

Order of the law Fellowship

correspondence address: Weis & Partners s.r.o., Ivanska cesta 30B, Bratislava, 821 04, Slovak Republic
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THE INTERNATIONAL CRIMINAL COURT

Office of the Prosecutor Communications
Post Office Box 19519 2500 CM
The Hague
The Netherlands
Email: otp.informationdesk@icc-cpi.int

In Bratislava, Slovak republic on 12th April 2021

**IN THE MATTER OF COMMITTED CRIMES AGAINST HUMANITY and
WAR CRIMES**

**(The Rome Statute of the International Criminal Court, art. 15.1 and
art.53)**

(The Slovak Republic as ratification Party of the Rome Statute of ICC in the
New York, as of 11th April 2002)

SUBJECT OF COMPLAINT:

**Violation of the Nuremberg Code by the Government of The Slovak
Republic in regards of mass testing**

We, the “**Order of the Law Fellowship**”, a fellowship composing of physical persons including attorneys-at-law, MDs, physicians, public and general activists etc. (full list of members of this fellowship is attached as Annex 1 to this Complaint) who freely and wilfully made a decision to exercise their democratic right not to participate in the experimental nation-wide mass medical testing (performed by Sars-COV-2 antigen tests), who know and feel that great pressures and illegal actions had been exercised on the population of the Slovak Republic on behalf of the Government of the Slovak Republic (hereinafter referred as to „**Government**”), members of the Parliament, the President of the Slovak Republic, ministers, senior officials, heads of municipalities and many individuals appointed to decisive positions by the Government temporarily for the period of lasting of the pandemic of Sars-COV-2 . It is necessary to state that our country is in the international community being officially recognised as a democratic state based on rule of law principle. We do not live in a dictatorship country.

1. Brief summary of the facts (chronologically)

- 1.1 First round of **mandatory mass testing** of the population of the Slovak Republic called officially and ironically by the Government Mutual Responsibility was performed on 31st October 2020 and 1st November 2020 on the legal basis of Government resolution no. 693 from 28th October 2020 (published in under no. 298/2020 Coll.). It is important to mention that the testing was called only formally as voluntary but legally it has to be considered as a pure obligation as not attending the mass testing was sanctioned in different ways as mentioned below in sec. 2.
- 1.2 According to common information available on the internet there was a positive outcome of 38.359 people (1.06 per cent) out of 3.625.332 people tested (e.g. <https://korona.gov.sk/celoplosne-plosne-testovanie-na-covid-19/>).

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- 1.3 Second round of **mandatory mass testing** of the population of the Slovak Republic was performed on 7th and 8th November 2020 in 45 districts on the legal basis of Government resolution no. 704 from 4th November 2020 (published in under no. 306/2020 Coll.).
- 1.4 According to common information available on the internet there was a positive outcome of 13.509 people (0.66 per cent) out of 2.044.855 people tested (e.g. <https://korona.gov.sk/celoplosne-plosne-testovanie-na-covid-19/>).
- 1.5 In direct causality to above mentioned mass testings on 17th November 2020 a huge anti-government protests took part at different places in the Slovak Republic.
- 1.6 In direct causality of these protests a third round was being proposed **strictly as voluntary**. Either in formal and material way.
- 1.7 Third round of mass testing of the population of the Slovak Republic was performed on 21st and 22nd November 2020 in 459 municipalities (selected by outcome of previous mass testing where the share of positivity was higher than 1 per cent).
- 1.8 The third round **WAS THE ONLY VOLUNTARY ROUND** (not sanctioned by the Government) and the numbers were as follows: 2.501 positive cases out of **110.609 people attending the testing**. Dramatical drop of the count of people attending voluntarily was impressive and worth of mention. We could state there was a clear correlation between free will to decide and attendance (for details see <https://www.health.gov.sk/Clanok?obrana-vysledky-testovanie-2-4-kolo>).
- 1.9 4th of December: publication of a study (<https://www.medrxiv.org/content/10.1101/2020.12.02.20240648v1#p-5>) stating the outcomes of the mass testing and introducing it as a method to decrease the prevalence of the illness (long story short: “testing as cure”).
- 1.10 4th Round of another **mandatory mass testing** of the population of the Slovak Republic called “Screening” was performed from 18th to 26th January 2021 on the legal basis of Government resolution no. 30 from 17th January 2021 (published in under no. 8/2021 Coll.).
- 1.11 According to common information available on the internet there was a positive outcome of 36.547 cases (1.24 per cent) out of 2.949.017 people tested (e.g. <https://www.minv.sk/?tlacove-spravy&sprava=definitivne-vysledky-skriningu-z-2-9-miliona-ludi-malo-pozitivny-test-1-24-percenta>). It is worth of mention that first official numbers were amended few times starting on the number of 0.7 per cent of positive share. Some of the municipalities performed their own count and protested that the numbers could had been raised in an at least strange if not illegal way.
- 1.12 This 4th mandatory so called “Screening” have been continuously running since then on the 7-days basis under the name COVID AUTOMAT.
- 1.13 25th March 2021 second publication of a study in Science (<https://science.sciencemag.org/content/early/2021/03/26/science.abf9648>) untruthfully stating that testing lowers prevalence of the tested illness. This was published also officially at <https://www.health.gov.sk/Clanok?covid-19-25-03-2021-studia>

2. Legal aspects

- 2.1 Whoever does not undergo mandatory testing is in fact (only main points mentioned):

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- 2.1.1 excluded from possibility to go to work (employers are forced to put employees on home office regime or to ban entry of the work premises)
 - 2.1.2 excluded from going shopping to different than selected shops and banned of using various public and private services
 - 2.1.3 excluded from going for a walk into the nature (this differs through time)
 - 2.1.4 excluded from crossing the border of the Slovak Republic (even a Slovak citizen) and crossing the borders of the districts
 - 2.1.5 excluded from school attendance (only via internet allowed when not tested for some age categories)
 - 2.1.6 excluded from personal attendance of bank services (e.g. signature of mortgage papers etc.)
 - 2.1.7 excluded from access even to basic healthcare (conditioned by having a negative test)
 - 2.1.8 excluded from access to ANY state service except from electronic service e.g. change of address or change of car registration (strictly conditioned by having a negative test).
- 2.2 The **Nuremberg Code** is a set of research ethics principles for human experimentation created as a result of the Nuremberg trials at the end of the Second World War.
- 2.3 The Nuremberg Code, **which stated explicit voluntary consent from patients are required for human experimentation** was drafted on August 9, 1947. On August 20, 1947, the judges delivered their verdict against Karl Brandt and 22 others. The verdict reiterated the memorandum's points and, in response to expert medical advisers for the prosecution, revised the original six points to ten. The ten points became known as the "Nuremberg Code", which includes such principles as **informed consent** and **absence of coercion; properly formulated scientific experimentation**; and beneficence towards experiment participants. It is thought to have been mainly based on the Hippocratic Oath, which was interpreted as endorsing the experimental approach to medicine **while protecting the patient**.
- 2.4 The **ten points of the Code** were given in the section of the verdict entitled "*Permissible Medical Experiments*":
- 2.4.1 The **voluntary consent** of the human subject is **absolutely essential**.
 - 2.4.2 The experiment should be such as to **yield fruitful results for the good of society**, unprocurable by other methods or means of study, and **not random and unnecessary in nature**.
 - 2.4.3 The experiment should be so designed and **based on the results of animal experimentation** and a **knowledge of the natural history of the disease** or other problem under study that the anticipated results will justify the performance of the experiment.
 - 2.4.4 The experiment should be so conducted as **to avoid all unnecessary physical and mental suffering and injury**.
 - 2.4.5 No experiment should be conducted where there is an *a priori* reason to believe that death or **disabling injury will occur**; except, perhaps, in those experiments where the experimental physicians also serve as subjects.

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- 2.4.6 The **degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem** to be solved by the experiment.
- 2.4.7 Proper preparations should be made and adequate facilities provided **to protect the experimental subject** against even remote possibilities of injury, disability, or death.
- 2.4.8 The experiment should be conducted **only by scientifically qualified persons**. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.
- 2.4.9 During the course of the experiment the **human subject should be at liberty to bring the experiment to an end** if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.
- 2.4.10 During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him that **a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject**.
- 2.5 These Nuremberg Code principles have been incorporated in the **Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: the Convention on Human Rights and Biomedicine** (hereinafter referred to as „**Convention**”).
- 2.6 Slovak Republic ratified this Convention and it entered into force on 1st December 1999 (published as 40/2000 Coll.)
- 2.7 Main violations of the articles of the **Convention**
 - 2.7.1 Art. 2 - the interests and welfare of the human being shall prevail over the sole interest of society or science. This was blatantly violated by the Government by performing the mass testing without proper informed consent in the name of public health needs.
 - 2.7.2 Art. 3 – non tested persons have been in fact treated as positive tested persons in the means of access to healthcare. Positive tested persons are being directly considered as infectious even though this information is already in contrary to common scientific knowledge.
 - 2.7.3 Art. 5 – At least first three rounds were **performed without gaining informed consent from participants**. Fourth Round pretends to collect informed consent, but this is being done only formally in violation of Art. 5 stating that a person shall beforehand be given appropriate information as to the purpose and nature of the intervention as well as on its consequences and risks. For importance of granting informed consent see also *the European Court of Human Rights Judgment on Case of V.C v. Slovakia from 8th February 2012*.
 - 2.7.4 Art. 10 is being continuously violated by the army and police illegally controlling the health certificates stating if a person is tested and if he/she is positive or negative. People without such certificates with negative results valid only for few days are then being discriminated and punished for exercising their fundamental rights and freedoms.
 - 2.7.5 Art. 15 and Art. 16: As of December 2020, the world-wide recognized scientific journal, presenting its articles/studies on www.medrxiv.org, published on 4th December 2020 a study (attached as Annex 2, see also <https://www.medrxiv.org/content/10.1101/2020.12.02.20240648v1#p-5>) is

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stating that the Slovak population of 5.5 million inhabitants **were subject of a research**. In contrary to the circumstances, authors claimed that this research was executed in compliance with the applicable laws of the Slovak Republic. As stated by the Slovak Medical Union of Specialists "Dr. Mengele did not have more favourable conditions created by his regime for an experiment than our Minister of Health received from the Government of Prime Minister Matovič".

2.7.6 Preprint discussion is self-explanatory. It is worth reading comment of e.g. Mr. Jan Lakota, MD, PhD., well known Slovak physician and scientist, stating as follows: "There was no punishment by law". Are you serious? What about the restrictions to those who were not "voluntary" tested? They were not allowed to go to work, not allowed to go to shops (except grocery stores). The people were pressured to stay at home what is as home arrest. Isn't it? Moreover, NO written consent has been obtained.

2.7.7 Ms. Zuzana Kollarova stated as follows: This statement is NOT TRUE and the citizens of the Slovak Republic have no idea they are a part of some medical research:

"All necessary patient/participant consent has been obtained and the appropriate institutional forms have been archived - Yes". We have been all forced to this by a number of restrictions and consequences presented by the Prime Minister and the Government prior the testing and they let the "choice" to us. If we wouldn't take part on that testing we couldn't go to work, to any store, bank, post office etc. Only basic needs could be fulfilled like grocery shopping, pharmacy etc. Healthy people who refused to take part on this had to stay at home in quarantine like they were infected and couldn't go outside without the risk of getting a fine, if a police would control them randomly on the streets. This lasted 14 days. They used the army, the President found out just from the papers and not officially. The President has been called a traitor by the Prime Minister just one day before the mass operation should start, when the President asked for a really voluntary participation on mass testing for the citizens. The testing has been done for tested persons by anonymous persons, also not always professional medical staff which was allowed by modified legislation for this purpose, without knowing their names and their real profession. Those so called „Blue Papers“ („the Health Certificate“/test result confirmation) do not contain the necessary legal requirements to be called a "certificate" officially by the law. And now, we are in the middle of 2nd mass "screening" now, since January 18th 2021 during the winter, even though the scientist didn't recommend it at all in current situation. And again - no one is collecting our written and signed consent. From January 27th 2021 there will be again 2 groups of people - the "blue" ones and the rest of us. The country will be then split into two half by the results and the worse half of the country has to undergo this procedure 1-2 times again until February 07th 2021 and until our Prime Minister will be satisfied with the results.

2.8 Summary of violations of the Nuremberg Code

2.8.1 (1) Voluntary informed consent was never obtained in ANY case. The authors of the study were openly lying stating that the consents were granted. People did not know they are undergoing an experiment and were not subject to any remuneration for joining such experiment.

2.8.2 (2) The experiment was totally unnecessary. It seems it was performed and still lasts based on economic reasons of various businessmen only. It might be considered as spending money on useless antigen tests only. The outcomes published in both journals are untruthfully in opposition of the factual data published on various portals. It is crystal clear that the prevalence of the tested

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illness dramatically raised after 10-14 days (incubation period) after each testing. There are quite lot of information available such as these links proving that antigen tests are objectively useless especially when used on whole population, e.g.:

- a) <https://norwaytoday.info/news/danish-health-inspectorate-rapid-corona-tests-provide-uncertain-results/>
- b) <https://www.nordschleswiger.dk/de/daenemark-gesellschaft/jeder-zweite-positive-schnelltest-ist-falsch-positiv>
- c) <https://www.wpr.org/cdc-uw-antigen-tests-missed-nearly-59-percent-covid-19-cases-among-asymptomatic-individuals>
- d) <https://www.newscientist.com/article/2263746-test-caught-just-3-percent-of-students-with-covid-19-at-uk-university/>

- 2.8.3 (3) No animal testing was performed. Information on the disease is still insufficient (isolation and purification of the SARS-CoV-2 patogen according to scientific principles still remains a challenge to the scientific community).
- 2.8.4 (4) Regular testing (nasopharynx testing) every week causes physical and psychical damages (nose bleeds, local pains, headaches and other injuries).
- 2.8.5 (5) Disabling injury may occur as the nasopharynx area is one of the most vulnerable places of human body neighbouring with frontal neocortex and trigeminal innervation with T cells missing. Nowadays the trend is to recertify the nasopharynx swabs as nasal swabs. The question is why was it necessary to use them in a way that hurts people and now it is being considered as suitable even for nasal self-testing. No changes to the tests were made.
- 2.8.6 (6) The degree of risks of transmission of respiratory and other diseases by letting people que outside for tests in cold winter weather conditions was definitely higher than collecting statistical information on results of tests with extremely low sensitivity and specificity. Based on these tests, lots of false negative people got false feeling of being healthy and acted so. Clinical testing was not performed. Asymptomatic people were tested as well. Testing did much worse than good.
- 2.8.7 (7) No preparations to protect the participants were ever made.
- 2.8.8 (8) Experiment was performed by different people, mostly not trained, not skilled, hardly of needed education and qualification. Therefore risk of health damage was higher than usual.
- 2.8.9 (9) People are not able to quit permanent testing circle willfully without high risk of heavy sanctions being imposed on them (e.g. not able to go to work and get paid, not able to sign documents at banks in order to postpone mortgage installments or refinancing the debts, not able to go from district to district, not able to cross borders with other states to the Slovak Republic what is applicable also for Slovak citizens etc.).
- 2.8.10 (10) Scientist (authors of the study and the Government members) are eager to continue the testing even if cases of injuries and adverse effects are being continously reported.

3. Legal basis according to Rome statute

- 3.1. Aforementioned breaches of the Code shall be considered as crimes against humanity at least but not limited to Art. 7 par. 1 sec. f) and h).

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- 3.2. The condition of an attack directed against any civilian population was definitely fulfilled by wilfull commission of multiple forced mass testings of entire population by Government targeted on its own civil population causing multiple harms.
- 3.3. Torture means the intentional infliction of severe pain or suffering, whether physical or mental, upon a person under the control of the accused (Government); except that torture shall not include pain or suffering arising only from, inherent in or incidental to, lawful sanctions.
- 3.4. Aforementioned forced mass testings shall be in every aspect considered as torture.
- 3.5. Persecution means the intentional and severe deprivation of fundamental rights contrary to international law by reason of the identity of the group or collectivity;
- 3.6. Aforementioned forced mass testings shall be considered as persecution of untested ones against tested ones.
- 3.7. Aformentioned breaches of the Code shall be also considered as war crimes at least but not limited to Art. 8 par. 2 sec. a(II), a(III) b(XXI).
- 3.8. Art. 8 par. 1 condition of severity is also fulfilled as the mass testings were planned in advance and effectivly forced by the Government.
- 3.9. Forced mass testing shall be beyond any doubts considered as biological experiment as per Art. 8 par. 2 sec. a(II).
- 3.10. Performance of forced mass testings caused great and contionous suffering of population, including many documented serious injuries to body and health.
- 3.11. Untested ones are experiencing outrages upon personal dignity, in particular well documented humiliating and degrading treatment; all supported by the Police, Armed Forces and the Government.
- 3.12. The Fellowship is of the opinion that there is a reasonable basis to believe that a broad range of wilfull conduct constituting war crimes and crimes against humanity were committed and that there is definitely a reasonable basis for further investigation.

4. Important facts

- 4.1 For mass testings, SD BIOSENSOR Standard Q test was used mainly. As stated by the producer (<http://sdbiosensor.com/x/covid19>), these tests are to be used in the medical premises only. Tests are intended for symptomatic patients only and exclusively to distinguish COVID-19 disease from other disease. The result must be always subject to further evaluation of a physician under actual anamnesis data and has to be confirmed by other laboratory means. In addition, there are various indicated medicaments that may cause a false negativity or positivity of tests. In other words, these tests are not suitable for mass testing.
- 4.2 Doubts about sensitivity of the tests are also underlined by a manner, in which the state procured the tests – without proper procurement proceedings (using direct contracting methods avoiding standard public competition, avoiding publicity in the Journal of Public Procurement therefore excluding European competitors), selecting a supplier company not active in such business and having no experience with procurement of any medical equipment, having personal ties with the Prime Minister and Minister of Commerce, and procuring tests at price being

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substantively higher than actual market price, all being well documented by the media.

- 4.3 The producer (SD Biosensor) tested first bulks of new Ag tests, concerning validity of the results, on 426 people in Brazil and India, whereas the tests were not standardly approved by ŠÚKL (State Agency for Medicaments Control) in accordance with a valid Slovak law (Act No. 362/2011 Coll.).
- 4.4 After the first procurements of the test SD Biosensor Standard Q tests the World Health Organisation published in October 2020 a WHO EUL (Emergency Use Licence) Public Report no. EUL-0563-1 17-00 in which it stated as follows:
 - 4.4.1 Page 1 Intended Use: ... It provides only an initial screening test result. This product is strictly for medical professional use only and not intended for personal use. The administration of the test and the interpretation of the results should be done by a trained health professional. The result of this test should not be the sole basis for the diagnosis; confirmatory testing is required.“
 - 4.4.2 Page 4 „This listing does not infer that the product meets WHO prequalification requirements and does not mean that the product is listed as WHO prequalified.“
 - 4.4.3 Page 14: Overall clinical specificity is 98,94 per cent.

4.5 Comments on 4.4

- 4.5.1 Testing was NOT performed as per WHO EUL guidelines. It was performed also by people with insufficient qualification/skills and therefore many of them did not fulfill the condition of medical professional use. Confirmatory testing was NOT performed AT ALL. The abovementioned tests were NOT suitable for mass testing purposes. False positivity is mathematically 100 per cent minus overall clinical specificity which is 1,06 per cent in case of Standard Q test. This means that the result of the first mass testing meant THERE WAS NO OCCURENCE OF PATOGEN TESTED on the premises of the Slovak Republic. But the result was in media and by officials interpreted in different way and lead as pretext to further measures tightening and further testing (infinite testing perpetuum mobile caused by wrong data interpretation).
 - 4.5.2 Results of 2nd mass testing before amending numbers by the Government meant even more: THERE WAS NO OCCURENCE OF PATOGEN TESTED EITHER. The numbers of positive outcomes were lower than overall false positivity declared by the producer (probably reached by inappropriate weather conditions and breaking of the sets as reported by some hospitals).
 - 4.5.3 The aforementioned studies were financed in advance by the same entities as are the funding entities of the manufacturer of the tests (e.g. Bill and Melinda Gates Foundation). The connection seems suspicious and this subject is well covered by the media.
- 4.6 The tests used for mass testings were having a CE mark based only on self-declaration and self-assessment of the producer of the tests. No validation of these tests in Slovak Republic was ever made before mass testings (although it was recommended by the ECDC). Full responsibility of choosing (procuring) and validation of the antigen tests is solely in the competence and of responsibility of Slovak Republic.

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Therefore, and considering the stated above, but not limited to, we address your honour with these main demands:

- 1. To discontinue the medical experiment of continuous mandatory mass testing of the public of the Slovak citizens immediately.**
- 2. To instruct the Government to step all the legislative proceedings which infringe on the principle of Informed Consent by a person to receive the above-described medical treatment, and which negates the legal status in the Slovak Republic and the Slovak democracy, including the avoidance to legislate the certificates, delivery of names of those who are not tested to the authorities, or any other harming legislature.**
- 3. To act in the most required severity against any public/business employment entity, which violates the laws of the State on subjects of employment or the other subjects required to prevent compulsion, coercion or solicitation to get tested, as well as the subject of discrimination, against those who made a choice not to receive the above-stated medical treatment.**

Legal representation and election of domicile

The applicants will be represented for the purposes of this procedure by

Respectfully

JUDr. Peter Weis
Attorney

JUDr. Erik Schmidt LL.M. MA
Attorney

JUDr. Marica Pirošíková
Attorney

Consequently, all subsequent correspondence should be sent only to the mailing and/or e-mail addresses given above. Any notification within the meaning of the Statute of the Court addressed in this way will be considered valid.

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ANNEXES:

Annex No.1 List of the fellowship members

Annex No.2 Scientific study published at MedRxiv journal

Annex No.3 Scientific study published at Science journal

Annex No.4 List of legal instruments used by the Government to impose public coercion

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Annex No.1 List of the fellowship members

Ing. Peter Poláček, civil activist

Katarína Poláčková, civil activist

čat. Juraj Dobrotka, professional soldier

Petra Dobrotková, civil activist

Matej Tomík, civil activist

Štefan Havlík, civil activist

Ján Stanko, mayor

Jozef Gonda , civil activist

Monika Gondová , civil activist

Ing. Ľudovít Lučenič, entrepreneur, software engineering

Ing. Ľudovít Lučenič, entrepreneur

Mgr. Zuzana Benčeková, economist

Robert Benček, civil activist

Ing. Veronika Andrássová Tözsérová, technical engineer

Martina Révayová, entrepreneur

Boris Čechvala, civil activist

Ján Lakota, MD, PhD, physician, scientist

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Mgr. Martin Kovalik, scientist

Matej Tomík, former professional soldier

Jana Leščáková, civil activist

Janka Leščáková, civil activist

Martin Perduk, civil activist, entrepreneur

Mgr. Adriana Kráľová, civil activist, teacher

Bc. Pavol Sekereš, civil activist, teacher

PhDr. Gabriela Pirošková, journalist

Kristína Ďurechová, civil activist, student

Bc. Veronika Cedzová, civil activist, translator

Dominik Cedzo, civil activist, self-employed

Tibor Toth, civil activist, cutter

Jozef Hübel, journalist

Michaela Zakuťanská, playwright

Oto Hajči, system engineer

Ing. Jozef Hranák, technician

Ing. Marcela Hranáková, civic activist

Martin Horváth, electrician

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Ing. Mgr. Irena Galádová, MBA economist

Mgr. Zuzana Kováčiková, PhD., scientist

Ing. Michal Gregor, civil engineer

Jana Helleschová, civil activist

Margita Noé, civil activist

JUDr. Ing. Gréta Noé, LL.M., apprentice advocate

Martina Figurová, civil activist

Katarína Liptáková, civil activist

Anna Liptáková, civil activist

Adela Jureníková, school director

Monika Fegyveres Oravská, Self Employed Consultant

Mgr. Dagmar Batthyany, interior designer

Ján Staňák, civil activist

Mgr. Lenka Pillarová, teacher, self-employed

Tomáš Pillar, physiotherapist

Ing. Lucia Ozar, pilot

Bülent Ozar, pilot

Ing. Petra Sovová, economist

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Lýdia Sovová, self-employed

Ing. Milan Sova, retired professional soldier and pilot

RNDr. Ivona Herichova, biochemist

Eva Koprena, PhD., lecturer

Juraj Boroš, Director of Maritime School

Ing. Peter Rzyman, electric engineer

JUDr. Barbora Jánošík, LL.M., apprentice advocate

Katarína Jakubcová, civil activist

Zuzana Šedinárová, civil activist

Lucie Šedinárová, civil activist

Gabriela Horváthová, civil activist

Martin Horváth, civil activist

Doc. JUDr. Ján Drgonec, constitutional judge(emeritus)

Ing. Alexandra Štefunková, self-employed

Roman Kováčik, self-employed

Ing. Mária Engelhardtová, public administrator

Mgr. Veronika Štefunková, civil activist

Shyamsundher Govindarajan, civil activist

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