

Administrative	Incident Number <b>11-5060</b>	Reference Case Number		Agency Name <input type="checkbox"/> Mansfield Police Department <input checked="" type="checkbox"/> Richland County Sheriff's Office																																											
	Additional Case Number	Map Reference <b>11</b>	Sector / Zone <b>2E</b>	Clearances - (Check One Box Only) <input type="checkbox"/> Death of Suspect <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Victim Refused to Coop. <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Arrest - Adult																																											
	Photos Taken <input type="checkbox"/> Y <input type="checkbox"/> N	By	<b>ORIGINAL</b>		<input type="checkbox"/> Arrest - Juvenile <input type="checkbox"/> Warrant Issued <input type="checkbox"/> Invas. Pending <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Unfounded <input type="checkbox"/> Unknown																																										
	Film Pack Num	Frames			Clearance Date <b>11/16/2011</b>	Cleared By <b>736</b>																																									
Day Of Week <b>Wednesday</b>	Report Date / Time <b>11/16/2011 2251</b>		Incident Occurred From Date / Time <b>11/15/2011</b>		Incident Occurred To Date / Time <b>11/16/2011</b>																																										
Incident Location (Street, Apt/Lot#, City, State, Zip) <b>(b)(6)</b>				DBA																																											
<table border="1"> <thead> <tr> <th>Offense</th> <th>Offense Code</th> <th>A/C</th> <th>F/M &amp; Degree</th> <th>Hotel/Bus</th> <th>Larceny</th> <th>Type Criminal Activity (Enter up to 3)</th> </tr> </thead> <tbody> <tr> <td>1. DECEASED PERSON</td> <td>1.</td> <td></td> <td></td> <td></td> <td></td> <td>1. 2. 3. B - Buying/Receiving C - Cultivating/Mfg/Pub. D - Distributing/Selling E - Exploiting Children O - Oper/Reporting/Asslt. P - Possessing/Concealing T - Transp/Transmitting U - Using/Consuming G - Other Gang Activity J - Juvenile Gang Activity N - No Gang Activity</td> </tr> <tr> <td>2.</td> <td>2.</td> <td></td> <td></td> <td></td> <td></td> <td>1. 2. 3.</td> </tr> <tr> <td>3.</td> <td>3.</td> <td></td> <td></td> <td></td> <td></td> <td>1. 2. 3.</td> </tr> <tr> <td>4.</td> <td>4.</td> <td></td> <td></td> <td></td> <td></td> <td>1. 2. 3.</td> </tr> <tr> <td>5.</td> <td>5.</td> <td></td> <td></td> <td></td> <td></td> <td>1. 2. 3.</td> </tr> </tbody> </table>						Offense	Offense Code	A/C	F/M & Degree	Hotel/Bus	Larceny	Type Criminal Activity (Enter up to 3)	1. DECEASED PERSON	1.					1. 2. 3. B - Buying/Receiving C - Cultivating/Mfg/Pub. D - Distributing/Selling E - Exploiting Children O - Oper/Reporting/Asslt. P - Possessing/Concealing T - Transp/Transmitting U - Using/Consuming G - Other Gang Activity J - Juvenile Gang Activity N - No Gang Activity	2.	2.					1. 2. 3.	3.	3.					1. 2. 3.	4.	4.					1. 2. 3.	5.	5.					1. 2. 3.
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3.	3.					1. 2. 3.																																									
4.	4.					1. 2. 3.																																									
5.	5.					1. 2. 3.																																									
Location of Offense - (Check Up to 2 Boxes Only)																																															
RESIDENTIAL STRUCTURE <input checked="" type="checkbox"/> Single Family Home <input type="checkbox"/> Multiple Dwelling <input type="checkbox"/> Residential Facility <input type="checkbox"/> Other Residential <input type="checkbox"/> Garage/Shed		COMMERCIAL LOCATIONS <input type="checkbox"/> Auto Shop <input type="checkbox"/> Financial Institution <input type="checkbox"/> Barber/Beauty Shop <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Dry Cleaners/Laundry <input type="checkbox"/> Professional Office <input type="checkbox"/> Doctor's Office <input type="checkbox"/> Other Business Office <input type="checkbox"/> Amusement Center <input type="checkbox"/> Rental Storage Facility <input type="checkbox"/> Other Commercial Service Loc.		RETAIL <input type="checkbox"/> Bar <input type="checkbox"/> Buy/Sell/Wire Shop <input type="checkbox"/> Restaurant <input type="checkbox"/> Gas Station <input type="checkbox"/> Auto Sales Lot <input type="checkbox"/> Jewelry Store <input type="checkbox"/> Clothing Store <input type="checkbox"/> Drug Store <input type="checkbox"/> Liquor Store <input type="checkbox"/> Shopping Mall <input type="checkbox"/> Grocery/Supermarket <input type="checkbox"/> Variety/Convince <input type="checkbox"/> Department Store <input type="checkbox"/> Other Retail Store		Factory/Mill/Plant <input type="checkbox"/> Other Building																																									
PUBLIC ACCESS BLDGS. <input type="checkbox"/> Transit Facility <input type="checkbox"/> Government Office <input type="checkbox"/> School <input type="checkbox"/> College <input type="checkbox"/> Church <input type="checkbox"/> Hospital				OUTSIDE <input type="checkbox"/> Yard <input type="checkbox"/> Construction Site <input type="checkbox"/> Lake/Waterway <input type="checkbox"/> Field/Woods <input type="checkbox"/> Street <input type="checkbox"/> Parking Lot <input type="checkbox"/> Park/Playground <input type="checkbox"/> Cemetery <input type="checkbox"/> Public Transit Vehicle <input type="checkbox"/> Other Outside Location																																											
Suspected of Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Computer Equipment <input type="checkbox"/> Not Applicable																																															
Type Weapon / Force Used 1. 2. 3.																																															
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force		Method of Entry - Motor Vehicle Theft <input type="checkbox"/> Motor Running / Keys In Car <input type="checkbox"/> Unlocked <input type="checkbox"/> Duplicate Key Used <input type="checkbox"/> Window Broken <input type="checkbox"/> Towed <input type="checkbox"/> Locked		Method of Entry - Burglary / B&E Entry (Check One Box From Each Column) <input type="checkbox"/> Basement <input type="checkbox"/> 1st Floor <input type="checkbox"/> 2nd Floor <input type="checkbox"/> Other <input type="checkbox"/> Unknown																																											
				<input type="checkbox"/> Door <input type="checkbox"/> Window <input type="checkbox"/> Garage <input type="checkbox"/> Skylight <input type="checkbox"/> Other																																											
				<input type="checkbox"/> Front <input type="checkbox"/> Side <input type="checkbox"/> Rear <input type="checkbox"/> Roof <input type="checkbox"/> Other																																											
				<input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West																																											
Method of Operation - (Enter Up To 5 Codes)																																															
No. <b>1</b>	Total Victims <b>1</b>	Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business	<input type="checkbox"/> Financial Institution <input type="checkbox"/> Government	<input type="checkbox"/> Police Officer (In The Line of Duty) <input type="checkbox"/> Religious Organization	<input type="checkbox"/> Society <input type="checkbox"/> Unknown <input type="checkbox"/> Other																																										
Name (Last, First, Middle) <b>(b)(6)</b>																																															
Address (Street, Apt/Lot#, City, State, Zip) <b>(b)(6)</b>																																															
Employer Name and Address (Street, Apt/Lot#, City, State, Zip) <b>(b)(6)</b>																																															
Age <b>36</b>	DOB <b>(b)(6)</b>	Sex <b>F</b>	Race <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> O <input type="checkbox"/> H	Height <b>5-4</b>	Weight <b>96</b>																																										
Occupation		SSN <b>(b)(6)</b>	Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Tourist	Hair <b>BRO</b>																																											
Eyes <b>BRO</b>		Military <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Unknown																																													
Victim Injured <input type="checkbox"/> Y <input type="checkbox"/> N	Victim Treated <input type="checkbox"/> Y <input type="checkbox"/> N	If Injured																																													
Agg. Assault / Homicide Ctr.		L.E.O. Killed/Assaulted Information Type of Act   Assign Type   ORI-Other		Victim/Suspect Relationship 1. 2. 3. 4. 5. 6.																																											
				1																																											
Reporting Officer <b>J. WINBIGLER</b>		Assisting Officer(s) <b>740 712</b>		Badge No. <b>736</b>	Date <b>11/16/2011</b>																																										
Approving Officer				Badge No.	Date																																										
Follow Up <input type="checkbox"/> Y <input type="checkbox"/> N	Community Services Bureau <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> CP	<input type="checkbox"/> Major Crimes/Det. B <input type="checkbox"/> Juvenile		<input type="checkbox"/> SIU <input type="checkbox"/> Traffic	<input type="checkbox"/> Crime Lab <input type="checkbox"/> Evidence Sheet																																										
Additional Assignments																																															
Incident Number <b>11-5060</b>																																															

11-5060 DECEASED PERSON 1012 EASTVIEW DR

INCIDENT SUPPLEMENT

Incident Number: 11-5080 Reference Case Number

Reporter	No.	Name (Last, First, Middle)	Age	DOB	SSN
	1	(b)(6)	68	(b)(6)	[REDACTED]
Witness	Address (Street, Apt/Lot#, City, State, Zip)				
	(b)(6)				
Witness	Employer Name and Address (Street, Apt/Lot#, City, State, Zip)				
	Phone/Cell Phone				
Witness	No.	Name (Last, First, Middle)	Age	DOB	SSN
	Address (Street, Apt/Lot#, City, State, Zip)				
Witness	Employer Name and Address (Street, Apt/Lot#, City, State, Zip)				
	Phone/Cell Phone				
Witness	No.	Name (Last, First, Middle)	Age	DOB	SSN
	Address (Street, Apt/Lot#, City, State, Zip)				
Witness	Employer Name and Address (Street, Apt/Lot#, City, State, Zip)				
	Phone/Cell Phone				

Check Categories									
<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Impounded <input type="checkbox"/> Recovered <input type="checkbox"/> Suspect's Vehicle <input type="checkbox"/> Victim's Vehicle <input type="checkbox"/> Unauthorized Use									
No.	<input type="checkbox"/> Damage to Vehicle <input type="checkbox"/> Theft From Vehicle		License	State	VIN	Value			
Year	Make	Model	Style	Color	Vehicle Locked <input type="checkbox"/> Y <input type="checkbox"/> N	Keys In Vehicle <input type="checkbox"/> Y <input type="checkbox"/> N	Hold Vehicle <input type="checkbox"/> Y <input type="checkbox"/> N	Release Contents <input type="checkbox"/> Y <input type="checkbox"/> N	
Vehicle Assoc. w/Suspect No.		Vehicle Assoc. w/Victim No.		Vehicle Towed <input type="checkbox"/> Y <input type="checkbox"/> N	Towed By	<input type="checkbox"/> Impounded <input type="checkbox"/> Owner's Request <input type="checkbox"/> Officer's Request		<input type="checkbox"/> Abandoned <input type="checkbox"/> Hold for Court <input type="checkbox"/> Lab Process	
Stolen Motor Vehicle Only		No. Stolen	<input type="checkbox"/> NCIC Entered	Insured <input type="checkbox"/> Y <input type="checkbox"/> N	Insured By	Insurance Agent			
Motor Vehicle Recovery Only		No. Recovered	<input type="checkbox"/> NCIC Removed	Recovery Code		<input type="checkbox"/> Stolen/Recovered Local <input type="checkbox"/> Stolen Other/Recovered Local		Value	
Owner Notified <input type="checkbox"/> Y <input type="checkbox"/> N		Recovered By		Recovery Date / Time		Recovery Location			

Property Type									
<input type="checkbox"/> Found <input type="checkbox"/> None <input type="checkbox"/> Counterfeit/Forged <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> NCIC Entered <input type="checkbox"/> Lost/Missing <input type="checkbox"/> Burned <input type="checkbox"/> Destroyed/Damaged/Vandalized <input type="checkbox"/> Seized <input type="checkbox"/> Unknown <input type="checkbox"/> Y <input type="checkbox"/> N									
Vict. No.	Veh. No.	Quantity	Description				Value		
Make/Brand		Model		Serial Number		Color		Weight or Quantity of Drugs	
Recovery Date / Time		Recovery Location (Street, Apt/Lot#, City, State, Zip)				Insured By			
Property Type									
<input type="checkbox"/> Found <input type="checkbox"/> None <input type="checkbox"/> Counterfeit/Forged <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> NCIC Entered <input type="checkbox"/> Lost/Missing <input type="checkbox"/> Burned <input type="checkbox"/> Destroyed/Damaged/Vandalized <input type="checkbox"/> Seized <input type="checkbox"/> Unknown <input type="checkbox"/> Y <input type="checkbox"/> N									
Vict. No.	Veh. No.	Quantity	Description				Value		
Make/Brand		Model		Serial Number		Color		Weight or Quantity of Drugs	
Recovery Date / Time		Recovery Location (Street, Apt/Lot#, City, State, Zip)				Insured By			
Property Type									
<input type="checkbox"/> Found <input type="checkbox"/> None <input type="checkbox"/> Counterfeit/Forged <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> NCIC Entered <input type="checkbox"/> Lost/Missing <input type="checkbox"/> Burned <input type="checkbox"/> Destroyed/Damaged/Vandalized <input type="checkbox"/> Seized <input type="checkbox"/> Unknown <input type="checkbox"/> Y <input type="checkbox"/> N									
Vict. No.	Veh. No.	Quantity	Description				Value		
Make/Brand		Model		Serial Number		Color		Weight or Quantity of Drugs	
Recovery Date / Time		Recovery Location (Street, Apt/Lot#, City, State, Zip)				Insured By			
Property Type									
<input type="checkbox"/> Found <input type="checkbox"/> None <input type="checkbox"/> Counterfeit/Forged <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> NCIC Entered <input type="checkbox"/> Lost/Missing <input type="checkbox"/> Burned <input type="checkbox"/> Destroyed/Damaged/Vandalized <input type="checkbox"/> Seized <input type="checkbox"/> Unknown <input type="checkbox"/> Y <input type="checkbox"/> N									
Vict. No.	Veh. No.	Quantity	Description				Value		
Make/Brand		Model		Serial Number		Color		Weight or Quantity of Drugs	
Recovery Date / Time		Recovery Location (Street, Apt/Lot#, City, State, Zip)				Insured By			

Victim / Witness  Property  Statements  Other  
 Supplement  Suspect / Arrestee  Narrative  Vehicle  Supplement

11-5060 DECEASED PERSON 1012 EASTVIEW DR

Report Number 11-5060 Reference Case Number

NARRATIVE SUPPLEMENT

COMPLAINANT WAS CONTACTED BY THE VICTIMS HUSBAND WHO WAS WORKING OUT OF STATE. THE HUSBAND REQUESTED THAT THE COMPLAINANT, WHO IS THE VICTIMS FATHER, GO TO THE RESIDENCE AND CHECK ON THE VICTIM BECAUSE HE COULD NOT CONTACT HER BY PHONE. WHEN THE COMPL. ARRIVED AT THE HOME HE WENT INSIDE AND COULD NOT LOCATE THE VICTIM. THE COMPL. THEN BEGAN LOOKING IN THE VEHICLES AND THE SURROUNDING AREA. THE COMPL. NOTICED THAT THE CAMPER THAT WAS SITTING BESIDE THE HOME HAD THE COVER TO THE ENTRY DOOR UNZIPPED AND THAT THE COVER HAD BEEN SHUT IN THE DOOR. THE COMPL. OPENED THE DOOR AND NOTICED THE VICTIM LAYING FACE DOWN ON THE FLOOR JUST TO THE RIGHT OF THE ENTRY DOOR. THE VICTIMS GLASSES WERE ON THE COUNTER AND HER CELL PHONE AS WELL AS A BOTTLE OF GATORADE WERE LAYING AT HER FEET. THE COMPL. FELT THE VICTIMS LEG AND ADVISED THAT SHE WAS COLD AND RIGID.

UPON ARRIVAL IT WAS CLEAR THAT THE VICTIM HAD BEEN DECEASED FOR SOME TIME. THE CORONER WAS THEN CALLED TO THE SCENE. PICTURES WERE TAKEN OF THE VICTIM AND THE TRAILER. THERE WAS NO EVIDENCE OF FOUL PLAY AND NO EVIDENCE OF ILLEGAL DRUG USE. THE LAST TIME THAT THE VICTIM HAD ANY CONTACT WITH ANYBODY WAS ON 11-15-11 AT ABOUT 1400 HRS. WHEN SHE SPOKE TO THE COMPL.

OFFICERS REMAINED ON SCENE UNTIL THE CORONER INVESTIGATOR ARRIVED AND THE VICTIM WAS RELEASED TO THEM. THE INTERIOR OF THE HOME WAS CHECKED FOR ANY SUICIDE NOTES OR MEDICATION AND NONE WERE FOUND.

THE VICTIM HAS HAD A HISTORY OF MENTAL ILLNESS AND WAS TAKEN TO THE HOSPITAL BY SQUAD ON DECEMBER OF 2010 FOR AN OVERDOSE OF PRESCRIPTION MEDS. VICTIM ALSO HAD AN EXTENSIVE MEDICAL HISTORY

THE COMPL. ADVISED THAT THE VICTIMS HUSBAND HAS BEEN WORKING IN VIRGINIA SINCE 11-14-11

Case# 11-5060

On 11/18/11 I made contact with the victim's husband. I was advised that to his knowledge the victim had no major medical problems. The victim had been having headaches. The victim had complained of pressure starting at her forehead and traveling to the top of her head. The victim was able to make the pressure ease by standing up and moving around. The victim got some relief by going outside in the cold temperatures. The victim had attempted suicide once in the past after her mother died from a brain hemorrhage. The victim also had a prior drug addiction problem. The victim used pain killers for some time. The husband said to his knowledge the victim had kicked her addiction problem.

I took a voluntarily statement from the victim's husband and will forward a copy to the coroners office.

Report Date 11/18/11	Report Time	Location (b)(6)	
Unit # Reporting Officer 712 Sgt. Nicholson		Unit # Supervisor's Approval	Assigned To: Unit #
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located	<input type="checkbox"/> Inactive
<input type="checkbox"/> Adult	<input type="checkbox"/> Missing	<input checked="" type="checkbox"/> Active / Pending / Located	<input type="checkbox"/> Closed
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Found	<input type="checkbox"/> Unfounded	

Case# 11-5060

On 11/21/11 at approximately 1500 hours I received a call from Tom Storts in reference to Paula Simon. I was told that the preliminary results from the autopsy were that she had a large concentration of carbon monoxide. A copy of the autopsy will be forwarded to our office when it is finished.

Report Date 11/21/11	Report Time 1500	Location	
Unit #	Reporting Officer <i>[Signature]</i>	Unit #	Supervisor's Approval
Assigned To: Unit #		<input type="checkbox"/> Inactive	<input type="checkbox"/> Closed
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located	<input type="checkbox"/> Active / Pending / Located
<input type="checkbox"/> Adult	<input type="checkbox"/> Missing	<input type="checkbox"/> Unfounded	
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Found		

Supplemental  Rollup

Richland County Sheriff's Office, 577 Park Avenue East, Waynesboro, Ohio 44785 (614) 774-2000 Case# 11-5060

On 11/16/11 officers were dispatched to (b)(6) in reference to a deceased person. Once on location officers were met in the driveway of the location by (b)(6) father of the victim (b)(6) Mr. (b)(6) advised he received a call from his son-in-law who called from Virginia stating he had been trying to call his wife to no avail. Mr. (b)(6) said he requested he go to the residence and check on his wife and have her call him if Mr (b)(6) was able to make contact.

Mr. (b)(6) went to the location found the residence locked. He gained access to the residence. The residence was checked for the victim. Mr. (b)(6) said he was unable to locate his daughter so he let the K-9 out. Mr. (b)(6) said he decided to look around the exterior of the residence because his daughter was a heavy smoker and she left her cigarettes in the house. Mr. (b)(6) said as he walked the K-9 between the house and the trailer he noticed the door was ajar and the trailer cover was caught in the door. Mr. (b)(6) said he opened the door wide enough to squeeze in and noticed his daughter laying face down on the floor with her purple blanket around her and her cell phone at her feet. Mr. (b)(6) said he touched the body to see if she was alive. He said she was stiff. He said he didn't touch anything and left the trailer. In doing so an employee of his son in-law pulled up and Mr. (b)(6) told him to call 911. Mr. (b)(6) said he didn't smell any exhaust fumes only the strong odor of gasoline from the stored four wheeler.

Officers once on scene noticed the trailer cover. Mr. (b)(6) had to unhook the cover and Deputy Schivinski had to assist in getting the cover over the door to gain entry to the trailer. Once in the trailer I noticed a very strong odor of gasoline. There was a Polaris Razor four wheeler. I told Deputy Winbigler to check the ignition, which he said was in the off position with the key in it. I checked the gas tank and found the vehicle had fuel in the tank. The vehicle was connected to a charger/tender for the battery and the driver seat was off and sitting on the passenger seat. The victim was laying face down with a purple blanket around her lower body. Her head was against the bathroom door and her feet were toward the four wheeler. There was a cell phone (Blackberry) lying on the floor next to the victim which was identified by Mr. (b)(6) as the victim's, and a bottle of Gatorade. There was an ashtray on the counter with one cigarette butt in it and a pair of glasses. The victim had on a black sweater and black pants with a purple shirt and black boots. The Coroner's office was called and Tom Stortz came to the scene. The victim was left in the position found until his arrival. Once on location he turned her over. The victim was in full rigor, and had levity visible. Photographs of the victim and the scene were taken by Tom Stortz and myself. The victim was collected by the Coroner's Office for an autopsy.

ORIGINAL

Report Date 11/27/11	Report Time	Location (b)(6)	
Unit # Reporting Officer 712 Sgt. Nicholson		Unit # Supervisor's Approval	Assigned To: Unit #
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located	<input type="checkbox"/> Inactive
<input type="checkbox"/> Adult	<input type="checkbox"/> Missing	<input type="checkbox"/> Active / Pending / Located	<input type="checkbox"/> Closed
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Found	<input type="checkbox"/> Unfounded	

Case# 11-5060

ON LISTED DATE/TIME, I RESPONDED TO THE LISTED RESIDENCE REFERENCE TO A DECEASED PERSON. WHEN I ARRIVED I MADE CONTACT WITH DEPUTY WINBIGLER AND SGT NICHOLSON AT THE CAMPER THAT WAS SITTING ALONG THE SIDE OF THE RESIDENCE. I WAS ADVISED THAT THE DECEASED PERSON WAS FOUND INSIDE THIS CAMPER BY HER FATHER. AS I ENTERED THE CAMPER I NOTICED A STRONG ODOR OF SOME TYPE OF EXHAUST FUMES COMING FROM INSIDE THE CAMPER, ALTHOUGH THERE WERE NO MOTORS RUNNING INSIDE THE CAMPER OR OUTSIDE OF IT. THE DECEASED PERSON WAS LAYING FACE DOWN ON THE FLOOR OF THE CAMPER. THERE WAS A RED POLARIS 4-RUNNER LOCATED IN THE SAME AREA OF THE CAMPER WHERE THE DECEASED PERSON WAS FOUND. I ASKED SGT NICHOLSON IF THE KEY WAS IN THE IGNITION OF THE POLARIS 4-RUNNER AND HE ADVISED THAT IT WAS HE ALSO ADVISED THAT THE KEY WAS IN THE OFF POSITION. I ALSO ASKED SGT. NICHOLSON IF THE 4-RUNNER HAD GAS IN IT AND HE ADVISED THAT IT DID. ALSO LAYING BY THE DECEASED PERSON WAS HER CELL PHONE AND A EMPTY GATORADE BOTTLE. WHILE WAITING FOR THE CORONER TO ARRIVE I SPOKE WITH THE DECEASED PERSONS FATHER, HE ADVISED THAT HIS SON-N-LAW TALKED WITH THE VICTIM EARLY YESTERDAY BUT LATER THAT EVENING HE COULD NOT GET THE VICTIM TO ANSWER. AS FAR AS THE VICTIM TALKING TO ANYONE ELSE PRIOR TO HER DEATH, I WAS NOT ADVISED.

**ORIGINAL**

Report Date 11-27-11	Report Time 0515	Location 597 PAE
Unit # Reporting Officer Dep. Schwinski # 740	Unit # Supervisor's Approval	Assigned To: Unit #
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located
		<input type="checkbox"/> Inactive

Supplemental      Follow-Up

Richland County Sheriff's Office, 397 Park Avenue East, Macon, Ohio 43005 (419) 734-3431     Case# 11-5060

On 11/27/11 I was able to make contact with the victim's father at his residence. I spoke with (b) (b)(6) of (b)(6). I took a recorded statement from him as to his finding his daughter on 11/16/11. See that statement for further.

I also forwarded paperwork to Pattie Massie of the Prosecutor's office to answer questions they had as to this case. I also forwarded paperwork to Tom Stortz of the Coroner's office.

Report Date 11/27/11	Report Time 0314	Location	
Unit # Reporting Officer 712 Sgt. Nicholson		Unit # Supervisor's Approval	Assigned To: Unit #
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located	<input type="checkbox"/> Inactive
<input type="checkbox"/> Adult	<input type="checkbox"/> Missing	<input checked="" type="checkbox"/> Active / Pending / Located	<input type="checkbox"/> Closed
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Found	<input type="checkbox"/> Unfounded	

**ORIGINAL**

Richland County Sheriff's Office, 337 Bay Avenue West, Macon, Georgia 31203-1447 Case# 11-5060

On 02/13/12 I received a memo to call Ed Edge of an insurance company from Georgia. On 02/14/12 at 1716 hours I called Ed Edge at 770 942-0030. I spoke with Mr. Edge in reference to (b)(6) death. Mr. Edge indicated he was an investigator with her insurance company and asked me a few questions about the investigation and the scene in which (b) was discovered. At the end of our conversation Mr. Edge requested copies of all paperwork from the investigation to be mailed to his office located at 8491 Hospital Drive #336 Douglasville, Georgia 30134. At the end of our conversation I called Lisa Finley and told her of Mr. Edges request, and gave her the address for her to mail the paperwork to him.

Report Date 02/14/12	Report Time 1716	Location	
Unit # Reporting Officer 712 Sgt. Nicholson		Unit # Supervisor's Approval	Assigned To: Unit #
<input type="checkbox"/> Cleared by Arrest	<input type="checkbox"/> NCIC	<input type="checkbox"/> Person Returned / Located	<input checked="" type="checkbox"/> Inactive
<input type="checkbox"/> Adult	<input type="checkbox"/> Missing	<input type="checkbox"/> Active / Pending / Located	<input type="checkbox"/> Closed
<input type="checkbox"/> Juvenile	<input type="checkbox"/> Found	<input type="checkbox"/> Unfounded	

# ORIGINAL

## VOLUNTARY STATEMENT

GENERAL OFFENSE # 11-5060 VICTIM (b)(6)

I, (b)(6), HUSBAND OF VICTIM (b)(6)

(b)(6). DO HEREBY MAKE THE FOLLOWING VOLUNTARY STATEMENT OF MY OWN FREE WILL TO AND IN THE PRESENCE OF SERGEANT JOHN NICHOLSON OF THE RICHLAND COUNTY SHERIFF'S OFFICE, MANSFIELD, OHIO AT APPROXIMATELY 2343 HOURS ON 11/18/11. THIS STATEMENT IS BEING TAKEN BY SERGEANT JOHN NICHOLSON AND TYPED BY BONNIE L. MILLER OF THE RICHLAND COUNTY SHERIFF'S OFFICE. NO THREATS, FORCE OR PROMISES HAVE BEEN MADE TO ME TO MAKE THIS STATEMENT.

TELEPHONE; (b)(6) DATE OF BIRTH; (b)(6) 45 YEARS OF AGE.

SOCIAL SECURITY NUMBER [REDACTED]

\*\*\*\*\* [REDACTED] \*\*\*\*\*

- Q. (b)(6) ON THE EARLY EVENING HOURS OF UH, NOVEMBER 15<sup>TH</sup>, YOUR WIFE WAS FOUND IN YOUR TRAILER WITH YOUR FOUR WHEELER IN IT, IS THAT CORRECT?
- A. UH HUM THAT'S CORRECT.
- Q. AND WHERE WERE YOU?
- A. I WAS IN, IN UH, SHORTPUMP, VIRGINIA, RIGHT OUTSIDE, RICHMOND, VIRGINIA.
- Q. AND HOW LONG HAD YOU BEEN IN VIRGINIA, OR OUT OF THE STATE OF OHIO?
- A. I LEFT, I LEFT HERE ABOUT 4:30, 5:00, SUNDAY AFTERNOON AND DROVE STRAIGHT THROUGH, STRAIGHT DOWN, ABOUT NINE HOURS.
- Q. AND DID YOU HAVE ANOTHER FAMILY MEMBER DOWN THERE WITH YOU?
- A. YES, MY SON, (b)(6) WAS WITH ME.
- Q. AND HAD YOU CONVERSED BACK AND FORTH WITH (b)(6) WHILE YOU WERE GONE?
- A. YES.
- Q. AND WAS THAT THROUGH PHONE CALLS OR THROUGH TEXT MESSAGES?
- A. BOTH.
- Q. OK.
- A. BOTH.
- Q. AND UH, ON THE 14<sup>TH</sup> ABOUT HOW MANY TEXT MESSAGES DID YOU SEND HER, UH, HAD THERE BEEN SEVERAL OR.
- A. OH YES, SEVERAL UH, ON THE 14<sup>TH</sup>, THE 14<sup>TH</sup> WAS MONDAY, CORRECT?
- Q. CORRECT.
- A. OH GEEZ, YEAH MONDAY UH, QUITE A FEW.
- Q. OK.

## ORIGINAL

- A. UH, ONE, TWO, THREE, FOUR, FIVE, SIX, SEVEN, TEN, TWELVE, UH, LOOKS LIKE APPROXIMATELY, IT LOOKS LIKE AT LEAST 15 TO 16 TEXTS, BACK AND FORTH.
- Q. AND THEN THERE WERE PHONE CALLS IN BETWEEN THAT?
- A. YEAH, AND A COUPLE OF PHONE CALLS.
- Q. ALRIGHT, UH, ON THE 15<sup>TH</sup> WHICH WOULD HAVE BEEN TUESDAY, DID YOU ALSO HAVE TEXT MESSAGING CONVERSATION WITH (b)(6)?
- A. YES.
- Q. WAS THERE ANYTHING DIFFERENT BETWEEN MONDAY AND TUESDAY IN THE WAY SHE ANSWERED THE TEXTS OR RESPONDED TO YOUR TEXTS WHEN YOU SENT THEM?
- A. UH, NOT UNTIL TUESDAY AFTERNOON WHEN UH, I NOTICED THAT UH, WHEN I TEXTED HER SOMETHING, UH, SHE WAS NOT EVEN OPENING THE TEXT. AND BUT AT THAT TIME, I ASSUMED THAT COULD BE NORMAL BECAUSE I EXPECTED HER TO BE AT WORK FROM 3 TO..OR 2 TO 11.
- Q. AND AROUND WHAT TIME WERE THESE TEXTS SENT TO HER THAT SHE WASN'T OPENING?
- A. UH, STARTING ON UH, STARTING AT ABOUT 4:00, UH 4:25 WAS THE LAST TIME THAT I SENT HER A TEXT UH, THAT..THAT I NOTICED SHE RECEIVED. AND THEN I ACTUALLY DIDN'T TEXT HER AGAIN UNTIL ABOUT 10:00 AT NIGHT, JUST WHEN WE GOT BACK TO OUR ROOM AFTER WORKING.
- Q. DID SHE ANSWER ANY OF THOSE TEXTS?
- A. NO.
- Q. AFTER 4?
- A. NO.
- Q. DID YOU TRY TO CALL HER?
- A. YES.
- Q. AND DID SHE ANSWER?
- A. NO.
- Q. THE PHONE CALLS?
- A. NO, DID NOT ANSWER, UH, A COUPLE TIMES I CALLED AND JUST DID NOT LEAVE A MESSAGE, BUT A COUPLE TIMES I DID LEAVE MESSAGES.
- Q. DID YOU AT ONE POINT GET WORRIED AND CONTACT SOMEONE TO CHECK ON HER?
- A. YES, UH, I CONTACTED MY BUSINESS PARTNER, (b)(6), (b)(6), AND, AND UH, ASKED HIM TO, YOU KNOW HE LIVES RIGHT DOWN THE ROAD FROM ME, ASKED HIM IF HE COULD GO CHECK, UH, TO SEE, FIRST OF ALL IF THE EXCURSION WAS IN THE DRIVEWAY, WHICH IS WHAT (b)(6) WOULD HAVE BEEN DRIVING, AND HE MENTIONED TO ME OR HE TOLD ME THAT HE ACTUALLY WHEN I CALLED HIM, HE WAS DRIVING BY, HE WAS ON HIS WAY HOME, AND HE NOTICED THAT THE EXCURSION WAS IN THE DRIVEWAY AND THAT THE LIGHTS WERE ON. AND THEN I ASKED HIM TO COME BACK AND, AND KNOCK ON THE DOOR, AND SEE IF SHE WAS OK.
- Q. AND DID HE DO THAT?
- A. YES.
- Q. AND WHAT, DID YOU STILL HAVE HIM ON THE PHONE WHEN HE DID THAT?
- A. NO.
- Q. DID HE CALL YOU BACK?
- A. NO, HE CALLED ME BACK. CAUSE HE ACTUALLY, BY THE TIME WE WERE DONE TALKING HE WAS AT HIS HOUSE. UH, WHICH IS YOU KNOW ON (b)(6), DOWN HERE. UH AND HE, HIM AND HIS WIFE COME UP AND UH, HE KNOCKED ON

## ORIGINAL

THE DOOR, HE SAID POUNDED ON THE DOOR FOR SEVERAL MINUTES.

Q. UH HUM.

A. NOTICED THAT THE LIGHTS WERE STILL ON IN THE HOUSE, THE TV WAS ON, AND OUR DOG WAS, WAS BARKING.

Q. AND UH, REALIZING THAT HE WASN'T GOING TO GET ANY..ANY ANSWER HERE AT THE HOUSE, DID HE CALL YOU BACK AND LET YOU KNOW THAT HE DIDN'T GET ANY ANSWER?

A. YES, HE CALLED ME BACK WHILE HE WAS STILL HERE, I ASKED HIM IF HE WANTED THE CODE TO ENTER OUR HOUSE, AND HE SAID THAT HE WOULD RATHER, YOU KNOW, A FAMILY MEMBER BE THE ONE TO DO THAT. SO AT THAT POINT, UH, WE HUNG UP AND I CALLED (b)(6) FATHER, (b)(6) TO, TO COME AND, AND CHECK, AND GIVE HIM THE CODE TO GET INTO THE DOOR.

Q. UH HUM.

A. AND THEN ACTUALLY (b)(6), I CALLED (b)(6) BACK TOLD HIM THAT (b)(6) WAS GONNA COME OVER AND (b)(6) SAID THAT HE WOULD COME BACK AND MEET HIM HERE, YOU KNOW IN 15 OR 20 MINUTES.

Q. SO UH, DID YOU EVER GET A CALL FROM (b)(6) AFTER HE CAME TO THE HOUSE?

A. YES.

Q. AND WHAT DID THAT CALL CONSIST OF?

A. UH, THE BEST OF MY RECOLLECTION IS WHEN HE CALLED ME, UH, THE BEST THAT I CAN REMEMBER, HE SAID, (b)(6) HE SAID WE, WE'VE FOUND (b)(6) AND IT DOESN'T LOOK GOOD. AND A LOT OF THE CONVERSATION AFTER THAT IS BLURRY.

Q. RIGHT, UH,

A. I JUST KNOW I REMEMBER, YOU KNOW THAT HE WAS TRYING TO EXPLAIN TO ME THAT SHE WAS IN THE TRAILER AND HE COULDN'T GET IN THE TRAILER BECAUSE OF THE COVER AND HE'S GOT, HE'S GOT YOU KNOW BACK PROBLEMS AND HE HAS A CANE, AND YOU KNOW, BUT HE COULD REACH IN TO FEEL HER AND HE SAID SHE WAS VERY, SHE WAS COLD.

Q. OK.

A. AND I JUST KEPT BEGGING HIM TO CHECK, CHECK HER AGAIN FOR A PULSE, YOU KNOW.

Q. UH HUM.

A. AND WHILE HE WAS TALKING TO ME, IT.. SIMULTANEOUSLY MY PARTNER, (b)(6) WAS CALLING 911.

Q. OK, HAD (b)(6) HAD ANY MEDICAL PROBLEMS THAT YOU KNOW OF THAT HAD BEEN BOTHERING HER FOR ANY TIME?

A. THE, THE ONLY THING THAT I CAN THINK OF IS UH, FRIDAY, FRIDAY NIGHT AFTER I GOT HOME FROM WORK, WE, WE HAD DINNER AND WE SAT DOWN TO, TO WATCH TV TOGETHER, UH. WATCH SOME OF OUR RECORDED SHOWS THAT WE RECORD THROUGH THE WEEK, AND UH, SHE SAT DOWN AND SHE HAD SEVERE PRESSURE IN HER FOREHEAD. IT JUST, JUST ALL OF A SUDDEN CAME ON. UH, THE FIRST TIME IT HAPPENED, SHE STOOD UP AND YOU KNOW I COULD SEE TEARS COME DOWN HER, HER FACE AND SHE ACTUALLY WALKED OUTSIDE, NOT YOU KNOW KIND OF WAVIN ME OFF LIKE NOT SPEAKING AND JUST WALKED OUTSIDE FOR A MINUTE. THEN SHE COME BACK IN AND SHE'S LIKE UH, IT'S..I'M BETTER SHE WAS EXPLAINING TO ME IT WAS..IT WASN'T LIKE A HEADACHE, IT JUST WAS UH, HUGE PRESSURE ON HER FOREHEAD AND AT THE SAME TIME SHE HAD BLURRED VISION IN HER RIGHT EYE. UH, YOU KNOW, SHE DESCRIBED IT AS LITTLE SQUIGGLES OR LITTLE WORMS THAT SHE'D ALMOST SEE THROUGH.

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- Q. OK.
- A. YOU KNOW BUT THAT, THAT WAS BLURRING HER VISION. THEN AFTER IT PASSED, YOU KNOW, WHICH WAS JUST A MINUTE OR SO, SHE SAT BACK DOWN AGAIN AND IT CAME BACK EVEN WORSE, BUT, BUT IT WAS ON THE TOP OF HER HEAD.
- Q. UH HUM.
- A. AND FROM THAT POINT FORWARD, YOU KNOW WHENEVER SHE WOULD HAVE THESE, THEY WERE ALL ON THE TOP OF HER HEAD, JUST THE FIRST TIME SEEMED TO BE IN THE FRONT OF HER FOREHEAD. AND SO, YOU KNOW THIS WENT ON THROUGHOUT THE EVENING WHENEVER SHE WOULD TRY TO SIT DOWN OR LAY DOWN, SHE WOULD HAVE THIS PRESSURE, SEVERE PRESSURE IN THE TOP OF HER HEAD. AND SHE JUST DESCRIBED IT AS IT FEELS LIKE MY HEAD IS GONNA EXPLODE.
- Q. OK.
- A. AND SHE WOULD HAVE THE BLURRED VISION. THEN SOMETIMES WHEN SHE WAS STANDING AND SHE, YOU KNOW TO MAKE THE HEAD PRESSURE GO AWAY, OCCASIONALLY SHE WOULD SAY, YOU KNOW, THE, THE BLURRY VISION. YOU KNOW, MY RIGHT EYE, IT'S BLURRED, YOU KNOW.
- Q. UH HUM.
- A. AND THEN IT WOULD CLEAR UP AGAIN, SHE KEPT..SHE THOUGHT, SHE KEPT THINKING SHE HAD SOMETHING IN HER EYE, BUT IT WASN'T IT WAS..IT WAS JUST BLURRIN UP ON HER.
- Q. OK.
- A. AND THAT CONTINUED PRETTY MUCH THROUGHOUT THE NIGHT ON FRIDAY.
- Q. OK, FRIDAY.
- A. AND THEN EVENTUALLY I WENT, YOU KNOW WE WENT TO TRY TO LAY DOWN, YOU KNOW, GO TO BED AND A COUPLE OF TIMES, YOU KNOW, I..I FELT HER SIT UP IN BED, YOU KNOW IT GOT TO THE POINT, YOU KNOW WHERE IT WAS LESSENING, BUT SHE COULD SIT NOW, BUT WHEN SHE WOULD LAY DOWN, THE PRESSURE WOULD COME BACK, SO I WOULD FEEL HER SIT UP IN BED AND THEN SHE WOULD LAY BACK DOWN.
- Q. WOULD THE TEMPERATURE CHANGE, DO ANYTHING FOR THE PAIN?
- A. YEAH IT SEEMED TO BECAUSE A COUPLE OF TIMES SHE WOULD GO OUTSIDE AND YOU KNOW, IT WOULD..IT WOULD SEEM TO HELP. BUT WE FOUND OUT THAT, THAT EXERCISE, YOU KNOW SHE RAN IN PLACE OR SHE DID JUMPING JACKS, SHE DID SOMETHING LIKE THAT, WOULD INSTANTLY TAKE THAT PRESSURE AWAY. UH, AND THEN WHEN I WOKE UP SATURDAY MORNING, APPARENTLY SHE HAD GOTTEN UP IN THE MIDDLE OF THE NIGHT AND WAS STILL HAVING THE PRESSURE. SWEETHEART SHE DIDN'T WANT TO WAKE ME, SHE WENT DOWN IN THE BASEMENT AND WAS DOING JUMPING JACKS AND STUFF LIKE THAT DOWN IN THE BASEMENT SO SHE WOULDN'T SHAKE THE FLOOR OR WAKE ME UP.
- Q. DID YOU EVER TALK TO HER ABOUT GOING TO THE EMERGENCY ROOM OR..
- A. OH, YES.
- Q. CONTACTING A FAMILY DOCTOR OR ANYTHING LIKE THAT?
- A. I, I WANTED TO TAKE HER TO THE EMERGENCY ROOM AND SHE JUST WOULD NOT GO. WE CALLED HER SISTER. I CALLED HER SISTER WHO'S A REGISTERED NURSE.
- Q. UH HUM.
- A. AND SHE SAID, YOU KNOW, GO TO THE HOSPITAL, GO TO THE HOSPITAL. (b)(6) SAID NO, I CALLED MY SISTER-IN-LAW, UH, (b)(6), SHE SAID THE SAME THING. SHE'S A REGISTERED NURSE AS WELL, SHE SAID GO TO THE HOSPITAL, BUT (b)(6) REFUSED, SHE WOULD NOT GO.

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- Q. IS THERE ANY REASON WHY SHE WOULDN'T GO?
- A. BECAUSE SHE HATES HOSPITALS. UH, WE, WE HAD TO TAKE HER, WE HAD TO TAKE HER MOM THERE.
- Q. UH HUM.
- A. A LOT.
- Q. OH YEAH?
- A. AND THE WAIT YOU KNOW, AND JUST FRUSTRATING EXPERIENCES AT THE HOSPITAL FROM THE PAST.
- Q. HAD, HAD SHE BEEN SUFFERING FROM ANY DEPRESSION OR ANYTHING LIKE THAT?
- A. UH, YEAH, UH, EARLIER IN THE YEAR, SHE HAD YOU KNOW TRIED TO COMMIT SUICIDE ACTUALLY ON NEW YEARS EVE.
- Q. AND WHAT WAS, WHAT WAS THE CULMINATION OF THAT ATTEMPT. I MEAN WHY DID SHE TRY?
- A. HER MOTHER PASSED AWAY, HER MOTHER HAD AN, A BRAIN HEMORRHAGE AND PASSED AWAY HERE IN OUR HOUSE CAUSE SHE LIVED WITH US.
- Q. OK.
- A. AND WITNESSING, I THINK WITNESSING THAT AND JUST THE SUDDENNESS OF IT, UH, BECAUSE HER MOM HAD A LONG HISTORY OF HEALTH PROBLEMS.
- Q. UH HUM.
- A. SHE HAD CANCER, AND YOU KNOW, DEFEATED THAT, GOT OVER THAT.
- Q. UH HUM.
- A. SHE HAD OPEN HEART SURGERY UH, TWELVE BYPASSES AT THE SAME TIME.
- Q. UH HUM.
- A. STILL A RECORD AT MANSFIELD GENERAL. HER MOM WAS REALLY PROUD OF THAT.
- Q. OK.
- A. BUT UH, AND GOT OVER THAT AND YOU KNOW, BUT, BUT SHE WAS ON OXYGEN AND STUFF LIKE THAT UH, BUT SHE WAS STILL FAIRLY YOUNG, I MEAN SHE WAS JUST IN HER 60'S.
- Q. OK.
- A. AND SHE HAD, SHE HAD A STROKE HERE ONE NIGHT AND UH, AND YOU KNOW (b)(6) BLAMED HERSELF THAT SHE SHOULD'VE BEEN, YOU KNOW THAT SHE WAS JUST IN HER ROOM AND SHE THOUGHT THAT YOU KNOW, WE COULD HAVE ACTED QUICKER YOU KNOW, OR SOMETHING. AND HER MOM HAD LIKE EYE SURGERY LIKE THE DAY BEFORE.
- Q. OK.
- A. AND YOU KNOW IT BOTHERED HER, DID THAT EYE SURGERY CAUSE HER, YOU KNOW, CAUSE HER BRAIN HEMORRHAGE OR HER STROKE THAT KILLED HER?
- Q. OK.
- A. UH, AND (b)(6) COULD NEVER REALLY COME TO TERMS WITH HER MOM'S DEATH, AND SHE, SHE TURNED TO, TO PAIN KILLERS AND IT..IT GOT BAD. IT GOT BAD.
- Q. HOW LONG HAD SHE BEEN ABUSING THE PAIN KILLERS, SINCE HER MOM'S DEATH?
- A. UH, I WOULD SAY SHORTLY AFTER HER MOM'S DEATH.
- Q. AND THAT WOULD HAVE BEEN FEBRUARY OF 2010?
- A. 2010 CORRECT. AND THEN ON NEW YEARS EVE YOU KNOW SO ALMOST TEN MONTHS LATER, UH, SHE TRIED TO COMMIT SUICIDE.
- Q. DID SHE KEEP THE PAIN KILLERS HERE IN THE HOUSE?
- A. SHE HAD THEM STASHED ALL OVER.
- Q. OK, AND YOU SAID NOT ONLY DID HER MOM DIE FROM A BRAIN HEMORRHAGE, BUT HER GRANDFATHER ALSO DIED?

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- A. HER GRANDFATHER HAD AN ANEURISM AND DIED INSTANTLY.
- Q. OK.
- A. HER, HER MOM, SHE HAD A BRAIN HEMORRHAGE, SHE ACTUALLY LASTED, I DON'T KNOW, SIX, SEVEN HOURS. UH, BUT, BUT HER GRANDFATHER PASSED INSTANTLY.
- Q. UH HUM,
- A. FROM A BRAIN HEMORRHAGE.
- Q. NOW YOU, YOU SHOWED ME SOME TEXT MESSAGES, ON TUESDAY, UH, YOU SHOWED ME A TEXT MESSAGE THAT (b)(6) HAD SENT, TRIED TO SEND TO YOU, BUT..
- A. I..I THINK SHE PROBABLY WAS TRYIN TO..
- Q. SHE WOUND UP SENDIN IT BACK TO HERSELF.
- A. AND SENT TO HERSELF.
- Q. CAN YOU READ TO ME THAT TEXT MESSAGE?
- A. YES, UH, IT SAYS, I JUST WANT TO STOP DISAPPOINTING YOU, MY WONDERFUL HUSBAND AND FAMILY. I DON'T UNDERSTAND WHY I KEEP GETTING ALL THIS PRESSURE IN MY HEAD, AND MY VISION HAS BEEN MESSING UP. I HAVE TRIED TO DO THE RIGHT THINGS, LATELY, AND I WISH I COULD EXPLAIN HOW I HAVE BEEN FEELING, AND THEN THERE'S SOMETHING, YOU KNOW, MY OWN FAMILY WON'T EVEN, AND THEN IT JUST TRAILS OFF INTO..
- Q. GIBBERISH.
- A. GIBBERISH.
- Q. AND WHEN WAS THAT SENT TO HER?
- A. THAT WAS AT UH, TUESDAY AT 4:28 PM.
- Q. AND UH, YOU NEVER RECEIVED THAT TEXT?
- A. NO, BECAUSE SHE SENT IT TO HER OWN PHONE.
- Q. ALRIGHT HAD YOU NOTICED THAT WHEN (b)(6) HAD THIS PRESSURE IN HER HEAD, WOULD SHE BECOME CONFUSED OR...
- A. NO, NO.
- Q. NOT AT ALL SHE REMAINED CLEAR THINKING WHEN SHE HAD THIS..
- A. YES, YES.
- Q. SEVERE PRESSURE IN HER HEAD?
- A. UH HUM, BUT LIKE I SAID, WE GOT TO THE POINT TO WHERE WHEN SHE FELT IT COMING ON, SHE WOULD INSTANTLY STAND UP AND START MOVING SO IT WOULDN'T..SO IT WOULDN'T GET REALLY BAD, BECAUSE WHEN SHE WAS MOVING AROUND, IT WOULD, IT WOULD DISAPPEAR.
- Q. UH HUM. WAS SHE TAKING ANY MEDICATION FOR IT, ANYTHING OVER THE COUNTER?
- A. NO FRIDAY, FRIDAY NIGHT WAS THE FIRST TIME THAT HAD EVER HAPPENED.
- Q. I MEAN WAS SHE TAKING LIKE ASPIRIN OR TYLENOL OR ANYTHING LIKE THAT?
- A. NOW SHE DID, YEAH SHE ENDED UP, WELL SHE TOOK UH, I'M TRYIN TO REMEMBER IF SHE TOOK IBUPROFEN OR TYLENOL, SHE UH, ONE OR THE OTHER.
- Q. OK, BUT SHE..
- A. BUT I'M NOT SURE WHICH ONE, I THINK SHE TOOK TYLENOL.
- Q. OK, SO SHE JUST TOOK OVER THE COUNTER STUFF?
- A. YEAH, YEAH.
- Q. OK AND UH, WOULD THERE, WOULD THERE BE AN OCCASION OR REASON WHY (b)(6) FOR ANY REASON, WOULD GO OUT TO THE, OUT TO THE TRAILER THAT YOU KNOW OF?
- A. THE ONLY THING I CAN THINK OF IS SOMETHING THAT MY SISTER REMINDED ME OF, MY SISTER HAS A HISTORY OF HORRIBLE, HORRIBLE MIGRANES AND SHE TOLD

## ORIGINAL

ME THAT THAT'S EXACTLY WHAT SHE DOES. UH, NOT NECESSARILY GO INTO A TRAILER, BUT IN THE WINTER, COLD MAKES IT BETTER, SO SHE'LL GRAB A BLANKET AND SHE WILL GO OUTSIDE AND SIT WHERE IT'S QUIET AND..AND COLD. AND IT, YOU KNOW, AND IT JUST MADE, MADE SENSE THAT MAYBE THAT'S WHAT (b)(5) WAS DOIN, TRYIN TO FIND A, A COOL, DARK QUIET, PLACE. I MEAN YOU KNOW, I, IT..IT..EVERYTHING IS SO CONFUSING TO ME BECAUSE, YOU KNOW AND I MEAN THERE'S PEOPLE, WHO, WHO ASSUME RIGHT AWAY THAT SHE OVERDOSED. IF SHE WAS GONNA DO THAT, WHY TAKE A BLANKET.

Q. UH HUM.

A. UH, AND AGAIN, AND YOU KNOW I SAW HER IN THE MORGUE, AND HER SISTER, THE NURSE, SAW HER THAT NIGHT. AND SHE SAID THE LOOK ON HER FACE WAS PAIN.

Q. UH HUM.

A. THAT IT WAS YOU KNOW, INDISPUTABLE PAIN LOOK ON HER FACE. IF YOU O.D. ON PAIN KILLERS, YOU'RE NOT GONNA HAVE A LOOK OF PAIN ON YOUR FACE.

Q. UH HUM.

A. I'D SEEN HER WHEN SHE TRIED TO COMMIT SUICIDE, I, I, I'M THE ONE THAT FOUND HER IN BED, AND, AND GOT HER TO THROW, I MEAN IT'S JUST IT'S, IT'S, IT'S NOT A LOOK OF PAIN, IT'S JUST A BLANK UH..

Q. UH HUM.

A. SO THAT DOESN'T ADD UP TO ME BECAUSE IMMEDIATELY, I MEAN THAT CROSSED MY MIND AS WELL.

Q. UH HUM.

A. UH, BUT THE MORE, JUST, JUST SO MANY THINGS DON'T ADD UP.

Q. UH HUM. AND THAT WAS, THAT WAS THE ONLY PHYSICAL PROBLEM THAT SHE WAS HAVING, SHE DIDN'T HAVE ANY KIND OF EATING DISORDER, OR NO HEART CONDITION, UH PROBLEMS WITH HIGH BLOOD PRESSURE?

A. SHE ACTUALLY HAD LOW BLOOD PRESSURE.

Q. OK.

A. BUT NO MEDICATION, UH, AND AS FAR AS EATING DISORDER, NO.

Q. OK. (b)(6) IS THERE..I'M SORRY, (b)(6), IS THERE ANYTHING THAT YOU CAN THINK OF THAT WE HAVEN'T TALKED ABOUT OR GONE OVER THAT MIGHT HELP US OUT TO TRY TO GET, GET A HANDLE ON WHAT WAS GOIN ON?

A. UH, THE, I MEAN I'VE BEEN GOIN ON OVER THIS CONSTANTLY, SINCE YOU KNOW, BASICALLY 11:00 WEDNESDAY NIGHT WHEN (b)(6) CALLED ME BACK. UH, IN THAT TIME, I MEAN EVERYTHING, JUST CONSTANTLY GOIN OVER IN MY HEAD. I CAN'T THINK OF ANYTHING ELSE. YOU KNOW, BUT WE'RE STILL DISCOVERING THINGS YOU KNOW.

Q. RIGHT.

A. YOU KNOW TALKIN TO DIFFERENT PEOPLE AND THINGS LIKE THAT BUT.

Q. WHEN I TALKED TO UH, MR. (b)(6), HE HAD MADE MENTION THAT YOU COULDN'T FIND (b)(6)'S PURSE?

A. CORRECT.

Q. AND WHEN I'M TALKING TO YOU TONIGHT, YOU'VE SINCE LOCATED IT?

A. YES. UH, YEAH, WHEN YOU KNOW THEY COULDN'T FIND HER PURSE, I, OF COURSE, UH, I WASN'T HERE THAT NIGHT. I GOT BACK YOU KNOW, UH, WE LEFT UNTIL VIRGINIA, UH, I HAD TO PICK UP SOME EQUIPMENT FROM THE JOB SITE. I COULDN'T DO THAT UNTIL ABOUT 8:00 ON WEDNESDAY, WEDNESDAY MORNING, WHAT'S TODAY, IS TODAY FRIDAY?