EXHIBIT E

In The Matter Of:

THE CITY OF NEW YORK, ET AL v.
EXXON MOBIL CORPORATION, ET AL

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cancer, and we look at that in the control group, the group that wasn't exposed to anything and we look at that also in the group or groups of animals that were exposed to whatever we were concerned about.

Q. You said these were lifetime studies. What do you mean by that?

A. We followed the animals into old age, or at least that's the goal. Sometimes the animals don't get all the way to old age, but they usually do. And the reason that we do that is because for the most part we know people start to manifest or are diagnosed with cancer at increasing rates as they get older. It tends to be a disease more associated, you know, with people in their 50s, 60s or 70s, so we need to follow the animals for a long period of time so they get to the equivalent age of what we are when we are at an age when we are more likely to get cancer.

Q. What is the life span of these rats and mice you are talking about?

A. It's approximately two years. That allows us to get an answer to the question fairly quickly, you know, is this particular agent likely to cause cancer.

Q. Are there any particular findings that toxicologists and public health officials look for in these rat and mice studies which typically lead to the conclusion that a substance may cause cancer?

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A. Yes. We look for more than one study, because in science we always try to have more than one study, you know, done by independent labs in many cases. We look for, you know, different types of cancer. You know, it's much more powerful if we see multiple types of cancer than if we see one.

We look to see if where the cancer was caused has an analogy in humans. Some animals have some parts we don't have. And we also look at how the cancer was caused. Often times there are follow-up studies that help us to understand what occurred and whether or not that has a parallel in people.

We often look to see if both the males and females had cancer. That can be a really important piece of evidence as well.

Q. Is it important that the cancer is manifested in different types of animals like some in mice and some in rats?

A. Yes. Multiple -- we call it multiple species. So, you know, rats and mice are two different species. Within the animals that we are directed to use and that we prefer to choose because they replicated what can happen in people, there are also different strains. Strains is kind of like in a dog, you can have a German Shepard, or you can have a Chihuahua or different kinds and they have different health profiles. So, even within a given species often times we will look at different strains of animals, and so that's analogous to the different breeds that you would have in your pets.

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Q. Of the types of rat and mice studies that you spoke about, have any been performed in connection with MTBE?

A. Yes. We have three studies that were performed in MTBE, and this is just a very brief outline of the studies.

So, you can see in the first column it lists the names of the people that did the study. The second column are the study subjects. And we have studies for both mice and rats. In the third column this is where the cancers were observed at levels that were statistically significant in their difference from the unexposed animals and the exposed animals. So, there is a natural background rate of cancers, but in these cases for these types of cancer that were listed there was a scientifically valid difference between the unexposed populations and the exposed populations, and that's a very important point.

The study sponsor is listed in the fourth column. The Ramazzini Foundation is in Italy, and the industry studies were done at Bushy Run labs. And the last column lists the publication dates. And there are two sets of dates for the two industry-sponsored studies, because the information was provided, you know, industry and to EPA at one date, and it wasn't published in scientific journals until another date.

With the last study on the bottom row, that was published in 1995, so there is just one date there.

Q. Dr. Burns, let me ask you, what do you mean by industry?

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A. These studies were sponsored by the petroleum industry.

Q. And so the right-hand column, 1991 was the date the study was completed and submitted to the industry and to the EPA, is that correct?

A. That's what I have in the cover memos that I have seen, yes.

Q. And what's the second date, the 1997?

A. That's the date that it was accessible to the public health scientists, to cancer scientists around the world, and to people who keep track of these things.

So, for the most part, you know, those of us who are out in the field working on different things, you know, that's when we would have seen it in a journal, a medical journal basically.

Q. The second date.

A. The second date.

Q. Now, have you reviewed the first study on mice?

A. Yes, I have.

Q. Can you describe briefly what was done in that study and how it was conducted?

A. Yes. The first two studies actually were inhalation studies. That's about, you know, being exposed to MTBE in air. So, they put the animals that are unexposed in chambers that don't have MTBE, and they put the animals that we do want to test and see, you know, is this chemical going to problem, in

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scientists throughout the United States. This is what the federal government tells us to do. And in their own studies this is the way that the process is carried out. They give them relatively high doses so that we can get that answer that we need.

Q. Well, does that mean that cancer will only manifest itself -- if it does at all -- in people at those same relative high doses?

A. No, it doesn't mean that at all.

Q. Why is that?

A. Because what we are looking for is the potential for the chemical to cause cancer. If it has the potential to cause cancer, we need to pay attention as public health professionals. We need to then look at how it caused that cancer, is that relevant to people, and, if it is, then we need to act on that as a carcinogen or a probable human carcinogen. And that's actually the basis for most of the drinking water standards that currently exist in the United States as well as a lot of other protective standards we have for chemicals.

So, we use this kind of data, the same types of doses, on a very regular basis.

Q. Now, what is the difference between a possible human carcinogen, a probable human carcinogen and a human carcinogen?

A. If we had just one of those studies, we would say, well, that's some evidence that's pretty strong, it was a well done

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study, but we don't have as much confidence. If we see two different species -- which is a criteria --

MR. SACRIPANTI: Your Honor, just who is we? According to who, and who is we?

A. Sure, that's fine. Toxicologists. So, toxicologists, public health community that practices toxicology related to chemicals. I am talking now about federal register guidelines. So this is the United States Environmental Protection Agency guidance on evaluating the risk of carcinogens. They prescribe very specific things that we need to look at.

I helped to write some of that guidance. I said we. I have written federal register notices on how you do cancer studies and so on.

So, one of the things that scientists do is to look at how much evidence we have. And here we have the evidence that satisfies the criteria established by the federal government, and that's a really important point.

Now, there is no human study there. We cannot do a human study now. MTBE hasn't been out there and around fortunately and exposing people for the last 60 or 70 years, so there is no way to do a human study. And in order to call something a human carcinogen, we have to have a human study that proves it causes cancer in people. So, we can't call this what they call a known human carcinogen, but we can say it's a probable human carcinogen because we have more than enough

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evidence to show it is very, very likely to cause cancer in human beings.

Q. Now, based upon your knowledge of these studies, and to a reasonable scientific certainty, is MTBE a probable human carcinogen?

A. Yes, it is.

Q. Now, Dr. Burns, what is the National Science and Technology Council?

A. The National Science and Technology Council is a group that advises the President's office on issues of science that are urgent and need to be addressed outside of just standard agency procedures.

Q. I am now going to be referring to PL-3339, which is in evidence, and I am going to hand a copy to Mr. Sacripanti, and I apologize it's not in the book, but I understand a couple of copies are coming.

MR. SACRIPANTI: I have just been handed the document, your Honor, so I may need a minute or two between cross.

THE COURT: OK. We'll see.

Q. So, again, the National Science and Technology Council is what?

A. It's a group that advises the President on scientific issues that are of urgent concern.

MR. SACRIPANTI: Sorry. Forgive me. But how is this -- I don't see it marked in evidence. I don't see a Bates

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number. Before we get into the document I just --

THE COURT: It shouldn't even be on the screen.

MR. CHAPMAN: Let me take it down. There is a PL number, your Honor, PL-3339, and I am told that it's on its way. I can come back to that later.

THE COURT: You are told what's on its way?

MR. CHAPMAN: The copies of the document with the Bates numbers, etc. I have given a copy to Mr. Sacripanti but he is really questioning whether it's that exhibit number.

MR. SACRIPANTI: No. In fairness what I'm saying is I have just been handed a document that looks to be about 70 pages; I haven't seen it before, it bears no Bates number.

THE COURT: But when he produces it with the Bates number it may become clear that you had it before.

MR. SACRIPANTI: It very well may be. There are a million documents in this case.

THE COURT: I understand.

MR. SACRIPANTI: OK.

MR. CHAPMAN: Should I move on, your Honor, and wait until it comes?

THE COURT: Yes.

Q. Are you familiar with the NSTC?

A. Yes, I am.

Q. And are you familiar with the document which is PL-3339?

A. I am familiar with the part of it that specifically

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addresses the health effects of MTBE, yes.
Q. And were there representatives from a number of government agencies involved in that study?
A. Yes.
Q. What agencies, do you recall?
A. The agencies that were involved in that were the United States Environmental Protection Agency --
MR. SACRIPANTI: Sorry, your Honor, forgive me, but was this relied on by the expert? I don't believe so, but I could be wrong.
THE COURT: I don't know.
THE WITNESS: I think I did cite this in my work, if that's what you're asking me.
THE COURT: If she cited it, it's certainly something that she considered --
MR. SACRIPANTI: Absolutely.
THE COURT: -- in forming her opinion. You think you cited it in your report?
THE WITNESS: I believe so, but somebody may have my report here and may be able to absolutely nail that down.
Q. Have you looked at that report?
A. I looked at this report many times, yes.
Q. And is anything in that report consistent with your own opinion?
A. Yes.

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Q. And what --
A. Absolutely.
Q. What conclusion in that report is consistent with your opinion?
MR. SACRIPANTI: Well, before the conclusion is given, we are looking to see if it's cited in the appendix, and thus far we don't see it. It's a multi-page appendix, so if I had been given this document a little earlier I would have checked that. I don't want to interrupt the flow here, but perhaps what we could do is move on to a different area while at least we check whether this is something we have that was relied on and used in the report. It could very well be. And if you have it there, just tell us what page and we will look at it.
THE WITNESS: I would like to provide a clarification of something that I was just discussing previously. Is that allowed?
MR. CHAPMAN: Excuse me, your Honor.
THE COURT: Go ahead, Mr. Chapman.
MR. CHAPMAN: On page 76 of Dr. Burns' report, which is listing a number of documents that she relied upon, it refers to this exact document, and that's the Science and Technology Council, 1997, Inner Agency Assessment of Oxygenated Fuel.
THE COURT: OK.
MR. CHAPMAN: May I continue?

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THE COURT: Yes.
Q. So, are you familiar with the conclusion of this government agency?
A. Yes, I am.
Q. And what conclusions did it reach that you are speaking about?
A. They concluded that MTBE was a known animal carcinogen and it had the potential -- I want to use the exact words that they used, and I haven't memorized them -- but the potential to be a human carcinogen.
Q. Now, does the fact that the NSTC didn't list it as a probable human carcinogen mean that it's not a probable human carcinogen?
A. No, it doesn't mean that.
Q. Why is that?
MR. SACRIPANTI: Objection to what the agency knew, your Honor. I don't believe this witness can testify as to what the NSTC knew.
THE COURT: I don't think she was asked what they knew.
Yeah, she wasn't asked whether the fact that the NSTC didn't list it as a possible human carcinogen, does that mean it's not a probable human carcinogen. She said it doesn't mean that. And then she was asked why.
MR. CHAPMAN: Yes.

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THE COURT: That's different. That's not the knowledge of the agency, so I will allow that.
You can answer that.
THE WITNESS: I want to answer the right question, so the question is why -- sorry.
THE COURT: The NSTC didn't list it as a probable human carcinogen. You were asked does that mean it's not a probable human carcinogen. You said it doesn't mean that. He said why doesn't it mean it, the fact that the agency didn't list it. Why does it mean it's not?
MR. SACRIPANTI: In this witness's opinion.
THE COURT: Of course, she is here solely to give her opinion.
MR. SACRIPANTI: OK.
THE COURT: In your opinion.
Q. Do you need the question again? Do you need it again?
A. I think I have the question. I think I understand the question. The NSTC did not use exactly the same terminology that the USEPA uses, which is typically probable human carcinogen. But the language that they used, essentially you would read it as meaning the same thing as a health scientist. And the NSTC committee that reviewed this was made up of multiple people from the US Environmental Protection Agency, from the US Centers for Disease Control, which is our main public health agency, and from an agency called The National

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Institutes of Environmental Health Sciences, which is the agency within the NIH, the National Institutes of Health, that does research on chemical carcinogens. And the person who led this team, Dr. Ronald Melnick, is a cancer expert. So, the language that they used is consistent with saying that this is a probable human carcinogen.

Q. Is it your opinion, to a reasonable degree of scientific certainty, that MTBE is a probable mutagenic substance?

A. Yes.

Q. And upon what do you base that opinion?

A. We now have at least ten studies, new studies of the mutagenicity of MTBE which are coming out quickly, but the last count I had, in the last ten years we have had ten new studies showing that MTBE is mutagenic. So, subsequent to what the NSTC or EPA or these other agencies had available to them, we now have very strong evidence that MTBE is a mutagen. The reason that's critically important is that we know there is a connection between something causing mutations and something causing cancer. That's been very well established in cancer research and in the toxicological literature. So, the fact that we have good evidence -- and you saw the slide of the DNA -- of not only studies that show it does cause mutations, but we have studies that show how it causes those mutations, and that the types of mutations are consistent with causing cancer, it gives us a coherent picture of what MTBE can do.

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Q. Can you describe in general how those mutagenic studies are performed?

A. Most studies, mutagenic studies, are performed by taking cells from either an animal or a few cells from a person and putting them in a dish, and we call it culturing. They culture the cells, they grow a layer of cells, and they expose that layer of cells in a laboratory under sterile conditions to the chemicals that we are concerned about, and they wills also have another culture of cells, the controlled plate of cells or culture of cells that they don't expose, and they watch them over time, and they look at what happens to the cells. They typically look at them using electron microscopes. They look at them using different kinds of chemical analyses. They can extract the DNA from those cells, and they can look at, you know, how the DNA itself looks like. They can look at abnormal aspects of the chemistry of the DNA within those cells.

So, there is a lot of different ways to look at how mutations are caused by chemicals.

Q. Now, were the cells that were studied only animal cells?

A. There are also human cell cultures. So, those are quite important in the case of MTBE and most other suspected carcinogens. Human lymphocytes, which are your white blood cells, are studied and they are cultured. And when the MTBE is put on those cultures we can see if there is damage that's done.

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Q. What is the relationship between MTBE being mutagenic and also a probable human carcinogen?

A. It adds a great deal of strength to the evidence that we have to know how things occur in the cells at the smallest level that we can observe. And we know that the way that happens can lead to the uncontrolled growth of cells -- which is very important part of cancer -- and it can move from that into, you know, full blown cancer if the body does not correct that problem.

Q. So, does that mean that even the smallest amounts of MTBE potentially on a mutagenic level can lead to cancer?

A. Yes. It only takes one molecule interacting, one molecule of MTBE interacting with DNA, to start to initiate the sequence that will give us an abnormal reproducing cell line and ultimately lead to cancer.

Q. So, in your opinion, and from a public health standpoint, should MTBE -- should as much MTBE as possible be removed from any groundwater before people are exposed to it?

MR. SACRIPANTI: Objection, your Honor. This is an MIL on this sheet. She is not qualified to give this opinion. You have so ruled.

I am happy to show your Honor the MIL. I have a summary of it here.

THE COURT: Do you need to see it?

MR. CHAPMAN: I would like to know what he is

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referring to.

THE COURT: Oh, you do know what he is referring to. You know exactly what he is referring to. The question is do you want to see it.

MR. SACRIPANTI: This is my summary. I am happy to get the opinion.

THE COURT: We have it in a notebook.

(Discussion held off the record at sidebar)

(Continued on next page)

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(Question read)
A. Yes, absolutely.
THE COURT: That's your view from a public health standpoint?
THE WITNESS: That's from a public health standpoint as a scientist.
BY MR. CHAPMAN:
Q. Are you familiar with what "MCL" means?
A. Yes: Maximum contaminant level.
Q. In your work have you come into contact with MCL?
A. Yes. I helped to establish MCL's for the State of New Jersey, for the federal government, and the federal drinking water program, and I continue to provide comments from the public health perspective on federal MCL's as they are proposed.
Q. What is an MCL?
A. An MCL is a maximum amount of a contaminant, usually a chemical, that is allowable in water. It's the most contamination that is permitted by a state or by the federal government. In this case we are talking about drinking water. Usually MCL's are for drinking water.
Q. Based upon your experience, what factors are typically taken into account when the state sets an MCL?
A. Usually there are a number of factors taken into account. Health is taken into account. But in addition to that,

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economic issues are taken into account: Feasibility, can it be removed, how would that occur, and stakeholder interests or the interests of parties that have specific concerns about regulating a particular chemical.
Q. What do you mean by "stakeholder"?
A. Stakeholders are organizations or individuals or parties that have an interest in how the MCL is set. So one of the things that I did in my work for EPA was to request stakeholders, a variety of different interested parties, to provide input when we were setting federal regulations.
Q. In other words, a company that might manufacture a chemical might have one interest and an environmental group might have another interest, and both of those interests are considered, is that right?
A. That's right.
Q. Does the EPA have an MCL for MTBE?
A. No, they do not.
Q. You're not a medical doctor, are you?
A. That's right.
Q. Does a toxicologist or public health official have to be a medical doctor to make their opinions valid?
A. No.
Q. Why is that?
A. We have training specifically in the ways that chemicals or other agents can affect people in addition to our training in

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physiology, pathology, anatomy, and other basic medical sciences.
Q. In the past hasn't MTBE been used for medical procedures?
A. MTBE was used in patients, as I understand it from reading the medical journals, that could not tolerate certain types of surgery, as an alternative when they had gallstones.
Q. If it was used for medical procedures, doesn't that mean it was safe?
A. It absolutely does not mean it was safe. It means that there were cases in which judgments by physicians and others were made that that option for a patient that had gallstones was the option that they should have. So patients typically consult with their doctors, the doctors look at their medical condition, and under some circumstances this was the option that they elected to take. That entails in most cases people having informed consent about the hazards, medical monitoring after they have a procedure, and things that we very commonly associate when we go in and have medical procedures done.
Q. Are there any other examples that you are aware of where toxic substances are used in medical treatment?
A. One of the most common examples that I think we are all familiar with is chemotherapy, where patients are usually at risk of losing their life or at the very least being in considerable pain, and they are given drugs that are often extremely toxic. They are monitored carefully. Sometimes the

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toxicity of the drug does severe damage or even kills the patient. But they have informed consent, they have made a decision, and that's a necessary trade-off that they make in consultation with their doctor and the family, and so on.
Q. Are you aware of any tests were human volunteers have been used to assess certain effects of MTBE?
A. Yes. There were very, very short-term tests done where people were exposed for brief periods to MTBE. Those are not very similar to what we would think of as a lifetime or many years of exposure through drinking water. There were also a certain number of evaluations done on people exposed when MTBE was used in gasoline.
Q. I thought you said we don't conduct tests on people. What happened?
A. These were short-term tests that were done a number of years ago for the most part to determine what the short-term consequences would be of MTBE if they inhaled it. I think some of them were also given oral doses. But they were very short-term. They were only given one dose, for example. And there are people who have substantial ethical concerns about that.
Q. Are you familiar with ethanol?
A. Yes, I'm familiar with ethanol.
Q. What is ethanol?
A. Ethanol is the scientific term for alcohol that we have in

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wine, in beer, in a mixed drink that we might have. So it is something that people have been using for a very long time as a way -- as part of their food really, the things that people drink.
Q. Are there potential health concerns about alcohol use?
A. There absolutely are very valid health concerns about alcohol use when alcohol use is excessive. If people routinely drink a lot of alcohol, or even a college student drinks the equivalent of a couple of gallons of alcohol, it could be really damaging. So it's really something that we are most aware of in terms of alcoholism. It can cause liver cancer in people that have high exposures over a long period of time.
Q. In this case we have heard about MTBE in the parts per billion range. Can you relate that to, say, how much alcohol is in a can of beer?
A. Yes. The alcohol in beer may be in the range of 4 percent, for example. 4 percent is the equivalent of 40 million parts per billion. It's a massively larger quantity than what we are talking about in terms of MTBE in water. If you have a glass of wine, maybe it has 10 percent alcohol. That's a hundred million parts per billion. So it's a very different scale altogether.
Q. From your studies, how does the body handle ethanol or alcohol when it's ingested?
A. We've developed a lot of very useful ways to deal with

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digestion of most of our foods. Since alcohol has really been used since people began walking the earth, as far as we can tell, and it's in a lot of fruits that we get from trees and other things, we have developed a special enzyme called alcohol dehydrogenase. It basically means alcohol, and then there is an enzyme that takes it apart. It breaks it down very quickly in our bodies. People are very good at doing this.
So with normal, even high levels of consumption, we break down the alcohol fairly quickly in our bodies. That's why it doesn't last for too long. So the effects of drinking, usually you can't tell many hours down the road. The next day, if you have had a glass of wine, the alcohol is gone.
Q. In your work in the public health field when you worked on water contamination, have you come across the fact that ethanol has contaminated any water?
A. I haven't seen instances of ethanol contaminating any water, no.
Q. Do you know why that is?
MR. SACRIPANTI: Objection, your Honor. I don't think this witness --
THE COURT: Sustained. I don't think she is an expert on that.
Q. You haven't seen that any of the literature you have reviewed, correct?
A. No, I haven't, and I was responsible for dealing with a lot

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of the water contamination in a couple of different states.
Q. Can you be certain that MTBE causes cancer in people?
A. We can't be certain, as health scientists, 100 percent unless we measure this through a very carefully designed study in people observed over many, many years. So we won't say with absolute certainty. But based on the evidence that we have, I think it's clear, and my opinion on this is consistent with other health scientists that we know. It's mutagenic, it's carcinogenic in animals in a way that I would say, yes, we can be very certain that it's a probable human carcinogen.
MR. CHAPMAN: Your Honor, I'd like to refer back briefly to PL3339, an exhibit Mr. Sacripanti has had now for a while. It's a public document. The practice of the parties has not been to Bates stamp pages of public documents.
THE COURT: Has it been previously produced?
MR. CHAPMAN: Oh, yes. It's in evidence, your Honor.
THE COURT: It's in evidence.
MR. SACRIPANTI: There is a stipulation, your Honor, that public documents such as this shall be allowed into evidence. Counsel makes a representation that it has been produced. I have no basis to doubt that. Again, there have been a million pages produced here.
THE COURT: I understand.
MR. SACRIPANTI: A million documents, well over a million pages. So if it's been produced, that's his

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representation, I take his representation. I just hadn't seen it before he handed it to me.
MR. CHAPMAN: May we publish it now, your Honor, to the jury?
THE COURT: You're not publishing all 70 pages. What part do you want to refer to?
MR. CHAPMAN: I just want to refer to three short parts. Can we have them up on the screen, please.
Q. This is the NSTC document we referred to before, correct?
A. Correct.
Q. I'd like to refer to the pages in chapter 4 that says "prepared by" and talks about the potential health of oxygenated gasoline. Are you familiar with who those people are?
A. Yes. Ronald Melnick, Dr. Ronald Melnick, is a toxicologist at the National institute of Environmental Health Sciences. He's a senior cancer scientist at the National Toxicology Program, which is a part of that. Mary White is a scientist at the Centers for Disease Control. And Michael Davis is a toxicologist at the United States Environmental Protection Agency. These are all health scientists.
Q. Can we go to the next page, please, and blow that up. Is this highlighted language what you referred to before, where it says, "We believe the weight of evidence supports regarding MTBE as having a carcinogenic hazard potential for humans"?

A. Yes.
Q. Again, the NSTC is a government group that advises the president?
A. That's correct.
Q. To conclude, are you able to say to a reasonable scientific certainty that MTBE is a probable human carcinogen?
A. Yes.
Q. Are you able to say to a reasonable scientific certainty that MTBE is a probable human mutagen?
A. Yes.
Q. Are you able to say to a reasonable scientific certainty that MTBE is a probable human mutagenic carcinogen?
A. Yes.

MR. CHAPMAN: Your Honor, I have no more questions.

THE COURT: We'll take our afternoon recess now. Take ten minutes. We'll reconvene at 25 of 4:00.

Before we do, however, Juror No. 1 must have shared her earlier note with you folks because people told my clerk that you are asking what the schedule will be on Monday. You must have told the other jurors that you have an issue on Monday.

JUROR NO. 1: Yes.

THE COURT: You need to be in Maryland. I have consulted with counsel. What we will do, with your agreement, is we'll work a half day early. So we would start at 9:00 but

stop at 12:00.

JUROR NO. 1: Thank you.

THE COURT: You probably wouldn't waste too much time and your fellow juror could make the appointment she has to make in Maryland, an emergency with her house that nobody else can cover. So we would still get in pretty much a half today day, 9:00 to 12:00. Are you all willing to come at 9:00 on Monday if you will be out at 12:00? OK, then that's Monday's schedule, 9:00 to 12:00. That answers that question, and the jury is excused for 10 minutes.

(Continued on next page)

(Jury not present)

THE COURT: Juror No. 8 or something wrote us a note that said, "I don't think this would matter, but I am a first responder and am in the Mount Sinai 9/11 monitoring program." I think he told us that during jury selection.

MR. CHAPMAN: He did, your Honor.

THE COURT: He meant by that he responded quickly to the 9/11 disaster and because of that he is being monitored at Mount Sinai regularly, I guess tested regularly, regularly seen, regularly watched. He wrote that early in this examination when people were talking about possible human carcinogen and all that, mutagen -- is that the word? I think he was trying to say that's what I'm being watched for. Does that trouble you?

MR. CHAPMAN: Dr. Burns testified that she has worked with her organization on that project with Mount Sinai and the first responders. That may have been what prompted it. But I don't think that is an issue.

MR. BONGIORNO: No issue, Judge.

MR. SHER: No issue for us.

THE COURT: Then I'll just tell him I talked about it with the attorneys and there is no concern.

MR. STACK: We concur it is not an issue.

(Recess)

(Continued on next page)

(Jury present)

THE COURT: Just to go over the announcements one last time, don't forget this is it for this week, and then Monday is only half a day. So not tomorrow and Monday at 9:00. All right, everybody's got it.

Notebooks are coming.

CROSS-EXAMINATION

BY MR. SACRIPANTI:

Q. Doctor, good afternoon. I'm Peter Sacripanti. I represent Exxon. I'm going to ask you some questions. And when I go to the doctor, I get real nervous, so I understand, and I'm going to go slow. If you have any questions, if I haven't asked a question that you understand, let me know. I'll try my best to rephrase it for you, understanding you're nervous at this time.

THE COURT: Not to break your flow, but my clerk is very solicitous of the jurors, and I missed a beat. He said that we should order bagels for 10:30. So at the one break, since you're coming to early on Monday, I should supply the food. That was good of him.

They're all happy. So at 10:30, we will send some food.

MR. SACRIPANTI: Your Honor, you may always interrupt me for bagels.

THE COURT: It is my favorite subject, too, Mr. Sacripanti, actually.