

Northern Netherlands Court, Leeuwarden location

Casenummer: C/17/190788 / HAZA 23/172

Rolldate: 3 September 2025

CONCLUSION OF REJOINER

regarding:

ALBERT BOURLA ("BOURLA")
living in Greenwich, United States of America

Defendant sub 11,
lawyers: mr. O.C. Roessingh and mr. **M.** Bredenoord-Spoek

against:

1. ██████████, living in Sneek, municipality
Sudwest-Fryslän,
2. ██████████, living in Sneek,
municipality Südwest-Fryslän,
3. ██████████, living in Sneek,
municipality Südwest-Fryslän,
4. ██████████, living in
Doetinchem,
5. ██████████, living in
Doetinchem,
6. ██████████, living in
Leeuwarden,

(together "██████ c.s." and individually referred to by their surnames)

plaintiffs,

lawyers: mr. A.G.W. van Kessel and mr. P.W.H. Stassen

1 INTRODUCTION

1.1 Introduction

1. In this rejoinder, Bourla responds to the reply of █████ et al. dated 11 June 2025 (the "CvR").
2. The CvR largely reiterates what █████ et al. already stated in their summons. The core of the accusations remains that the Coronavirus, the COVID-19 disease, and the COVID-19 pandemic were fabricated and that the vaccines were neither safe nor effective (and were even bioweapons), and were actually intended to realize "Project Covid-19: The Great Reset."¹ According to █████ et al., as part of this "Great Reset," and through the COVID-19 vaccines, a genocide against the world's population is taking place both spiritually and physically, the goal of which is to (ultimately) cause humanity to lose its soul and life, thus ushering in the New World Order.² All defendants, as well as the UN, the WEF, NATO, the WHO, the EU, and the United States,³ are allegedly involved in this sinister plot.

- More serious (and implausible) accusations are almost unthinkable, so █████ et al. might have been expected to provide evidence for their claims. However, any cogent substantiation was lacking in the summons and is still lacking in the CvR..⁴
- 3.

- As Bourla explained in his statement of defense of February 20, 2024 ("CvA") (as did the other defendants in their respective statements), the Coronavirus, COVID-19 and the COVID-19 pandemic exist, the COVID-19 vaccines are safe and effective and there is (therefore) no deception, genocide or otherwise an (intended) modification of humans by means of the COVID-19 vaccines.⁵ Nor does this in any way implement a Great Reset nor usher in the New World Order.⁶ In any case, there is no causal connection between the alleged unlawful act and the alleged damage.⁷ The claims of █████ et al. are already rejected at this point.
- 4.

1.2 Reading guide

5. In this rejoinder, Bourla further explains that the arguments of █████ et al. in the Statement of Claim, insofar as they relate to him, Pfizer, and/or Comirnaty's qualities, are incorrect and, at the very least, cannot lead to the claim being granted.

6. In Chapter 2, Bourla explains that the arguments of █████ et al. regarding COVID-19 and the COVID-19 pandemic lack factual basis.

¹ CvR, nr. 3.

² CvR, nrs. 5-25.

³ CvR, nrs. 11, 14, 17 en 132.

⁴ See also V. Van den Brink, 'Places, fights, tests - a manual', TvPP 2008, afl. 4, p. 92: "That factual assertions also immediately yield a credible story is not in itself required, but a party that puts forward a very implausible assertion can be expected to provide as much information as possible to substantiate his position."

⁵ CvA, nr. 1-5 en 14-124.

⁶ CvA, nr. 6-8, 116 en 123-124.

⁷ CvA, nr. 138-140.

In Chapter 3, Bourla explains that the assertions of █████ et al. regarding the alleged unsafeness of COVID-19 vaccines also lack a factual basis. In Chapter 4, Bourla explains that █████ et al. do not meet the threshold for the damages assessment procedure. In Chapter 5, Bourla explains that the request to hear certain individuals as experts or witnesses must be denied. In Chapter 6, Bourla explains that there is also no reason to order the requested preliminary hearing, as the claims of █████ et al. must clearly be denied.

1.3 Request to completely disregard █████ Production -108, -111 en -113

7. In support of certain statements, █████ et al. refer in general terms to the very extensive Production █████ 108 (more than 4,000 pages), -111 (a German-language video of 1 hour and 20 minutes, without transcript or subtitles) and - 113 (a book of more than 130 pages that would follow "via UT"),⁸ but never received), but without indicating a specific source in those exhibits. This violates the duty of reference. Bourla or the court cannot be expected to independently search for possible substantiation for a claim by █████ et al. in thousands of pages of exhibits.⁹ These productions are therefore not permitted. The same applies to general references to websites where additional information could be found.¹⁰
8. Bourla therefore requests the court to disregard Minks's Exhibits 108, 111, and 113 in their entirety, as well as the content of other exhibits or websites insofar as █████ et al. did not refer to specific locations therein..

2 RESPONSES TO STATEMENTS ABOUT COVID-19 OR AT LEAST THE COVID-19 PANDEMIC

9. In this chapter, Bourla responds to the assertions of █████ et al. that COVID-19 or the COVID-19 pandemic do not actually exist. In paragraph 2.1, Bourla explains that COVID-19 and the COVID-19 pandemic do exist and that the assertions of █████ et al. constitute unfounded conspiracy theories. Bourla endorses the assertions in the rejoinder of the State and various natural persons (collectively, the "State") of July 23, 2025 (Exhibit Bourla-59) and adopts them as his own. Bourla limits his rejoinder to

⁸ CvR, nr. 55.

⁹ Supreme Court 10 March 2017, ECL1:NL:HR:2017:404, NJ 2017/147, paragraph 3.3.2. Similarly, Advocate General Hammerstein for Supreme Court 31 October 2014, ECL1:NL:HR:2014:3075, NJ 2014/485, no. 9: "An opposing party must be able to defend itself properly and need not be satisfied with the contents of the appendices being considered repeated and inserted in a procedural document. This turns the procedure into a grab bag from which arguments can be drawn at will. [...] The court is not required to conduct its own investigation into what is stated in the submitted exhibits except to the extent that there is clear reference to it in the procedural documents." See also De Bock, in: Provincial Executive Civil Procedure, Article 85 Code of Civil Procedure, note 3 and Preamble. Lindijer, "The Proper Procedure." An Investigation into the Meaning of Proper Procedure as a Normative Concept in Civil Procedure (Civil Procedure & Practice No. IV) (Groningen dissertation) 2006/4.4.1.3.

¹⁰ See, for example, CvR, no. 47: "This information has entered the public domain uncensored[...]. This information comprises tens of Gigabytes and was explained in a press conference on 23 July 2024 by Prof. Dr. Stefan Homburg, Aya Velázquez and Bastian Barucker. The minutes of the RKI Kristentabs are submitted as exhibit 108. For the complete information, including a video of the press conference, the supplementary material, email correspondence and the RKI minutes, please refer to the website <https://lrki-transparenzbericht.de/> where all of these can be freely viewed and downloaded. Due to the size of these documents, █████ et al. trust your court and the parties agree to introduce these documents, including the video of the press conference, into the proceedings via this link so that they form part of the case file."

the following statements that concern him, or at least Pfizer. In paragraph 2.2, Bourla responds to Minks's Exhibits 108, 111, and 112. The conclusions drawn by ██████ et al. cannot be drawn from these exhibits. Finally, in paragraph 2.3, Bourla responds to the conspiracy theory of ██████ et al. that the CEO of Moderna was informed in advance about the COVID-19 pandemic.

2.1 The claims of ██████ et al. concern unfounded conspiracy theories

10. Contrary to what ██████ et al. believe, the Coronavirus is real, as are the disease COVID-19 and the global pandemic that broke out in March 2020.¹¹ The COVID-19 vaccines, including Comirnaty, contributed greatly to slowing the pandemic.¹² Bourla refers to Chapter 1 of his CvA for a detailed explanation of the existence of COVID-19 and the COVID-19 pandemic.
11. ██████ et al. refuse to accept these facts and dismiss all the defendants' assertions, supported by evidence, as "manipulated data" that are supposedly part of a fabricated "preferred reality" that the State "projects" onto the population.¹³ ██████ et al. allege that he (and the entire world population) were deliberately misled into getting vaccinated against COVID-19. This allegedly occurred in execution of a large-scale conspiracy—aimed at genocide against the population using the COVID-19 vaccines as a "bioweapon," according to ██████ et al.
12. ██████ et al. apparently borrowed these conspiracy theories from (the title of) the book "The Great Reset," which describes what the authors believe the world could look like after COVID-19 (and nothing more) 'Reset', at least not in the sense intended by ██████ et al., and Bourla is not part of it in any case. Nor does Bourla know (everything) that the other defendants allegedly know, as ██████ et al. claim without any substantiation.¹⁵ There is no factual basis for the claims of ██████ et al.
13. Bourla has taken note of the State's rejoinder. Bourla concurs with it, and in particular with the propositions:
 - that the {absurd} accusations made by the defendants are incorrect and unfounded (no. 1.3);
 - that what the State (and Bourla and other defendants) have argued has not actually been refuted in the CvR. Instead, ██████ et al. paint an alternative and fictional reality, with the CvR clinging to speculation and theories (no. 1.4);

¹¹ See Bourla's Conclusion, nos. 1-3; WHO, WHO Director-General's opening remarks at the media briefing on COV/0-19, March 11, 2020 (Bourla-1), accessible at www.who.int/director-general/speeches/detail/whodirectorgeneral_s-opening-remarks-at-the-media-briefing-on-COVID-19-----11-march-2020.

¹² See Bourla's Conclusion, no. 4; The Lancet, Global impact of the first year at COV/0-19, June 23, 2022 (Bourla-4), accessible via www.thelancet.com/action/showPdf?pii=S1473-3099%2822%2900320-6.

¹³ CvR, nr. 45.

¹⁴ CvA, nr. 6.

¹⁵ CvR, nr. 3.

- that conducting a real debate in this way is impossible (no. 1.5);
- that █████ et al. must state and substantiate in these proceedings that he has been treated unlawfully and that he has suffered damage as a result, and that █████ et al. have failed to do so (no. 2.1);
- that the arguments and exhibits of █████ et al. do not detract from the State's (and Bourla's and other defendants') assertion that COVID-19 exists, that there has been a COVID-19 pandemic, and that the broad scientific consensus is that the various vaccines against COVID-19 have been a safe and effective means of combating that pandemic (nos. 2.2-2.3);
- that the arguments of █████ et al. are also not supported by the productions submitted by █████ et al., because █████ et al. often take things out of context and the productions do not state what █████ et al. states about this (no. 2.4);
- that █████ et al. base themselves on documents with a limited value (no. 2.5);
- that the positions of █████ et al. are also largely part of (found to be unfounded) conspiracy theories (no. 2.6);
- that the claims of █████ et al. should therefore be dismissed, as there is no question of any unlawful conduct and █████ et al. has not substantiated at all that damage has been suffered as a result of a COVID-19 vaccination (no. 2.7); and
- that █████ et al. have not sufficiently substantiated their case, especially in light of the State's (and Bourla's) defence in the CvA, to be allowed to provide further evidence - not to mention that the evidence offered is also not relevant (no. 2.8).

2.2 On the basis of Productions █████ 108, -111 and -112, the conclusions of █████ et al. cannot be drawn.

14. In support of their conspiracy theory that there was no COVID-19 pandemic and (therefore) no medical necessity for COVID-19 vaccinations, █████ et al. referred to various exhibits related to the minutes of the meetings of the German RKI-Krisenstabs (the Robert Koch Institute COVID-19 crisis management team), namely █████ exhibits-108, -111 and -112.
15. █████ et al. failed to refer to relevant passages regarding Exhibits 108 and 111 (4,000 pages, respectively, and a German-language video without transcript or subtitles, lasting 1 hour and 20 minutes). Bourla was therefore unable to review the content of these exhibits and therefore requests the court to disregard them (see section 1.3 above).
16. █████ 112 concerns a book by Bodo Schiffman. Schiffman is not a reliable or objective expert. He is a disseminator of conspiracy theories surrounding COVID-19 and a well-known figure within the German coronavirus protest movement "Querdenken," whose followers include right-wing extremists and conspiracy theorists..¹⁶
17. According to █████ et al., Production █████ 112 should, insofar as possible, be relevant to the claims of █████ et al.,¹⁷ follow that:¹⁸

- *"there is a maliciously designed global project - Covid-19: The Great Reset - that is being rolled out everywhere, including in the Netherlands, according to the same script"; and that*
- *"After the large-scale Covid-19 injection campaign, general public health has deteriorated significantly and many more people are dying than before this Covid-19 injection campaign".*

18. First, these assertions are factually incorrect (see CvA, nos. 6, 37, 116, and 123-124). Second, █████ et al. do not substantiate these assertions with evidence. █████ et al. failed to refer to specific pages of the more than 4,000 pages of the RKI minutes where the quotes cited by Schiffman can be found, making the quotes unverifiable for Bourla. Even if the quotes from the RKI minutes as presented by Schiffman (the "Quotes") were assumed to be correct, these quotes still do not establish what █████ et al. claim.¹⁹

- For example, █████ et al. argue that the Quotations imply that "patients in hospitals and people in nursing homes were murdered by emergency services on the orders of the German State."²⁰ This refers to passages from the RKI minutes describing a procedural protocol from an ethics committee. It states that since March 21, 2020, "patients over 80 years of age who require ventilation will no longer receive intubation (ventilation)," but instead "rapid end-of-life care with opiates and sedatives."²¹

¹⁶ 'Fact check: Three children have not died from wearing masks in Germany', *Reuters* 6 oktober 2020, <https://www.reuters.com/artic1e/world/fact-check-three-children-have-not-died-from-wearing-masks-in-germany-idUSKBN26R3D8/>; 'Polizei durchsucht Praxis von "Querdenken"-Wortführer Bodo Schiffmann', *Spiegel Panorama* 28 oktober 2020, <https://www.spiegel.de/panorama/bodo-schiffmann-polizei-durchsucht-praxis-von-querdenken-wortfuehrer-in-sinsheim-a-5e24206a-9b73-4065-955f-4e113b4da3e1>; 'Querdenken-Wortführer Bodo Schiffmann angeklagt', *Spiegel Panorama* 13 april 2022, <https://www.spiegel.de/panorama/justiz/bodo-schiffmann-querdenken-wortfuehrer-wegen-volksverhetzung-angeklagt-a-Obef4145-24d8-47c8-91e5-05a96d0a0f2c>; 'Security service targets coronavirus protest movement Querdenken', *Germany Institute* April 28, 2021, <https://duitslandinstituut.nl/artikel/43629/veiligheidsdienst-richt-vizier-op-coronaprotest-beweging-querdenken>.

¹⁷ For example, █████ et al. also allege that the RKI engaged in insider trading (CvR, no. 50, tenth bullet). Bourla fails to see the relevance of this assertion to the claims. Moreover, it is incorrect. The relevant minutes state: "Efficacy studies reach milestone with BioNTech/Pfizer mRNA vaccine. So far only as press information {PI}, to prevent insider trading on the stock exchange," see █████ Exhibit 112, p. 138 (lawyer's translation). The minutes are therefore about preventing insider trading on the stock exchange, not about 'insider trading' or insider trading by the RKI.

¹⁸ CvR, nr. 51.

¹⁹ See also: conclusion of the State's rejoinder of 24 July 2025, footnote 18.

²⁰ CvR, nr. 50, third bullet.

²¹ Production █████ 112, p. 194 (lawyer's translation).

This is about how patients over 80 who can no longer breathe independently are treated. It doesn't say that people are being murdered at the expense of the German state.

- Another example: █████ et al. state that the Quotes show that "on February 3, 2021, the figures already made it perfectly clear that people were not dying from 'Covid-19', but from the toxic Covid-19 mRNA injections."²² This isn't mentioned in the quotes. The quote in question actually describes the success of infection control measures. It also notes that the death toll may remain high due to a reporting delay.²³

2.3 Moderna CEO was not informed in advance about the COVID-19 pandemic

19. To support their conspiracy theory that the COVID-19 pandemic was faked, █████ et al. also point to the alleged "public confession" of Moderna CEO Stéphane Bancel from January 2023.²⁴ According to █████ et al., Bancel allegedly said that Moderna had a production capacity of 100,000 ampoules of COVID-19 vaccines in 2019, which should be scaled up to one billion ampoules "because he knew that a pandemic was planned for 2020."²⁵ According to █████ et al., this information would have been "known in advance to CEOs of companies in the 'vaccine development' sector, including Bourla."²⁶
20. First of all: statements by the CEO of Moderna cannot be attributed to Bourla as CEO of Pfizer, as █████ et al. state without any substantiation.
21. In addition: what appears from Production █████ 118 is that Bancel recalled in January 2023 that Moderna had produced a total of 100,000 vaccines in 2019 (so not: COVID-19 vaccines, which he also does not mention).²⁷ He continued that in late January 2020 (after the WEF meeting of that year in Davos, January 21-24), he told an employee that Moderna might even have to produce a billion vaccines that year, because a pandemic seemed to be looming. This was, of course, the COVID-19 pandemic, the first signs of which were already visible in January 2020.²⁸

3 COMIRNATY 15 SAFE AND EFFECTIVE

22. In this chapter, Bourla responds to the claims of █████ et al. that Comirnaty is unsafe or ineffective. In section 3.1, Bourla explains that Comirnaty is indeed very effective in

²² CvR, nr. 50.

²³ Production █████ 112, p. 170 (lawyer translation).

²⁴ CvR, nr. 61.

²⁵ CvR, nr. 61.

²⁶ CvR, nr. 126.

²⁷ <https://apnews.com/article/fact-check-moderna-covid-stephane-bancel-298794971352>

²⁸ 'January 2020: First signs of corona', Rijksoverheid, <https://www.rijksoverheid.nl/onderwerpen/coronavirus-tijdlijn/januari-2020-eerste-signalen-corona#timeline-minor-event-1500367331553191768>; 'China confirms human-to-human transmission of coronavirus', The Guardian, 21 January 2020, <https://www.theguardian.com/world/2020/jan/20/coronavirus-spreads-to-beijing-as-china-confirms-new-cases>; 'COVID flashback: On Jan. 30, 2020, WHO declared a global health emergency', NPR January 29, 2023, <https://www.npr.org/sections/goatsandsoda/2023/01/29/1151833783/covid-flashback-heres-how-npr-reported-on-the-coronavirus-at-a-turning-point>.

preventing symptomatic course of COVID-19 and has only a few, generally mild, and short-lived side effects. This alone refutes the claims of ██████ et al. regarding the alleged unsafeness of Comirnaty. In section 3.2, Bourla explains that the "studies" submitted by ██████ et al. cannot be used to conclude that Comirnaty is unsafe. These studies are flawed and originate from anti-vaccination activists, and/or have been misinterpreted or misrepresented. In section 3.3, Bourla explains that the claims of ██████ et al. regarding the composition of Comirnaty are incorrect and not supported by the cited exhibits. In section 3.4, Bourla responds to the claims of ██████ et al. regarding alleged differences between batches of Comirnaty.

3.1 Comirnaty is effective in preventing symptomatic disease progression of COVID-19 and is not unsafe or defective

23. ██████ et al. argue in the CvR that mRNA COVID-19 vaccines, including Comirnaty, would be unsafe because they would lead to "a huge increase in all kinds of serious diseases, such as turbo cancers, cardiovascular diseases, diabetes and sudden death, often of people in the prime of their life."²⁹ ██████ et al. also claim that part of The Great Reset would be to sterilize people with Covid-19 mRNA injections.³⁰ All of that is incorrect.
24. As explained in the CvA³¹, Is Comirnaty a medicine that meets the requirements of safety and effectiveness? The fact that Comirnaty can have side effects, like any other medicine, does not make it unsafe or defective within the meaning of Article 6:186 of the Dutch Civil Code.³² The core question is whether the benefits of the vaccine, given its effectiveness and the severity of the disease against which Comirnaty protects, outweigh the possibility of serious side effects. This is the case.³³
25. Comirnaty is particularly effective (95%) in preventing symptomatic progression of COVID-19.³⁴ The course of COVID-19 can be very serious and has led to more than 7 million deaths worldwide.³⁵ By comparison, the common flu kills between 290,000 and 650,000 people worldwide each year.³⁶ Scientific research shows that COVID-19 vaccines, including Comirnaty, have prevented nearly 20 million deaths worldwide.³⁷

²⁹ CvR, nr. 50.

³⁰ CvR, nrs. 46, 56 and amended petition.

³¹ CvA, par. 3.1-3.2.

³² The relevant framework for assessment here. This also demonstrates the irrelevance of the statement in CvR, no. 67, that "American regulations assume that a 'vaccine' by definition harms public health and that, under American medical law, there is no precautionary principle to protect people from 'vaccine damage.'" Leaving aside the correctness of the presentation of American law: it is true that a vaccine, like other medicines, may have side effects and can therefore (temporarily) lead to 'harm' to health, but that does not make a vaccine unsafe or defective.

³³ CvA, nr. 32 and 133.

³⁴ CvA, nrs. 27-28.

³⁵ <https://data.who.int/dashboards/covid19/deaths> (accessed 1 September 2025).

³⁶ [https://www.who.int/news-room/fact-sheets/detail/influenza-\(seasonal\)](https://www.who.int/news-room/fact-sheets/detail/influenza-(seasonal)) (accessed September 1, 2025).

³⁷ CvA, nr. 36.

26. Comirnaty also has few, and generally mild and short-lived, side effects.³⁸ The claims of █████ et al. regarding the alleged side effects of Comirnaty are unfounded:

- There is no evidence that Comirnaty causes cancer³⁹ or causes diabetes (and █████ et al. provide no substantiation whatsoever for the latter assertion).
- To the extent that █████ et al. mean myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the sac surrounding the heart) by "cardiovascular diseases," they are correct that these are side effects of Comirnaty. However, these side effects are very rare. They usually resolve spontaneously or are easily treated with medication.⁴⁰

Comirnaty does not (and has not) lead to a significant increase in deaths. As is well known, the potential side effects of Comirnaty are being closely monitored.⁴¹ In this context, continuous monitoring was also conducted to determine whether reported deaths after vaccination could possibly be related to the vaccine. Between January 2021 and December 2023, approximately 12,000 deaths after vaccination were reported (out of approximately 1 billion doses administered). This does not mean that these deaths were (therefore) related to the vaccine. Research by the EMA and Member States has shown that only in very exceptional cases could a serious adverse event from a COVID-19 vaccine have contributed to a death.⁴²

³⁸ CvA, nr. 37.

³⁹ <https://www.ema.europa.eu/en/human-regulatory-overview/public-health-threats/coronavirus-disease-covid-19/covid-19-medicines/covid-19-vaccines-key-facts#vaccine-safety-7220>: "Moreover, safety monitoring of vaccines shows that any **side effect** usually occurs within two months of **vaccination**. There is no evidence that COVID-19 vaccines may cause side effects, such as cancer, in the long term."

⁴⁰ <https://www.cbg-meb.nl/onderwerpen/medicijninformatie-vaccinaties/coronavaccins/comirnaty#anker-5> side effects under "Inflammation of the heart muscle or pericardium": "A very rare side effect of the vaccine is inflammation of the heart muscle (myocarditis) or inflammation of the pericardium (pericarditis). This side effect occurs in fewer than 1 in 10,000 people and is therefore very rare. Symptoms include shortness of breath, chest pain, and palpitations that are sometimes irregular. The symptoms usually resolve on their own or can be treated well with medication."

⁴¹ CvA, par. 3.23.

⁴² <https://www.ema.europa.eu/en/human-regulatory-overview/public-health-threats/coronavirus-disease-covid-19/covid-19-medicines/covid-19-vaccines-key-facts#common-misunderstandings-and-false-claims-65639>: "As for other medicines, EMA has received reports of death following **COVID-19 vaccination**. Between January 2021 and December 2023, with around 1 billion doses of **COVID-19 vaccines** administered, about 12,000 spontaneous reports of death were received in EudraVigilance from healthcare professionals and members of the public. This does not mean that COVID-19 vaccines caused these deaths. When millions of people are vaccinated, it is likely that some of them will, by chance, experience an illness or even die in the days or weeks following vaccination, without this being caused by the vaccine. In most cases, these events would have happened even if they had not been vaccinated, especially in the **elderly** and people with pre-existing or undiagnosed **medical conditions**. When monitoring the safety of medicines, EMA and EU Member States search the reported suspected side effects for any unusual or unexpected patterns, such as a medical event occurring more often in vaccinated people than in the general population, which may indicate a safety concern. They also check the data from other sources, such as **scientific studies** and the medical literature. When a safety concern is detected, EMA and EU Member States investigate this thoroughly and take necessary action to protect public health. This continuous monitoring has allowed detection of very rare but serious **side effects** which, in very exceptional circumstances, may have contributed to the death of a vaccinated person. The vaccines' product information highlights when a serious side effect could have led to death. Apart from these very exceptional cases of death potentially linked to serious side effects, there is no evidence so far suggesting that other reported deaths may be linked to vaccination."

- There is no evidence that Comirnaty has any (negative) effect on fertility.⁴³ ██████ et al. do not substantiate this assertion but refer in passing to ██████ 114 in issue 56 of the CvR. This production contains a video of Prof. Burkhardt, who has been criticized in the past for spreading false information about vaccines.⁴⁴ In the video, Burkhardt shows images purportedly showing the spike protein in the testes of a 28-year-old man who died approximately five months after receiving Comirnaty, and of an 85-year-old man, in both cases showing few spermatocytes. Even assuming these images were accurate, this could still be due to any number of other causes (especially in an 85-year-old man). Burkhardt then makes the "personal comment," but explicitly "not a scientific comment," that as a "woman of fertile age," he would not plan to have children with a vaccinated man. Apparently, Burkhardt himself did not dare to assert that there was any scientific basis for the claim that Comirnaty had (negative) effects on fertility.

27. From the foregoing, it follows that the benefits of vaccination, also considering its broader benefits for society, outweigh the potential, and limited, risks. This alone invalidates the arguments of ██████ et al. regarding the alleged unsafe situation of Comirnaty.

3.2 The studies submitted do not show that Comirnaty is unsafe

28. To support their claims that Comirnaty is unsafe, ██████ et al. submitted several so-called "studies." These include two articles by McCullough et al. (section 3.2.1), the book "Vaccinated-dead" (section 3.2.2), and an article by Krüger in Berliner Zeitung (section 3.2.3). These articles and books were all written by well-known conspiracy theorists and anti-vaccination activists. Against these unreliable and non-scientific "studies," Bourla actually submitted reliable scientific evidence demonstrating that Comirnaty is safe and effective.⁴⁵ ██████ et al. misinterpreted the Pfizer study that ██████ et al. submitted with their CvR (section 3.2.4)..

3.2.1 Articles McCullough e.a.

29. ██████ et al. submitted two articles by Peter Andrew McCullough and others as Exhibits ██████ 115 and -116.
30. ██████ 116 is a case report in which the authors comment on the autopsy report of a single death (where the autopsy was not performed by themselves). Based on a single death, which is at best anecdotal evidence, no broader conclusions can be drawn. Moreover, this study does not demonstrate in any way that the death was related to COVID-19-vaccination.

⁴³ See for example. <https://www.rivm.nl/corona/coronaprik/veiligheid>: *Can the COVID vaccine make me infertile? No. There are no adverse effects on fertility after the COVID vaccine.* See also <https://www.lareb.nl/mvm-kennis-pagina/Coronavaccin-tijdens-de-zwangerschap> en <https://www.cdc.gov/covid/vaccines/pregnant-or-breastfeeding.html> en <https://www.sciencedirect.com/science/article/pii/S0264410X22011185>.

⁴⁴ 'Fact Check: A four-page, yet to be peer-reviewed paper is not proof that COVID-19 vaccines cause 93% of deaths that occur after inoculation', *Reuters*, 7 januari 2022.

⁴⁵ CvA Bourla, nr. 25-28, 32, 34-38.

The person in question was vaccinated on July 1, 2021, and died on January 7, 2023. Three days before his death, he had a viral infection in his upper respiratory tract. The coroner who performed the autopsy determined that the person died of cardiovascular disease due to high blood pressure. The authors note that "[t]o ensure a comprehensive understanding of the potential impact of COVID-19 vaccines on adverse outcomes, it is critical to conduct specific tests during postmortem procedures."⁴⁶ After all: "[w]ithout proper post-mortem investigation into specific COVID-19 vaccine components residing in blood and tissues, it is difficult to confidently determine the cause of death in COVID-19 vaccinated subjects."⁴⁷ In this case, according to the article, such research was not performed at autopsy ("the autopsy was conducted to investigate the presence of COVID-19 vaccine-specific components").⁴⁸ The authors then speculate that the actual cause of death was the COVID-19 vaccination, based on an unverified 'batch analysis'. In doing so, they do not use correct scientific methods, such as an empirical study with a control group.

31. ██████ 115 also concerns an article from 2024 about autopsy studies conducted by others, which the authors misrepresent.⁴⁹ This "study" therefore suffers from the same flaw as the "study" in Exhibit 116, namely that the autopsies lacked a "proper post-mortem investigation into specific COVID-19 vaccine components residing in blood and tissues" (at least, this is not evident from the study). Instead, the authors designated the COVID-19 vaccination as the cause of death if at least "two of the three investigators agreed on this" based on circumstantial evidence and autopsies not conducted by themselves.⁵⁰ One of these investigators is Peter Andrew McCullough, a well-known anti-vaccination activist who repeatedly made false and misleading claims during the COVID-19 pandemic, contrary to scientific and medical consensus.⁵¹

46 Productie ██████ 116, p. 39.

47 Productie ██████ 116, p. 39.

48 Productie ██████ 116, p. 38.

49 'Withdrawn: A systematic review of autopsy findings in deaths after COVID-19 Vaccination', *Forensic Science International* 21 juni 2024,

<https://www.sciencedirect.com/science/article/pii/S0379073824001968?via%3Dihub>

50 Productie ██████ 115, p. 4: "[...] three physician experts (RH, WM, PAM [Peter Andrew McCullough, adv.] with experience in death adjudication and anatomical/clinical pathology independently reviewed the available evidence of each case (Table S1), including demographic information, clinical vignette, vaccination data, gross and histologic autopsy findings, and determined whether or not COVID-19 vaccination was the direct cause or contributed significantly to the mechanism of death described. The physicians assessed the temporal relationships, strength of evidence and consistency of findings with reported characteristics and common presentations of COVID-19 vaccine-associated deaths documented in VAERS, and other potential etiologies to adjudicate each case. Agreement was reached when two or more physicians adjudicated a case concordantly." (underlining added, lawyers).

51 'Joe Rogan podcast hosts doctor known for pushing debunked claims about Covid-19', *Independent*, 16 december 2021, <https://www.independent.co.uk/news/world/americas/joe-rogan-covid-podcast-doctor-b1977603.html>;

'Doctor's misleading vaccine claims spread online', *ENR*, 31 oktober 2023,

<https://europeannewsroom.com/doctors-misleading-vaccine-claims-spread-online/>;

J. Jarry, 'Dr. Peter McCullough's Libertarian Medical Train Makes a Pit Stop in East Palestine', *McGi/1 University Office for Science and Society*, 10 maart 2023,

<https://www.megi11.ca/lossiarticle/covid-19-medical-critical-thinking/dr-peter-mcculloughs-libertarian-medical-train-makes-pit-stop-east-palestine/>; 'US conspiracy theorists monetize 'Disease X' misinformation', *France24*, 4 maart 2024, <https://www.france24.com/en/live-news/20240304-us-conspiracy-theorists-monetize-disease-x-misinformation>.

McCullough's credentials—he is a former cardiologist—have since been revoked by the American Board of Internal Medicine.⁵²

32. The article has been heavily criticized in the scientific community because it does not meet the criteria for scientific publication. It contains incorrect citations, an incorrect methodology, misrepresentations, a lack of factual support for the conclusions, and a failure to acknowledge and cite counterevidence. Consequently, the article was retracted by the journal *Forensic Science International*, where it was originally published.⁵³
33. The article was subsequently published in 'Science, Public Health Policy and the Law'. This is not a "scientific publication of the medical journal," as ██████ et al. argue.⁵⁴ but a blog that is wrongly presented by ██████ et al. as a scientific journal.⁵⁵ The blog itself states under "About the Journal" that its purpose is "eschewing 'science' enforced by official narratives." In short: a platform that appears to espouse the same conspiracy theories as the plaintiffs themselves. Articles on this blog, especially if they have been rejected or retracted elsewhere, cannot serve as credible or objective evidence..

3.2.2 Book 'Vaccinated-dead'

██████ et al. claim that the book 'Vaccinated Dead' "scientifically and peer-reviewedly demonstrates" that in 77% of the deaths (89) or illnesses (75) investigated, COVID-19 mRNA vaccinations were the cause.⁵⁶ As stated above, the book (Production ██████ 113) was not actually submitted.⁵⁷ Bourla only received Production ██████ 113a and -113b, which are, respectively, a preview and a screenshot of a webpage with the book's synopsis. The preview contains a table of contents, a foreword, a short introduction, three random pages from the book, and the acknowledgments. These submitted sections of the book do not support the assertions of ██████ et al.

34. It is also highly doubtful whether the (complete) book can support the claim of ██████ et al. According to ██████ et al., the book contains posthumously published results of a study by Arne Burkhardt, who has been criticized in the past for spreading incorrect information about vaccines.⁵⁸

⁵² 'ABIM Revokes Certification of Another Doctor Who Made Controversial COVID Claims', *Medpage Today*, 2 januari 2025, <https://www.medpagetoday.com/special-reports/features/113624>; 'Peter A McCullough', *American Board of Internal Medicine*, 28 juli 2025, <https://www.abim.org/verify-physician?type=name&ln=McCullough&fn=Peter&d=12%2F29%2F1962>.

⁵³ 'Withdrawn: A systematic review of autopsy findings in deaths after COVID-19 Vaccination', *Forensic Science International* 21 juni 2024, <https://www.sciencedirect.com/science/article/pii/S0379073824001968?via%3Dihub> CvR, nr. 58.

⁵⁴ 'In the Journals: The Growing Trend of Deceitful, So-called "Journals"', *Children's Hospital of Philadelphia, Vaccine Update for Healthcare Professionals*, 19 februari 2025, <https://www.chop.edu/vaccine-update-healthcare-professionals/newsletter/growing-trend-deceitful-journals>. Zie ook: C. Lane c.s., 'Predatory Journals-What Can We Do to Protect Their Prey?' *New N Eng/ J Med.* 2025 Jan 16;392(3):283-285.

⁵⁵ CvR, nr. 54-55.

⁵⁶ See no. 7 above.

⁵⁷ See no. 26, fourth bullet point above.

35. Furthermore, the investigation only partially pertains to Comirnaty. Of the two deaths investigated, which can be read (in part) in the preview, one was (allegedly) vaccinated with an AstraZeneca vaccine and one with Comirnaty.
36. In addition, the introduction alone contains several misconceptions about COVID-19 that seriously question the objectivity, reliability and expertise of the research conducted. Contrary to what is stated in the introduction, (i) COVID-19 is not caused by a variant of the influenza virus⁵⁹ and the COVID-19 variants in the period 2020-2025 were generally significantly more contagious⁶⁰ and deadlier than the common flu,⁶¹ (ii) the mRNA technique is not entirely new,⁶² but has been developed previously,⁶³ and (iii) the required research has been conducted in full.⁶⁴ Moreover, (iv) it is clear from the introduction to the book that no material from deceased persons with malignancies (malignant tumors) that occurred shortly after vaccination was submitted.⁶⁵ In any case, the fact that an illness would occur shortly after vaccination does not justify the conclusion that it is (therefore) related to the vaccination, but a possible causal link between vaccination and a particular illness obviously becomes increasingly unlikely as the time interval between the two increases. Bourla also recalls that there is no evidence that Comirnaty causes cancer..

3.2.3 Krüger's contribution to Berliner Zeitung

37. In their CoR, ██████ et al. cite a contribution by Ute Krüger in the Berliner Zeitung (Exhibit ██████ 117). Krüger states in Exhibit ██████ 117 that he observed a significant increase in rapidly growing breast cancers in women between the ages of 30 and 50 who had received mRNA COVID-19 vaccinations.⁶⁶ Bourla understands this "statement" by ██████ et al. to mean that he intended to state that Comirnaty would be unsafe for that reason. ██████ et al. further state that the contribution in question discusses unspecified "other studies" from which it would follow that "30 percent of deaths within two weeks after receiving a COVID-19 mRNA injection are

59 Productie ██████ 113b, p. 9: "COVID-19 wurde sie benannt und ausgelöst durch die Variante eines Grippevirus [...]" en "Die ersten Analysen, u.a. van dem Kreuzfahrtschiff "Diamond Princess", wiesen auf eine durchschnittliche Infektiosität, Pathogenität und Mortalität im Vergleich zu anderen Grippe-Viren hin und bestätigten die anfänglichen Befürchtungen nicht."

60 <https://www.cdc.gov/f1u/about/flu-vs-covid19.html>: "While the virus that causes COVID-19 and influenza viruses are thought to spread in similar ways, the virus that causes COVID-19 is generally more contagious than influenza viruses. Also, COVID-19 has been observed to have more superspreading events than f/u. This means the virus that causes COVID-19 can quickly and easily spread to a lot of people and result in continuous/ spreading among people as time progresses."

61 Influenza causes about 290,000 to 650,000 deaths per year globally, while COVID-19 has caused 7.1 million deaths from December 31, 2019, to June 29, 2025, which amounts to about 1.3 million deaths per year (7.1 million/5.5 years) (see: <https://www.who.int/news-room/detail/11-03-2019-who-launches-new-global-influenza-strategy>, accessed on July 21, 2025).

62 Productie ██████ 113b, p. 9: "Andererseits handelte es sich bei der Corona-Impfung um eine voll/kommen neue und bisher nie in größerem Maßstab angewendete Technologie."

63 CvA, nrs. 43-47.

64 Zie CvA, nrs. 50-55. Productie ██████ 113b, p. 9: "Nur wenige Ärzte und Wissenschaftler haben damals gewarnt. Einerseits sei die Impfung voll/kommen unzureichend getestet und die normalerweise mindestens 8 Jahre dauernde Untersuchung bis zur Zulassung auf wenige Monate 'teleskopiert' worden."

65 Productie ██████ 113b, p. 12: "Leider gab es keine Einsendungen vom Material Verstorbener mit Malignitäten, die relativ kurz nach der Corona-Impfung aufgetreten sind."

66 CvR, nr. 60.

causally related to the *Covid-19 mRNA injection and that the increase in serious autoimmune diseases is also caused by the Covid-19 mRNA injections*"⁶⁷

38. As stated above,⁶⁸ Bourla cannot be expected to respond to documents that are not submitted and/or not properly referred to, so he leaves this (unsubstantiated and incorrect) claim as it is.
39. Krüger is not a reliable and objective expert. Krüger is a former pathologist who, in her own words, "has discovered that the medicine she was taught is not the whole truth" and whose "view of Western medicine has now completely changed."⁶⁹ Krüger has her own practice for alternative medicine, offering services in, for example, the pseudoscientific field of 'energy medicine'.⁷⁰ Krüger also contributed to the book 'Vaccinated-Dead' (section 3.2.2). For this reason, too, her objectivity, reliability, and expertise must be questioned.⁷¹
40. Regarding Krüger's claim that mRNA COVID-19 vaccines lead to an increase in (breast) cancer, this is a debunked anti-vaccination conspiracy theory.⁷² As previously stated,⁷³ there is no evidence that Comirnaty (or other COVID-19 vaccines) cause cancer. This article does not provide such evidence either.
41. Even if Krüger's claim that she observed more, larger, and more aggressive tumors in patients between the ages of 30 and 50 in the fall of 2021 were correct, this would still be purely anecdotal evidence (and not peer-reviewed research). The article doesn't even make it clear how many patients her observations pertain to. Moreover, she apparently only links these tumors to the COVID-19 vaccinations because in several cases she observed these tumors a few months after vaccination.⁷⁴ Any further substantiation of a supposed "link" is lacking. It is also unclear which vaccine the patients were supposedly vaccinated with. For this reason alone, Krüger's findings are insufficient to provide any support for the claim that Comirnaty is unsafe.
42. Furthermore, Krüger's alleged anecdotal findings about the number of breast cancer cases and the size and aggressiveness of tumors do not

⁶⁷ CvR, nr. 60.

⁶⁸ See section 1.3 above.

⁶⁹ According to Krüger's LinkedIn page, <https://www.linkedin.com/in/ute-kr%C3%BCger-a07625a6/> (accessed on August 18, 2025) (lawyer translation).

⁷⁰ 'Methods', *Active health*, <https://active-health.se/en/methods> (accessed on August 18, 2025).

⁷¹ See no. 37 above.

⁷² <https://publichea1thcollaborative.org/alerts/false-claims-persist-about-covid-19-vaccine-linked-turbo-cancers/>, <https://www.reuters.com/article/factcheck-turbocancer-vaccine/fact-check-no-evidence-covid-19-vaccines-cause-turbo-cancer-idUSL1N3340PQ/>, <https://www.reuters.com/article/factcheck-coronavirus-cancer/fact-check-no-evidence-covid-19-vaccines-cause-cancer-idUSL1N2S322C/> en <https://www.reuters.com/article/factcheck-cancer-covid-idUSL1N2UM24J/>.

⁷³ See no. 26 above.

⁷⁴ Production ██████ 117, p. 2: "*Hier handelte es sich dann um sehr aggressives Tumorwachstum mit sehr rascher Tumorstreuung im ganzen Körper, welches wiederholt wenige Monate nach der Corona-Impfung auftrat.*"

support in the figures (in Germany),⁷⁵ as appears from an article in the Berliner Zeitung in response to Krüger's article.⁷⁶

43. That article shows (and Bourla verified this using figures from the Robert Koch Institute) that since 2007, the number of breast cancer cases (in women) across all age groups in Germany has been between 70,000 and 78,000 annually (Exhibit Bourla-60).⁷⁷ In 2021 and 2022, there were 75,579 and 74,512 cases of breast cancer, respectively. If the COVID-19 vaccinations were indeed leading to a "huge increase" in breast cancer, one would expect a much higher number of cases to be diagnosed in 2021 and 2022 than in previous years, but that is not the case. Exhibit Bourla-60 shows that since 1999, there has been an upward trend in the number of diagnosed breast cancer cases, and that since 2007, the number of cases has stabilized and fluctuated between 70,000 and 78,000.
44. Nor has there been a "huge increase" in the number of deaths from breast cancer in Germany (Exhibit Bourla-61).⁷⁸ Since 2015, the number of deaths has been consistently between 18,100 and 18,900, with limited fluctuations. On the contrary, the standardized mortality rate, which indicates how many people per 100,000 die from a disease within a year, shows that relatively fewer people die from breast cancer and all other forms of cancer.⁷⁹ The head of the German Center for Cancer Registration also stated, when asked, that there is no evidence of an increase in the number of breast cancer cases, a higher mortality rate, or increased tumor aggressiveness that can be linked to vaccination..⁸⁰

⁷⁵ Dr. Krüger was working in a hospital in Sweden at the time of her findings. The article discusses the statistics for Germany. These are nevertheless relevant because both Sweden and Germany were vaccinated with mRNA COVID-19 vaccines. If these vaccines indeed lead to an increase in (breast) cancers, this would also be the case in Germany.

⁷⁶ <https://www.berliner-zeitung.de/gesundheit-oekologie/corona-impfstoffe-und-turbo-krebs-was-die-fallzahlen-aus-deutschland-verraten-li.2262993>

⁷⁷ This Excel spreadsheet is based on data from the Robert Koch Institute (https://www.krebsdaten.de/Krebs/EN/Database/databasequery_step1_node.html), using the following parameters. Statistics category: Incidence. Statistics: Number of cases. Age category: 0-85+. Diagnosis: Breast cancer (C50). Sex: Female. Years: 1999-2022.

⁷⁸ This Excel spreadsheet is based on data from the Robert Koch Institute (https://www.krebsdaten.de/Krebs/EN/Database/databasequery_step1_node.htm1), using the following parameters. Statistics category: Mortality rate. Statistics: Number of cases. Age category: 0-85+. Diagnosis: Breast cancer (C50). Sex: Female. Years: 1999-2022.

⁷⁹ <https://www.berliner-zeitung.de/gesundheit-oekologie/corona-impfstoffe-und-turbo-krebs-was-die-fallzahlen-aus-deutschland-verraten-li.2262993>: "Ob das Risiko aber für einzelne Patientinnen steigt, an Brustkrebs zu sterben, lässt sich besser mit der sogenannten altersstandardisierten Sterberate herausfinden. Wie viele Patientinnen von 100.000 überleben ihre Erkrankung in einem Jahr nicht? 2018 waren es noch 12,4 von 100.000, im Jahr 2023- nach Pandemie und Impfkampagne - starben nur noch 11,5 von 100.000. Für alle Krebserkrankungen zusammengenommen gilt dasselbe: Die absoluten Fallzahlen steigen seit Jahren leicht an. Aber wenn man die Alterung der Gesellschaft herausrechnet, sinkt die Sterblichkeit kontinuierlich, zuletzt von 147,6 pro 100.000 Krebspatienten im Jahr 2018 auf 137,5 pro 100.000 im Jahr 2023."

⁸⁰ <https://www.berliner-zeitung.de/gesundheit-oekologie/corona-impfstoffe-und-turbo-krebs-was-die-fallzahlen-aus-deutschland-verraten-li.2262993>: "Beim Zentrum für Krebsregisterdaten haf man auf Anfrage der Berliner Zeitung daher noch tiefer in die Zah/en geschaut und neben den Registerdaten und der Todesursachenstatistik auch die Krankenhausdaten ausgewertet, insbesondere zu Brustkrebs.

Die deutschen Daten zeigen auch hier keine Entwicklung, die Anlass zur Sorge gibt: „Wir finden keinen Hinweis auf eine höhere Inzidenz, eine höhere Sterblichkeit ader auf ein vermehrt aggressives Tumorverhalten, das sich mit der Impfung in Verbindung bringen lie/3e“, sagt Klaus Kraywinkel, Leiter des Zentrums.“

3.2.4 Pfizer report March 12, 2024

45. █████ et al. submitted an (interim) report from Pfizer as Exhibit █████ 122. First of all, it is incorrect that Pfizer wanted to withhold the report, as █████ et al. claim.⁸¹ Exhibit █████ 122 concerns a summary of a post-approval safety study of Comirnaty. Bourla refers to paragraph 3.3.4 of his Explanatory Memorandum, in which he has already explained that pharmaceutical companies, including Pfizer, do not release their reports to the public, but to the relevant regulatory authorities.⁸²
46. Moreover, the conclusion █████ et al. draws from the interim report is incorrect. Based on this interim report, █████ et al. wrongly conclude "that those who received a Pfizer Covid-19 mRNA injection have a 40% higher risk of developing [heart-related] AESIs [adverse events of special interest]."⁸³ The study, however, shows that there is no strong evidence of a general increased risk of serious adverse events after vaccination with Comirnaty.⁸⁴
47. █████ et al. appear to have taken their argument from an article in the Daily Sceptic (Exhibit █████ 123), a blog that frequently publishes disinformation about COVID-19.⁸⁵ According to this article, the Pfizer report shows that vaccinated individuals have a 23% to 40% higher risk of heart problems. This incorrect conclusion is likely based on a misunderstanding of the hazard ratios mentioned in the study. ("**HRs**").⁸⁶
48. An HR of 1.4 only means that in the group of people studied there was a 40% higher chance of a condition occurring compared to the control group:
- The HRs compare the frequency of adverse events between certain vaccinated and unvaccinated groups.

⁸¹ CvR, nr. 84.

⁸² CvA Bourla, nr. 94.

⁸³ CvR, nr. 84.

⁸⁴ The study concludes that of the 37 AESIs (reported adverse events) examined, the incidence rates were very low and comparable between vaccinated and unvaccinated individuals. Eleven adverse events were further investigated (at the request of the EMA or because they were new). No, or only slight, increases in risk were observed in some data sources. These increases can be explained by several factors unrelated to Comirnaty, such as differences in how quickly vaccinated and unvaccinated individuals seek healthcare. The researchers emphasize that, at the current state of affairs, it is not possible to draw definitive conclusions..

⁸⁵ See for example, 'Fact Check: Vaccine-effectiveness study does not show 'negative immunity' or harm to the immune system', *Reuters*, 19 september 2022; 'Misleading: COVID-19 vaccines don't work because most people in U.K. hospitals with the virus are vaccinated', *Logically Facts Limited*, <https://web.archive.org/web/20240625010315/https://www.logicallyfacts.com/en/fact-check/misleading-the-covid-19-vaccines-don-t-work-because-most-people-in-u-k-hospitals-with-the-virus-are-vaccinated>; 'The COVID-19 vaccines are safe and effective; claim that they have caused an "international medical crisis" is baseless', *Health Feedback*, 10 september 2022.

⁸⁶ Incidentally, the authors used the wrong HRs. For example:

According to the authors, the HR for "Acute cardiovascular injury" was 1.23 (Exhibition █████ 123, p. 2). However, the report lists an HR of 1.38 for this adverse event (Exhibition █████ 122, p. 3)..

- The HRs say nothing about the absolute risk of a particular person experiencing a particular adverse event. An adverse event with a high HR can still be very rare in absolute terms (and it is).⁸⁷
- The HRs also say nothing about causality. The report is an observational study, not an investigation into causes. Differences observed between a group of vaccinated individuals and a group of unvaccinated individuals can be influenced by many different factors, including health behavior, medical history, or healthcare utilization. For example, it's possible that people who get vaccinated are more likely to seek medical care, even for less severe symptoms. This could lead to variations in the study results that are not attributable to Comirnaty. This is explicitly stated in the report.⁸⁸
- Finally, the HRs refer to a specific data source, i.e., a limited set of data. This does not allow for general conclusions to be drawn for all vaccinated individuals.
- ████████ et al. also failed to consider the confidence intervals (the "Cis"). The value of a CI indicates how confident the researchers are about the HR. If the value 1.0 is part of the CI,⁸⁹ this means that the research result is not statistically significant, i.e., that the actual relative risk of a particular condition could be either lower or higher. For example, the HRs for 'stress cardiomyopathy' and 'myocarditis,' on which the Daily Skeptic bases its conclusions, are not statistically significant (the CIs contain 1.0).

3.3 Theses on the composition of Comirnaty

49. As explained in the CvA,⁹⁰ Comirnaty contains Tozinameran, four lipids (small fatty spheres), sucrose (a sugar), a salt mixture, and water. This list of ingredients is exhaustive. This alone invalidates the claim by ████████ et al. that Comirnaty contains graphene oxide or other toxic substances. Nor does Comirnaty contain "large quantities of DNA scrap."⁹¹ Comirnaty also does not contain any nanotechnology capable of modifying humans and making them part of the "Internet of Bodies."⁹² These claims are also not supported by the exhibits submitted by ████████ et al., as Bourla explains below.

3.3.1 No graphene-oxide in Comirnaty

50. In the CvR, ████████ et al. repeat the assertion that Comirnaty would contain graphene oxide, referring to Production ████████ 121, which consists of Production ████████ 121a and -b.⁹³

⁸⁷ Production ████████ 122, p. 4.

⁸⁸ Production ████████ 122, p. 4.

⁸⁹ For example, for myocarditis the first CI is 0.46, 1.94: which interval therefore includes the value 1.0.

⁹⁰ CvA, par. 3.3.3.

⁹¹ CvR, nr. 67.

⁹² CvR, nr. 23.

⁹³ CvR, nrs. 76-78.

51. Exhibit ██████ 121a pages 1 through 5 is a collection of internet pages and a page from a memorandum of the FDA (a US regulator),⁹⁴ from which it follows that the lipids ALC-0315 and ALC-0159 are part of Comirnaty.
52. That is correct, as Bourla explained in the CvA.⁹⁵ The full names of these lipids are respectively: ((4-hydroxybutyl)azanediyl)bis(hexane-6, 1-diyl)bis(2-hexy/decanoate) and 2-[(polyethyleneglyco/)-2000)-N,N-ditetradecylacetamide. Bourla already explained in the CvA that neither these lipids⁹⁶ nor Comirnaty contain graphene oxide and that any cogent substantiation of that assertion is lacking.⁹⁷ Contrary to what ██████ et al. would like to have us believe, the opposite does not follow from Production ██████ 121a and -b submitted by ██████ et al.
53. Pages 6 and 7 contain a reference to a Chinese patent stating that a new coronavirus vaccine allegedly contains graphene oxide. Bourla has already explained in the CvA that this patent does not belong to Pfizer or any of its group companies and that the connection with Comirnaty is also unclear and disputed.⁹⁸ Pages 7-20 contain information about recombination and a patent relating to "methods and systems for prioritizing treatments, vaccinations, tests, and/or activities while protecting the privacy of individuals," the content of which Bourla does not understand, or at least its relevance. In any case, it does not follow from this that Comirnaty would contain graphene oxide, as ██████ et al. claim.
54. Production ██████ 121b is also a homebrew production that incorporates various elements from the SINOPEG website. SINOPEG is a Chinese manufacturer of drug delivery systems that, like other manufacturers, produces the lipids ALC-0315 and ALC-0159. Pfizer does not use the ALC-0315 and ALC-0159 lipids produced by SINOPEG. In addition, Production 121b contains a page from a Public Assessment Report on Comirnaty from the Medicines & Healthcare products Regulatory Agency (a UK regulator) and a memorandum from the FDA (a US regulator).
55. Page 1 of Production ██████ 121bis, the first page of a news article on the Industry News page of the SINOPEG⁹⁹ website, titled "Gore-shell structured polyethylene glycol functionalized graphene for energy-storage polymer dielectrics: Combined mechanics and dielectric performances." Therefore, the article was not written by SINOPEG (nor was the research conducted by SINOPEG).¹⁰⁰

⁹⁴ The page from the FDA report is also part of Exhibit ██████ 121b.

⁹⁵ CvA, nrs. 80-81.

⁹⁶ A fact that already follows from the absence of the mention of graphene oxide in the full name of the chemical substance for these lipids.

⁹⁷ CvA, par. 3.3.3.

⁹⁸ CvA, nr. 85.

⁹⁹ https://www.sinopeg.com/core-shell-structured-polyethylene-glycol-functionalized-graphene-for-energy-storage-polymer-dielectrics-combined-mechanica1-and-dielectric-performances_n28

¹⁰⁰ The article was originally published in the journal Composites Science and Technology, see: <https://www.sciencedirect.com/science/article/abs/pii/S0266353819336371>. The study is of interest to SINOPEG because it describes a way to modify the solubility of graphene oxide using PEGylated lipids ('PEGy/ated lipids'), and SINOPEG primarily uses such lipids in its production process (see: <https://www.sinopeg.com/about-us-d1>), hence the 'PEG' in SINOPEG..

56. Moreover, the article has nothing to do with mRNA vaccines. It describes a study in which "graphene oxide was chemically functionalized with single terminal amino-PEG (PEG-NH₂) and subsequently introduced into epoxy resin as a "core-shell" structure to enhance the dielectric performance of polymer dielectrics." The article thus describes the application of graphene oxide in polymer dielectrics, which are insulating materials, usually plastic, used to store energy in electrical devices (as the title of the news article also implies).
57. Perhaps because the words "polyethylene glycol" (abbreviation: PEG) precede the word "graphene" in this news article, and "polyethylene glycol" is a component of ALC-0159, ██████ et al. conclude that ALC-0159 contains graphene oxide. However, this conclusion is incorrect and does not follow from the other pages of ██████ 121. The SINOPEG website itself also does not mention in the product descriptions of ALC-0159 and ALC-0315 that they contain graphene oxide.

3.3.2 Nor any other toxic substances in Comirnaty

58. ██████ et al. now also argue that, in addition to graphene oxide, COVID-19 vaccines contain several other dangerous substances, such as chromium, arsenic, nickel, cobalt, copper, tin, cadmium, lead, manganese, and mercury.¹⁰¹ This is said to be evident from the study submitted as Exhibit ██████ 141 from the International Journal of Vaccine Theory, Practice and Research of October 11, 2024. This journal is a notorious anti-vaccine publication that promotes disinformation about COVID-19 vaccines.¹⁰² The 'research' has also been updated,¹⁰³ after criticism arose that, among other things, the device used is not even capable of detecting the reported values of the elements in question and the dilution calculations (and therefore the reported values) were off by a factor of 200.¹⁰⁴
59. The "study" itself also reveals that the "researchers" were unable to replicate the "results"—a key method for verifying and validating research results. The "researchers" noted that they measured varying levels of the "chemicals" in the same doses of vaccines:¹⁰⁵

"Given all the noted characteristics of the fluids in the vials that were analyzed, their content seems to be changing across time. The contents of all the vials were heterogeneous in unexpected ways. In spite of their seemingly common viscous matrix, even with repeated draws from the same vial, we never found homogeneous content in different samples even when they were drawn from the same vial." [underlining added, lawyers]

60. Chemical elements do not appear or change spontaneously (except by radioactive decay), suggesting that the variability comes from the

¹⁰¹ CvR, nr. 155.

¹⁰² See for example. <https://www.mcgill.ca/oss/article/covid-19-medical-critical-thinking/spikeopathy-speculative-fiction-contaminates-blood-supply>; en <https://healthfeedback.org/claimreview/preventing-deaths-isnt-sole-benefit-covid19-vaccination-contrary-epoch-times-article/> en <https://defacto-observatoire.fr/Medias/Factuel/Fact-checks/Cette-etude-italienne-assurant-montrer-d-etranges-particules-dans-le-sang-apres-la-vaccination-anti-Covid-a-ARN-ne-respecte-pas-le-protocole-scientifique/>.

¹⁰³ See footnote 1: "The current version has been edited for format, peer-reviewed, and updated."

¹⁰⁴ <https://www.naturalnews.com/2024-10-16-the-chd-touted-science-paper-claiming-55-undeclared-chemical-elements-were-found-in-covid-vaccines-is-a-hoax-and-must-be-retracted-heres-why.html>.

¹⁰⁵ Production ██████ 141, p. 19.

researchers themselves, for example because they contaminated the samples or used an impure method of working.

61. Even if the reported values were assumed to be accurate, they would still be so low that they pose no risk whatsoever. The reported values of all allegedly measured elements remain (far) below the safe, or average, daily intake values for those elements. Bourla refers to Exhibit Bourla-62, which contains a table with the highest allegedly measured values per element per dose of Comirnaty (0.3 ml) compared with the safe values for daily intake in micrograms or the average values for daily intake (if those safe values are not known).

3.3.3 No "large amounts of DNA scrap" in Comirnaty

62. ██████ et al. argue that "large amounts of DNA debris [were measured] in the mRNA injection fluid produced, and there were no technical means to prevent this during large-scale production." For this reason, US law would allow up to 50% DNA debris instead of mRNA as a contaminant in the injection fluid. Since the production process for COVID-19 mRNA injections is the same worldwide,¹⁰⁶ this would also apply to the vaccines supplied to ██████ et al., as Bourla understands this argument. All this "can be demonstrated" by two "experts" who could testify on this basis. Any concrete substantiation for these assertions is lacking, and relevant documents have not been submitted (in violation of Article 85 of the Dutch Code of Civil Procedure).¹⁰⁷ It also remains unclear to what conclusion (relevant to the claims) this argument should lead. Bourla suspects that ██████ et al. believe this fact would make the vaccines unsafe, but even that is not stated, let alone: how and why that would be the case.
63. ██████ et al. have therefore failed to meet their burden of proof, so this argument can be dismissed for that reason. In any case, the claim that Comirnaty contains "large quantities of DNA scrap" is incorrect.

3.3.4 No nanotechnology in Comirnaty that modifies DNA

64. ██████ et al. argue that Comirnaty contains "nanotechnology" with which "the actual rulers and their executors" want to modify people's DNA and make them part of the "Internet of Bodies."¹⁰⁸ To substantiate this claim, ██████ et al. submitted a briefing paper from the WEF and a screenshot of the WEF website (Exhibit ██████ 97). ██████ et al. failed to refer to a specific page of the 28-page document.¹⁰⁹

¹⁰⁶ CvR, nr. 67.

¹⁰⁷ See Supreme Court 9 March 2012, ECL1:NL:HR:2012:BU9204, paragraph 3.5: "The Supreme Court notes in the foregoing that a party relying on correspondence in its possession may be required to introduce that correspondence into the proceedings of its own accord, even if it concerns confidential correspondence between lawyers, the production of which requires the consent of the (then) lawyer of the opposing party or the chairman. The court is not required to give the parties the opportunity to do so."

¹⁰⁸ CvR, nr. 23.

¹⁰⁹ Regarding the lack of references to specific parts of long productions, see section 1.3 above..

65. As Bourla already explained in his CvA, Comirnaty does not modify human DNA.¹¹⁰ The mRNA in Comirnaty does not enter the cell nucleus, where the human genome, that is, DNA, is located. Instead, the mRNA is quickly broken down by the body of the vaccinated person.¹¹¹
66. Based on the positions taken by ██████ et al. and the submitted exhibits, Bourla understands that ██████ et al.'s "Internet of Bodies" refers to a concept that refers to a network of devices that collect data, are connected to the internet, and are located on, in, or around the human body (e.g., smartwatches, pacemakers, or insulin pumps). Comirnaty is a vaccine. It contains no chips, sensors, or transmission capabilities and therefore cannot be connected to the internet or collect human data. This assertion by ██████ et al. also lacks any basis in fact.

3.4 No differences in batches

67. ██████ et al. again argue that there would be differences between the various batches of Comirnaty, because different numbers of side effects have been reported in this regard.¹¹² In the CvA, Bourla explained in detail that very strict quality controls are carried out on the quality of the (produced) vaccines and that the fact that more or fewer side effects are reported for certain batches of vaccines does not mean that there is (therefore) a difference in quality between those batches of vaccines.¹¹³
68. Analyses of reported (possible) adverse events are not suitable for demonstrating a causal link between vaccine use and health problems, especially when using self-reporting systems that are subject to reporting biases and data shortcomings. The fact that more or fewer adverse events are reported for different batches of vaccines can be explained, for example, by the fact that (i) some batches were not used or were barely used (and therefore no or very few adverse event reports were made) and (ii) different groups of people received different batches. The expected adverse events and reporting behavior differ per group. Also relevant is (iii) the fact that, for previously administered batches, healthcare providers were encouraged to report all suspected adverse events, but were no longer encouraged to do so later.¹¹⁴
69. Moreover, as far as Bourla is aware, the administration of batch EM0477, the "killer batch" referred to by ██████ et al., has not been stopped in the Netherlands (or elsewhere). Nor have any batches of Comirnaty been recalled anywhere in the world for safety reasons.¹¹⁵
70. Each of the positions taken by ██████ et al. in this regard at the CvR and the Productions ██████ 130-133 submitted with it fail on the basis of the foregoing.

¹¹⁰ CvA, para. 3.3.7.

¹¹¹ See, for example, 'mRNA vaccines are distinct from gene therapy', Reuters, 10 August 2021 (Bourla-54), accessed via www.reuters.com/article/idUSL1N2PH16N.

¹¹² CvR, nrs. 69, 116 and 120.

¹¹³ CvA, par. 3.3.5. This also applies to Mrs Van der Voort-Kant in her CvA (nrs. 40-45).

¹¹⁴ CvA, nrs. 99 and 102.

¹¹⁵ CvA, nr. 103.

Moreover, the productions cannot serve to substantiate the claims of █████ et al., as Bourla explains below..

71. Minks's exhibit 130 concerns a page titled "Suspected cases of vaccine side effects reported to the Paul Ehrlich Institute after the use of COVID-19 vaccine KILLER Batches causing Death." It depicts two sets of different colored circles of varying sizes, each containing (difficult to read) apparently the designation of different batches of mRNA vaccines and a number that, Bourla assumes, is the number of reported "suspected cases" of adverse events. The left group of circles apparently refers to mRNA vaccines, and the other to viral vector vaccines. The source for these groups of circles is the homepage of the Paul-Ehrlich Institute website, an agency of the German Ministry of Health, and the X.com username @waukema. As Bourla explained above,¹¹⁶ cannot be expected of him or the court to search very extensive exhibits or the internet for possible substantiation or sources for the positions taken by █████ et al. Bourla is therefore unable to verify these numbers due to the lack of any proper source reference. Even if these numbers are correct, that fact does not detract from the preceding (nos. 68-70).
72. █████ 131 concerns a list of postal codes where (apparently Wouter Aukema) noted: "Couldn't resist, Leon, a saline solution was delivered to these postal codes," and a map of the Netherlands with colored squares on (apparently) the relevant postal codes. Any proper source reference or substantiation is lacking. Apparently, █████ et al.'s reasoning is that if no adverse reactions to certain batches have been reported, those batches must have involved a saline solution. This is incorrect. Pfizer did not supply saline solutions and presented itself as Comirnaty. Moreover, the 'accusation' is inconsistent with █████ et al.'s overarching claim that genocide would be committed with the COVID-19 vaccines. If Pfizer's goal were to kill humanity with toxic vaccines, why would they supply harmless saline solutions instead of Comirnaty?
73. Production █████ 132 concerns a newspaper article dated December 20, 2024, in 'De Andere Krant' about Wouter Aukema's analyses and Hansen's scientific report, which attempts to establish a link between different numbers of reported side effects and varying quality of vaccine batches, the inadequacy of which Bourla had already explained to the CvA.¹¹⁷ As the article itself correctly states, "this concerns deaths after vaccination, which does not mean the same as due to vaccination."
74. █████ 133 production is a graph showing the number of vaccine doses in total stock and in free stock, as well as the cumulative number of doses delivered to vaccination sites over the period January through March 2021. The original is taken from a letter from the Minister of Health, Welfare and Sport.¹¹⁸
75. █████ et al. placed a red circle in Production █████ 133 with the text "Significant quantity of Pfizer mRNA injections withdrawn from the free stock around February 6, 2021. What large Pfizer batch was withdrawn at that time

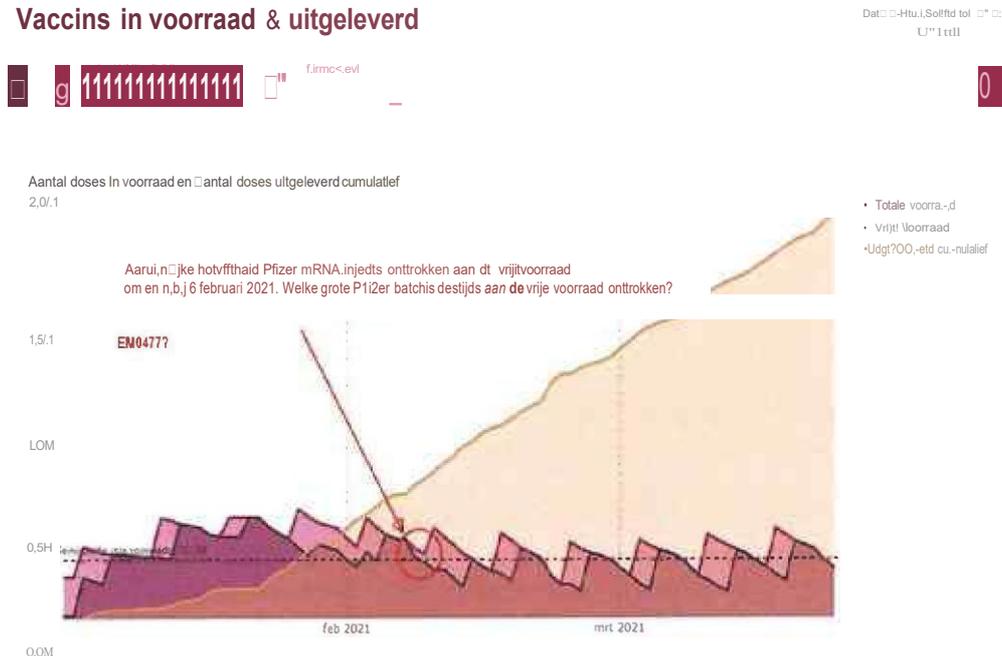
¹¹⁶ See section 1.3 above.

¹¹⁷ CvA, nrs. 97-104.

¹¹⁸ *Parliamentary documents* II 2020-2021, 25 295, nr. 1063, p. 46.

from open stock? The last report to Lareb of the death batch EM0477 was on February 5, 2021. EM0477?"

Vaccins in voorraad & uitgeleverd



76. This question posed by █████ et al. is insufficient to justify the conclusion that, as █████ et al. claim, half of a batch (let alone which batch) was withdrawn from the free stock, let alone what the reason for this would have been.¹¹⁹
77. As can be seen in the graph, there is a regular increase in total and free stock, followed by a decrease in total and free stock. These fluctuations can be explained by (i) the irregularity of deliveries and (ii) fluctuations in (the rate of) deliveries, as can be seen from the explanation of this graph in the relevant parliamentary document.¹²⁰

4 NO DAMAGE ARISING FROM COMMUNITY

78. As Bourla explained in his statement of claim, █████ et al. do not meet the threshold for the damages procedure. The possibility of damages suffered by █████ et al. is implausible because (i) Comirnaty does not contain graphene oxide (or other toxic substances), (ii) █████ et al. failed to meet its burden of proof and the majority of █████ et al. admits that it did not suffer material damages, and (iii) the alleged non-material damages are not eligible for compensation. █████ et al. did not raise any objections to this in their statement of claim.
79. Bourla agrees with the State's positions in his rejoinder on this matter in no. 2.7 and 3.1, first, second and sixth bullets:
- █████ et al. have not substantiated at all that he suffered damage as a result of a COVID-19 vaccination.

¹¹⁹ CvR, nr. 122.

¹²⁰ *Parliamentary documents* 112020-2021, 25 294, nr. 1063, p. 46.

In their Statement of Claims, ██████ et al. devote only one paragraph—not concrete and unsubstantiated—to damage, and one paragraph to causality.

- It was publicly known that vaccines can have side effects, even before claimants were vaccinated.
- These possible side effects have also been explicitly and publicly pointed out.
- It is incorrect that the claimants "are using the lie" that there are no side effects in the first two weeks after vaccination. The Lareb Foundation website (which is also linked to on the RIVM website) states that side effects usually occur within 48 hours of vaccination.

5 OFFER OF EVIDENCE MUST BE REJECTED

80. ██████ et al. submitted a copy of a petition in another case before this court. It requests an order for preliminary evidence to be taken to demonstrate that a Great Reset is underway and that COVID-19 vaccines are bioweapons used to commit genocide.¹²¹ ██████ et al. offer to hear the individuals named in the petition as experts or witnesses.

81. The request must be denied because it follows from the CvA and the foregoing that ██████ et al. failed to fulfill their burden of proof. In the vaccination certificates of ██████ et al. in the CvR (Exhibit ██████ 91), it is often unclear who the certificates belong to, due to missing names or additional initials. Furthermore, there are discrepancies in the data, as in the case of claimants 4 and 5, where the vaccination booklet shows different dates than the attached screenshots.¹²²

82. The request must also be rejected because (i) the proposed individuals cannot be considered (objective and impartial) experts, (ii) they do not possess the appropriate qualifications, (iii) the proposed questions are irrelevant and/or unsuitable for an expert or witness to answer and/or do not fall within the nominated individuals' area of expertise, and (iv) it has not been explained which relevant personal observations the proposed witnesses can testify about. Bourla refers in this regard to his statement of defense (Exhibit Bourla-63), the State's statement of defense (Exhibit Bourla-64), and the court's negative decision (Exhibit Bourla-65).

83. In addition, ██████ et al. offered to call Krüger and Mr. Walter Lang as witnesses, specifically regarding the assertion that the spike protein is found ubiquitously, continuously, and permanently in the bodies of people who received an mRNA COVID-19 vaccine. In this regard, too, ██████ et al. failed to meet their burden of proof¹²³ and that Krüger and Lang, the authors of the book "Vaccinated-Dead," are not (objective and impartial) experts.¹²⁴

¹²¹ Production 107, nrs. 1, 8 en 13.

¹²² See also: conclusion of the State's rejoinder of 24 July 2025, nr.

¹²³ 2.7. See no. 26 fourth bullet above.

¹²⁴ See nos. 36-37 and 40 above.

6 **NO REASON FOR A REGISTERED HEARING**

84. Finally, ██████ et al. requested a preliminary hearing to discuss the further course of the proceedings (per group of defendants), the presentation of evidence, the manner in which the parties will be heard, and the admission of independent media to oral hearings and interrogations. Bourla believes that, given the debate between the parties, the court has been sufficiently informed and can deny ██████ et al.'s claims without the need to order an oral hearing. In any case, Bourla sees no reason to order a preliminary hearing to discuss the topics mentioned by ██████ et al., the relevance of which has neither been explained nor is evident.

CONCLUSION

- 7
85. Bourla maintains his conclusion in the CvA.

loco
V. Vowk 

Lawyer

This case is being handled by Mr. O.C. Roessingh, T +31 20 577 1892, M +316 5162 1874, E Davine.Roessingh@debrauw.com, and Mr. M. Bredenoord-Spoek, T +31 20 577 1066, M +316 5043 1078, E Marieke.Bredenoord@debrauw.com. De Brauw Blackstone Westbroek N.V., P.O. Box 75084, 1070 AB Amsterdam

APPENDIX 1 - LIST OF PRODUCTIONS

Exhibit	Bourla-59	Conclusion of the State's rejoinder of 23 July 2025
Exhibit	Bourla-60	Breast cancer statistics in Germany
Exhibit	Bourla-61	Breast cancer mortality statistics Germany
Exhibit	Bourla-62	Data overview of elements allegedly contained in Comirnaty
Exhibit	Bourla-63	Bourla's statement of defense against █████ et al.'s request for preliminary evidence.
Exhibit	Bourla-64	State's statement of defense against request for provisional evidence by █████ et al..
Exhibit	Bourla-65	Court order of 20 August 2025 on the request for provisional evidence

EXHIBIT BOURLA-59

PELS RIJCKEN

Court North-Netherlands, location Leeuwarden

Oral hearing of 23 July 2025

Casenummer/rollnummer C/17/190788 / HA ZA 2023-172

Conclusion of rejoinder

regarding

1. The State of the Netherlands

whose registered office is located in The Hague

2. Everhardus Ite Hofstra

3. Jaap Tamino van Dissel

4. Maria Petronella Gerarda Koopmans

5. Mark Rutte

6. Sigrid Agnes Maria Kaag

7. Hugo Mattheüs de Jonge

8. Ernst Johan Kuipers

9. Diederik Antonius Maria Paulus

Johannes Gommers

10. Wopke Bastiaan Hoekstra

11. Cornelia van Nieuwenhuizen

12. Feike Sijbesma

all choosing residence in The Hague

defendants

lawyers: mr. R.W. Veldhuis and mr. M.E.A. Möhring

against

1. [REDACTED]

2. [REDACTED]

3. [REDACTED]

4. [REDACTED]

5. [REDACTED]

6. [REDACTED]

7. [REDACTED]

plaintiffs

lawyers: mr. P.W.H. Stassen and mr. A.G.W. van Kessel

1 Introduction

- 1.1 The conclusion of the plaintiffs' reply further exposes what was already apparent earlier in these proceedings: the plaintiffs assume a different, fictitious reality.
- 1.2 The plaintiffs allege that they, and the rest of the Dutch population (and the global population), were deliberately misled into getting vaccinated against Covid-19. This was allegedly done in execution of a large-scale conspiracy—aimed at genocide ("genocide of the animate human being"¹; "the ultimate goal is to eradicate the animate human being, made in the image of its Creator, who is connected to its Creator"²), with the Covid-19 vaccines as a "bioweapon³," according to the plaintiffs.
- 1.3 The State⁴ already explained in its statement of defense that the (absurd) accusations made by the defendants are incorrect and unfounded. In that context, the State explained the course of the pandemic and its consequences, as well as the development and explanation of the COVID-19 vaccines – to combat the pandemic and protect public health. The statement of defense already implies that the claims must be dismissed, and the statement of reply does not change this.
- 1.4 The plaintiffs simply refuse to see or hear this. What the State presented in its statement of defense is dismissed by the plaintiffs in their reply as "the preferred reality." Sources the State referred to in support—such as statistics from Statistics Netherlands (CBS), research from the National Institute for Public Health and the Environment (RIVM), and approval reports from the Health Council and the European Medicines Agency (EMA)—are also flawed, according to the plaintiffs⁵. They allege that these are "manipulated data compiled through agencies controlled by the State itself."
- 1.5 The reply therefore does not actually contradict what the State has argued. Instead, it sketches an alternative and fictional reality, which the plaintiffs claim exists, with the reply being constructed from speculation and theories.
- 1.6 This makes it impossible to have a real debate. It's therefore important to bring this procedure back to its (legal) core.

¹ Reply, § 21.

² Reply, § 19.

³ Among other things, reply, § 83.

⁴ Regarding the position of the individual defendants on whose behalf this reply is submitted, see the reply under 1.13-1.15. The same also applies to this conclusion of the reply.

⁵ Reply, § 45.

2 The heart of the matter

- 2.1 In these proceedings, plaintiffs must state and substantiate that they have been treated unlawfully,⁶ and that they have suffered damage as a result.⁷ They did not do that.
- 2.2 The plaintiffs' core argument is that the disease Covid-19 does not exist, there has been no pandemic and that the vaccines are not safe.⁸ In its statement of defense, the State has already (substantiated) explained that Covid-19 exists, that there has indeed been a Covid-19 pandemic,⁹ and that the broad scientific consensus¹⁰ is that the various vaccines against Covid-19 have been a safe and effective means of combating that pandemic.¹¹
- 2.3 The (non-conclusive) arguments the plaintiffs make in their reply do not alter this. Nor do the submitted exhibits.

The plaintiffs have submitted a large number of productions (the total now stands at 146), several of which are very extensive (the productions accompanying the reply total more than 4,500 pages).¹² Moreover, plaintiffs do this without explaining in their reply—by referring to specific pages from a document—why that document is relevant and how it supports their arguments. This happens, for example, with document 95 (453 pages) and also with document 108 (3,903 pages). This is contrary to due process.¹³ but even apart from this, any productions on which the plaintiffs do not take any concrete positions need not be taken into account.

- 2.4 For the sake of completeness: the plaintiffs' claims are also not supported by the exhibits submitted by the plaintiffs. Examination of the exhibits reveals that plaintiffs often distort the context. This is the case, for example, with the statement made by

⁶ Judging by the wording of the declaratory judgment, the plaintiffs also appear to want to represent "the Dutch people," but this is not a class action. For this reason alone, the requested declaratory judgment cannot be granted on this point.

⁷ The plaintiffs' assertions regarding US vaccine regulations (statement of reply, paragraphs 67-68) are irrelevant. US law does not apply to this dispute.

⁸ Reply, § 51.

⁹ See conclusion of answer, in particular § 2. See also: <https://data.who.int/dashboards/covid19/deaths>.

¹⁰ In response to the plaintiffs' arguments, the State further points out that an extensive systematic study found no evidence of a link between Covid-19 vaccines and fertility restrictions. See Zace, La Gatta, Petrella, Di Pietro, 'The impact of COVID-19 vaccines on fertility-A systematic review and meta-analysis', *Elsevier*40/42, 2022, p. 6023-6034. Accessible via: <https://doi.org/10.1016/j.vaccine.2022.09.019>. See also: <https://factcheck.afp.com/doc.afp.com.33D39R6>.

¹¹ Conclusion of answer, in particular §§ 4, 5 and 6.2 to 6.4. See also, for example, Watson e.a., 'Global impact of the first year of COVID-19 vaccination: a mathematical modelling study', *The Lancet Infectious Diseases* 22/9, 2022, p. 1293-1302, accessible via: [https://doi.org/10.1016/S1473-3099\(22\)00320-6](https://doi.org/10.1016/S1473-3099(22)00320-6). This article estimates (based on mathematical models) that COVID-19 vaccinations prevented 14.4 million deaths worldwide between December 8, 2020, and December 8, 2021. See, for example: <https://www.umcutrecht.nl/nieuws/geen-oversterfte-door-covid-19-vaccinaties>.

¹² Apparently, the claimants also intend to introduce more documents in addition to this, see the reply., § 47.

¹³ Zie bijv: Hoge Raad 10 maart 2017, ECLI:NL:HR:2017:404, rov. 3.3.2 en Conclusie A-G Keus 16 oktober 2015, ECLI:NL:PHR:2015:2494, nr. 3.3.

Mr. Van Kappen to which plaintiffs refer,¹⁴ in the statements made by the then Minister of Health, Welfare and Sport,¹⁵ in the internal email from VWS that the plaintiffs mention,¹⁶ in a comment from Moderna's CEO¹⁷, and the book mentioned by the plaintiffs about the German RKI and the quotations contained therein.¹⁸ The productions do not therefore state what the plaintiffs state about this.

- 2.5 Furthermore, the plaintiffs also rely on documents of (relatively) limited value. For example, they point to an investigation into a single death, in which the investigators themselves did not conduct an autopsy (but rather a paper study).¹⁹ - and plaintiffs also draw conclusions that are not apparent from the investigation.²⁰ For example, plaintiffs also point to an article in which someone makes what they call a 'professional observation',²¹ but has not done any (peer-reviewed) research.
- 2.6 Moreover, the plaintiffs' claims are largely part of (conspiracy) theories that have already been expressed, and which some have been circulating for some time. Many of these theories have already been fact-checked by independent sources and found to be unfounded. This is the case, for example, with the plaintiffs' theory that minutes from the RKI supposedly show that there had been no pandemic.²² for the aforementioned theory regarding the Moderna CEO's statements and the alleged meaning of the word 'AstraZeneca'.²³
- 2.7 The claim must therefore be dismissed. There is no evidence of any unlawful conduct. Furthermore, the plaintiffs have not substantiated at all that they suffered damage as a result of a Covid-19 vaccination.

¹⁴ Production 92, claimants, cited in § 7 of the reply. The video shows that the conversation at the talk show table concerns a bombing in Syria that had taken place the day before, and that Van Kappen made his statements in that context.

¹⁵ Production 93 claimants, cited under § 11 reply.

¹⁶ Production 94 claimants, cited in § 11 of the reply. This email shows that during the pandemic, a proposal was made to build up emergency stockpiles within NATO in relation to Covid-19.

¹⁷ Production 118, plaintiffs, cited under § 61 of the reply. The quote, according to the video, is different from what the plaintiffs claim. See also: <https://www.factcheck.org/2023/02/scicheck-posts-misrepresent-moderna-ceos-remarks-on-vaccine-production/>.

¹⁸ Production 112, plaintiffs, cited in § 50 of the reply. Comparing the claims the plaintiffs make about this book in the reply with the content of the book, as per the passage cited by the plaintiffs, shows that the book does not contain what the plaintiffs claim.

¹⁹ Production 116 claimants, to which they refer under § 59 reply.

²⁰ The conclusion of the study is that a Covid-19 vaccination may have contributed to the death, and it is not clear whether this was directly or indirectly.

²¹ Production 117 claimants. See also in this regard <https://www.factcheck.org/2024/05/still-no-evidence-covid-19-vaccination-increases-cancer-risk-despite-posts/> ; <https://www.cancer.org/cancer/managing-cancer/coronavirus-covid-19-and-cancer/covid-19-vaccines-in-people-with-cancer.html> ; <https://mvec.mcri.edu.au/aap-factcheck-debunks-circulating-vaccine-misinformation/>.

²² Zie <https://factcheck.afp.com/doc.afp.com.34RY6DT> ; <https://www.aap.com.au/factcheck/no-german-government-has-not-said-there-was-no-pandemic/> ; <https://www.tagesschau.de/faktenfinder/kontext/rki/files-corona-100.html> ; <https://www.faz.net/aktuell/feuilleton/debatten/rki-kein-skanda-1-in-den-aktuel-19923871.html>.

This leaves aside the significance and relevance of the course of events in Germany for these proceedings. That "this course of events was exactly the same in the Netherlands, more specifically within the Dutch OMT," as the claimants state in § 48 of the reply, is incorrect and unsubstantiated.

²³ <https://www.yahoo.com/news/fact-check-no-astrazeneca-doesnt-100000343.html>.

The State has already provided a reasoned explanation for this in its statement of defence.²⁴ In their reply, the plaintiffs limit themselves to one – non-specific and unsubstantiated – paragraph about damage, and one paragraph about causal connection.

Regarding the vaccination certificates submitted by the plaintiffs in their reply (production 91 plaintiffs), it is not always clear who the relevant certificate belongs to (because a name is missing from the document, or more initials are mentioned than in the summons) and it is noticeable that there are discrepancies in the dates on those documents (for example, with regard to plaintiffs sub 4 and 5, a vaccination booklet is submitted in which different dates are mentioned than on the screenshots that are also attached).

- 2.8 In this state of affairs, it also applies that the plaintiffs have not sufficiently substantiated their case, especially in light of the State's defense in the statement of defense, to be permitted to provide further evidence – not to mention that the offer of evidence is also irrelevant. Their offer of evidence must be rejected.

Regarding the plaintiffs' request to question several individuals about whether COVID-19 vaccines are bioweapons, the following also applies. A third party, assisted by the same lawyers as the plaintiffs, previously requested this court to order a preliminary expert report in which these individuals are questioned. The State objected to that request (production 14).²⁵ That defence must be considered repeated and inserted here,²⁶ and essentially boils down to the fact that these persons are not experts, and in any case not independent and impartial experts, and that in any event there is no basis or interest in hearing these persons.

3 Other points

- 3.1 For the sake of completeness, the following in response to the conclusion of the reply.

- In Section 82, the plaintiffs argue that their willingness to be vaccinated would have decreased if they had known about the potential side effects of the vaccine. The State points out that it was publicly known that vaccines can have side effects, even before the plaintiffs were vaccinated.²⁷
- These potential side effects were also explicitly and publicly pointed out. The plaintiffs accuse the then-Minister of Health, Welfare and Sport of promoting the Janssen vaccine while allegedly being aware of the "serious effects of this drug on the health of young people."²⁸

²⁴ See the conclusion of the answer, § 7.1-7.8.

²⁵ At the time of filing this rejoinder, the request had not yet been decided. An oral hearing was held on July 9, 2025, and a decision was scheduled for August 20, 2025.

²⁶ This defence also applies to the offer to hear Krüger and Lang.

²⁷ See for example: EMA, 'Annex 1: Summary of Product Characteristics Comirnaty', https://www.ema.europa.eu/n1/documents/product-information/co_mirnatv-epa_r-product-information_nl.pdf.

²⁸ Reply, § 95.

The State notes that at the end of the NOS video submitted by the plaintiffs as exhibit 125, the then-Minister urges people to be thoroughly informed before choosing the Janssen vaccine, because the vaccine has a very rare but serious side effect.²⁹ The State then leaves out that the plaintiffs, even according to their own arguments, were not vaccinated with the Janssen vaccine, so the relevance of this argument is not apparent.

- It is incorrect that no answer was given to certain parliamentary questions, as the plaintiffs state in § 74 of their reply. That answer was indeed given.³⁰ This is also apparent from production 120, which was submitted by the plaintiffs themselves.
- The plaintiffs' assertion that the State would obstruct independent research into excess mortality during the Covid-19 pandemic is also incorrect.³¹ The State has - as is also apparent from the answers to parliamentary questions ³² - A request to make certain data available was forwarded to the Lareb Foundation. The State emphasized that data, where possible, should be as widely available as possible for scientific health research, and that Lareb did not consider the requested data suitable for establishing a causal link. The State also emphasized the importance of safeguarding the privacy of individuals reporting to Lareb. Furthermore, the State has encouraged independent scientific research into excess mortality during the Covid-19 pandemic. For example, through the ZonMw Excess Mortality subprogram, further research into excess mortality has been conducted by organizations such as the RIVM (National Institute for Public Health and the Environment) and Statistics Netherlands (CBS).³³ These studies show, among other things, that the Covid-19 vaccinations have not led to excess mortality, but have actually limited the number of deaths.³⁴
- The plaintiffs are requesting the court to order the State to produce recordings of OMT meetings, which have been filed with the registry of the North Holland District Court. The State points out that the North Holland District Court—citing the threats that OMT members continue to face to this day— the importance of OMT members being able to speak freely and confidentially during an OMT meeting and the fact that a lot of information is already public –

²⁹ Reply, production 125, video NOS, 01:00-01:13.

³⁰ Appendix to the Proceedings 2024-2025, nr. 998.

³¹ Reply, § 63.

³² Appendix to the Proceedings 2024-2025, nr. 2256.

³³ Parliamentary documents II 2024-2025, 25 295, nr. 2219.

³⁴ Parliamentary documents II 2024-2025, 25 295, nr. 2219. For the studies see, among others::
<https://www.cbs.nl/nl-n-1/longread/rapportages/2022/sterfte-en-oversterfte-in-2020-en-2021>;
<https://www.rivm.nl/publicaties/covid-19-vaccinatie-en-sterfte-in-2022-kans-op-sterfte-aan-covid-19-en-andere-oorzaken>
<https://www.cbs.nl/nl-n-1/longread/rapportages/2023/oversterfte-en-doodsoorzaken-in-2020-tot-en-met-2022>.

has decided that those recordings should not be made public.³⁵ This request must also be rejected in these proceedings.

- It is also incorrect that "the lie is being used" that there would be no side effects in the first two weeks after the vaccine, as the plaintiffs claim.³⁶ The website of the Lareb Foundation (which is also referred to on the RIVM website) states that side effects usually occur within 48 hours after vaccination.³⁷
- In § 73 of the reply, the plaintiffs argue that the measures taken during the COVID-19 pandemic (such as temporary lockdowns and the mandatory face mask requirement) constitute a violation of fundamental rights. The legality of these measures is not at issue in this dispute. These measures have also been reviewed in various judicial decisions and consistently found to be lawful.³⁸
- The plaintiffs submit exhibit 121 to support their claims regarding graphene oxide. However, this exhibit is untraceable, and its origin cannot be verified. In its statement of defense (§ 6.3), the State, based on information from the medicines information bank, pointed out that the Pfizer and Moderna mRNA vaccines do not contain graphene oxide.
- The State further considers it highly reprehensible that the plaintiffs, without any substantiation, state that individuals are responsible for the death of claimant sub 6.³⁹ Even though her death may have caused a sense of grief and possibly helplessness among the other plaintiffs, this does not justify making such unfounded statements.

3.2 Finally, the following: The summons lists Mr. George Reginald Vlegels, residing in Leeuwarden, as plaintiff 7. The reply, without further explanation, lists a different name for plaintiff 7: Mr. George Reginald Dijkstra, residing in Leeuwarden. This makes it unclear who is the party to the proceedings, and whether a change of party is intended. This uncertainty is all the more significant since the documents submitted against plaintiff 7 to substantiate his vaccination are in the name of Vlegels.

³⁵ North Holland Court 30 juni 2025, ECLI:NL:RBNHO:2025:6994, rov. 8-9.

³⁶ Reply, § 52.

³⁷ <https://www.lareb.nl/bijwerkingen-coronavaccins>: <https://www.rivm.nl/corona/coronaprik/bijwerkingen>.

³⁸ See, for example: The Hague District Court, May 1, 2024, ECLI:NL:RBDHA:2024:6182 (on the Corona access pass); The Hague Court of Appeal, December 14, 2021, ECLI:NL:GHDHA:2021:2452 en ECLI:NL:GHDHA:2021:2543 (about the face mask requirement); Hof Den Haag 22 juni 2021, ECU: NL:GHDHA:2021:1094 (about vaccination policy and campaign); Hof Den Haag 18 mei 2021, ECLI:NL:GHDHA:2021:868 (about showing a negative test result when entering the Netherlands); Hof Den Haag 26 februari 2021, ECLI:NL:GHDHA:2021:285 (about the curfew); Rechtbank Den Haag (vzr.) 9 december 2020, ECLI:NL:RBDHA:2020:12449 (about the use of PCR tests); Rechtbank Den Haag (vzr.) 24 juli 2020, ECLI:NL:RBDHA:2020:6856.

³⁹ Reply, § 99.

4 Conclusion

As per conclusion of answer.



advocaat

The State / [REDACTED] c.s. C/17/190788 / HA ZA 2023-172

Inventory of productions of the conclusion of the reply

- 14 Statement of defense regarding preliminary evidence presented by the State,
June 24, 2025

ZENTRUM
FÜR
KREBSREGISTERDATEN

ROBERT KOCH INSTITUT



	0- 4	5-9	10- 14	15 - 19	20- 24	25- 29	30- 34	35 - 39	40-44	45 - 49	50- 54	55-59	60- 64	65 - 69	70- 74	75- 79	80- 84	85		
1999 Breast (CSO) female	<5	<5	<5	<5		32	248	938	1972	3154	4609	4810	7310	8098	5889	6500	6121	3063	4601	57345
2000 Breast (C50) female	<5	<5	<5	<5		36	247	956	2039	3331	4818	4825	7579	8661	6240	6429	7113	3033	4239	59546
2001 Breast (C50) female	<5	<5	<5	<5		37	225	923	2053	3440	4624	5807	6285	9026	6648	6530	6229	3827	4131	59785
2002 Breast (C50) female	<5	<5	<5	<5		42	232	903	2141	3633	5091	5912	6058	9106	7678	6493	6353	4462	4681	62785
2003 Breast (C50) female	<5	<5	<5	<5		39	234	858	2104	3730	4873	5925	6143	9261	8430	6255	6406	4828	4111	63197
2004 Breast (CSO) female	<5	<5	<5	<5		38	230	779	2057	3816	5167	5593	5893	8340	8470	6358	5986	5370	3908	62005
2005 Breast (CSO) female	<5	<5	<5	<5		40	239	778	2036	3939	5088	5728	5799	7989	8770	6661	6375	5407	4319	63168
2006 Breast (C50) female	<5	<5	<5	<5		42	260	723	2023	4047	5405	5764	6735	7482	9870	7364	5869	5523	4731	65838
2007 Breast (C50) female	<5	<5	<5	<5		43	266	765	1977	4280	6003	6342	7125	7633	10683	7722	6154	5687	5403	70083
2008 Breast (CSO) female	<5	<5	<5		5	46	286	799	1997	4450	6264	7512	8502	9205	13129	8477	6259	5580	5452	77963
2009 Breast (CSO) female	<5	<5	<5	<5		42	292	796	1915	4371	6463	8110	8409	9149	12092	8803	6571	5531	5699	78243
2010 Breast (CSO) female	<5	<5	<5		5	46	277	765	1764	4200	6420	7875	7917	8393	10391	9003	6672	5346	5811	74885
2011 Breast (CSO) female	<5	<5	<5	<5		53	286	807	1595	3896	6554	7956	7592	8757	9067	9038	7237	5339	5793	73970
2012 Breast (CSO) female	<5	<5	<5	<5		50	299	834	1538	3836	6540	8426	7614	8851	8276	8687	7835	5284	5939	74009
2013 Breast (CSO) female	<5	<5	<5	<5		51	292	806	1646	3555	6573	8704	7395	8625	8235	8591	8049	5101	5879	73502
2014 Breast (CSO) female	<5	<5	<5	<5		44	271	854	1630	3296	6393	8845	7295	8451	7990	8028	8733	5222	5867	72919
2015 Breast (CSO) female	<5	<5	<5		5	44	298	862	1634	3210	6225	8816	7404	8343	8201	7254	8844	5460	6009	72609
2016 Breast (C50) female	<5	<5	<5		7	46	348	879	1691	3124	5944	9135	7514	8145	8676	6612	9171	5922	5764	72978
2017 Breast (CSO) female	<5	<5	<5		6	44	300	911	1786	2977	5715	8758	7331	8248	8885	6441	9288	6483	5838	73011
2018 Breast (CSO) female	<5	<5	<5	<5		40	309	892	1889	2962	5579	8949	7944	8320	9107	6057	8721	6982	5898	73649
2019 Breast (C50) female	<5	<5	<5		5	41	328	989	1857	3087	5274	8760	8072	8871	9227	6259	8693	7467	5925	74855
2020 Breast (C50) female	<5	<5	<5	<5		43	286	1000	1836	3233	4986	8250	8035	8603	8757	6262	7900	7694	6119	73004
2021 Breast (CSO) female	<5	<5	<5	<5		41	284	1005	1936	3363	4875	8406	8414	9184	9329	6902	7206	7839	6795	75579
2022 Breast (C50) female	<5	<5	<5		5	36	299	948	1921	3295	4764	7855	8074	9225	9181	7185	6931	8106	6687	74512

Latest Update: 05.09.2024

Incidence, Number of cases in Germany

Selected filters

Age groups: 0 - 85+

Diagnosis: Breast (C50)

Sex: female

Years: 1999 - 2022

Legend

* : No reasonable results due to a small number of cases

x : Combination does not make sense, for example sex-specific cancer sites.

<5 : Less than 5 cases are registered. For data protection the exact number is not published.

Citation: "German Centre for Cancer Registry Data, Robert Koch Institute: Database Query with estimates for cancer incidence, prevalence and survival in Germany, based on data of the population based cancer registries

Mortality data provided by the Federal Statistical Office. www.krebsdaten.de/database, Latest Update: 05.09.2024, Retrieved: (date of query)"

EXHIBIT BOURLA-61

ZENTRUM FÜR
KREBSREGISTERDATEN

ROBERT KOCH INSTITUT



		0- 4	5-9	10-14	15- 19	20- 24	25- 29	30- 34	35- 39	40- 44	45 - 49	50- 54	55 -59	60- 64	65- 69	70- 74	75- 79	80- 84	85	
1999 female	Breast (C50)	0	0	1	0	3	26	115	337	507	898	1089	1854	2003	1803	2160	2467	1514	2839	17616
2000 female	Breast (C50)	0	0	0	0	3	9	123	299	510	854	1113	1707	2151	1846	2099	2461	1641	2998	17814
2001 female	Breast (C50)	0	0	0	0	2	12	80	292	532	792	1170	1469	2162	1868	2036	2495	1841	2753	17504
2002 female	Breast (C50)	0	0	0	0	4	14	98	278	492	846	1186	1385	2125	2010	2014	2498	2129	2701	17780
2003 female	Breast (C50)	0	0	0	1	2	13	89	259	489	782	1160	1333	2017	2141	1947	2193	2233	2514	17173
2004 female	Breast (C50)	0	1	0	1	3	15	78	240	531	765	1102	1302	2057	2384	1996	2358	2402	2357	17592
2005 female	Breast (C50)	0	0	1	1	2	12	62	232	505	778	1079	1340	1934	2318	2045	2228	2353	2565	17455
2006 female	Breast (C50)	0	0	0	0	0	13	62	232	459	717	1144	1345	1636	2399	2111	2172	2371	2625	17286
2007 female	Breast (C50)	0	1	0	1	1	14	54	198	446	735	994	1353	1517	2237	2183	2106	2235	2705	16780
2008 female	Breast (C50)	0	0	0	0	1	14	54	206	412	748	993	1351	1520	2362	2355	2046	2254	2893	17209
2009 female	Breast (C50)	0	0	0	0	4	16	63	167	377	774	954	1342	1437	2172	2440	2122	2281	2917	17066
2010 female	Breast (C50)	0	0	0	0	3	15	69	187	388	755	965	1263	1465	1997	2599	2178	2383	3199	17466
2011 female	Breast (C50)	0	0	0	0	1	12	77	145	406	738	1053	1293	1655	1816	2624	2346	2247	3402	17815
2012 female	Breast (C50)	1	0	0	0	0	15	59	154	398	670	1061	1256	1548	1694	2604	2545	2288	3455	17748
2013 female	Breast (C50)	1	0	0	0	1	18	70	163	348	671	1079	1247	1532	1628	2430	2649	2343	3673	17853
2014 female	Breast (C50)	0	0	0	0	2	21	67	151	293	724	1034	1179	1484	1604	2329	2782	2274	3726	17670
2015 female	Breast (C50)	0	0	0	0	5	12	64	133	313	646	1042	1243	1420	1627	2243	2988	2567	3833	18136
2016 female	Breast (C50)	0	0	0	0	0	26	70	164	303	644	1052	1347	1464	1744	2095	2995	2652	4014	18570
2017 female	Breast (C50)	1	0	0	0	1	17	83	172	275	647	1063	1263	1415	1796	1863	2920	2788	4092	18396
2018 female	Breast (C50)	0	0	0	0	3	25	76	194	297	596	1023	1309	1416	1750	1847	2841	3092	4122	18591
2019 female	Breast (C50)	0	0	0	1	1	22	85	200	292	485	1026	1411	1324	1692	1775	2802	3271	4132	18519
2020 female	Breast (C50)	0	0	0	0	1	22	86	156	299	502	940	1335	1387	1658	1782	2595	3311	4351	18425
2021 female	Breast (C50)	0	0	0	0	1	19	79	169	301	404	877	1389	1442	1605	1913	2259	3420	4601	18479
2022 female	Breast (C50)	0	0	0	0	3	13	69	187	318	440	878	1286	1448	1678	1976	2239	3478	4878	18891
2023 female	Breast (C50)	1	0	1	0	1	14	75	182	301	479	761	1173	1487	1663	1976	2124	3265	5024	18527

Latest Update: 05.09.2024

Mortality, Number of cases in Germany

Selected filters

Age groups: 0 - 85+

Diagnosis: Breast (CS0)

Sex: female

Years: 1999 - 2023

Legend

* : No reasonable results due to a small number of cases

x : Combination does not make sense, for example sex-specific cancer sites.

<5 : Less than 5 cases are registered. For data protection the exact number is not published.

Citation: "German Centre for Cancer Registry Data, Robert Koch Institute: Database Query with estimates for cancer incidence, prevalence and survival in Germany, based on data of the population based cancer registries

Mortality data provided by the Federal Statistical Office. www.krebsdaten.de/database, Latest Update: 05.09.2024, Retrieved: (date of query)"

EXHIBIT BOURLA-62

Element:	Hoogste gemeten waarde beweerdelijk in Comirnaty-vaccin (in µg/0,3ml)	Limiet van veilige dagelijkse inname (in µg/per dag):
Lithium	0,0186	73890 ¹
Boron	0,66	13000 ²
Sodium	17400	2000000 ³
Mağnesium	16,2	400000 ⁴
Aluminium	69	10000 (bij een çiewicht van 70 kg) ⁵
Fosfor	2010	3000000 ⁶
Potassium	19200	Geen limiet ⁷
Titanium	1,86	Geen veilige limiet gesteld, wel een gemiddelde intake van 1710 ua/per dağ vastgesteld ⁸
Vanadium	0,0063	1800 ⁹
Chromium	0,0216	1000000 ¹⁰
Mançiaan	0,0057	11000 ¹¹
Nickel	0,0081	1000 ¹²
Kobalt	0,000261	3013
Koper	0,027	10000 ¹⁴
Zine	0,81	25000 ¹⁵
Gallium	0,00066	geen veilige limiet, gallium is echter aanwezig in bijvoorbeeld komkommer (0,0016 µg/g en wortel (13,34 µg/g)) ¹⁶
Arsenicum	0,0081	5017
Selenium	0,00225	4000000 ¹⁸
Rubidium	0,00057	geen veilige limiet, gemiddeld mens krijg 6.000 µg/per dağ binnen ¹⁹
Strontium	0,00069	1000000 ²⁰
Niobium	0,00024	Geen veilige limiet vastgesteld, maar nooit een vergiftiging waargenomen en een daily intake van 20-60 ua ²¹
Molybdenum	0,0036	600000 ²²
Ruthenium	0,0000003	Geen limiet, maar is aangetroffen in diverse soorten groenten in een gemiddelde hoeveelheid van 0.0002 (wortel en tomaat) µg/g tot 0,0013 (dille) µg/g ²³
Rhodium	0,000012	Geen limiet, in het slechtste geval (op basis van verouderde çieçievens uit Ençieland) 0,3 ua/per daçi ²⁴
Palladium	0,00024	çieen veilige limiet, 1,5-15 µçi intake per dağ ²⁵
Barium	0,0207	2026
Lanthanum	0,000168	4500000 (voor lanthanum karbonaat, het element als medicijn in zoutvorm) ²⁷
Cerium	0,00153	Geen limiet, te vinden in bepaalde voedsels met een hoeveelheid tussen 0,0002 (komkommer) en 1,2 (braziliaanse noot) µçi/q ²⁸
Praseodymium	0,000042	350 ²⁹
Samarium	0,0000075	Geen veilige limiet, 0,72-1,98 µg/kg droog gewicht is aanwezig in het menselijk lichaam ³⁰
Europium	0,0000075	Geen limiet, te vinden in bepaalde voedsels met een hoeveelheid tussen 0,0005 (broccoli) en 0,1 (braziliaanse noot) ua/q ³¹
Terbium	0,0000006	In diervoeding is de maximumhoeveelheid 200 ³²
Gadolinium	0,000006	Geen limiet, te vinden in bepaalde voedsels met een hoeveelheid tussen 0,0004 (dille) en 0,00125 (spinazie) ua/g ³³
Dysprosium	0,0000042	Geen limiet, tussen de 0,0006 µg/g (rode biet) en 0,0019 µg/g (spinazie) in çiroenten ³⁴
Erbium	0,000018	Geen limiet, maar is aangetroffen in diverse groenten met een gemiddelde hoeveelheid van tussen de 0,0003 µg/g (rode biet) en 0,0010 ua/g (spinazie) ³⁵
Hafnium	0,00093	500 ua/m ³ ³⁶
Wolfram	0,00144	500 ua/m ³ ³⁷
Platinum	0,000126	1,6 µq/0,3ml ³⁸
Lood	0,0126	geen veilige limiet, gemiddelde dagelijkse intake van 0,36µg-2,43ua/kg lichaamsgewicht ³⁹
Uranium	0,000075	0,6 ua/kg lichaamsgewicht ⁴⁰

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- ¹ J. Cafasso, 'The Facts about Lithium Toxicity', healthline.com, 29 juni 2023.
- ² World Health Organization, International Atomic Energy Agency & Food and Agriculture Organization of the United Nations, *Trace elements in human nutrition and health*, World Health Organization 1996.
- ³ 'Sodium reduction', who.int, 7 februari 2025.
- ⁴ 'Magnesium: Fact Sheet for Health Professionals', ods.od.nih.gov.
- ⁵ 'EFSA Advises on the Safety of Aluminium in Food', efsa.europa.eu, 15 juli 2008.
- ⁶ 'Hoeveel vitamines en mineralen heb je nodig?', vitamine-info.nl.
- ⁷ R. Morgan Griffin, A. Powell Key, 'How Potassium Helps the Body', wbmd.com, 8 mei 2024.
- ⁸ 'Estimated intake of titanium dioxide via medicines', rivm.nl, 19 december 2024.
- ⁹ 'VANADIUM - Uses, Side Effects, and More', webmd.com.
- ¹⁰ 'Hoeveel vitamines en mineralen heb je nodig?', vitamine-info.nl.
- ¹¹ 'Hoeveel vitamines en mineralen heb je nodig?', vitamine-info.nl.
- ¹² F. Nielsen, 'Nickel', *Advances in Nutrition* 2020 12/1, p. 281-282.
- ¹³ B.L. Finley, A.D. Monnot, D.J. Paustenbach, S.H. Gaffney, 'Derivation of a chronic oral reference dose for cobalt', *Regulatory Toxicology and Pharmacology* 2012 64/3, p. 491-503.
- ¹⁴ 'Copper: Fact Sheet for Consumers', ods.od.nih.gov.
- ¹⁵ 'Hoeveel vitamines en mineralen heb je nodig?', vitamine-info.nl.
- ¹⁶ 'Showing Compound Gallium (FDB030029)', foodb.ca, 26 november 2019.
- ¹⁷ 'ARSENIC - Uses, Side Effects, and More', webmd.com.
- ¹⁸ 'Selenium: Fact Sheet for Consumers', ods.od.nih.gov.
- ¹⁹ 'Rubidium $_{37}\text{Rb}^{854678}$ ', mateck.com.
- ²⁰ 'Toxicological Profile for Strontium.', ncbi.nlm.nih.gov, 3 april 2004.
- ²¹ 'Niobium $_{41}\text{Nb}^{92906}$ ', mateck.com.
- ²² 'Hoeveel vitamines en mineralen heb je nodig?', vitamine-info.nl.
- ²³ 'Showing Compound Ruthenium (FDB030039)', foodb.ca, 26 november 2019.
- ²⁴ A.C. Beynen, 'Rhodium in petfood', *Bonny Can/een* 2021/2, p. 287-295.
- ²⁵ C. Melber, D. Keiler, 1. Mangelsdorf, *Environmental Health Criteria* 226. Geneva: United Nations Environment Programme, de International Labour Organization en de World Health Organization.
- ²⁶ 'Assessment of the Tolerable Daily Intake of Barium', opgesteld door het *Scientific Committee on Health en Environmental Risks* op last van de Europese Commissie.
- ²⁷ 'Lanthanum Carbonate Dosage', drugs.com, 2 oktober 2024.
- ²⁸ 'Showing Compound Cerium (FDB004261)', foodb.ca, 26 november 2019.
- ²⁹ A.C. Beynen, 'Praseodymium in petfood', *Bonny Can/een* 2024/5, p. 21-28.
- ³⁰ A.C. Beynen, 'Samarium in petfood', *Bonny Canteen* 2024/5, p. 1-9.
- ³¹ 'Showing Compound Europium (FDB003769)', foodb.ca, 26 november 2019.
- ³² A.C. Beynen, 'Terbium in petfood', *Bonny Can/een* 2024/5, p. 121-126.
- ³³ 'Showing Compound Gadolinium (FDB030054)', foodb.ca, 26 november 2019.
- ³⁴ 'Showing Compound Dysprosium (FDB030056)', foodb.ca, 26 november 2019.
- ³⁵ 'Showing Compound Erbium (FDB030058)', foodb.ca, 26 november 2019.
- ³⁶ 'Hafnium', cdc.gov.
- ³⁷ A.M. Bolt, 'Tungsten Toxicity and Carcinogenesis', *Adv. Pharmacol.* 2023/96, p. 119-150.
- ³⁸ 'Platinum and platinum compounds: Health-based recommended occupational exposure limit', advies van de Gezondheidsraad aan de minister van Sociale Zaken en Werkgelegenheid, 12 juni 2008.
- ³⁹ 'Scientific Opinion on Lead in Food', *Efsa Journaal* 2010 8/4, p. 1570.
- ⁴⁰ 'Uranium and Depleted Uranium', world-nuclear.org, 16 mei 2025.

EXHIBIT BOURLA-63

r

Northern Netherlands Court, Leeuwarden location

Case number: C/17/199273 /HARK 25/17

Oral hearing: 9 juli 2025

**DEFENSE PROVISIONAL EVIDENCE TAKING PLACES UNDER ART. 196 ECJ,
Code of Civil Procedure**

regarding:

ALBERT BOURLA

living in Greenwich, United States of America

defendant sub 11,

lawyers: Mr. O.C. Roessingh and Mr. M. Bredenoord-Spoek, both
with offices at Burgerweeshuispad 201, 1076 GR Amsterdam,
who submit this statement of defense.

against:

1. [REDACTED]
living in Leeuwarden,

2. [REDACTED]
living in Brunssum,

3. [REDACTED]
living in Leeuwarden,

(together "[REDACTED] c.s.")

)
applicants,

lawyers: Mr. A.G.W. van Kessel and Mr. P.W.H. Stassen

1 INTRODUCTION

1. ██████ et al. filed a request for provisional evidence pursuant to Article 196 et seq. of the Code of Civil Procedure. In this statement of defense, Bourla explains that ██████ et al. should be declared inadmissible, or at least that the request of ██████ et al. should be rejected.

2. BOURLA JOINS THE STATE'S DEFENSE

2. Bourla has taken note of the statement of defense preliminary expert hearing on behalf of the State of the Netherlands and various natural persons (together the "State") of June 24, 2025 (Appendix 1). Bourla joins the defense of the State and adopts all of the State's positions as its own, and in particular the following (summarized) positions:

- (i) ██████ et al. should be declared inadmissible in their request (Article 196 paragraph 1 of the Code of Civil Procedure), or at least the request of ██████ et al. should be rejected on the grounds of conflict with the proper order of the proceedings and/or abuse of authority (Article 196 paragraph 2 of the Code of Civil Procedure) (paragraph 3 of the State's defence).
- (ii) The request of ██████ et al. must be rejected, because ██████ et al. has insufficient interest in hearing the proposed 'experts', because (i) the proposed persons cannot be regarded as (objective and impartial) experts, (ii) they do not have the correct qualifications and (iii) it is already clear from previous statements how they will testify and that they will not provide irrefutable evidence of the assertions of ██████ et al. (and/or ██████ et al.) (nos. 1.5-1.8 and paragraph 4 of the State's defence).
- (iii) The request of ██████ et al. must be rejected because ██████ et al. has insufficient interest in the request and/or there is abuse of authority and/or conflict with the proper order of the proceedings, because (i) the evidence can also be obtained in writing, (ii) there is no need to secure the evidence, (iii) it concerns a legal dispute and (iv) there is a real chance that any incidental claim for joinder or intervention by ██████ et al. will be rejected (paragraph 5 of the State's defence).
- (iv) The request of ██████ et al. must be rejected, because the questions

proposed by ■■■ et al. are irrelevant and/or unsuitable for answering by an expert, and/or do not fall within the area of expertise of the nominated persons (paragraph 6 of the State's defence).

- (v) To the extent that the request of ■■■ et al. must (also) be understood as a request to hear witnesses, it applies for the aforementioned reasons (i) to (iv) that ■■■ et al. must be declared inadmissible in their request or at least that their request must be rejected. In addition, the request must also be rejected because ■■■ et al. have not explained which relevant events the persons mentioned by ■■■ et al. would have witnessed; none of the questions relate to their own observations (footnote 1 of the State's defence).

3. ADDITIONAL NOTES REGARDING MICHAEL YEADON

3. In addition to the State's defence that Mr Mike Yeadon ("Yeadon"), a former employee of Pfizer, Inc. ("Pfizer"), cannot be regarded as an (objective and impartial) expert, Bourla makes a few further comments.
4. ■■■ et al. claim that Yeadon would have the necessary qualities to be heard and/or to report as an expert, among other things because he is said to be a former vice president of Pfizer and to specialize in the development of vaccines.¹ ■■■ et al. would like to ask Yeadon questions about, among other things, (i) the existence of the disease Covid-19 and the Covid-19 pandemic, (ii) who developed the Covid-19 vaccines and for what purpose and (iii)

Petition ■■■ et al. marginal number 17 sub 2.

the safety and effectiveness of Covid-19 vaccines and the qualification of Covid-19 vaccines as 'bioweapons' and a means of committing genocide.

3.1 No relevant expertise apparent from his resume

5. To the extent that █████ et al. believe that Yeadon can be considered an expert on these subjects because of his employment with Pfizer, this is not clear.
6. Yeadon worked at Pfizer from 1995-2011. So he hasn't been employed by Pfizer for over 13 years. For that reason alone, it can't be that Yeadon was involved in the development of Comirnaty, which started in 2020.
7. In addition, Yeadon did not work in a department within Pfizer that was responsible for vaccine development. Yeadon worked in Pfizer's Worldwide Research, Development and Medicine ("WRDM") organization. Pfizer's WRDM organization is divided into several therapeutic areas, including, for example, 'Inflammation & Immuno/ogy' and 'Vaccines'.² Until 2011, 'Allergy & Respiratory Biology' ("A&R") was also one of the therapeutic areas. Yeadon worked there. The A&R department was involved in research into asthma and lung diseases such as COPD. Yeadon did not work in the 'Inflammation & Immuno/ogy' or 'Vaccines' departments.
8. The latter department ultimately developed Comirnaty in 2020. It is therefore not clear that Yeadon, because of his employment at Pfizer, would have the necessary knowledge and/or experience to testify about the safety and effectiveness of Comirnaty or other Covid-19 vaccines. Moreover, his CV does not show that he has gained relevant experience or knowledge about (Covid-19 or mRNA) vaccines or bioweapons or pandemics on any other basis.

² See: 'About', *Pfizer*, <https://www.pfizer.com/about/partners/research-and-business-development-partnerships>.

As for the latter, he explicitly confirmed in an online blog post that he lacks relevant expertise in that area: "I am not an epidemiologist."³

9. By the way, Yeadon's resume states that he was the Chief Scientific Officer of Pfizer. That is incorrect. During the period that Yeadon worked at Pfizer, Martin Mackay (1995-2010) and Mikael Dolsten (2010-2025) were the Chief Scientific Officer of Pfizer.

3.2 Yeadon's demonstrably false and unsubstantiated public statements disqualify him as an expert

10. The fact that Yeadon has publicly disseminated demonstrably incorrect and unsubstantiated statements about the Covid-19 pandemic and vaccinations also disqualifies Yeadon as a possible (reliable, objective and impartial) expert.
11. In For example, in an October 16, 2020 blog post, Yeadon incorrectly stated that the Covid-19 pandemic was effectively over: "*The pandemic is effectively over, with small, self-limiting outbreaks which will soon subside.*" Yeadon also stated that vaccines were not needed to end the pandemic: "*There is absolutely no need for vaccines to extinguish the pandemic. I've never heard such nonsense talked about vaccines.*" In the same blog post, Yeadon confirmed that he lacks relevant expertise in this area: "*I am not an epidemiologist. I'm not a mathematician, either.*"⁴
12. Yeadon's above claims regarding the Covid-19 pandemic and vaccines have been proven false. The pandemic was not over in October 2020, but continued for over two and a half years.⁵ Vaccination has also contributed significantly to slowing the pandemic.

Blog: M. Yeadon, 'What SAGE Has Got Wrong', 16 oktober 2020, <https://web.archive.org/web/20201129113931/https://lockdownsceptics.org/what-sage-got-wrong/>. Commentary: A. Swenson, 'Coronavirus pandemic is not 'effectively over' as op-ed claims', 30 november 2020, <https://apnews.com/article/fact-checking-9788407587>.

⁴ Blog: M. Yeadon, 'What SAGE Has Got Wrong', 16 oktober 2020, <https://web.archive.org/web/20201129113931/https://lockdownsceptics.org/what-sage-got-wrong/>. Commentaar: A. Swenson, 'Coronavirus pandemic is not 'effectively over' as op-ed claims', 30 november 2020, <https://apnews.com/article/fact-checking-9788407587>.

'Coronavirus disease (COVID-19) pandemic', WHO, <https://www.who.int/europe/emergencies/situations/covid-19>.

Scientific analyses show that the Covid-19 vaccines prevented approximately 14 to 19 million deaths worldwide during the first two years of the pandemic alone.⁶

13. In addition, on December 1, 2020, Yeadon unsuccessfully filed a request with the European Medicines Agency (the “EMA”) to withdraw emergency authorization for a Covid-19 vaccine from BioNTech and Pfizer.⁷ The reason for this request was that the vaccines could cause infertility in women, Yeadon said. However, in the request itself, Yeadon acknowledges that this claim is unfounded, as there was no evidence of the alleged fertility risk.⁸ The request was therefore not granted.⁹ Furthermore, the claim that Comirnaty would lead to infertility remained unfounded.¹⁰
14. Another example of Yeadon's unfounded beliefs concerns his speech of May 16, 2021. In it, Yeadon stated, among other things, that people without symptoms could not transmit Covid-19.¹¹ This is incorrect, as shown by various medical studies.¹² Yeadon spread even more disinformation in his speech, including about the safety and effectiveness of Covid-19 vaccines.¹³

⁶ The Lancet, Global impact of the first year of COVID-19, 23 juni 2022, accessible via www.thelancet.com/action/showPdf?pii=S1473-3099%282022%2900320-6.
W. Wodarg en M. Yeadon, 'Petition/motion for administrative/regulatory action', <https://www.scribd.com/document/487135032/Wodarg-Yeadon-EMA-Petition-Pfizer-Trial-FINAL-01DEC2020-en-Unsigned-With-Exhibits>.

⁸ N. Sajjadi c.s., 'United States internet searches for "infertility" following COVID-19 vaccine misinformation', *J Osteopath Med* 121(6), p. 583-587, <https://jom.osteopathic.org/abstract/united-states-internet-searches-for-infertility-following-covid-19-vaccine-misinformation/>.

⁹ 'Comirnaty', EMA, <https://www.ema.europa.eu/en/medicines/human/EPAR/comirnaty>.

¹⁰ See for example <https://www.lareb.nl/mvm-kennis-pagina/Coronavaccin-tijdens-de-zwangerschap> en <https://www.cdc.gov/covid/vaccines/pregnant-or-breastfeeding.html>.

¹¹ 'Fact Check: Ex-Pfizer scientist repeats COVID-19 vaccine misinformation in recorded speech', *Reuters* 20 May 2021, <https://www.reuters.com/article/fact-check/fact-check-ex-pfizer-scientist-repeats-covid-19-vaccine-misinformation-in-recorded-speech-idUSL2N2N72CS/>.

¹² Zie *bv. M. Johansson c.s.*, 'SARS-CoV-2 Transmission From People Without COVID-19 Symptoms', *JAMA Netw Open* 2021;4;(1):e2035057, <https://pubmed.ncbi.nlm.nih.gov/33410879/>.

¹³ 'Fact Check: Ex-Pfizer scientist repeats COVID-19 vaccine misinformation in recorded speech', *Reuters* 20 mei 2021, <https://www.reuters.com/article/fact-check/fact-check-ex-pfizer-scientist-repeats-covid-19-vaccine-misinformation-in-recorded-speech-idUSL2N2N72CS/>.

15. Following the disinformation Yeadon spread on social media, several former colleagues of Yeadon have publicly stated that they no longer recognize Yeadon as the well-informed and evidence-oriented colleague they once knew.¹⁴ It is clear that Yeadon is not qualified to testify as an independent and impartial expert in these proceedings. Yeadon does not have the necessary experience and knowledge to testify about Covid-19 (vaccines) and takes positions that run counter to broad scientific consensus.
16. For the sake of completeness: the fact that █████ et al., given the above, have no interest in a preliminary hearing of witnesses and/or experts, does not alter the fact that they (and █████ et al.) are free to draw up and submit a written statement from Yeadon (Article 152 paragraph 1 of the Code of Civil Procedure), which he is apparently prepared to do.¹⁵ The court can then assess such a statement at its own discretion (Article 152 paragraph 2 of the Code of Civil Procedure). Bourla is not out to silence Yeadon or to prevent his opinion from being made public. Bourla simply sees no added value in hearing Yeadon, since his positions on the Covid-19 pandemic and vaccination are already known through public sources and Bourla has no questions for Yeadon.

4. CONCLUSION

17. Based on the foregoing, Bourla concludes that the court, by order, to the extent legally possible enforceable provisionally:
- (a) █████ et al. will declare their request inadmissible, or at least reject the request of █████ et al.;
 - (b) █████ c.s. will be ordered to pay the costs of the proceedings, increased by the statutory interest as referred to in Article 6:119 of the Dutch Civil Code from fourteen days after the date of the judgment.

¹⁴ 'The ex-Pfizer scientist who became an anti-vax hero', *Reuters* 18 maart 2021, <https://www.reuters.com/investigates/special-report/health-coronavirus-vaccines-skeptic/>.

¹⁵ Verzoekschrift █████ c.s., randnr. 16.

Amsterdam, 25 June 2025



This case is being handled by Mr. O.C. Roessingh, T +31 20 577 1892, M +3165162 1874, E Davine.Roessingh@debrauw.com, and Mr. M. Bredenoord Spoek, T +31 20 577 1066, M +316 5043 1078, E Marieke.Bredenoord@debrauw.com. De Brauw Blackstone Westbroek N.V., P.O. Box 75084, 1070 AB Amsterdam

EXHIBIT BOURLA-64

PELS RIJCKEN

**Northern Netherlands Court, Leeuwarden
location**

Case/roll number C/17/199273 /HARK 25/17

Date of filing of statement of defense: 24 June 2025

**Statement of defence
preliminary expert hearing**

regarding

1. the State of the Netherlands

whose registered office is located in The Hague

2. Everhardus Ite Hofstra

3. Jaap Tamino van Dissel

4. Maria Petronella Gerarda Koopmans

5. Mark Rutte

6. Sigrid Agnes Maria Kaag

7. Hugo Mattheüs de Jonge

8. Ernst Johan Kuipers

9. Diederik Antonius Maria Paulus

Johannes Gommers

10. Wopke Bastiaan Hoekstra

11. Cornelia van Nieuwenhuizen

12. Feike Sijbesma

all choosing residence in The Hague

defendants

lawyers:

mr. R.W. Veldhuis and mr. M.E.A. Möhring

against

1. [REDACTED]
living in Leeuwarden

2. [REDACTED]
living in Brunssum

3. [REDACTED]
living in Leeuwarden

applicants

lawyers:

mr. A.G.W. van Kessel and mr. P.W.H. Stassen

1 Introduction

- 1.1 The applicants request your court to order a provisional examination of evidence. The precise provisional examination of evidence that the applicants are requesting is somewhat vague: in the application, the applicants alternately refer to a provisional expert hearing, a provisional expert report, a combination of these, or a witness hearing. Since the petition only requests an examination of experts, the State assumes that this is the request at issue here.¹

The applicants have involved various natural persons in these proceedings who, as ministers, OMT members or otherwise, have been committed to combating the corona pandemic. However, there is no legally respectable interest in involving these persons in these proceedings in private. It is settled case law that the conduct of persons that relates to their work for the State must be attributed to the State.² The defence in this defence is also always conducted by the State on behalf of the other defendants on whose behalf this defence is filed.

- 1.2 The request for this provisional evidence production is related to the summons procedure currently pending before your court, which Illili et al. have initiated against various defendants, including the State (hereinafter: the main proceedings).³

In that procedure, et al. submitted their reply on 11 June 2025. The case is now on the roll of 23 July 2025 for the submission of a rejoinder by the defendants. An oral hearing will then be scheduled.

- 1.3 In the main proceedings, the core argument of et al. is that there would be intentional and unlawful deception, because the Dutch population would have been called upon by the defendants to be vaccinated against Covid-19, while the defendants would have known that the vaccine was not safe and effective. et al. also claim a declaration of law with that content in those proceedings. That core argument and claim are based by et al. on the theory that there would be a global conspiracy, of which the defendants would be part.

¹This is also the evidence that is most prominent in the body of the petition. Should your court view the petition differently, the following applies accordingly with regard to the requests before you according to your court. Specifically with regard to hearing persons as witnesses, the State notes that the applicants have not explained at all which relevant events the persons named by the applicants would have witnessed, and that none of the questions relate to these persons' own observations, so that the request must (also) be rejected on that ground. See Supreme Court 7 September 2018, ECLI:NL:HR:2018:1433, rov.3.5.3.

²HR 11 oktober 1991, ECLI:NL:HR:1991:ZC0360, NJ 1993/165, rov. 3.3. See also Court of The Hague 18 July 2017, ECLI:NL:GHDHA:2017:2033, rov. 10.

³The case is being handled under case/file number: C/17/190788 / HA ZA 23-172.

That plot would be aimed at carrying out the 'Great Reset', of which the 'project Covid-19' would also be a part. Covid-19 would not really exist, and the "Covid-19 injections" would lead to (serious) injury and death, and even to genocide - according to et al.

- 1.4 According to the application, the applicants support the arguments of et al. in the main proceedings. According to the applicants, the main proceedings of et al. would increasingly focus on the question of whether the vaccines against Covid-19 are "a bioweapon with which genocide is committed". The applicants believe that an evidentiary determination on this point is "crucial" in order to determine whether they wish to join or intervene in the main proceedings.⁴ For that reason, the applicants wish to submit various questions to the persons named in the application as experts - including whether there is a 'Great Reset', whether the disease Covid-19 exists, whether there has been a pandemic, and whether the vaccines against Covid-19 are a bioweapon with which genocide is committed.
- 1.5 The persons named by the applicants cannot be regarded as experts, and certainly not as independent and impartial experts. The State also believes without further ado that the persons named by the applicants, if they are heard, will answer the questions proposed by the applicants in the manner advocated by the applicants - namely that there is a 'Great Reset', that the disease Covid-19 does not exist, that there has been no pandemic and that the vaccines against Covid-19 are a bioweapon with which genocide is committed. After all, the persons nominated by the applicants have previously publicly expressed such positions.⁵ The applicants therefore do not really need these persons to be heard as experts by way of preliminary evidence in order to be able to determine their legal position. For this reason alone, the request must be rejected for lack of interest.
- 1.6 The fact that these persons, if heard, would make such a statement does not mean that it is established that the position of the applicants and these persons on, in short, Covid-19 is correct - as the applicants seem to believe. There are many (truly) independent and impartial experts who would state the opposite. After all, the position of the applicants, and of the persons named by the applicants, runs counter to the broad scientific consensus: that the disease Covid-19 exists, that there has been a pandemic and that the vaccines against Covid-19 are safe and effective. The State could therefore also find many experts willing to state this, but pitting different (party) experts against each other is not a helpful way to settle a dispute.
- 1.7 Hearing the persons named by the applicants as experts would therefore not advance the dispute between the parties.

⁴ Petition, under 1 and 19. Petitioners speak alternately of intervention and joinder. It is therefore not clear in what way they wish to intervene.

⁵ See below under 4.

The question is whether that is what the applicants intend with the request. The aim of the applicants with this request seems to be mainly to have a certain legitimacy attributed to the (content of the) statements of these persons - also outside the procedure - by hearing these persons as experts by a judge. That is not a legally respectable interest that would justify hearing these persons in court.

- 1.8 The State considers that the applicants should be declared inadmissible, or at least that the application should be rejected. The State will explain this further below.

2 Legal framework

- 2.1 This procedure - which was initiated by the petition filed on March 7, 2025 - is subject to the new law of evidence, as it applies from January 1, 2025.⁶ The applicants also assume this.⁷
- 2.2 Under this new law of evidence, the court may, upon request, order provisional evidence taking (i) before the case is pending or (ii) if the case is already pending but has not yet been entered on the roll (Article 196 paragraph 1 of the Code of Civil Procedure). No request for provisional evidence taking may be made during ongoing proceedings.⁸ When a case is pending, any evidentiary proceedings must be ordered by the judge to whom the case has been assigned.⁹ The court is best placed to assess whether an evidentiary procedure is necessary, thus preventing preliminary evidentiary procedures from disrupting ongoing proceedings.¹⁰
- 2.3 A request for provisional evidence may also be rejected (i) if the information requested is not sufficiently specific, (ii) if there is insufficient interest in the provisional evidence, (iii) if the request is contrary to the proper conduct of the proceedings, (iv) if there is abuse of authority or (v) if there are other important reasons that oppose the provisional evidence (Article 196 paragraph 2 of the Code of Civil Procedure).

3 Inadmissible; contrary to due process; abuse of power

- 3.1 The request by the applicants was made while a case was already ongoing: the procedure of et al., in which the applicants state that they wish to intervene.¹¹

⁶ *Stb.* 2024/62. For the transitional law, see: Parliamentary Papers II 2021/22, 35 498, no. 7, p. 3 and art. XXIIA of the Act on the Simplification and Modernisation of the Law of Evidence (*Stb.* 2024, 62).

⁷ The applicants refer to a 'Petition for provisional evidence proceedings (pursuant to art. 196 et seq. Rv)'.
⁸ Parliamentary Papers II 2019/20, 35 498, no. 3, p. 10. See also: Loek, in: T&C Rv, commentary on art. 196 Rv, note Ia; G. de Groot, Civil expert evidence (Civil Procedure & Practice no. 27), Deventer: Wolters Kluwer 2025, no. 253, 255.

⁹ See *parliamentary documents II* 2019/20, 35 498, nr. 3, p. 44.

¹⁰ See *parliamentary documents II* 2019/20, 35 498, nr. 3, p. 44.

¹¹ A 'case' within the meaning of Article 196 paragraph 1 of the Code of Civil Procedure is a case in which a claim, request or defence may be based on facts about which information can be obtained by means of the provisional evidence. See G. de Groot, Civil Expert Evidence (Civil Procedure & Practice No. 27), Deventer: Wolters Kluwer 2025, No. 255.

As explained above, a request for provisional evidence can only be made before the case is pending and it is not possible to order provisional evidence while the case is pending. This means that applicants must be declared inadmissible in their request.¹²

- 3.2 If a third party is allowed to request provisional evidence during ongoing proceedings that is related to ongoing proceedings, this would mean that the restriction that the legislator deliberately laid down in Article 196 paragraph 1 of the Code of Civil Procedure (only provisional evidence before the proceedings) could easily be circumvented. Such a detour also runs counter to the intention of the legislator with the new law of evidence, which after all has two flavours: evidence gathering before the proceedings, or during the proceedings.
- 3.3 The above applies in particular to a case like this. Applicants do not appear to be 'ordinary' third parties who are considering intervening in ongoing proceedings. There are clear connections between applicants and et al: applicants and et al are assisted by the same lawyers, applicants and et al introduce each other's procedural documents in the various proceedings, and both the applicants' proceedings and those of et al are apparently facilitated by the same foundation: Stichting Recht Oprecht, which also sees these proceedings as a single entity.¹³
- 3.4 It therefore appears that the request by the applicants for provisional evidence is in fact intended to gather evidence for the ongoing proceedings of et al., and that this is an attempt to circumvent the statutory restriction of Article 196 paragraph 1 of the Code of Civil Procedure (no provisional evidence is possible during ongoing proceedings).¹⁴
- 3.5 Granting the request would furthermore result in an unacceptable interference with the procedural policy of the judge in the ongoing proceedings.¹⁵ In their reply, et al. referred to this application procedure, and subsequently offered "the same expert evidence" in the main proceedings as well.¹⁶ It is up to the judge in that procedure, following the (currently ongoing) debate between the parties in the main proceedings, to ultimately assess whether evidence is necessary in that procedure - and if so, what evidence is required.¹⁷ In this way, evidence can be taken in a targeted and procedurally efficient manner - if necessary.

¹² See also Gelderland District Court, 27 March 2025, ECLI:NL:RBGEL:2025:2264.

¹³ This follows from the fact that the website of this foundation (www.rechtoprecht.online) contains information under the heading 'The lawsuit' about both the procedure of – et al and about this application procedure. The same website also announced that the lawyers of the applicants (who are also the lawyers of – et al) will inform visitors at events about (among other things) developments in both the current procedure and in this application procedure.

¹⁴ At least serves another purpose (outside any procedure), see 1.7.

¹⁵ See *Parliamentary Papers II 2019/20, 35 498, no. 3, p. 58*. See also *T&C Rv, commentary on art. 196 Rv, note 1*.

¹⁶ See the conclusion of the reply of - et al., under 26 and 44 (and also the offer of evidence on p. 52).

¹⁷ See Asser Procedural Law/Asser 3 2□19; Asser Procedural Law/Van Schaick 2 2022/95.

The State believes, however, that the party debate in that case to date had not given rise to this.

3.6 If the request in these petition proceedings is granted, there is a real possibility that provisional evidence will be provided with regard to statements for which, in the opinion of the judge, no evidence is required in the current proceedings.

3.7 The above means that the applicants must be declared inadmissible (Article 196 paragraph 1 of the Code of Civil Procedure), or at least that the applicants' request must be rejected on the grounds of conflict with due procedural order and/or abuse of power (Article 196 paragraph 2 of the Code of Civil Procedure). This applies all the more in light of the following.

4 The proposed 'experts'

4.1 The applicants have named five persons whom they would like to hear as experts. These are:

- Catherine Austin Fitts.** According to appendix 1 submitted by the applicants, she has a bachelor's degree in history and a master's degree in business administration and claims to be an 'investment advisor, entrepreneur, government official, investment banker'¹⁸ In her own words: *"I am not a scientist. I am not a doctor. I am not a biotech engineer. I am not an attorney. However, I read, listen, appreciate, and try to understand those who are."*¹⁹ Fitts has previously made the following statements about the mRNA vaccines: *"The certainty that mRNA technology kills and maims-and that this was known by those who made and released the COVID-19 vaccinations-is priceless intelligence. Having this knowledge gives you the power to protect yourself and the people you love. Your doing so is of the utmost importance to the network of doctors, scientists, and researchers who have worked to understand and communicate these dangers. (...) What you have learned may be priceless intelligence, but it is not convenient. The fact that mRNA technology maims and kills has profound implications. Given who is applying this technology, it radically alters our understanding of whom we can trust-not just about mRNA technology but about a far wider range of issues that touch numerous aspects of our daily life and finances. Off the list of trusted institutions are our governments, including the military and the agencies that regulate health. Off the list is the pharmaceutical industry. Off the list are the many doctors and hospitals that were paid richly to push mRNA vaccines, and even before that to administer harmful and often lethal COVID-19 treatments. Off the list are the media that made war on the hearts and minds of people everywhere, filling them with fear to herd them and*

¹⁸ See Appendix 1 to the petition.

¹⁹ <https://solari.com/deep-state-tactics-101-the-covid-injection-fraud-its-not-a-vaccine/>

*their children into the mRNA "kill box".*²⁰ In an interview, Fitts describes what she believes is the goal of the 'Great Reset', namely "to make s/aves of all of us" - in whatever context she states "What COVID19 is, is the institution of contrals necessary to convert the p/anet fram democratie praces to technocracy. So what we're watching is a change in contra/, and an engineering of new contra/ systems. So think of this as a coup d'etat rather than a virus." – see also "Catherine begins the interview by explaining what is The Great Reset, and how it wil/ eventual/y bring an end to the U.S. dollar as the world's main currency, and be the end of all currencies as we know them as the Centra/ banks intraduce a cashless society with a social credit system like China. ".²¹

- **Mike Yeadon.** According to his CV submitted by the applicants, Yeadon did indeed work at Pfizer, but not in a department involved in (the development of) vaccines.²² Yeadon claims that the Covid-19 vaccines are bioweapons, and has filed a lawsuit with the International Court of Justice on that basis: "*The crimina/ complaint is brought against various alleged perpetrators including the Prime Minister of the United Kingdom, Director-Genera/ of the World Health Organisation, co-chairs of the Bill and Melinda Gates Foundation, and senior executives of multinational pharmaceutical companies involved in the praduction of vaccines, for al/eqedlv perpetrating crimes against humanity, war crimes, crimes of aggression and violations of the Nuremberg Code.*"²³ Yeadon states, among other things, "So let me just say again, the variants are not different enough to represent a threat to use. You do not need to top up vaccines. They are being made, and the regulators that more or less waved them through. I'm terrified of that. There's no possible benign interpretation of this. I believe that they're going to be used to damage your health and possibly kill/ vou seriously. I can see them. Sensible interpretation, other than a serious attempt at mass depopulation, wil/ prvide the tools to do it and plausible deniability because they'/1 create another story about some biologica/ threats. You'/1 /ine up and get your top-up vaccines, and a few months or a year or so later, you wil/ die of some peculiar explicable svndrome, and they won't be able to associate it with the top-up vaccine".²⁴

²⁰ <https://solari.com/now-available-mrna-vaccine-toxicity-by-doctors-for-covid-ethics-with-a-erword-by-catherine-austin-fitts/>, Underlining added.

²¹ <https://medicalkidnap.com/2021/01/01/catherine-austin-fitts-explains-how-the-globalist-billionaires-and-technocrats-are-planning-on-taking-over-the-planet-and-how-we-can-stop-it/>

²² See (subsequently submitted) Annex 2 to the petition.

²³ <https://www.cliffedekkerhofmevr.com/news/publications/2022/Practice/Employment/employment-law-alert-24-january-2022-COVID-19-vaccines-A-crime-against-humanity-The-International-Criminal-Court-to-determine.html> (underlining added).

²⁴ <https://a-nointedtube.com/video/87226/a-fina1-warn-ing-to-humanity-from-former-pfizer-chief-scientist-michael-yeadon-watch-share-with-a11-make-this-video-qo-vira1-m-p4/> (underlining added)

- Alexandra Latypova.** From the CV enclosed by the applicants it appears that she has a bachelor's degree in foreign languages and a master's degree in business administration.²⁵ Latypova has also previously spoken out about Covid-19 and the vaccines. See: *"Farmer pharmaceutical executive and researcher Alexandra "Sasha" Latypova has laid out compelling arguments for why the "carte" that orchestrated the dissemination and uptake of "biowarfare agents" - marketed as "COVID-19 vaccines" - operated with "very clear intent to harm" and to execute a "mass genocide of Americans."*²⁶ See further: *"As Latypova has explained, the DoD [U.S. Department of Defense] managed to classify these "vaccines," not as medicines or pharmaceuticals but as "COVID countermeasures" under the authority of the military, which means they are not required to comply with U.S. law governing the manufacturing quality, testing, effectiveness, safety, and labeling of medical products. (...) The evidence is overwhelming that there is an intent to harm people by the COVID 19 injections, so-called 'vaccines,' and other nonsensical COVID response measures implemented in lockstep by governments all over the world," she explained" (...) "There is obvious/y malignant policy from the government. We know that they're lying. We know that they're covering up. They're gaslighting the families of those killed and injured by these shots," Latypova summarized. And thus, this demonstrates a "very clear intent to harm through all these actions. And at this point, everything should be deemed intentional. All of the injury and death toll, should be deemed completely intentional." "We found that these products are dirty, contaminated, do not conform at all to what the label says. And they're hugely toxic by design," she said. "They should all be stopped immediately, and this should be investigated properly. And we should bring those responsible to justice, to accountability. Until that happens, we cannot move on from this," Latypova said. "We have to focus on this more and focus especially on prosecution and bringing those responsible to justice".²⁷*
- Katherine Watt.** According to the CV enclosed by the applicants, Watt has a bachelor's degree in philosophy and natural sciences, she has a 'Paralegal Studies Certificate' and she has worked as a paralegal and as a writer and publisher.²⁸ She previously stated the following: *"On January 24, 2023 Katherine Watt was an attendee at a press conference that discussed the ongoing emergency use rollout of bioweapons being marketed as Covid vaccines. She discussed the legal framework for which this is happening and provides ways to circumvent the WHO/BIS/DOD initiatives that undermine sovereignty."* "During a Zoom press conference in January,

²⁵ See Appendix 3 to the petition.

²⁶ <https://www.1ifesitenews.com/news/toxic-by-design-researcher-explains-why-us-defense-depts-covid-vaccine-operation-shows-intent-to-harm/> (underlining added).

²⁷ <https://www.1ifesitenews.com/news/toxic-by-design-researcher-explains-why-us-defense-depts-covid-vaccine-operation-shows-intent-to-harm/> (underlining added).

²⁸ See Appendix 4 to the petition.

Watt discussed the /equal framework used for the emergency use rol/out of the bioweapons being marketed as "covid vaccines." "I would not call them [Department of Defence] DoD vaccines. I would call them DoD weapons," she said. Adding that using legislation they are constructing the walls of what they call the "kil/ box." The "kil/ box" is a military term used to describe a three-dimensional area reference that enables timely, effective coordination and contra/ and facilitates rapid attacks. Describing the covid-19 kil/ box, Watt said: "What the DoD and the World Health Organisation intend to do - and have gatten quite far in doing but have not completely reached their goals - is to set up the entire world as their geographic terrain; their target population as all the people in the world [and] the duration of their campaign as permanent.".²⁹ Watt also wrote a 'Notice of War Crimes', which included the text: "If you have been promoting or using products known as 'Covid-19 vaccines' on patients since December 2020, you have been participating in fraud, mass murder and war crimes, because medica/ countermeasures (MCMs), covered countermeasures, and prototype products are DoD-contracted bioweapons intended and effective for iniuring, sickening and killing recipients.": "The "global chemica/ and biologicala/ warfare program to sicken, injure and kil/ targets" using lethal bioweapons being fraudulently /abelled as marketed and promoted as "covid-19 vaccines.".³⁰

- **Joseph Sansone.** According to the CV enclosed by the applicants, Sansone has a PhD in psychology, specialises in clinical hypnosis and has worked as a therapist, among other things.³¹ Sansone has filed a lawsuit in the US to have Covid-19 vaccines banned "because they are biologicala/ and technologica/ weapons of mass destruction"; "the complaint also seeks declaratory judgements that the COVID 19 injections and all mRNA injections violate Weapons of Mass Destruction". In that (lost) lawsuit, Sansone also submitted a statement (from Francis Boyle, also mentioned by the applicants in their petition), stating: "It is my expert opinion that, 'COVJD-19 nanoparticle injections' or mRNA nanoparticle injections' or 'COVJD-19 injections' meet the criteria of biologicala/ weapons and weapons of mass destruction. ".³²

4.2 The persons mentioned by the applicants cannot be regarded as (objective and impartial) experts.³³

²⁹ <https://expose-news.com/2023/02/26/covid-injections-are-weapons-of-the-covid-19-ki11-box/> (underlining added); https://www.youtube.com/live/q9mFc4_SS0A?feature=share,

³⁰ <https://expose-news.com/2023/02/26/covid-injections-are-weapons-of-the-covid-19-ki11-box/>

³¹ See Appendix 5 to the petition.

³² <https://www.truth11.com/florida-lawsuit-seeks-iniunction-to-prohibit-mrna-nanoparticle-injections-because-they-are-bioweapons/>; <https://josephsansone.substack.com/>

³³ See GS Civil Procedure, art. 194 Code of Civil Procedure, note 1.4; GS Civil Procedure, art. 190 Code of Civil Procedure, note 3.3; G. de Groot, Civil expert evidence (BPP no. 27) 2025/2.

4.3 The persons named by the applicants do not have the necessary qualifications for this. Moreover, as is apparent from the foregoing, these persons have previously made statements about, in short, (the vaccines against) Covid-19. They have done so in a manner that is consistent with the view of the applicants (and others), but which is diametrically opposed to the broad scientific consensus (that a Covid-19 pandemic has occurred, that the Covid-19 vaccines have been developed with the aim of combating that pandemic and that the vaccines are safe and effective).

4.4 In view of the foregoing, it is not only clear in what manner these persons will testify, but also that these statements - contrary to what the applicants believe - will not provide "irrefutable evidence" of the applicants' (and others') claims. This means that there is insufficient interest in hearing these persons as experts, or at least that there is abuse of authority.

If there were any grounds for the provisional evidence requested by the applicants (which, according to the State, is not the case), and therefore, in the opinion of your court, experts should be heard on the question of whether the vaccines against Covid-19 are "a bioweapon with which genocide is committed", then actual - objective and independent - experts will have to be heard in that context.

5 Further grounds for rejection

5.1 The request must also be rejected because there is insufficient interest in the provisional taking of evidence for the following reasons and/or there is abuse of authority and/or conflict with the proper order of the proceedings.

Evidence can also be obtained in writing

5.2 There is no interest in a preliminary expert hearing, because the applicants can also obtain the desired preliminary evidence in another way. This also means that the request is contrary to the proper order of the proceedings and/or that there is an abuse of power.

5.3

The applicants themselves state that the persons they would like to hear as experts have declared themselves willing to cooperate in an expert hearing and/or an expert report.³⁴ These persons are therefore prepared to provide a written expert report to the applicants. The type of evidence that these persons would have to provide is also a form of evidence that lends itself to a written document (and not to an interrogation).

³⁴ Petition, § 16.

Furthermore, as explained above (under 4), these persons have already expressed themselves extensively in public sources on the issues on which the applicants want an expert hearing. It is therefore already clear what these persons would state in an expert hearing. The applicants therefore do not need an interview of these persons in order to be able to determine their legal position. If they wish to use the opinion of these persons for this purpose, they can base themselves on the statements already available in public sources, or ask these persons for a written document.

The request to hear the persons named by the applicants as experts also fails because a provisional expert report is a less onerous provisional evidence procedure than a provisional expert hearing. For this reason too, the request for a provisional expert hearing must be rejected.³⁵

No need to secure evidence

- 5.4 The applicants argue that their interest in an expert hearing would lie in securing evidence.
- 5.5 In the context of the new law of evidence, the legislator has explained that the fear that evidence will be lost - the original idea behind the (now deleted) article 186 paragraph 2 Rv (old) - is no longer well-founded. The judge can namely, on the basis of article 87 paragraphs 1 and 3 Rv, both ex officio and at the request of the parties, at any stage of an ongoing procedure, order an oral hearing at which witnesses or party experts are heard, if necessary urgently. Furthermore, the parties have the possibility to submit written statements in the proceedings.³⁶
- 5.6 Nor is it necessary to hear the persons named by the applicants in order to secure evidence. In that connection too, it is sufficient to put the statements of these persons in writing.³⁷ In this (less onerous) way, the evidence desired by the applicants can also be secured. A provisional evidence procedure is not necessary for this.
- 5.7 Furthermore, the applicants have not substantiated in any way that there is a real risk that evidence will be lost. There is no evidence that it is to be expected that the persons named by the applicants will no longer be able to testify in the short term. If the applicants were really afraid of this, it is also not clear why they did not have the statements of these persons put in writing earlier.

³⁵ Cf. Parliamentary Papers II 2019/20, 35 498, nr. 3, p. 62.

³⁶ See parliamentary documents II 2019/20, 35 498, nr. 3, p. 43-44.

³⁷ Cf. Parliamentary Papers II 2019-2020, 35 498, no. 3, p. 44: "In addition, parties also have the option of submitting written statements from witnesses to the proceedings where appropriate."

This is a legal dispute

- 5.8 The applicants state in the introduction to the application: "The applicants have closely followed this procedure [the main procedure], are themselves victims of the Covid-19 (mRNA) injections [meaning: vaccines] and see that the procedure is increasingly focusing on the question of whether the Covid-19 (mRNA) injections are a bioweapon with which genocide is committed, or not. An evidentiary determination on this point is crucial for the applicants in order to decide to intervene in the substantive proceedings with their own claim." (emphasis added). According to the applicants, obtaining an answer to that question (are the vaccines against Covid-19 a bioweapon with which genocide is committed) is the reason for requesting a preliminary evidentiary hearing in these proceedings.
- 5.9 However, that question is not a factual but a legal one – and the same applies to many of the underlying questions formulated by the applicants.³⁸ Legal questions must be answered by the judge and cannot be answered by an expert.³⁹ A preliminary expert report on legal questions is therefore not admissible. There is therefore no interest in hearing experts on legal questions.

Furthermore, the State also does not recognise the image that the main proceedings would increasingly focus on the question formulated by the applicants.⁴⁰

Real chance of rejection of intervention in current procedure

- 5.10 The current proceedings are at an advanced stage. On 11 June 2025, et al. submitted their reply, and on 23 July 2025 the case is set for a rejoinder.
- 5.11 The oral hearing of this petition will take place on 9 July 2025 and a decision will be made thereafter. Subsequently, if the petition is granted, an expert hearing will have to be ordered on a date on which the five persons and parties mentioned can be present. The current proceedings will very likely have been concluded by then (see art. 218 Rv).
- 5.12 In any event, there is a real chance that the incidental claim for joinder or intervention will be dismissed, given the advanced stage of the proceedings in question. Any other outcome would be contrary to the proper conduct of the proceedings. Further complication of those proceedings (by joining or intervening) would lead to unreasonable delay of those proceedings.

³⁸ HR 22 February 2019, ECLI:NL:HR:2019:272, paragraph 3.3.5; G. de Groot, Civil expert evidence (Civil Procedure & Practice no. 27), Deventer: Wolters Kluwer 2025, no. 17, 271.

³⁹ HR 22 februari 2019, ECLI:NL:HR:2019:272, rov. 3.3.5.

⁴⁰ In the reply in the main proceedings, - et al. also state only that they are of the opinion that the debate "should focus on this". Conclusion of reply, under 65 (emphasis added).

his is all the more galling now that the procedure - due to various procedural complications outside the State's control and a very generous period for the conclusion of the reply requested and obtained by et al. - has now been ongoing in the court of first instance for almost two years. This is also a reason to dismiss the incidental claim for joinder or intervention (which would necessitate further procedural steps).⁴¹ There is therefore no interest in the request for a preliminary expert hearing.

The applicants also mention in passing the possibility of independently initiating new proceedings.⁴² It is not plausible that the applicants are actually considering this: according to the application, the main proceedings are the reason for the application, since the main proceedings would "focus" on the question mentioned (on bioweapons and genocide in connection with covid vaccinations), and the application is otherwise entirely focused on their intervention in the ongoing main proceedings,⁴³ and it is certainly not obvious that the applicants (with the same lawyers and the same positions, and facilitated by the same foundation) will initiate new, in fact identical, proceedings while the proceedings of et al. are still ongoing.

6 The questions to be asked to the proposed persons

- 6.1 Finally, the State notes that - if experts were to be heard - the experts to be appointed can only be heard on factual questions that are relevant to determining the legal position of the applicants. Many of the questions proposed by the applicants do not meet this requirement.
- 6.2 Many of the questions proposed by the applicants are not related to what the applicants claim to be the core question on which the preliminary evidence should be based (whether the vaccines against Covid-19 are "a bioweapon used to commit genocide"), but are much broader in nature. According to the applicants themselves, these questions are therefore not relevant to the main proceedings.⁴⁴
- 6.3 This reinforces the idea that the request was made in order to gather evidence (for et al) for the main proceedings, or at least serves another purpose (outside those proceedings): to have the statements of these persons attributed a certain legitimacy - which also does not constitute a legally respectable interest, and moreover means that there is an abuse of power.
- 6.4 Furthermore, the State points out the following

⁴¹ HR 28 March 2014, ECLI:NL:HR:2014:768, paragraph 4.4.2.

⁴² Petition, § 5.

⁴³ Petition § 1-3, 9, 13-14, 19.

⁴⁴ Vgl. gerechtshof Arnhem-Leeuwarden 16 mei 2023, ECLI:NL:GHARL:2023:4224, rov. 3.4.

Questions about the Covid-19 pandemic and Covid-19 vaccines. Petitioners propose to submit questions to Yeadon, Latypova and Sansone about the Covid-19 pandemic and the regulation, safety and effectiveness of the mRNA vaccines against Covid-19.⁴⁵ None of these people have the necessary qualifications to answer these questions. The Covid-19 pandemic and the regulation, safety and effectiveness of vaccines are not within their area of expertise.⁴⁶ The same applies to the question of whether the Covid-19 vaccines qualify as bioweapons.⁴⁷ Moreover, this is a question of legal qualification.⁴⁸ Such questions should, if necessary, be answered by the judge in the main proceedings, and not by an expert.⁴⁹

- Questions about American law. The applicants propose to ask Latypova and Watt several questions about American law.⁵⁰ The relevance of these questions is not explained by the applicants and cannot be seen. American law does not apply to the main proceedings. There is therefore no interest in questions about that law. The State also leaves aside the fact that the nominated persons do not have demonstrably sufficient specialist knowledge of American law, and that if there were reason to hear experts on American law, it would be obvious that the International Legal Institute would be called in.⁵¹
- Questions about Dutch (or international) law. The applicants propose to ask Yeadon and Sansone whether genocide is being committed with Covid-19 vaccines.⁵² They want to ask Watt whether the people who prescribed, purchased and administered the vaccines participated in war crimes and/or genocide.⁵³ These are legal questions, and it is up to the judge in the main proceedings to rule on them if necessary.⁵⁴ In any case, the persons mentioned do not have the necessary knowledge of Dutch (or international) law to answer these questions.
- Other questions. It is not clear what the relevance is of a large number of the questions proposed by the applicants for the assessment of whether or not the applicants wish to join or intervene in the main proceedings. This applies, for example, to the questions:

⁴⁵ For those questions see: Yeadon, questions 1-7; Latypova, questions 1-2, 4-5; Sansone, questions 1-4.

⁴⁶ G. de Groot, Civil expert evidence (Civil Procedure & Practice no. 27), Deventer: Wolters Kluwer 2025, no. 59.

⁴⁷ For those questions, see: Yeadon, question 8; Latypova, questions 1, 6; Sansone, question 5.

⁴⁸ The concept of a bioweapon is defined in Article 1, paragraph 1, of the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on their Destruction.

⁴⁹ HR 22 februari 2019, ECLI:NL:HR:2019:272, rov. 3.3.5.

⁵⁰ For those questions, see: Latypova, question 3; Watt, questions 1-4.

⁵¹ G. de Groot, Civil expert evidence (Civil Procedure & Practice no. 27), Deventer: Wolters Kluwer 2025, no. 16.

⁵² For those questions, see: Yeadon, question 9; Sansone, question 7.

⁵³ For that question see: Watt, question 6.

⁵⁴ HR 22 February 2019, ECLI:NL:HR:2019:272, paragraph 3.3.5; G. de Groot, Civil expert evidence (Civil Procedure & Practice no. 27), Deventer: Wolters Kluwer 2025, no. 17, 271.;

“What is the relationship between the regulatory functions and decisions of the US Food and Drug Administration (US FDA) regarding international trade in viruses, gene therapies and other biological products, and other regulatory authorities outside the United States, particularly in Europe?, and “Was the development and/or administration of the Covid-19 (mRNA) injections [vaccines] a military project?”.

- 6.5 The questions proposed by the applicants are therefore irrelevant, unsuitable for an expert to answer, and/or do not fall within the area of expertise of the persons nominated. For these reasons too, the application must be rejected.

7 Conclusion

The State concludes:

- i. to declare the applicants' request inadmissible, or at least to reject the request;
- ii. ordering the applicants to pay the costs of the proceedings, with the proviso that statutory interest will be due on the award of costs from the fifteenth day after the date of the decision to be made in this case;
- iii. with an order that the applicants pay the subsequent costs, estimated at €178 in accordance with the liquidation tariff or, in the event of service, at €270;
- iv. with a declaration that these awards of costs are provisionally enforceable.

Advocaat

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EXHIBIT BOURLA-65

decision

COURT OF NORTH NETHERLANDS

Civil law

Seat Leeuwarden

Case number / request number: C/17/199273 /HARK 25-17

Decision of 20 August 2025

In the case of

1. [REDACTED]
living in Leeuwarden,
2. [REDACTED],
living in Brunssum,
3. [REDACTED],
living in
Leeuwarden,
applicants,
hereinafter jointly referred to as: applicants,
attorney: Mr. P.W.H. Stassen,

against

1. EVERHARDUS ITE HOFSTRA,
2. JAAP TAMINO VAN DISSEL,
3. MARIA PETRONELLA GERARDA KOOPMANS,
4. MARK RUTTE,
5. SIGRID AGNES MARIA KAAG,
6. HUGO MATTHEÛS DE JONGE,
7. ERNST JOHAN KUIPERS,
8. DIEDERIK ANTONIUS MARIA PAULUS JOHANNES GOMMERS,
9. WOPKE BASTIAAN HOEKSTRA,
10. CORNELIA VAN NIEUWENHUIZEN,
14. FEIKE SIJBESMA,
all choosing residence in The Hague,
17. DE STAAT DER NEDERLANDEN,
seated in The Hague,
hereinafter jointly referred to as: Hofstra et al.
attorneys: Mr. R.W. Veldhuis and Mr. M.E.A. Möhring,
11. ALBERT BOURLA,
residing in Greenwich, hereinafter referred to as Bourla,
attorneys: Mr. O.C. Roessing and Mr. M. Bredenoord-Spoek,
12. GISELLE JACQUELINE MARIE-THÉRÈSE VAN CANN,
living in the municipality of De Bilt,
13. PAUL EDWIN JANSEN,
residing in the municipality of Leiden,
hereinafter jointly referred to as: Van Cann et al.,

attorney: Mr. R.H.W. Lamme,

15. WILLIAM HENRY BILL GATES 111,
residing in Medina, Washington, hereinafter referred to as Gates,
attorneys: Mr. W. Heemskerk and Mr. P.F.B. Mulder,

16. AGNES CATHARINA VAN DER VOORT-KANT,
choosing residence in Amsterdam, hereinafter referred to as: Van der Voort-Kant,
attorney: Mr. A.H. Ekker, registered,
hereinafter jointly referred to as: registered.

Hofstra et al., Bourla, Van Cann et al. and Van der Voort-Kant will hereinafter jointly be referred to as defendants.

1. The procedure

1.1. The course of the proceedings is evident from:

- the petition
- the email dated May 21, 2025, from the petitioners, with exhibits
- the letter dated June 17, 2025, from the petitioners, with exhibits
- the statement of defense from Hofstra et al.
- the email from Bourla dated July 2, 2025, requesting digital participation in the hearing
- the court's decision of July 3, 2025, rejecting Bourla's request
- the statement of defense from Bourla
- the email from Gates dated July 4, 2025, indicating that Gates is recusing himself
- the statement of defense from Van der Voort-Kant
- the email from Van Cann et al. dated July 4, 2025, indicating that oral defense will be conducted
- the email dated July 6, 2025 July 2025, from the applicants, with requests to the court and a link to a video
- the letter from the court dated July 6, 2025, in which the court ruled on those requests
- the email from the court dated July 8, 2025, in which the parties were requested to respond to the journalists' request to take photographs and make audio and video recordings at the hearing
- the emails from the applicants dated July 8, 2025, in which they objected to this request insofar as it concerns non-accredited journalists
- the email from the court dated July 8, 2025, in which the parties were informed of the decision that non-accredited journalists were not permitted to take photographs and make audio and video recordings
- the email from the applicants dated July 8, 2025, in which the parties objected to that decision
- the oral hearing, of which the court clerk took notes
- the Statement of case from the applicants
- Statement of case from Hofstra et al.
- Statement of case from Van Cann et al.

1.2 The decision is set for today.

2. The request and the defense

2.1. Applicants request the court

1. to hold a hearing [the court understands: to order] by decision on the facts and circumstances stated in the petition, at which the experts named in the petition can be questioned about the questions formulated in the petition,
2. to determine that the party experts, if they so wish, can be heard in public by the examining magistrate via a video connection with the court,
3. to determine the day, time and place at which these hearings will take place in public, taking into account the different time zones,
4. to designate the examining magistrate before whom the hearing will be held, and
5. to determine the date on which the applicants must send a copy of this petition and the decision to be issued thereon to the seven [the court understands: five] party experts.

2.2. The applicants have, in short, based their request on the fact that they are considering intervening or joining the substantive proceedings pending before the court, docket number 23/172, in which the applicants are the defendants, or initiating proceedings against the applicants themselves. They seek compensation for all material and immaterial damages they have already suffered and will yet suffer as a result of being unlawfully misled by the applicants into receiving a COVID-19 (mRNA) injection. According to the petition and the attached documents, the plaintiffs in the aforementioned substantive case argue that COVID-19 is not a disease but a project called "Covid-19: the Great Reset." According to them, the COVID-19 (mRNA) injections are a crucial part of this project in which the applicants are participating and qualify these injections as bioweapons, which are used to commit genocide. The applicants share these positions of the plaintiffs in the substantive proceedings. The defendants in the main proceedings dispute these positions. The applicants intend to secure evidence of the aforementioned positions through the expert hearing they have requested and to better assess their chances of success. According to the applicants, given their training, experience, and relevant expertise, the experts are qualified to provide an independent and scientifically sound expert opinion regarding the questions raised in the application regarding the project and the COVID-19 (mRNA) injections.

2.3. The defendants each conduct their own defense. Hofstra et al., Bourla, and Van der Voort-Kant request that the applicants' request be declared inadmissible or that this request be rejected with a provisionally enforceable order against the applicants to pay the costs of these proceedings (including the additional costs), plus statutory interest. Van Cann et al. request the same, with the exception of the provisionally enforceable order for the costs of the proceedings. Gates refers to the court's judgment.

3. The assessment

Contents of request and assessment framework

3.1. This concerns a request for provisional evidence. The Act on Simplification and Modernization of the Law of Evidence entered into force on 1 January 2025, which, among other things,

amended the provisional evidence regulations in the Code of Civil Procedure (CCP). Because the request was made after that date, these new articles apply to the request.

3.2. Under Article 196, paragraph 1, of the Dutch Code of Civil Procedure (RCV), the court may, at the request of an interested party, order one or more preliminary evidentiary hearings before a case is pending, such as a preliminary witness hearing, a preliminary expert report, or a preliminary expert hearing. The latter involves the hearing of a court-appointed expert during the oral hearing.

Under Article 192, paragraph 1, of the RCV, the court may, at the request of a party, grant permission to hear experts whom the party wishes to hear. These experts are not appointed by the court and are hereinafter referred to as party experts. The legislative history of Article 192, paragraph 1, of the RCV indicates that this hearing can also be requested as a preliminary evidentiary hearing¹. If a (party) expert not only possesses a specific expertise but also has personal knowledge of facts and circumstances relevant to the case, a request can be made to hear them as an expert witness/party expert. This involves a combination of a witness hearing and a (party) expert hearing.

3.3. Respondents have argued that the petition does not clearly indicate which of the aforementioned preliminary evidence proceedings the applicants are requesting. They point out that in the petition, the applicants alternately refer to a preliminary expert hearing, a preliminary expert report, a combination of these, or a witness hearing.

3.4. The court notes that the petition's request requests an expert hearing and further refers to "the party experts." The petitioners have indicated that the experts they have nominated can also be considered witnesses and that their relevant factual knowledge also consists (partly) of their observations as witnesses, so they argue that they should be heard under oath. The court therefore proceeds on the basis of a request to order a preliminary hearing of the expert witnesses nominated by the petitioners. The court notes that at the oral hearing, the petitioners referred to an expert witness hearing. Insofar as the petitioners did not understand the request in this way, their interests will not be harmed by this, given the considerations below regarding this request.

3.5. Article 196, paragraph 2, of the Dutch Code of Civil Procedure stipulates that the court will grant a request for provisional evidence unless:

- the requested information is insufficiently specific;
- there is insufficient interest in the provisional evidence;
- the request is contrary to due process;
- there is abuse of authority;
- there are other compelling reasons that oppose the provisional evidence.

The court notes that these rejection criteria are not separate, but rather overlap and can therefore be applied concurrently.

¹ See parliamentary documents II 1999/2000, 26855, nr. 3, pag. 120 and 125.

3.6. The court rejects the request and explains below why.

The request is not possible if applicants wish to intervene or join the ongoing substantive proceedings

3.7. Insofar as the applicants requested the hearing because they are considering intervening (or joining) in the aforementioned substantive proceedings, the request is inadmissible. As the respondents correctly argued, Article 196 of the Dutch Code of Civil Procedure precludes the possibility of requesting provisional evidence during ongoing proceedings. While the applicants are not currently parties to the substantive proceedings, so strictly speaking, this is not a request for provisional evidence in ongoing proceedings, they will become parties to those ongoing proceedings if a request for intervention (or joinder) is granted. The request is therefore contrary to the intent of Article 196 of the Dutch Code of Civil Procedure. If a case is already being dealt with on its merits, according to the legislator, evidence must be obtained through the court to which the case has been assigned, and provisional evidence must not interfere with ongoing proceedings. In the court's opinion, such an unacceptable interference with ongoing proceedings also occurs when the request for a preliminary hearing is made by someone who intends to become a party to an already ongoing proceeding². The request is therefore incompatible with the legislature's intention.

The request must also be rejected if applicants wish to initiate their own substantive proceedings

3.8. The applicants have indicated that they are also considering initiating their own proceedings against the applicants. However, these proceedings on the merits will involve the same set of facts as the current proceedings and the same defendants (who are now applicants). These proceedings will therefore be very closely intertwined with the already pending proceedings. The reply submitted by the applicants in the main proceedings shows that this petition was submitted as exhibit in the main proceedings and that an offer was made in the main proceedings to hear the parties' experts in the main proceedings. It is up to the panel in the ongoing proceedings to decide whether this is necessary and desirable. If the request is granted, the ongoing proceedings could be unacceptably affected. If the written report of the hearing of the parties' experts is introduced in the ongoing proceedings, this will affect the further course of the proceedings. The control of the panel in the main proceedings will thus be compromised in a way similar to the consequences described above for the main proceedings in the event of intervention or joinder. This conflicts with the intention of the legislator.

The request must also be rejected for other reasons

1. An expert hearing is not the appropriate means

3.9. Respondents have argued, among other things, that the applicants have no interest in a preliminary expert hearing, because the applicants can also obtain the requested preliminary evidence in writing. They point out in this regard that the persons

² See parliamentary documents II 2019/20, 35 498, nr. 3, p. 19 (MvT)

the applicants wish to call as experts have declared their willingness to provide a statement, which they can also do in writing. bereid hebben verklaard om een verklaring af te leggen, wat ze ook schriftelijk kunnen doen.

3.10. The applicants countered that a unilateral written statement from the nominated experts lacks the weight and evidentiary value of an expert opinion reached in a careful legal process with the opportunity for both sides to be heard. According to the applicants, all parties can ask critical questions of the nominated party experts during the hearing, and the applicants can also have their party experts heard under oath. According to the applicants, the diametrically opposed camps of party experts will each have to give and substantiate their expert opinion under oath. Only such an expert opinion will provide the applicants with sufficient insight to determine whether they can demonstrate in legal proceedings that unlawful conduct has occurred in the form of genocide with a bioweapon.

3.11. The court disagrees with the applicants' position. The parties agree that the opinions of their respective experts on this matter are (or will be) diametrically opposed. In such a case, an expert report by an independent expert appointed by the court in consultation with the parties is a more appropriate way to gain insight into the matter and to obtain evidence. This is especially true because this is a complex issue that lends itself better to written information provided by an expert appointed in consultation with the parties, who can then, if necessary, be heard on certain aspects by the judge at an oral hearing. While the applicants have insisted on a debate between the experts of the applicants and the applicants, the legal option for requesting a hearing of the parties' experts is not intended for this purpose. The debate takes place before the judge in the main proceedings, and that judge determines how and in what manner the debate should take place.

2. Applicants have no interest in the request

3.12. It is undisputed that the applicants are aware of the position of their party experts and the opposing views of the party experts that the applicants will wish to rely on. Therefore, they have not sufficiently substantiated their claim that they need the hearing to decide whether to initiate substantive proceedings. Furthermore, they can request their party experts to answer the questions in writing or by video. This will sufficiently safeguard their evidence. Therefore, the court finds that the applicants have insufficient interest in hearing the party experts.³

3. The party experts cannot be heard as witnesses

3.13. The following also applies to the hearing of witnesses. Under Article 163 of the Code of Civil Procedure, a witness's statement can only serve as evidence insofar as it relates to facts known to the witness from his or her own observation. According to established case law, the term 'observation' must be interpreted broadly. Impressions what the witness

³ See Explanatory Memorandum to the Act on the Simplification and Modernisation of the Law of Evidence, House of Representatives, session year 2019-2020, 35 498, no. 3, page 58.

has learned and what the witness has heard from third parties belong to this⁴. The request for a preliminary witness hearing must clearly and specifically specify the actual event to which the hearing will relate. Furthermore, if necessary, it must also be made clear why the witnesses to be heard may (possibly) testify about this.⁵

3.14. According to the respondents, the request should be denied insofar as it requests that the parties' experts also be heard as witnesses. They argue that the applicants have not explained which relevant events the persons nominated by the applicants allegedly witnessed and that none of the proposed questions pertain to these persons' own observations. In response, the applicants explained at the hearing that the persons they named can testify from their own observations regarding the existence of the project "Covid-19: Great Reset," genocide, and the use of bioweapons, as they live in a time when all of this is happening. In the court's opinion, in light of the respondents' arguments, the applicants have insufficiently specified which proposed questions the nominated persons can answer based on their own observations. As the respondents have argued uncontested, the questions, given their formulation, are intended to be answered by an expert based on knowledge and experience in their field. In short, the questions addressed to the parties' experts pertain to what they know based on their expertise, but not to what they have seen, heard, or observed.

4. *The request is contrary to due process*

3.15. Furthermore, in light of the respondents' challenge, the applicants have insufficiently explained that all the questions they formulated are relevant and could contribute to the resolution of the dispute in any potential proceedings on the merits. For example, the applicants propose to submit various questions to the American party experts K. Watt (hereinafter: Watt) and S. Latypova Mba regarding US regulations on viruses, vaccines, and biological and bacteriological weapons, without clarifying why US law would be relevant in this regard. Furthermore, the court cites, as an example, the applicants' proposal to ask Watt: "What is the relationship between the regulatory functions and decisions of the US Food and Drug Administration (US-FDA) regarding international trade in viruses, gene therapies, and other biological products and other regulatory authorities outside the United States, particularly in Europe?" Again, no explanation has been given as to why the answer to this question is necessary for a decision. This applies to other questions. Viewed in this light, it has also been insufficiently explained that five experts must be heard and that fewer experts are not sufficient. The court therefore finds that granting the request will be time-consuming and expensive, and will lead to inefficient information gathering. This, in conjunction with the preceding considerations, means that the request violates due process.

⁴ See Supreme Court 11 July 2025, ECL1:NL:HR:2025:1141

⁵ See Supreme Court 7 September 2018, ECL1:NL:HR:2018:1433

Conclusion

3.16. The court concludes that the circumstances mentioned above must lead to the conclusion that the request must be rejected.

3.17. Since the request is already rejected on the aforementioned grounds, all other defences raised by the respondents do not need to be discussed further.

Legal costs

3.18. The applicants, as the unsuccessful party, will be jointly and severally ordered to pay the costs of the proceedings (including the additional costs). The costs incurred by Hofstra et al. will be determined as follows:

- court fees:	€ 714,00	
- lawyer's salary:	€ 1.228,00	(2 points x rate € 614,00)
- <u>additional costs</u>	<u>€ 178,00</u>	(plus the increase as stated in the decision)
Total	€ 2.120,00	

The costs on Bourla's side are set at:

- court fees:	€ 331,00	
- lawyer's salary:	€ 1.228,00	(2 points x rate € 614,00)
- <u>additional costs</u>	<u>€ 178,00</u>	(plus the increase as stated in the decision)
Total	€ 1.737,00	

The costs on the side of Van Cann et al. are set at:

- lawyer's salary:	€ 614,00	(1 point x rate € 614,00)
- <u>additional costs</u>	<u>€ 178,00</u>	(plus the increase as stated in the decision)
Total	€ 792,00	

The costs on Gates' side are set at:

- lawyer's salary:	€ 614,00	(1 point x rate € 614,00)
- <u>additional costs</u>	<u>€ 178,00</u>	(plus the increase as stated in the decision)
Total	€ 792,00	

The costs on the side of Van der Voort-Kant are set at:

- court fees:	€ 331,00	
- lawyer's salary:	€ 1.228,00	(2 points x rate € 614,00)
- <u>additional costs</u>	<u>€ 178,00</u>	(plus the increase as stated in the decision)
Total	€ 1.737,00	

3.19. The statutory interest on the legal costs claimed by the defendants will also be awarded as legally based and uncontested in the manner set out in the judgment.

4. The decision

The court

4.1. rejects the request;

4.2. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, in the legal costs on the side of Hofstra et al., set to date at € 2,120.00, to be paid within fourteen days of notification to that effect, to be increased by € 92.00 plus the costs of service if the applicants do not comply with the orders in time and the decision is subsequently served;

4.3. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, to pay the statutory interest as referred to in Article 6:119 of the Dutch Civil Code on the legal costs of Hofstra et al. if these have not been paid within fourteen days after the date of this order;

4.4. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, in the legal costs on the side of Bourla, set to date at € 1,737.00, to be paid within fourteen days of notice to that effect, to be increased by € 92.00 plus the costs of service if the applicants do not comply with the orders in time and the decision is subsequently served;

4.5. orders the applicants jointly and severally, in the sense that if one pays, the others will be released from the obligation to pay the statutory interest referred to in Article 6:119 of the Dutch Civil Code on Bourla's legal costs up to the amount of that payment if these are not paid within fourteen days of the date of this order;

4.6. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, in the legal costs on the side of Van Cann et al. set to date at € 792.00, to be paid within fourteen days of notification to that effect, to be increased by € 92.00 plus the costs of service if the applicants do not comply with the orders in time and the decision is subsequently served;

4.7. orders the applicants jointly and severally liable, in the sense that if one pays, the others will be released up to the amount of that payment, to pay the statutory interest as referred to in Article 6:119 of the Dutch Civil Code on the legal costs of Van Cann et al. if these have not been paid within fourteen days after the date of this order;

4.8. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, in the legal costs on the side of Gates to date set at € 792.00, to be paid within fourteen days of notice to that effect, to be increased by € 92.00 plus the costs of service if the applicants do not comply with the judgment in time and the decision is served thereafter;

4.9. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, in the legal costs on the side of Van der Voort Kant, set to date at € 1,737.00, to be paid within fourteen days of notice to that effect, to be increased by € 92.00 plus the costs of service if the applicants do not comply with the orders in time and the decision is subsequently served;

4.10. orders the applicants jointly and severally, in the sense that if one pays, the others will be released up to the amount of that payment, to pay the statutory interest as referred to in Article 6:119 of the Dutch Civil Code on the legal costs of Van der Voort-Kant if these have not been paid within fourteen days after the date of this order;

4.11. declares this order provisionally enforceable with regard to the convictions under 4.2., 4.3., 4.4., 4.5., 4.9. and 4.10.

This order was issued by Mr. J.A. Werkema and pronounced in open court on August 20, 2025 in the presence of the clerk.

fn: 445



Voor 9Flilil&&e/afschr. conform

20 AUG 2025


De griffier,