冠肺炎持續在全球大爆發，美國累計確診人數至今已飆破16萬，為疫情最嚴重的國家，許多州下令禁止民衆外出，不過日前在洛杉磯卻有民衆無視防疫規定，聚集了至少40人準備舉辦生日派對，此舉也引來大批警察到場關切，強制將全部人驅離，雙方爆發激烈口角，場面十分火爆。

事發於海德公園地區(Hyde Park area)第四大街上，當地於26日才剛宣布「民衆須待在家中」的防疫規定，沒想到28日晚間，

國家。「你認為什麼時候才能與它們同步？」

川普當場反駁，「我們已經很接近了。美國幅員遼闊。沒有人比我更懂韓國。韓國人口密集。」他反問道，「你知道首爾有多少人嗎？你知道首爾多大嗎？首爾有3800萬人口，比美國任何一個城市人口都多。3800萬人，密集生活在一起。」

他接著說：「我們做了更多的測試，我沒有提到人均水準。到目前為止，我們做的測試比世界上任何國家都多。到目前為止。我們的測試也比世界上任何一個國家都好。」



這四國疫情不明 美情報單位稱之為「硬目標」

(綜合報導)美國情報機構在努力收集全球新冠疫情的精確情況，但是他們發現難以評估中國大陸、俄羅斯和北韓的真實狀況。此外，情報機構對新冠疫情在伊朗的全面影響也了解有限。

這四個國家被美國情報機構稱為「硬目標」(hard targets)，因為這些國家對信息有著嚴格的控制，即使在正常時期，也很難從他們封閉的領導圈子裡收集情報。

美國之音報導，準確評估這些國家的疫情將有助於美國和國際社會保護人民，遏制新冠病毒所造成的經濟損失，情報機構不僅在尋找確切的數字，還在尋找危機處理方式所造成的政治後果的蛛絲馬跡。

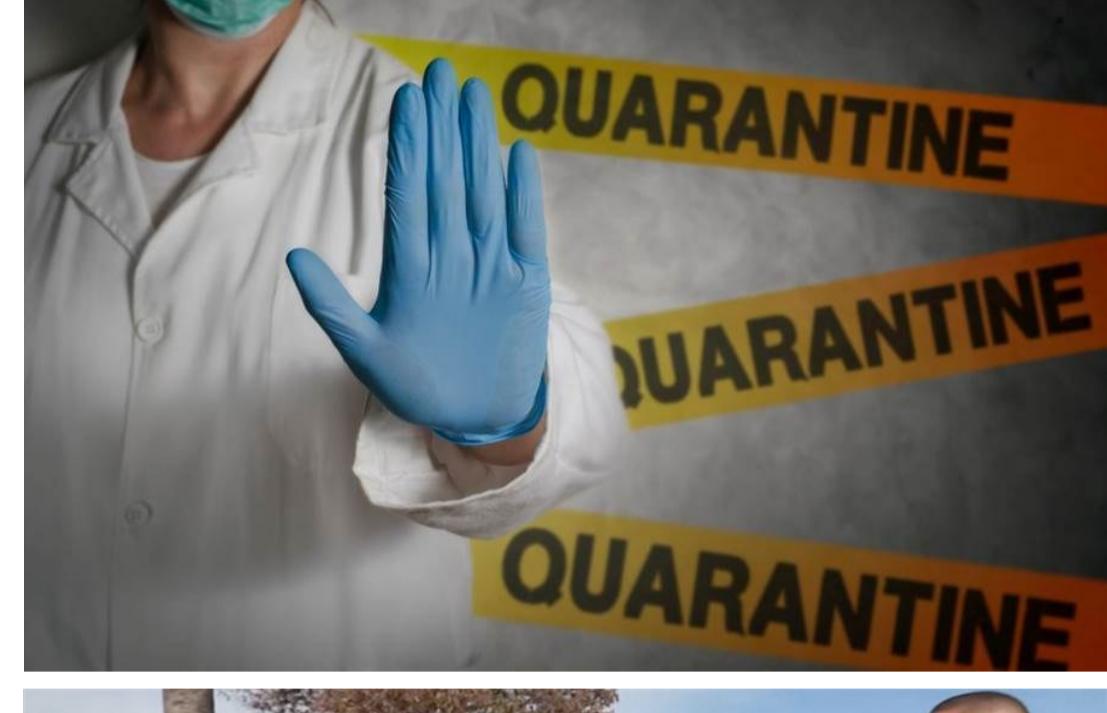
大陸累計通告了超過8萬新冠確診病例，目前許多地區也實現了病例零增長。路透社援引一

名消息人士的話說，大陸聲稱境內新冠確診病例零增長，但美國機構對大陸是否控制了病毒仍持懷疑態度。

北韓聲稱尚未發現新冠病例，但一位美國消息人士稱，「我們不知道」這個封閉國家的問題有多嚴重。

俄羅斯的累計確診病例已超過1800例，莫斯科自周一起開始實施居家隔離模式。路透社報導說，了解俄羅斯新冠病毒傳播的全面情況可能至關重要，因為它與14個國家接壤，是一個貿易和旅遊中心。

美國國務卿蓬佩奧此前還曾指責北京當局、俄羅斯和伊朗散佈有關新冠疫情的不實信息，大陸予以否認。



十大日勉 肚量大一點，嘴巴甜一點，
行動快一點，效率高一點，
腦筋活一點，理由少一點，
做事多一點，脾氣小一點，
說話輕一點，微笑露一點。



“延禧”團隊打造 《鬢邊不是海棠紅》演繹梨園傳奇

近日，由戴瑩、於正任總制片人，惠楷棟執導，黃曉明[微博]、尹正、余詩曼領銜主演的民國情感戲《鬢邊不是海棠紅》開播。據悉，該劇是近年來少有的將全部視角集中到上世紀北平梨園的影視劇作品，通過描繪因戲聚集在壹起的人物眾生相來表現京劇之美。

黃曉明尹正成“靈魂知己”

《鬢邊不是海棠紅》改編自同名小說，講述在上個世紀三十年代的北平，愛國商人和京劇名伶在動亂中砥礪前行的勵志故事——梨園新魁商細蕊（尹正飾）聲名鵲起，為了在北平站穩腳跟、發揚戲曲，他壹門心思紮進藝術的海洋中。在此過程中，從未看過京劇的新派富商程鳳臺（黃曉明飾）偶然間看了商細蕊的表演後被深深打動，兩人結交。在山河飄搖之際二人不忍大好山河與國粹藝術被葬送，於是在各自的領域堅守愛國熱忱，共同與殘酷命運鬥爭到底，為藝術的保護與傳承供獻自己的力量。

劇中，黃曉明飾演男主角程

鳳臺，風衣、黑色禮帽打扮，十分具有民國時期的特色，不禁讓人想起他在《上海灘》裏的扮相。尹正則在劇中飾演京劇名伶，長相十分秀氣的他穿上京劇的戲服，給人壹種驚艷的感覺。據悉，劇中壹段戲中，尹正用壹把扇子上演了什麼叫“風情”，顛覆了他以往的各種形象。

余詩曼首次出演京劇題材

劇中，余詩曼出演女主角範湘兒。余詩曼2018年憑借《延禧攻略》中繼後的角色再次翻紅，劇中的她將壹開始的隱忍，黑化之後的情緒爆發都拿捏得十分到位，讓大家看到了中年演員積累的戲劇功底。在這部劇中，她和黃曉明搭檔飾演劇中女主角，身穿旗袍的她扮相溫婉有氣質。

談及出演《鬢邊不是海棠紅》的緣由，余詩曼稱2018年仲夏，自己正馬不停蹄地為《延禧攻略》做宣傳，於正邀請她加盟《鬢邊不是海棠紅》。余詩曼表示，京劇太吸引自己了，“我內心的興奮絕不亞於第壹次穿高跟

鞋，終於有機會可以親近她（京劇），於是懷著躍躍欲試的心情，腦海中浮現壹幕幕她的畫面，方寸舞臺間，人生百態顯，符號化的臉譜、精煉的唱詞、唱念做打……範湘兒讓我有種躁境中心生清淨的愜意。”不過從目前播出的劇情來看，作為女主角的余詩曼戲份不多。

除了三位主演，杜淳、黃聖依、白冰、遲帥、馬蘇以及資深戲骨金士傑、米雪也在劇中出演重要角色。

制作團隊曾打造《延禧攻略》

該劇由爆款電視劇《延禧攻略》的原班底制作，在畫面鏡頭、服化道置景等多方面展現出了精美的整體效果。

在拍攝中，劇組邀請了梨園泰鬥畢谷雲老先生及兩位京劇名旦尹俊、牟元笛作為戲曲顧問及指導，尹正等演員也進行了特訓，方才有了觀眾看到的“水雲樓”。戲曲國潮這壹流行元素，被《鬢邊不是海棠紅》用得很好，對國粹京劇的精彩呈現大大增強了該劇的視聽享受和文化質感。



百家号/骡子看电影

章明：電影和視頻行業面臨大洗牌

疫情還沒暴發前，導演章明就和家人來到海南，本來打算過了春節就返回北京，結果壹待就接近兩個月，現在他只能通過微信遠程遙控操作，為新片《熱湯》剪輯預告片。

“我助理在北京，我們倆就幾個小時開著視頻，我告訴她怎麼剪，她對著

電腦操作，我倆共同看著畫面弄。”章明坦言，這樣的線上工作方式難度著實較大，因為視頻有延時，效果往往不準確，每剪壹段，助理就得生成壹段小視頻發給章明，沒問題再繼續往下剪。

“預告片公司收費挺高的，我們這樣的小成本文藝片請不起，只能自己剪。”

作為中國第六代導演的代表人物之一，章明從上世紀90年代開始拍攝影視作品，數量眾多，個人風格強烈，《巫山雲雨》《秘語十七小時》《結果》《郎在對門唱山歌》《她們的名字叫紅》《冥王星時刻》等影片在國內外電影節上多次展映、獲獎。盡管已成名多年，但因為做的都是成本不大的非商業片，受到這次疫情的衝擊仍然不小。“我現在壓力很大，擔心收不回成本。花了幾百萬元下來，對很多商業電影可能是九牛二虎之力，但對我們來講就是壹個很大壓力了。”

在他看來，相對商業大片，疫情對小眾文藝片的衝擊更大，“影院恢復營業後，肯定會先滿足被積壓的商業片，到時候大片蜂擁而至，小眾文藝片的生存空間更小了，這樣的打擊可能是致命性的，也算是疫情的‘次生災害’了。”按照他原本的設想，《熱湯》有望在今年上半年完成全部制作，現在肯定不行了，只能邊做邊看。

《熱湯》這壹片名壹語雙關，既指喝的湯，也指泡溫泉，兩個元素片中都會出現。影片共有四組人物，每組人物都是壹男壹女，分別是壹對夫妻、壹對父女、壹對邂逅的男女、壹對師生。影片故事發生在上海，主要在上海拍攝，現在已經定剪。

“這次我想探討的是關於尋求幸福的主題。不管社會怎麼發展，人活得幸不幸福都是壹個當下的問題，人為什麼要流動、為什麼要建立感情都是為了尋找幸福，這可能就是人活著的意義。但人的問題是永遠不滿足，旁觀者認為你已經很幸福了，好像幾個硬指標就可以達到幸福，但每個人的切身體會並不是這樣的，所以幸福就變成了壹個復雜的問題。”章明介紹。

談及疫情對電影行業的影響，章明認為，這次疫情可能會在無意間給電影、視頻行業帶來壹場大洗牌。“疫情幫助奈飛、‘愛騰優’這些視頻網站成為壹種主流消費模式，大家的觀影方式變了，都在家看視頻。視頻平臺和影院的交鋒，因為疫情提前來了。這個影響是很深遠的，只是大家可能還沒來得及去估量，但你看《囧媽》網絡首映，影院壹下子就跳腳了，這就是他們的直覺反應，因為覺得飯碗壹下就沒了。疫情逼著視頻平臺提前釋放能量，這給未來埋下了壹個很大的伏筆。影院則大傷元氣，要花很大的功夫才能恢復昔日的繁榮。”當然，這壹影響只是從渠道和平臺而言，就創作者的創作而言，影響可能並沒有那麼大，“我的作品不是主流行業電影，很多片子以前也都是在網絡上跟觀眾見面，很少有機會在大銀幕上亮相。”

當被問及是否會創作疫情題材的作品時，章明直言，這類創作難度太大，因為事件剛剛發生，創作者很難真正有沈澱和思考，倉促上馬的結果往往是急就章。“疫情對我來說是場意外，壹開始每天都很焦慮，都在關注疫情發展，很難平靜下來創作，現在形勢好轉了，又得考慮是不是要回北京復工了。”他說，等疫情結束後，自己要做的第壹件事就是忙完《熱湯》的聲音混錄、調色、拷貝復制等後續工作，然後準備新的項目。



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SCAN ME

離開殘酷摔角界 間諜速成班 巴帝斯塔秀暖心

動作喜劇「間諜速成班」請來職業摔角界巨星，戴夫巴帝斯塔(Dave Bautista)飾演中央情報局幹員阿傑，他回想過去：「摔角生涯讓我又愛又恨，那是個競爭激烈又充滿敵意的環境，它讓我名利雙收，讓全世界知道我，但接下來的十幾年間，我變得孤僻，不相信任何人，眼前的朋友可能轉眼成為下一場擂台上相見的敵人，我不停地鍛練肌肉，也在精神上武裝自己，就為了能打倒出現在我面前的任何人。」直到他引退轉向好萊塢發展的那一刻開始，巴帝斯塔輕呼一口氣說：「我才意識到我擺脫了那個最糟糕的自己。」

他坦言在「間諜速成班」(My Spy)中飾演的情報員阿傑，就像當年的自己，不相信任何人，不想與人相處，隨時讓自己保持在體能的巔峰，直到有一次任務搞砸了，上級指派他必須與女同事芭比執行一項簡單到不行的監視行動，這項大材小用的任務令他抓狂，但他卻在任務開始的第一天就被9歲小女孩蘇菲(克蘿伊寇爾曼 飾)逮個正著，為了不讓她走漏風聲，導致自己丟了飯碗甚至危及整個任務，阿傑只能任其予取予求，甚至必須教她如何成為一個間諜。

在與蘇菲相處的過程中，阿傑逐漸學會對這個世界卸下心防，巴帝斯塔說：「在

『間諜速成班』中，與其說阿傑教她如何成為間諜，倒不如說蘇菲教會他更多如何放鬆自己，學著融入這個社會，也學會關心別人內心感受，這一點，即使是現在的我也還是有所不足。」然而，巴帝斯塔卻做了一件暖心得足以讓克蘿伊寇爾曼 Chloe Coleman 永生難忘的事。

10歲生日那天，克蘿伊因趕工拍攝不能請假，巴帝斯塔決定給小女孩一個驚喜。當天中午他邀集所有劇組人員齊聚，除了給克蘿伊一個簡單的生日小蛋糕外，還貼心地播放劇組為她錄製的生日祝福影片，就在大家以為影片快要結束時，克蘿伊驚呼：「哇，是克里斯普瑞特！」接著是柔伊莎達娜、布萊德利庫柏與馮迪索，「星際異攻隊」全組到齊，外加「蜘蛛人」湯姆荷蘭也祝她生日快樂！她說：「這無價的禮物讓我成為全宇宙最特別的女孩！我超開心！」

知道要「星際異攻隊」與「蜘蛛人」這些明星齊聚為克蘿伊拍攝生日祝賀短片不是一件容易的事，導演忍不住問他怎麼辦到的，巴帝斯塔微笑地指著右手上臂說：「我秀了一下二頭肌，他們就答應我的要求，除了馮迪索...」他補充：「他很願意幫忙。」



都是女神卡卡害的！ 一家人「一房難求」流落街頭



電影《我們的家不是我們的家》直指愛爾蘭社會嚴重的居住正義問題，導演派迪也為拍攝本片，針對無家可歸的愛爾蘭人進行一連串訪談研究，他發現這些人大多數只是因為生活中突如其來的一點小事，就成了無家之人，而社會也無法及時給予安置協助，導致他們的處境更加雪上加霜。

一如片中蘿西一家人，因房價上漲，房東將他們的家賣掉，導致他們無家可歸

，只能依靠政府提供的緊急住所度日，然而他們打遍所有電話，竟發現因適逢周末女神卡卡演唱會，導致市區所有旅館通通客滿，一房難求。於是大半夜一家人窩在車上吃著薯片，對照街上剛看完演唱會準備回旅館的歡樂歌迷，形成強烈又令人心酸的對比。

根據愛爾蘭重建計劃官網顯示，愛爾蘭自2015年1月起，無家可歸的家庭數增加了302%，官方數字還不包含夜宿在速食店、網咖，以及借宿友人客廳沙發的青少年。無辜的孩子因為居無定所，衣物無法獲得完善清潔，導致身上發出異味，在學校被同學嘲笑排擠；在學校認真上課，但放學後卻連寫功課的地方都沒有，只能跑去同學家借用書桌，電影殘酷帶出無家的孩子在同儕間的痛苦心境。

飾演主角蘿西的女星莎拉格林形容：「這是一部講述一群人，由於社會和政府體制失能，而流離失所的故事，這樣的故事不僅發生在愛爾蘭許多家庭身上，也是國際間必須正視的課題。」

《這樣不OK》 格格不入也是OK的

打從2017年的恐部片《牠》熱賣後，片中唯一的女生蘇菲亞莉莉絲就被視為明日之星，有趣的是，她的確在演出其他恐怖題材就發揮得很好，因此這部改編繪本小說的《這樣不OK》，就有意無意在美術風格、畫面、還有一些取景的角度，都參考了《牠》《怪奇物語》，還把《牠》另外一位童星懷特奧萊夫也找來演出，因此有一些史蒂芬金小說改編的題材風格滲入其中。這樣的嘗試很大膽，卻又很巧妙地跟這些戲劇融合在一起毫無維和。

《這樣不OK》與其說是向《怪奇物語》《牠》致敬，還不如說是繼《漢娜的遺言》後，Netflix又一成功處理青少年題材的作品。圍繞著高中少女希妮，她覺得自己完全格格不入，不光是從小到處搬家，搬到賓州某處小鎮（偏偏這個小鎮看起來很像《牠》縮因州的小鎮），更糟糕的是父親在一年前在地下室自殺，從此之後她就不想去地下室，也跟很多放在那裡的東西無緣了。

但最讓她煩悶的，不是在高中沒有同學、朋友，而是老媽一直在外頭上班工作，要她照顧弟弟、分

擔家事，而是她唯一的好友狄娜突然發育很好，胸前偉大吸引了校隊男生布雷追求，讓她連講垃圾話的對象都沒有。此刻另外一位說要當她好友的史丹冒出來，

擺明了想要追求她，但希妮覺得史丹又不吸引人，要當戀人還早的很！所有青春期的不耐煩都發生在她身上，希妮想要釐清這些思緒，還有一個讓她覺得很麻煩的，就是她覺得自己很怪！到底是怪在哪，又一時說不上...。

當然這只是前面幾集的設定，整齣戲拍得相當好，每個人物都交代得很清楚，希妮的那種厭世、甚至討厭自己、懷疑自己的種種舉動，其實完全交代了青春期的無奈與蒼白，非常的動人。而推動這齣戲的其他戲劇元素，也交織得很好，觀眾可以慢慢進入希妮的世界，包括



怎麼甩都甩不掉的史丹，或者在學校吃的很開的狄娜，都很有意思。

當然這裡頭有一些致敬，除了之前提到的史蒂芬金以外，還有《早餐俱樂部》！看到那集實在是太有趣了！全劇的時空雖然是現代，但劇中人卻很著迷黑膠、卡帶錄音機這些事物，這種復古的趣味並不會讓人感到突兀，反而成為這齣戲最難以解釋、卻順理成章的魅力。希妮，討厭自己是OK的，覺得自己古怪、格格不入也是OK的，你不是怪物，我們都是這個芸芸眾生裡頭，無人理解的，這樣很OK。

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