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# WORLD WAR

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AN ORAL HISTORY OF THE ZOMBIE WAR

# MAX BROOKS

AUTHOR OF *THE ZOMBIE SURVIVAL GUIDE*

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# WORLD WAR

AN ORAL HISTORY OF THE ZOMBIE WAR

**MAX BROOKS**



THREE RIVERS PRESS  
NEW YORK

This is a work of fiction. Names, characters, places, and incidents either are the product of the author's imagination or are used fictitiously. Any resemblance to actual persons, living or dead, events, or locales is entirely coincidental.

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*For Henry Michael Brooks,  
who makes me want to change the world*



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## INTRODUCTION

It goes by many names: “The Crisis,” “The Dark Years,” “The Walking Plague,” as well as newer and more “hip” titles such as “World War Z” or “Z War One.” I personally dislike this last moniker as it implies an inevitable “Z War Two.” For me, it will always be “The Zombie War,” and while many may protest the scientific accuracy of the word *zombie*, they will be hard-pressed to discover a more globally accepted term for the creatures that almost caused our extinction. *Zombie* remains a devastating word, unrivaled in its power to conjure up so many memories or emotions, and it is these memories, and emotions, that are the subject of this book.

This record of the greatest conflict in human history owes its genesis to a much smaller, much more personal conflict between me and the chairperson of the United Nation’s Postwar Commission Report. My initial work for the Commission could be described as nothing short of a labor of love. My travel stipend, my security access, my battery of translators, both human and electronic, as well as my small, but nearly priceless voice-activated transcription “pal” (the greatest gift the world’s slowest typist could ask for), all spoke to the respect and value my work was afforded on this project. So, needless to say, it came as a shock when I found almost half of that work deleted from the report’s final edition.

“It was all too intimate,” the chairperson said during one of our many “animated” discussions. “Too many opinions, too many feelings. That’s not what this report is about. We need clear facts and figures, unclouded by the human factor.” Of course, she was right. The official report was a collection of cold, hard data, an objective “after-action report” that would allow future generations to study the events of that apocalyptic decade without



being influenced by “the human factor.” But isn’t the human factor what connects us so deeply to our past? Will future generations care as much for chronologies and casualty statistics as they would for the personal accounts of individuals not so different from themselves? By excluding the human factor, aren’t we risking the kind of personal detachment from a history that may, heaven forbid, lead us one day to repeat it? And in the end, isn’t the human factor the only true difference between us and the enemy we now refer to as “the living dead”? I presented this argument, perhaps less professionally than was appropriate, to my “boss,” who after my final exclamation of “we can’t let these stories die” responded immediately with, “Then don’t. Write a book. You’ve still got all your notes, and the legal freedom to use them. Who’s stopping you from keeping these stories alive in the pages of your own (expletive deleted) book?”

Some critics will, no doubt, take issue with the concept of a personal history book so soon after the end of worldwide hostilities. After all, it has been only twelve years since VA Day was declared in the continental United States, and barely a decade since the last major world power celebrated its deliverance on “Victory in China Day.” Given that most people consider VC Day to be the official end, then how can we have real perspective when, in the words of a UN colleague, “We’ve been at peace about as long as we were at war.” This is a valid argument, and one that begs a response. In the case of this generation, those who have fought and suffered to win us this decade of peace, time is as much an enemy as it is an ally. Yes, the coming years will provide hindsight, adding greater wisdom to memories seen through the light of a matured, postwar world. But many of those memories may no longer exist, trapped in bodies and spirits too damaged or infirm to see the fruits of their victory harvested. It is no great secret that global life expectancy is a mere shadow of its former prewar figure. Malnutrition, pollution, the rise of previously eradicated ailments, even in the United States, with its resurgent economy and universal health care are the present reality; there simply are not enough resources to care for all the physical and psychological casualties. It is because of this enemy, the enemy of time, that I have forsaken the luxury of hindsight and published these survivors’ accounts. Perhaps decades from now, someone



will take up the task of recording the recollections of the much older, much wiser survivors. Perhaps I might even be one of them.

Although this is primarily a book of memories, it includes many of the details, technological, social, economic, and so on, found in the original Commission Report, as they are related to the stories of those voices featured in these pages. This is their book, not mine, and I have tried to maintain as invisible a presence as possible. Those questions included in the text are only there to illustrate those that might have been posed by readers. I have attempted to reserve judgment, or commentary of any kind, and if there is a human factor that should be removed, let it be my own.





# WARNINGS

## GREATER CHONGQING, THE UNITED FEDERATION OF CHINA

[At its prewar height, this region boasted a population of over thirty-five million people. Now, there are barely fifty thousand. Reconstruction funds have been slow to arrive in this part of the country, the government choosing to concentrate on the more densely populated coast. There is no central power grid, no running water besides the Yangtze River. But the streets are clear of rubble and the local “security council” has prevented any postwar outbreaks. The chairman of that council is Kwang Jing-shu, a medical doctor who, despite his advanced age and wartime injuries, still manages to make house calls to all his patients.]

The first outbreak I saw was in a remote village that officially had no name. The residents called it “New Dachang,” but this was more out of nostalgia than anything else. Their former home, “Old Dachang,” had stood since the period of the Three Kingdoms, with farms and houses and



even trees said to be centuries old. When the Three Gorges Dam was completed, and reservoir waters began to rise, much of Dachang had been disassembled, brick by brick, then rebuilt on higher ground. This New Dachang, however, was not a town anymore, but a “national historic museum.” It must have been a heartbreaking irony for those poor peasants, to see their town saved but then only being able to visit it as a tourist. Maybe that is why some of them chose to name their newly constructed hamlet “New Dachang” to preserve some connection to their heritage, even if it was only in name. I personally didn’t know that this other New Dachang existed, so you can imagine how confused I was when the call came in.

The hospital was quiet; it had been a slow night, even for the increasing number of drunk-driving accidents. Motorcycles were becoming very popular. We used to say that your Harley-Davidsons killed more young Chinese than all the GIs in the Korean War. That’s why I was so grateful for a quiet shift. I was tired, my back and feet ached. I was on my way out to smoke a cigarette and watch the dawn when I heard my name being paged. The receptionist that night was new and couldn’t quite understand the dialect. There had been an accident, or an illness. It was an emergency, that part was obvious, and could we please send help at once.

What could I say? The younger doctors, the kids who think medicine is just a way to pad their bank accounts, they certainly weren’t going to go help some “nongmin” just for the sake of helping. I guess I’m still an old revolutionary at heart. “Our duty is to hold ourselves responsible to the people.”<sup>1</sup> Those words still mean something to me . . . and I tried to remember that as my Deer<sup>2</sup> bounced and banged over dirt roads the government had promised but never quite gotten around to paving.

I had a devil of a time finding the place. Officially, it didn’t exist and therefore wasn’t on any map. I became lost several times and had to ask directions from locals who kept thinking I meant the museum town. I was in an impatient mood by the time I reached the small collection of hilltop

1. From “Quotations from Chairman Maozedong,” originally from “The Situation and Our Policy After the Victory in the War of Resistance Against Japan,” August 13, 1945.
2. A prewar automobile manufactured in the People’s Republic.



homes. I remember thinking, *This had better be damned serious*. Once I saw their faces, I regretted my wish.

There were seven of them, all on cots, all barely conscious. The villagers had moved them into their new communal meeting hall. The walls and floor were bare cement. The air was cold and damp. *Of course they're sick*, I thought. I asked the villagers who had been taking care of these people. They said no one, it wasn't "safe." I noticed that the door had been locked from the outside. The villagers were clearly terrified. They cringed and whispered; some kept their distance and prayed. Their behavior made me angry, not at them, you understand, not as individuals, but what they represented about our country. After centuries of foreign oppression, exploitation, and humiliation, we were finally reclaiming our rightful place as humanity's middle kingdom. We were the world's richest and most dynamic superpower, masters of everything from outer space to cyber space. It was the dawn of what the world was finally acknowledging as "The Chinese Century" and yet so many of us still lived like these ignorant peasants, as stagnant and superstitious as the earliest Yangshao savages.

I was still lost in my grand, cultural criticism when I knelt to examine the first patient. She was running a high fever, forty degrees centigrade, and she was shivering violently. Barely coherent, she whimpered slightly when I tried to move her limbs. There was a wound in her right forearm, a bite mark. As I examined it more closely, I realized that it wasn't from an animal. The bite radius and teeth marks had to have come from a small, or possibly young, human being. Although I hypothesized this to be the source of the infection, the actual injury was surprisingly clean. I asked the villagers, again, who had been taking care of these people. Again, they told me no one. I knew this could not be true. The human mouth is packed with bacteria, even more so than the most unhygienic dog. If no one had cleaned this woman's wound, why wasn't it throbbing with infection?

I examined the six other patients. All showed similar symptoms, all had similar wounds on various parts of their bodies. I asked one man, the most lucid of the group, who or what had inflicted these injuries. He told me it had happened when they had tried to subdue "him."

"Who?" I asked.



I found “Patient Zero” behind the locked door of an abandoned house across town. He was twelve years old. His wrists and feet were bound with plastic packing twine. Although he’d rubbed off the skin around his bonds, there was no blood. There was also no blood on his other wounds, not on the gouges on his legs or arms, or from the large dry gap where his right big toe had been. He was writhing like an animal; a gag muffled his growls.

At first the villagers tried to hold me back. They warned me not to touch him, that he was “cursed.” I shrugged them off and reached for my mask and gloves. The boy’s skin was as cold and gray as the cement on which he lay. I could find neither his heartbeat nor his pulse. His eyes were wild, wide and sunken back in their sockets. They remained locked on me like a predatory beast. Throughout the examination he was inexplicably hostile, reaching for me with his bound hands and snapping at me through his gag.

His movements were so violent I had to call for two of the largest villagers to help me hold him down. Initially they wouldn’t budge, cowering in the doorway like baby rabbits. I explained that there was no risk of infection if they used gloves and masks. When they shook their heads, I made it an order, even though I had no lawful authority to do so.

That was all it took. The two oxen knelt beside me. One held the boy’s feet while the other grasped his hands. I tried to take a blood sample and instead extracted only brown, viscous matter. As I was withdrawing the needle, the boy began another bout of violent struggling.

One of my “orderlies,” the one responsible for his arms, gave up trying to hold them and thought it might safer if he just braced them against the floor with his knees. But the boy jerked again and I heard his left arm snap. Jagged ends of both radius and ulna bones stabbed through his gray flesh. Although the boy didn’t cry out, didn’t even seem to notice, it was enough for both assistants to leap back and run from the room.

I instinctively retreated several paces myself. I am embarrassed to admit this; I have been a doctor for most of my adult life. I was trained and . . . you could even say “raised” by the People’s Liberation Army. I’ve treated more than my share of combat injuries, faced my own death on more than one occasion, and now I was scared, truly scared, of this frail child.



The boy began to twist in my direction, his arm ripped completely free. Flesh and muscle tore from one another until there was nothing except the stump. His now free right arm, still tied to the severed left hand, dragged his body across the floor.

I hurried outside, locking the door behind me. I tried to compose myself, control my fear and shame. My voice still cracked as I asked the villagers how the boy had been infected. No one answered. I began to hear banging on the door, the boy's fist pounding weakly against the thin wood. It was all I could do not to jump at the sound. I prayed they would not notice the color draining from my face. I shouted, as much from fear as frustration, that I *had* to know what happened to this child.

A young woman came forward, maybe his mother. You could tell that she had been crying for days; her eyes were dry and deeply red. She admitted that it had happened when the boy and his father were “moon fishing,” a term that describes diving for treasure among the sunken ruins of the Three Gorges Reservoir. With more than eleven hundred abandoned villages, towns, and even cities, there was always the hope of recovering something valuable. It was a very common practice in those days, and also very illegal. She explained that they weren't looting, that it was their own village, Old Dachang, and they were just trying to recover some heirlooms from the remaining houses that hadn't been moved. She repeated the point, and I had to interrupt her with promises not to inform the police. She finally explained that the boy came up crying with a bite mark on his foot. He didn't know what had happened, the water had been too dark and muddy. His father was never seen again.

I reached for my cell phone and dialed the number of Doctor Gu Wen Kuei, an old comrade from my army days who now worked at the Institute of Infectious Diseases at Chongqing University.<sup>3</sup> We exchanged pleasantries, discussing our health, our grandchildren; it was only proper. I then told him about the outbreak and listened as he made some joke about the

3. The Institute of Infectious and Parasitic Diseases of the First Affiliated Hospital, Chongqing Medical University.





hygiene habits of hillbillies. I tried to chuckle along but continued that I thought the incident might be significant. Almost reluctantly he asked me what the symptoms were. I told him everything: the bites, the fever, the boy, the arm . . . his face suddenly stiffened. His smile died.

He asked me to show him the infected. I went back into the meeting hall and waved the phone's camera over each of the patients. He asked me to move the camera closer to some of the wounds themselves. I did so and when I brought the screen back to my face, I saw that his video image had been cut.

"Stay where you are," he said, just a distant, removed voice now. "Take the names of all who have had contact with the infected. Restrain those already infected. If any have passed into coma, vacate the room and secure the exit." His voice was flat, robotic, as if he had rehearsed this speech or was reading from something. He asked me, "Are you armed?" "Why would I be?" I asked. He told me he would get back to me, all business again. He said he had to make a few calls and that I should expect "support" within several hours.

They were there in less than one, fifty men in large army Z-8A helicopters; all were wearing hazardous materials suits. They said they were from the Ministry of Health. I don't know who they thought they were kidding. With their bullying swagger, their intimidating arrogance, even these backwater bumpkins could recognize the Guoanbu.<sup>4</sup>

Their first priority was the meeting hall. The patients were carried out on stretchers, their limbs shackled, their mouths gagged. Next, they went for the boy. He came out in a body bag. His mother was wailing as she and the rest of the village were rounded up for "examinations." Their names were taken, their blood drawn. One by one they were stripped and photographed. The last one to be exposed was a withered old woman. She had a thin, crooked body, a face with a thousand lines and tiny feet that had to have been bound when she was a girl. She was shaking her bony fist at the

4. Guokia Anquan Bu: The prewar Ministry of State Security.



“doctors.” “This is your punishment!” she shouted. “This is revenge for Fengdu!”

She was referring to the City of Ghosts, whose temples and shrines were dedicated to the underworld. Like Old Dachang, it had been an unlucky obstacle to China’s next Great Leap Forward. It had been evacuated, then demolished, then almost entirely drowned. I’ve never been a superstitious person and I’ve never allowed myself to be hooked on the opiate of the people. I’m a doctor, a scientist. I believe only in what I can see and touch. I’ve never seen Fengdu as anything but a cheap, kitschy tourist trap. Of course this ancient crone’s words had no effect on me, but her tone, her anger . . . she had witnessed enough calamity in her years upon the earth: the warlords, the Japanese, the insane nightmare of the Cultural Revolution . . . she knew that another storm was coming, even if she didn’t have the education to understand it.

My colleague Dr. Kuei had understood all too well. He’d even risked his neck to warn me, to give me enough time to call and maybe alert a few others before the “Ministry of Health” arrived. It was something he had said . . . a phrase he hadn’t used in a very long time, not since those “minor” border clashes with the Soviet Union. That was back in 1969. We had been in an earthen bunker on our side of the Ussuri, less than a kilometer downriver from Chen Bao. The Russians were preparing to retake the island, their massive artillery hammering our forces.

Gu and I had been trying to remove shrapnel from the belly of this soldier not much younger than us. The boy’s lower intestines had been torn open, his blood and excrement were all over our gowns. Every seven seconds a round would land close by and we would have to bend over his body to shield the wound from falling earth, and every time we would be close enough to hear him whimper softly for his mother. There were other voices, too, rising from the pitch darkness just beyond the entrance to our bunker, desperate, angry voices that weren’t supposed to be on our side of the river. We had two infantrymen stationed at the bunker’s entrance. One of them shouted “Spetsnaz!” and started firing into the dark. We could hear other shots now as well, ours or theirs, we couldn’t tell.



Another round hit and we bent over the dying boy. Gu's face was only a few centimeters from mine. There was sweat pouring down his forehead. Even in the dim light of one paraffin lantern, I could see that he was shaking and pale. He looked at the patient, then at the doorway, then at me, and suddenly he said, "Don't worry, everything's going to be all right." Now, this is a man who has never said a positive thing in his life. Gu was a worrier, a neurotic curmudgeon. If he had a headache, it was a brain tumor; if it looked like rain, this year's harvest was ruined. This was his way of controlling the situation, his lifelong strategy for always coming out ahead. Now, when reality looked more dire than any of his fatalistic predictions, he had no choice but to turn tail and charge in the opposite direction. "Don't worry, everything's going to be all right." For the first time everything turned out as he predicted. The Russians never crossed the river and we even managed to save our patient.

For years afterward I would tease him about what it took to pry out a little ray of sunshine, and he would always respond that it would take a hell of a lot worse to get him to do it again. Now we were old men, and something worse was about to happen. It was right after he asked me if I was armed. "No," I said, "why should I be?" There was a brief silence, I'm sure other ears were listening. "Don't worry," he said, "everything's going to be all right." That was when I realized that this was not an isolated outbreak. I ended the call and quickly placed another to my daughter in Guangzhou.

Her husband worked for China Telecom and spent at least one week of every month abroad. I told her it would be a good idea to accompany him the next time he left and that she should take my granddaughter and stay for as long as they could. I didn't have time to explain; my signal was jammed just as the first helicopter appeared. The last thing I managed to say to her was "Don't worry, everything's going to be all right."

**[Kwang Jingshu was arrested by the MSS and incarcerated without formal charges. By the time he escaped, the outbreak had spread beyond China's borders.]**





## LHASA, THE PEOPLE'S REPUBLIC OF TIBET

**[The world's most populous city is still recovering from the results of last week's general election. The Social Democrats have smashed the Llamist Party in a landslide victory and the streets are still roaring with revelers. I meet Nury Televaldi at a crowded sidewalk café. We have to shout over the euphoric din.]**

Before the outbreak started, overland smuggling was never popular. To arrange for the passports, the fake tour buses, the contacts and protection on the other side all took a lot of money. Back then, the only two lucrative routes were into Thailand or Myanmar. Where I used to live, in Kashi, the only option was into the ex-Soviet republics. No one wanted to go there, and that is why I wasn't initially a shetou.<sup>1</sup> I was an importer: raw opium, uncut diamonds, girls, boys, whatever was valuable from those primitive excuses for countries. The outbreak changed all that. Suddenly we were besieged with offers, and not just from the liudong renkou,<sup>2</sup> but also, as you say, from people on the up-and-up. I had urban professionals, private farmers, even low-level government officials. These were people who had a lot to lose. They didn't care where they were going, they just needed to get out.

***Did you know what they were fleeing?***

We'd heard the rumors. We'd even had an outbreak somewhere in Kashi. The government had hushed it up pretty quickly. But we guessed, we knew something was wrong.

1. Shetou: A "snake head," the smuggler of "renshe" or "human snake" of refugees.
2. Liudong renkou: China's "floating population" of homeless labor.



***Didn't the government try to shut you down?***

Officially they did. Penalties on smuggling were hardened; border checkpoints were strengthened. They even executed a few shetou, publicly, just to make an example. If you didn't know the true story, if you didn't know it from my end, you'd think it was an efficient crackdown.

***You're saying it wasn't?***

I'm saying I made a lot of people rich: border guards, bureaucrats, police, even the mayor. These were still good times for China, where the best way to honor Chairman Mao's memory was to see his face on as many hundred yuan notes as possible.

***You were that successful.***

Kashi was a boomtown. I think 90 percent, maybe more, of all westbound, overland traffic came through with even a little left over for air travel.

***Air travel?***

Just a little. I only dabbled in transporting renshu by air, a few cargo flights now and then to Kazakhstan or Russia. Small-time jobs. It wasn't like the east, where Guangdong or Jiangsu were getting thousands of people out every week.

***Could you elaborate?***

Air smuggling became big business in the eastern provinces. These were rich clients, the ones who could afford prebooked travel packages and first-class tourist visas. They would step off the plane at London or Rome, or even San Francisco, check into their hotels, go out for a day's sightseeing, and simply vanish into thin air. That was big money. I'd always wanted to break into air transport.



***But what about infection? Wasn't there a risk of being discovered?***

That was only later, after Flight 575. Initially there weren't too many infected taking these flights. If they did, they were in the very early stages. Air transport shetou were very careful. If you showed any signs of advanced infection, they wouldn't go near you. They were out to protect their business. The golden rule was, you couldn't fool foreign immigration officials until you fooled your shetou first. You had to look and act completely healthy, and even then, it was always a race against time. Before Flight 575, I heard this one story about a couple, a very well-to-do businessman and his wife. He had been bitten. Not a serious one, you understand, but one of the "slow burns," where all the major blood vessels are missed. I'm sure they thought there was a cure in the West, a lot of the infected did. Apparently, they reached their hotel room in Paris just as he began to collapse. His wife tried to call the doctor, but he forbade it. He was afraid they would be sent back. Instead, he ordered her to abandon him, to leave now before he lapsed into coma. I hear that she did, and after two days of groans and commotion, the hotel staff finally ignored the DO NOT DISTURB sign and broke into the room. I'm not sure if that is how the Paris outbreak started, though it would make sense.

***You say they didn't call for a doctor, that they were afraid they'd be sent back, but then why try to find a cure in the West?***

You really don't understand a refugee's heart, do you? These people were desperate. They were trapped between their infections and being rounded up and "treated" by their own government. If you had a loved one, a family member, a child, who was infected, and you thought there was a shred of hope in some other country, wouldn't you do everything in your power to get there? Wouldn't you want to believe there was hope?

***You said that man's wife, along with the other renshe, vanished into thin air.***

It has always been this way, even before the outbreaks. Some stay with family, some with friends. Many of the poorer ones had to work off their



bao<sup>3</sup> to the local Chinese mafia. The majority of them simply melted into the host country's underbelly.

***The low-income areas?***

If that's what you want to call them. What better place to hide than among that part of society that no one else even wants to acknowledge. How else could so many outbreaks have started in so many First World ghettos?

***It's been said that many shetou propagated the myth of a miracle cure in other countries.***

Some.

***Did you?***

**[Pause.]**

No.

**[Another pause.]**

***How did Flight 575 change air smuggling?***

Restrictions were tightened, but only in certain countries. Airline shetou were careful but they were also resourceful. They used to have this saying, "every rich man's house has a servant's entrance."

***What does that mean?***

If western Europe has increased its security, go through eastern Europe. If the U.S. won't let you in, go through Mexico. I'm sure it helped make the

3. Bao: The debt many refugees incurred during their exodus.



rich white countries feel safer, even though they had infestations already bubbling within their borders. This is not my area of expertise, you remember, I was primarily land transport, and my target countries were in central Asia.

***Were they easier to enter?***

They practically begged us for the business. Those countries were in such economic shambles, their officials were so backward and corrupt, they actually helped us with the paperwork in exchange for a percentage of our fee. There were even shetou, or whatever they called them in their barbarian babble, who worked with us to get renshe across the old Soviet republics into countries like India or Russia, even Iran, although I never asked or wanted to know where any of the renshe were going. My job ended at the border. Just get their papers stamped, their vehicles tagged, pay the guards off, and take my cut.

***Did you see many infected?***

Not in the beginning. The blight worked too fast. It wasn't like air travel. It might take weeks to reach Kashi, and even the slowest of burns, I've been told, couldn't last longer than a few days. Infected clients usually reanimated somewhere on the road, where they would be recognized and collected by the local police. Later, as the infestations multiplied and the police became overwhelmed, I began to see a lot of infected on my route.

***Were they dangerous?***

Rarely. Their family usually had them bound and gagged. You'd see something moving in the back of a car, squirming softly under clothing or heavy blankets. You'd hear banging from a car's boot, or, later, from crates with airholes in the backs of vans. Airholes . . . they really didn't know what was happening to their loved ones.





***Did you?***

By then, yes, but I knew trying to explain it to them would be a hopeless cause. I just took their money and sent them on their way. I was lucky. I never had to deal with the problems of sea smuggling.

***That was more difficult?***

And dangerous. My associates from the coastal provinces were the ones who had to contend with the possibility of an infected breaking its bonds and contaminating the entire hold.

***What did they do?***

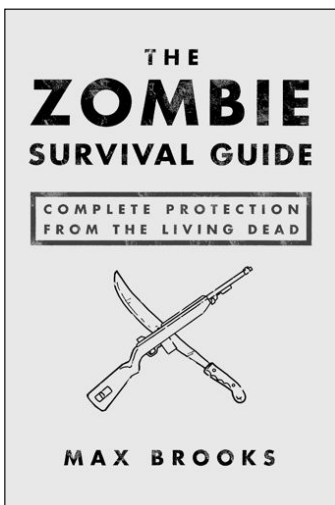
I've heard of various "solutions." Sometimes ships would pull up to a stretch of deserted coast—it didn't matter if it was the intended country, it could have been any coast—and "unload" the infected renshes onto the beach. I've heard of some captains making for an empty stretch of open sea and just tossing the whole writhing lot overboard. That might explain the early cases of swimmers and divers starting to disappear without a trace, or why you'd hear of people all around the world saying they saw them walking out of the surf. At least I never had to deal with that.

I did have one similar incident, the one that convinced me it was time to quit. There was this truck, a beat-up old jalopy. You could hear the moans from the trailer. A lot of fists were slamming against the aluminum. It was actually swaying back and forth. In the cab there was a very wealthy investment banker from Xi'an. He'd made a lot of money buying up American credit card debt. He had enough to pay for his entire extended family. The man's Armani suit was rumpled and torn. There were scratch marks down the side of his face, and his eyes had that frantic fire I was starting to see more of every day. The driver's eyes had a different look, the same one as me, the look that maybe money wasn't going to be much good for much longer. I slipped the man an extra fifty and wished him luck. That was all I could do.



Also by Max Brooks

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2. They feel no fear, why should you?
3. Use your head: cut off theirs.
4. Blades don't need reloading.
5. Ideal protection = tight clothes, short hair.
6. Get up the staircase, then destroy it.
7. Get out of the car, get onto the bike.
8. Keep moving, keep low, keep quiet, keep alert!
9. No place is safe, only safer.
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