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IN THE CIRCUIT COURT FOR PINELLAS COUNTY, FLORIDA  
21-01099-CF  
SECTION M

STATE OF FLORIDA,  
Plaintiff,  
vs.  
CORNELIUS TREVON WHITFIELD  
Person ID: 1566510,  
Defendant.

\_\_\_\_\_ /

DEPOSITION OF: JONATHAN THOMAS SCHULTHEISS  
DATE: February 21, 2023  
TIME: 9:56 a.m. to 10:11 a.m.  
PLACE: County Justice Center  
14250 49th Street North  
Room 1100  
Clearwater, Florida

PURSUANT TO: Notice by counsel for  
Defendant for purposes of  
discovery, use at trial  
or such other purposes  
as are permitted under  
the Florida Rules  
of Civil Procedure

BEFORE: Nathan F. Perkins, RDR  
Notary Public, State of  
Florida at Large

Pages 1 to 20

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APPEARANCES:

THEODORA TAKTIKOS-DANZIG, ESQUIRE  
County Justice Center  
14250 49th Street North  
Clearwater, Florida 33762  
Attorneys for Plaintiff

JESSICA MANUELE, ESQUIRE  
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Attorney for Defendant

I N D E X

DIRECT EXAMINATION BY MS. MANUELE	Page	3
CERTIFICATE OF OATH	Page	17
REPORTER'S CERTIFICATE	Page	18
WITNESS' SIGNATURE PAGE	Page	19

E X H I B I T S

(None marked)

1                   JONATHAN THOMAS SCHULTHEISS,  
2     the witness herein, being first duly sworn on oath, was  
3     examined and deposed as follows:

4                   DIRECT EXAMINATION

5     BY MS. MANUELE:

6           Q.     Could you please state your name for the  
7     record?

8           A.     Jonathan Thomas Schultheiss.

9           Q.     And do you -- oh. Because I wrote the other  
10    guy's name. I was, like, wait a second.

11          A.     Troy is not here.

12          Q.     I looked at it and then I totally just wrote  
13    down the wrong name, and said, What am I doing?

14                 Okay. Sorry. We are here because you have  
15    been listed as a witness in the State of Florida versus  
16    Cornelius Whitfield regarding a homicide and attempted  
17    homicide that occurred back on February 1st,  
18    February 2nd, 2021. Are you familiar generally with  
19    those circumstances?

20          A.     Yes.

21          Q.     And I was provided an EMS run number of  
22    1340632. Is that a patient care report that you have a  
23    copy of also?

24          A.     Yes, ma'am.

25          Q.     All right. And have you had an opportunity to

1 review that?

2 A. Yes, ma'am.

3 Q. Was there anything that stuck out to you as  
4 being inaccurate or different from what you don't  
5 recall?

6 A. No. No, ma'am.

7 Q. Okay. The run, this report here, who authors  
8 that? Like, is that something you write or is that  
9 something that Mr. Bartow writes?

10 A. That was Mr. Bartow.

11 Q. Okay. And then the last page, is that your  
12 initials also?

13 A. Yes, ma'am.

14 Q. And are you -- like, do you review it prior  
15 and then like initial it, you agree? Or tell me how  
16 that works?

17 A. So at the beginning of shift we all just sign  
18 the patient care computer, and then throughout the shift  
19 the paramedic just writes all the reports and fills out  
20 everything. So we never see the report after that.

21 Q. So --

22 A. So I had no input on this entire report.

23 Q. Oh, okay. So having now had an opportunity to  
24 look at it in preparation for the depo, do you agree?

25 Is this how you recall what you recall happening?

1 A. To the best of my abilities, yes.

2 Q. Okay. So the crew, am I reading this  
3 correctly that there would have been two to the crew on  
4 this particular call?

5 A. There was only two of us on that truck that  
6 day. Yes, ma'am.

7 Q. Okay. And that was you and Bartow?

8 A. Yes, ma'am.

9 Q. What is the difference between a paramedic and  
10 an EMT?

11 A. It's the scope of practice within the county.

12 Q. Explain.

13 A. So a paramedic has further clinical abilities  
14 than an EMT.

15 Q. Like medical?

16 A. Yes.

17 Q. Okay. And do you have to become an EMT before  
18 you become a paramedic?

19 A. Yes, ma'am.

20 Q. Okay. So it's just like a kind of a  
21 stepping --

22 A. Yes, ma'am. Like an RN and a doctor.

23 Q. Gotcha. Well, you don't have to be an RN to  
24 become a doctor.

25 Okay. And I'm sorry, I forgot to ask you.

1 How long have you been with Sunstar?

2 A. Coming up on four years in April.

3 Q. Any prior employment in the same kind of line  
4 of work?

5 A. Yes, ma'am.

6 Q. And where was that?

7 A. Out in Colorado.

8 Q. What was that? Was that as an EMT also?

9 A. Yes, ma'am.

10 Q. About how many years?

11 A. Altogether?

12 Q. Well, within Colorado. Oh, did you do  
13 different agencies out there?

14 A. No, there was one.

15 Q. Okay.

16 A. I was with them a little over seven years.

17 Q. For your, like, the crew, are you guys always  
18 with the same people?

19 A. No, ma'am.

20 Q. Okay. Had you been with Mr. Bartow as a unit  
21 before there occasion?

22 A. No, ma'am.

23 Q. Have you been as a unit with Mr. Bartow since?

24 A. No, ma'am.

25 Q. Oh, okay. Any particular reason?

1 A. He left Sunstar back in October I believe.

2 Q. Oh, okay. So he's not with Sunstar anymore?

3 A. No, ma'am.

4 Q. Okay. Left for just other employment, or  
5 anything --

6 A. No idea.

7 Q. Okay. Did he leave voluntarily?

8 A. (Gestures).

9 Q. You just don't know anything at all?

10 A. No idea.

11 Q. You just know he's not with Sunstar?

12 A. Yes, ma'am.

13 Q. Okay. The times that get -- looking at, I'm  
14 sorry, page -- I think it's page 1 of the report where  
15 it has response and destination and time, and there's a  
16 call received, dispatch, en route, is that something  
17 that are, like, clocked in as you guys are arriving? Or  
18 how do those get input?

19 A. It's what they consider a button-push. So on  
20 the CAD system, which is our computer dispatch system,  
21 it is a matter of us pushing an en route, on scene, and  
22 then transporting, at destination.

23 Q. Okay. And so at scene would be, like, when  
24 you guys stage perhaps couple blocks way?

25 A. Yes, ma'am.

1 Q. And at patient, you are literally with  
2 patient?

3 A. On the mic. We acknowledge that we are at  
4 patient.

5 Q. What do you mean, "on the mic"? Like to the  
6 dispatch?

7 A. Yes, on the radio.

8 Q. Gotcha.

9 A. And that's usually transferred over from -- if  
10 FD is on scene first, then it usually transfers over for  
11 us too.

12 Q. So you and FD -- by "you" I mean Sunstar and  
13 FD use the same report writing system? Or is it --

14 A. Yes, essentially. So they have their own PCR  
15 system and we have our own PCR. It's the same, like,  
16 brand, if you want to call it that, and then we can do a  
17 transfer. So it usually fire shows up on scene, they  
18 obtain the patient's information, and then if we have to  
19 do a hand-off or a patient transfer, then they send what  
20 they have to us, and then we finish the report.

21 Q. Gotcha.

22 A. So the two narratives should be completely  
23 different. FD's narrative should be completely  
24 different.

25 Q. Right. Okay. So if you -- if I am looking at



1 this correctly, this is the EMS run that we have  
2 discussed?

3 A. Yes, ma'am.

4 Q. But that has a different number than this EMS  
5 run, but that's for the same patient, just fire and  
6 rescue; is that right?

7 A. That I cannot attest to.

8 Q. Okay. And then the FD number is the same on  
9 both; is that right?

10 A. That looks correct.

11 Q. Okay. And so is that how they tie the cases  
12 together for both?

13 A. I would assume so, yes.

14 Q. Okay. Do you know if, like, the times on fire  
15 and rescue, if it's the same, like push-button system?

16 A. It is the same push-button system.

17 Q. Okay. So if their time indicates that they  
18 were at the patient at 12:19 --

19 A. That's a verbal acknowledgment via radio.

20 Q. Gotcha. Okay. So in this particular  
21 circumstance, based on the time, it sounds like guys  
22 were at the patient approximately five minute before  
23 they arrived. Does that -- is that what you recall?

24 A. No, ma'am.

25 Q. Okay. Tell me what you recall.

1 A. I recall us both arriving at the same time.

2 Q. Okay.

3 A. What happens sometimes is one unit potentially  
4 forgets to go "at patient" on the radio, and sometimes  
5 it's just recollection --

6 Q. Okay.

7 A. -- for themselves.

8 Q. Okay. All right. So the best you recall, you  
9 guys all -- like, all four of you guys approached to  
10 patient at the same time?

11 A. Yes, ma'am.

12 Q. Gotcha. Okay. Did you have any involvement,  
13 or on checking on the guy inside the apartment,  
14 Mr. Barnes?

15 A. No, ma'am.

16 Q. Okay. Mr. Green. When you first had contact  
17 with him, where was he?

18 A. He was already outside.

19 Q. Okay. Do you remember if he was upright or --

20 A. No, ma'am.

21 Q. Okay. Do you recall anything that Mr. Green  
22 said on scene?

23 A. No, ma'am.

24 Q. Okay. I'm looking at the narrative, the  
25 second paragraph, and it says, "PD states they found the

1 patient next to another person."

2 That's the police department; is that right?

3 A. Yes, ma'am.

4 Q. Okay. PD was helping the patient sit up.  
5 Patient states "They shot him, they shot my brother."

6 Do you know if that's a statement that was  
7 relayed from the PD or if that's a statement that  
8 somebody on the crew heard?

9 A. No, ma'am.

10 Q. "Patient complained he could not breathe."

11 Do you know if that's something that he --  
12 like, was that something he was relaying to you guys at  
13 the time?

14 A. I do not recollect him saying that.

15 Q. "Patient has no medical history."

16 Do you know where that information was  
17 obtained from?

18 A. My assumption is from the patient.

19 Q. Okay. "The patient is alert and oriented  
20 times 4."

21 What does that mean?

22 A. So alert and oriented are just generalized  
23 questions; usually person, place, and event. So it's  
24 just a matter of, you know, what's your name, where are  
25 we at, those types of basic questions. As long as they

1 seem in line with what's the truth, then they are  
2 usually what we consider alert and oriented.

3 Q. Now, so would somebody have to verbally give  
4 those answers --

5 A. Yes.

6 Q. -- to be considered alert and oriented?

7 A. No.

8 Q. Okay. So it's something that he was at least  
9 able to answer his name and where he was --

10 A. Yes.

11 Q. -- type of question?

12 A. Based on the report, yes.

13 Q. Gotcha. And then the score of 15, what does  
14 that mean?

15 A. It's the Glasgow Coma Scale. It's essentially  
16 the same thing. It's just for if they are able to open  
17 their eyes on their own, if they are able to move on  
18 their own, those types of situations.

19 Q. Does that require any verbal responses in  
20 order to score somebody?

21 A. Yes.

22 Q. Okay. And what is the range? Like, what's  
23 the highest score somebody could have?

24 A. Fifteen.

25 Q. What's the lowest score somebody could have?

1 A. Three.

2 Q. Okay. When airway is open -- I've got "open  
3 partially patent." What does that "partially patent"  
4 mean?

5 A. Patent.

6 Q. Patent. Sorry.

7 A. It just means that -- where are you seeing  
8 that?

9 Q. I'm sorry. The third line of the third  
10 paragraph.

11 A. Oh, there we are. "Airway is open and  
12 partially patent. Breathing is labored."

13 So my -- from my assumption from this is just  
14 that he wasn't fully occluded. So he must have still  
15 been able to swallow on his own and breathe on his  
16 without extreme difficulty.

17 Q. Okay. And then "Circulation is not intact,  
18 with obvious bleeding from the patient's face."

19 That means like?

20 A. Red stuff is coming out of the body.

21 Q. Okay. So you don't just say, like, "he's  
22 bleeding"?

23 A. That's a fancy way of saying that.

24 Q. Do you, once you guys arrive on scene, do you  
25 stay with the patient until he is transported to the

1 hospital?

2 A. Yes, ma'am.

3 Q. Are you driving?

4 A. Yes, ma'am.

5 Q. Okay. And so is Bartow, is he up with you or  
6 he's back with the patient?

7 A. He's in the back with Fire.

8 Q. Okay. Are you able to hear what they are  
9 doing back there?

10 A. Sometimes.

11 Q. Okay. Would you be able to testify about any  
12 statements Mr. Green made in the back?

13 A. Uh-uh (Negative response).

14 Q. Or any specific questions that were asked of  
15 him?

16 A. No. I just listen for trigger words from my  
17 medics. That's all.

18 Q. So, like, if there's an emergent situation  
19 that you need to pull over and come help or something?

20 A. Yes, yes.

21 Q. Okay. Was this considered a life threatening  
22 injury?

23 A. The patient was shot through, like it says in  
24 here, he was shot through the cheek. So -- with no exit  
25 wound. So assumption would be yes.

1 Q. Okay. Once you guys get to the hospital, do  
2 you have any additional contact with the patient?

3 A. No, ma'am.

4 Q. Okay. The times for the treatment summary,  
5 how do those times get input? Is that --

6 A. You are talking about all these right here?

7 Q. Yeah.

8 A. These are all manual input.

9 Q. So is that something that they do at the time  
10 while they are treating him?

11 A. No.

12 Q. It's, like, a go back and fill in the --

13 A. Go back and fill in, to the best of your  
14 recollection.

15 Q. Okay.

16 A. Now, the only one that's going to be the most  
17 accurate would be your trauma alert at 022. That's  
18 because once it's called up on the radio, dispatch puts  
19 in the note --

20 Q. Okay.

21 A. -- that says there was a trauma alert.

22 Q. Okay.

23 A. That's going to be your most accurate.

24 Secondary to that would be potentially your  
25 cardiac monitoring or your first blood pressure, because

1 that is based on what the monitor has captured.

2 Q. Oh, okay. So it has, like, a time when it  
3 gives you the reading?

4 A. Yes.

5 Q. Gotcha. Mr. Whitfield was arrested for some  
6 other cases a couple weeks after this. Do you have any  
7 knowledge about that?

8 A. (Nods negatively).

9 Q. Do you know if you worked that scene at all?

10 A. I do not.

11 MS. MANUELE: Okay. I don't have any other  
12 questions. Ms. Taktikos might.

13 MS. TAKTIKOS-DANZIG: I don't either. Good to  
14 go.

15 MS. MANUELE: All right. Thanks for coming  
16 in.

17 (Concluded at 10:11 a.m.)

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CERTIFICATE OF OATH

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

I, the undersigned authority, certify that  
Jonathan Thomas Schultheiss, personally appeared before  
me and was duly sworn.

WITNESS my hand and official seal this 26th day  
of September, 2023.



Nathan F. Perkins, RDR  
Notary Public - State of Florida  
My Commission Expires: 7/18/2025  
Commission No. HH 122841

REPORTER'S CERTIFICATE

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

I, Nathan F. Perkins, Registered Diplomate Reporter, certify that I was authorized to and did stenographically report the deposition of Jonathan Thomas Schultheiss; that a review of the transcript was requested; and that the transcript is a true and complete record of my stenographic notes.

I further certify that I am not a relative, employee, attorney, or counsel of any of the parties, nor am I a relative or employee of any of the parties' attorney or counsel connected with the action, nor am I financially interested in the action.

Dated this 26th day of September, 2023.



Nathan F. Perkins, RDR

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WITNESS' SIGNATURE PAGE

PLEASE ATTACH TO THE DEPOSITION OF JONATHAN THOMAS  
SCHULTHEISS, TAKEN ON FEBRUARY 21, 2023, IN THE CASE OF  
STATE OF FLORIDA VS. CORNELIUS TREVON WHITFIELD.

Job No. FLA5759448

PAGE      LINE      CORRECTION AND REASON THEREFOR

I HAVE READ THE FOREGOING PAGES AND, EXCEPT FOR ANY  
CORRECTIONS OR AMENDMENTS INDICATED ABOVE, I HEREBY  
SUBSCRIBE TO THE ACCURACY OF THIS TRANSCRIPT.

\_\_\_\_\_  
JONATHAN THOMAS SCHULTHEISS

\_\_\_\_\_  
DATE

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WITNESS TO SIGNATURE

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September 26, 2023  
Mr. Jonathan Thomas Schultheiss  
C/O: Theodora Taktikos-Danzig, Esquire  
County Justice Center  
eservice@flsa6.gov

Re: 2/21/2023 deposition of Jonathan Thomas Schultheiss  
State of Florida vs. Cornelius Trevon Whitfield

Dear Sir/Madam:

This letter is to advise that the transcript of the above-referenced deposition has been completed and is available for review. Please email the signed errata sheet to transcripts-fl@veritext.com or sign below to waive review of this transcript.

It is suggested that the review of this transcript be completed within 30 days of your receipt of this letter, as considered reasonable under Federal Rules\*; however, there is no Florida Statute to this regard.

The original of this transcript has been forwarded to the ordering party and your errata, once received, will be forwarded to all ordering parties.

Sincerely,

Nathan F. Perkins, RDR  
Veritext Legal Solutions

Cc: Jessica Manuele, Esquire

WAIVER:

I, \_\_\_\_\_ hereby waive the reading & signing of my deposition transcript.

\_\_\_\_\_  
Deponent Signature

\_\_\_\_\_  
Date

\*Federal Civil Procedure Rule 30(e)/Florida Civil Procedure Rule 1.310(e)

<b>&amp;</b>	<b>2nd</b> 3:18	<b>airway</b> 13:2,11	<b>authority</b> 17:8
<b>&amp;</b> 20:19	<b>3</b>	<b>alert</b> 11:19,22 12:2,6 15:17,21	<b>authorized</b> 18:7
<b>0</b>	<b>3</b> 2:10	<b>altogether</b> 6:11	<b>authors</b> 4:7
<b>022</b> 15:17	<b>30</b> 20:11,23	<b>amendments</b> 19:19	<b>available</b> 20:8
<b>1</b>	<b>33762</b> 2:3,7	<b>answer</b> 12:9	<b>b</b>
<b>1</b> 1:25 7:14	<b>4</b>	<b>answers</b> 12:4	<b>b</b> 2:15
<b>1.310</b> 20:24	<b>4</b> 11:20	<b>anymore</b> 7:2	<b>back</b> 3:17 7:1 14:6,7,9,12 15:12,13
<b>10:11</b> 1:15 16:17	<b>49th</b> 1:16 2:3,6	<b>apartment</b> 10:13	<b>barnes</b> 10:14
<b>1100</b> 1:17	<b>7</b>	<b>appearances</b> 2:1	<b>bartow</b> 4:9,10 5:7 6:20,23 14:5
<b>122841</b> 17:22	<b>7/18/2025</b> 17:22	<b>appeared</b> 17:9	<b>based</b> 9:21 12:12 16:1
<b>12:19</b> 9:18	<b>9</b>	<b>approached</b> 10:9	<b>basic</b> 11:25
<b>1340632</b> 3:22	<b>9:56</b> 1:15	<b>approximately</b> 9:22	<b>beginning</b> 4:17
<b>14250</b> 1:16 2:3,6	<b>a</b>	<b>april</b> 6:2	<b>believe</b> 7:1
<b>15</b> 12:13	<b>a.m.</b> 1:15,15 16:17	<b>arrested</b> 16:5	<b>best</b> 5:1 10:8 15:13
<b>1566510</b> 1:8	<b>abilities</b> 5:1,13	<b>arrive</b> 13:24	<b>bleeding</b> 13:18 13:22
<b>17</b> 2:11	<b>able</b> 12:9,16,17 13:15 14:8,11	<b>arrived</b> 9:23	<b>blocks</b> 7:24
<b>18</b> 2:12	<b>above</b> 19:19 20:8	<b>arriving</b> 7:17 10:1	<b>blood</b> 15:25
<b>19</b> 2:13	<b>accuracy</b> 19:19	<b>asked</b> 14:14	<b>body</b> 13:20
<b>1st</b> 3:17	<b>accurate</b> 15:17 15:23	<b>assume</b> 9:13	<b>brand</b> 8:16
<b>2</b>	<b>acknowledge</b> 8:3	<b>assumption</b> 11:18 13:13 14:25	<b>breathe</b> 11:10 13:15
<b>2/21/2023</b> 20:5	<b>acknowledgm...</b> 9:19	<b>attach</b> 19:2	<b>breathing</b> 13:12
<b>20</b> 1:25	<b>action</b> 18:16,17	<b>attempted</b> 3:16	<b>brother</b> 11:5
<b>2021</b> 3:18	<b>additional</b> 15:2	<b>attest</b> 9:7	<b>button</b> 7:19 9:15,16
<b>2023</b> 1:14 17:13 18:19 19:2 20:1	<b>advise</b> 20:7	<b>attorney</b> 2:7 18:14,16	<b>c</b>
<b>21</b> 1:14 19:2	<b>agencies</b> 6:13	<b>attorneys</b> 2:4	<b>c</b> 20:2
<b>21-01099</b> 1:1	<b>agree</b> 4:15,24		
<b>25003</b> 17:20 18:23			
<b>26</b> 20:1			
<b>26th</b> 17:12 18:19			

<b>cad</b> 7:20 <b>call</b> 5:4 7:16 8:16 <b>called</b> 15:18 <b>captured</b> 16:1 <b>cardiac</b> 15:25 <b>care</b> 3:22 4:18 <b>case</b> 19:2 <b>cases</b> 9:11 16:6 <b>cc</b> 20:18 <b>center</b> 1:16 2:2 2:6 20:3 <b>certificate</b> 2:11 2:12 17:1 18:1 <b>certify</b> 17:8 18:7 18:13 <b>cf</b> 1:1 <b>checking</b> 10:13 <b>cheek</b> 14:24 <b>circuit</b> 1:1 2:5 <b>circulation</b> 13:17 <b>circumstance</b> 9:21 <b>circumstances</b> 3:19 <b>civil</b> 1:21 20:23 20:23 <b>clearwater</b> 1:17 2:3,7 <b>clinical</b> 5:13 <b>clocked</b> 7:17 <b>colorado</b> 6:7,12 <b>coma</b> 12:15	<b>come</b> 14:19 <b>coming</b> 6:2 13:20 16:15 <b>commission</b> 17:22,22 <b>complained</b> 11:10 <b>complete</b> 18:11 <b>completed</b> 20:8 20:11 <b>completely</b> 8:22 8:23 <b>computer</b> 4:18 7:20 <b>concluded</b> 16:17 <b>connected</b> 18:16 <b>consider</b> 7:19 12:2 <b>considered</b> 12:6 14:21 20:11 <b>contact</b> 10:16 15:2 <b>copy</b> 3:23 <b>cornelius</b> 1:8 3:16 19:3 20:5 <b>correct</b> 9:10 <b>correction</b> 19:4 <b>corrections</b> 19:19 <b>correctly</b> 5:3 9:1 <b>counsel</b> 1:18 18:14,16	<b>county</b> 1:1,16 2:2,6 5:11 17:5 18:4 20:3 <b>couple</b> 7:24 16:6 <b>court</b> 1:1 <b>crew</b> 5:2,3 6:17 11:8  <b>d</b>  <b>d</b> 2:9 <b>danzig</b> 2:2 16:13 20:2 <b>date</b> 1:14 19:22 19:25 20:22 <b>dated</b> 18:19 <b>day</b> 5:6 17:12 18:19 <b>days</b> 20:11 <b>dear</b> 20:6 <b>defendant</b> 1:9 1:19 2:7 <b>defender</b> 2:5 <b>department</b> 11:2 <b>depo</b> 4:24 <b>deponent</b> 20:22 <b>deposed</b> 3:3 <b>deposition</b> 1:13 18:8 19:2 20:5,8 20:20 <b>destination</b> 7:15 7:22 <b>difference</b> 5:9 <b>different</b> 4:4 6:13 8:23,24 9:4	<b>difficulty</b> 13:16 <b>diplomate</b> 18:6 <b>direct</b> 2:10 3:4 <b>discovery</b> 1:19 <b>discussed</b> 9:2 <b>dispatch</b> 7:16 7:20 8:6 15:18 <b>doctor</b> 5:22,24 <b>doing</b> 3:13 14:9 <b>driving</b> 14:3 <b>duly</b> 3:2 17:10  <b>e</b>  <b>e</b> 2:9,15 20:23 20:24 <b>either</b> 16:13 <b>email</b> 20:8 <b>emergent</b> 14:18 <b>employee</b> 18:14 18:15 <b>employment</b> 6:3 7:4 <b>ems</b> 3:21 9:1,4 <b>emt</b> 5:10,14,17 6:8 <b>en</b> 7:16,21 <b>entire</b> 4:22 <b>errata</b> 20:8,14 <b>eservice</b> 20:3 <b>esquire</b> 2:2,5 20:2,18 <b>essentially</b> 8:14 12:15 <b>event</b> 11:23 <b>examination</b> 2:10 3:4
---	---	---	---

<p><b>examined</b> 3:3  <b>except</b> 19:18  <b>exit</b> 14:24  <b>expires</b> 17:22  <b>explain</b> 5:12  <b>extreme</b> 13:16  <b>eyes</b> 12:17</p>	<p>18:3 19:3 20:5                  20:12,23  <b>flsa6.gov</b> 20:3  <b>follows</b> 3:3  <b>foregoing</b> 19:18  <b>forgets</b> 10:4  <b>forgot</b> 5:25  <b>forwarded</b>                  20:14,14  <b>found</b> 10:25  <b>four</b> 6:2 10:9  <b>fully</b> 13:14  <b>further</b> 5:13                  18:13</p>	<p>11:12 13:24                  15:1</p>	<p><b>intact</b> 13:17  <b>interested</b> 18:17  <b>involvement</b>                  10:12</p>
<p><b>f</b></p>	<p><b>g</b></p>	<p><b>h</b></p>	<p><b>j</b></p>
<p><b>f</b> 1:22 17:21                  18:6,24 20:16  <b>face</b> 13:18  <b>familiar</b> 3:18  <b>fancy</b> 13:23  <b>fd</b> 8:10,12,13                  9:8  <b>fd's</b> 8:23  <b>february</b> 1:14                  3:17,18 19:2  <b>federal</b> 20:11,23  <b>fifteen</b> 12:24  <b>fill</b> 15:12,13  <b>fills</b> 4:19  <b>financially</b>                  18:17  <b>finish</b> 8:20  <b>fire</b> 8:17 9:5,14                  14:7  <b>first</b> 3:2 8:10                  10:16 15:25  <b>five</b> 9:22  <b>fl</b> 20:9  <b>fla5759448</b> 19:3  <b>florida</b> 1:1,5,17                  1:21,23 2:3,7                  3:15 17:4,21</p>	<p><b>generalized</b>                  11:22  <b>generally</b> 3:18  <b>gestures</b> 7:8  <b>give</b> 12:3  <b>gives</b> 16:3  <b>glasgow</b> 12:15  <b>go</b> 10:4 15:12,13                  16:14  <b>going</b> 15:16,23  <b>good</b> 16:13  <b>gotcha</b> 5:23 8:8                  8:21 9:20 10:12                  12:13 16:5  <b>green</b> 10:16,21                  14:12  <b>guy</b> 10:13  <b>guy's</b> 3:10  <b>guys</b> 6:17 7:17                  7:24 9:21 10:9,9</p>	<p><b>h</b> 2:15  <b>hand</b> 8:19 17:12  <b>happening</b> 4:25  <b>happens</b> 10:3  <b>hear</b> 14:8  <b>heard</b> 11:8  <b>help</b> 14:19  <b>helping</b> 11:4  <b>hh</b> 17:22  <b>highest</b> 12:23  <b>hillsborough</b>                  17:5 18:4  <b>history</b> 11:15  <b>homicide</b> 3:16                  3:17  <b>hospital</b> 14:1                  15:1</p>	<p><b>jessica</b> 2:5 20:18  <b>job</b> 19:3  <b>jonathan</b> 1:13                  3:1,8 17:9 18:8                  19:2,22 20:2,5  <b>judicial</b> 2:5  <b>justice</b> 1:16 2:2                  2:6 20:3</p>
		<p><b>i</b></p>	<p><b>k</b></p>
		<p><b>idea</b> 7:6,10  <b>inaccurate</b> 4:4  <b>indicated</b> 19:19  <b>indicates</b> 9:17  <b>information</b>                  8:18 11:16  <b>initial</b> 4:15  <b>initials</b> 4:12  <b>injury</b> 14:22  <b>input</b> 4:22 7:18                  15:5,8  <b>inside</b> 10:13</p>	<p><b>kind</b> 5:20 6:3  <b>know</b> 7:9,11                  9:14 11:6,11,16                  11:24 16:9  <b>knowledge</b> 16:7</p>
			<p><b>l</b></p>
			<p><b>labored</b> 13:12  <b>large</b> 1:23  <b>leave</b> 7:7  <b>left</b> 7:1,4  <b>legal</b> 20:17  <b>letter</b> 20:7,11  <b>life</b> 14:21  <b>line</b> 6:3 12:1                  13:9 19:4  <b>listed</b> 3:15  <b>listen</b> 14:16  <b>literally</b> 8:1  <b>little</b> 6:16</p>

<b>long</b> 6:1 11:25 <b>look</b> 4:24 <b>looked</b> 3:12 <b>looking</b> 7:13 8:25 10:24 <b>looks</b> 9:10 <b>lowest</b> 12:25	<b>monitor</b> 16:1 <b>monitoring</b> 15:25 <b>move</b> 12:17	<b>obvious</b> 13:18 <b>occasion</b> 6:21 <b>occluded</b> 13:14 <b>occurred</b> 3:17 <b>october</b> 7:1 <b>official</b> 17:12 <b>oh</b> 3:9 4:23 6:12 6:25 7:2 13:11 16:2 <b>okay</b> 3:14 4:7 4:11,23 5:2,7,17 5:20,25 6:15,20 6:25 7:2,4,7,13 7:23 8:25 9:8,11 9:14,17,20,25 10:2,6,8,12,16 10:19,21,24 11:4,19 12:8,22 13:2,17,21 14:5 14:8,11,21 15:1 15:4,15,20,22 16:2,11 <b>once</b> 13:24 15:1 15:18 20:14 <b>open</b> 12:16 13:2 13:2,11 <b>opportunity</b> 3:25 4:23 <b>order</b> 12:20 <b>ordering</b> 20:14 20:14 <b>oriented</b> 11:19 11:22 12:2,6 <b>original</b> 20:13	<b>outside</b> 10:18 <b>own</b> 8:14,15 12:17,18 13:15
<b>m</b>	<b>n</b>	<b>p</b>	
<b>m</b> 1:2 <b>ma'am</b> 3:24 4:2 4:6,13 5:6,8,19 5:22 6:5,9,19,22 6:24 7:3,12,25 9:3,24 10:11,15 10:20,23 11:3,9 14:2,4 15:3 <b>madam</b> 20:6 <b>made</b> 14:12 <b>manual</b> 15:8 <b>manuele</b> 2:5,10 3:5 16:11,15 20:18 <b>marked</b> 2:16 <b>matter</b> 7:21 11:24 <b>mean</b> 8:5,12 11:21 12:14 13:4 <b>means</b> 13:7,19 <b>medical</b> 5:15 11:15 <b>medics</b> 14:17 <b>mic</b> 8:3,5 <b>minute</b> 9:22	<b>n</b> 2:9 <b>name</b> 3:6,10,13 11:24 12:9 <b>narrative</b> 8:23 10:24 <b>narratives</b> 8:22 <b>nathan</b> 1:22 17:21 18:6,24 20:16 <b>need</b> 14:19 <b>negative</b> 14:13 <b>negatively</b> 16:8 <b>never</b> 4:20 <b>nods</b> 16:8 <b>north</b> 1:16 2:3,6 <b>notary</b> 1:23 17:21 <b>note</b> 15:19 <b>notes</b> 18:11 <b>notice</b> 1:18 <b>number</b> 3:21 9:4,8	<b>page</b> 2:10,11,12 2:13,13 4:11 7:14,14 19:1,4 <b>pages</b> 1:25 19:18 <b>paragraph</b> 10:25 13:10 <b>paramedic</b> 4:19 5:9,13,18 <b>partially</b> 13:3,3 13:12 <b>particular</b> 5:4 6:25 9:20 <b>parties</b> 18:14,15 20:14 <b>party</b> 20:14 <b>patent</b> 13:3,3,5 13:6,12 <b>patient</b> 3:22 4:18 8:1,2,4,19 9:5,18,22 10:4 10:10 11:1,4,5 11:10,15,18,19 13:25 14:6,23 15:2 <b>patient's</b> 8:18 13:18 <b>pcr</b> 8:14,15 <b>pd</b> 10:25 11:4,7 <b>people</b> 6:18	



<p><b>perkins</b> 1:22 17:21 18:6,24 20:16</p> <p><b>permitted</b> 1:20</p> <p><b>person</b> 1:8 11:1 11:23</p> <p><b>personally</b> 17:9</p> <p><b>pinellas</b> 1:1</p> <p><b>place</b> 1:16 11:23</p> <p><b>plaintiff</b> 1:6 2:4</p> <p><b>please</b> 3:6 19:2 20:8</p> <p><b>police</b> 11:2</p> <p><b>potentially</b> 10:3 15:24</p> <p><b>practice</b> 5:11</p> <p><b>preparation</b> 4:24</p> <p><b>pressure</b> 15:25</p> <p><b>prior</b> 4:14 6:3</p> <p><b>procedure</b> 1:21 20:23,24</p> <p><b>provided</b> 3:21</p> <p><b>public</b> 1:23 2:5 17:21</p> <p><b>pull</b> 14:19</p> <p><b>purposes</b> 1:19 1:20</p> <p><b>pursuant</b> 1:18</p> <p><b>push</b> 7:19 9:15 9:16</p> <p><b>pushing</b> 7:21</p> <p><b>puts</b> 15:18</p>	<p style="text-align: center;"><b>q</b></p> <p><b>question</b> 12:11</p> <p><b>questions</b> 11:23 11:25 14:14 16:12</p> <p style="text-align: center;"><b>r</b></p> <p><b>radio</b> 8:7 9:19 10:4 15:18</p> <p><b>range</b> 12:22</p> <p><b>rdr</b> 1:22 17:21 18:24 20:16</p> <p><b>read</b> 19:18</p> <p><b>reading</b> 5:2 16:3 20:19</p> <p><b>reason</b> 6:25 19:4</p> <p><b>reasonable</b> 20:11</p> <p><b>recall</b> 4:5,25,25 9:23,25 10:1,8 10:21</p> <p><b>receipt</b> 20:11</p> <p><b>received</b> 7:16 20:14</p> <p><b>recollect</b> 11:14</p> <p><b>recollection</b> 10:5 15:14</p> <p><b>record</b> 3:7 18:11</p> <p><b>red</b> 13:20</p> <p><b>referenced</b> 20:8</p> <p><b>regard</b> 20:12</p> <p><b>regarding</b> 3:16</p> <p><b>registered</b> 18:6</p>	<p><b>relative</b> 18:13 18:15</p> <p><b>relayed</b> 11:7</p> <p><b>relaying</b> 11:12</p> <p><b>remember</b> 10:19</p> <p><b>report</b> 3:22 4:7 4:20,22 7:14 8:13,20 12:12 18:8</p> <p><b>reporter</b> 18:7</p> <p><b>reporter's</b> 2:12 18:1</p> <p><b>reports</b> 4:19</p> <p><b>requested</b> 18:10</p> <p><b>require</b> 12:19</p> <p><b>rescue</b> 9:6,15</p> <p><b>response</b> 7:15 14:13</p> <p><b>responses</b> 12:19</p> <p><b>review</b> 4:1,14 18:9 20:8,9,10</p> <p><b>right</b> 3:25 8:25 9:6,9 10:8 11:2 15:6 16:15</p> <p><b>rn</b> 5:22,23</p> <p><b>room</b> 1:17</p> <p><b>route</b> 7:16,21</p> <p><b>rule</b> 20:23,24</p> <p><b>rules</b> 1:21 20:12</p> <p><b>run</b> 3:21 4:7 9:1 9:5</p>	<p style="text-align: center;"><b>s</b></p> <p><b>s</b> 2:15</p> <p><b>saying</b> 11:14 13:23</p> <p><b>says</b> 10:25 14:23 15:21</p> <p><b>scale</b> 12:15</p> <p><b>scene</b> 7:21,23 8:10,17 10:22 13:24 16:9</p> <p><b>schultheiss</b> 1:13 3:1,8 17:9 18:9 19:2,22 20:2,5</p> <p><b>scope</b> 5:11</p> <p><b>score</b> 12:13,20 12:23,25</p> <p><b>seal</b> 17:12</p> <p><b>second</b> 3:10 10:25</p> <p><b>secondary</b> 15:24</p> <p><b>section</b> 1:2</p> <p><b>see</b> 4:20</p> <p><b>seeing</b> 13:7</p> <p><b>seem</b> 12:1</p> <p><b>send</b> 8:19</p> <p><b>september</b> 17:13 18:19 20:1</p> <p><b>seven</b> 6:16</p> <p><b>sheet</b> 20:9</p> <p><b>shift</b> 4:17,18</p> <p><b>shot</b> 11:5,5 14:23,24</p>
--	--	--	--

<b>shows</b> 8:17 <b>sign</b> 4:17 20:9 <b>signature</b> 2:13 17:20 18:23 19:1,25 20:22 <b>signed</b> 20:8 <b>signing</b> 20:19 <b>sincerely</b> 20:15 <b>sir</b> 20:6 <b>sit</b> 11:4 <b>situation</b> 14:18 <b>situations</b> 12:18 <b>sixth</b> 2:5 <b>solutions</b> 20:17 <b>somebody</b> 11:8 12:3,20,23,25 <b>sorry</b> 3:14 5:25 7:14 13:6,9 <b>sounds</b> 9:21 <b>specific</b> 14:14 <b>stage</b> 7:24 <b>state</b> 1:5,23 3:6 3:15 17:4,21 18:3 19:3 20:5 <b>statement</b> 11:6 11:7 <b>statements</b> 14:12 <b>states</b> 10:25 11:5 <b>statute</b> 20:12 <b>stay</b> 13:25 <b>stenographic</b> 18:11	<b>stenographica...</b> 18:8 <b>stepping</b> 5:21 <b>street</b> 1:16 2:3,6 <b>stuck</b> 4:3 <b>stuff</b> 13:20 <b>subscribe</b> 19:19 <b>suggested</b> 20:10 <b>summary</b> 15:4 <b>sunstar</b> 6:1 7:1 7:2,11 8:12 <b>swallow</b> 13:15 <b>sworn</b> 3:2 17:10 <b>system</b> 7:20,20 8:13,15 9:15,16  <b>t</b>  <b>t</b> 2:15 <b>taken</b> 19:2 <b>taktikos</b> 2:2 16:12,13 20:2 <b>talking</b> 15:6 <b>tell</b> 4:15 9:25 <b>testify</b> 14:11 <b>thanks</b> 16:15 <b>theodora</b> 2:2 20:2 <b>therefor</b> 19:4 <b>thing</b> 12:16 <b>think</b> 7:14 <b>third</b> 13:9,9 <b>thomas</b> 1:13 3:1 3:8 17:9 18:9 19:2,22 20:2,5 <b>threatening</b> 14:21	<b>three</b> 13:1 <b>tie</b> 9:11 <b>time</b> 1:15 7:15 9:17,21 10:1,10 11:13 15:9 16:2 <b>times</b> 7:13 9:14 11:20 15:4,5 <b>together</b> 9:12 <b>totally</b> 3:12 <b>transcript</b> 18:9 18:10 19:19 20:7,9,11,13,20 <b>transcripts</b> 20:9 <b>transfer</b> 8:17,19 <b>transferred</b> 8:9 <b>transfers</b> 8:10 <b>transported</b> 13:25 <b>transporting</b> 7:22 <b>trauma</b> 15:17 15:21 <b>treating</b> 15:10 <b>treatment</b> 15:4 <b>trevon</b> 1:8 19:3 20:5 <b>trial</b> 1:19 <b>trigger</b> 14:16 <b>troy</b> 3:11 <b>truck</b> 5:5 <b>true</b> 18:10 <b>truth</b> 12:1 <b>two</b> 5:3,5 8:22 <b>type</b> 12:11	<b>types</b> 11:25 12:18  <b>u</b>  <b>uh</b> 14:13,13 <b>under</b> 1:20 20:11 <b>undersigned</b> 17:8 <b>unit</b> 6:20,23 10:3 <b>upright</b> 10:19 <b>use</b> 1:19 8:13 <b>usually</b> 8:9,10 8:17 11:23 12:2  <b>v</b>  <b>verbal</b> 9:19 12:19 <b>verbally</b> 12:3 <b>veritext</b> 20:17 <b>veritext.com</b> 20:9 <b>versus</b> 3:15 <b>voluntarily</b> 7:7 <b>vs</b> 1:7 19:3 20:5  <b>w</b>  <b>wait</b> 3:10 <b>waive</b> 20:9,19 <b>waiver</b> 20:19 <b>want</b> 8:16 <b>way</b> 7:24 13:23 <b>weeks</b> 16:6 <b>whitfield</b> 1:8 3:16 16:5 19:3 20:5
--	---	--	---

<b>witness</b> 2:13 3:2 3:15 17:12 19:1 19:25
<b>words</b> 14:16
<b>work</b> 6:4
<b>worked</b> 16:9
<b>works</b> 4:16
<b>wound</b> 14:25
<b>write</b> 4:8
<b>writes</b> 4:9,19
<b>writing</b> 8:13
<b>wrong</b> 3:13
<b>wrote</b> 3:9,12
<b>x</b>
<b>x</b> 2:9,15
<b>y</b>
<b>yeah</b> 15:7
<b>years</b> 6:2,10,16

FLORIDA RULES OF CIVIL PROCEDURE

Rule 1.310

(e) Witness Review. If the testimony is transcribed, the transcript shall be furnished to the witness for examination and shall be read to or by the witness unless the examination and reading are waived by the witness and by the parties. Any changes in form or substance that the witness wants to make shall be listed in writing by the officer with a statement of the reasons given by the witness for making the changes. The changes shall be attached to the transcript. It shall then be signed by the witness unless the parties waived the signing or the witness is ill, cannot be found, or refuses to sign. If the transcript is not signed by the witness within a reasonable time after it is furnished to the witness, the officer shall sign the transcript and state on the transcript the waiver, illness, absence of the witness, or refusal to sign with any reasons given therefor. The deposition may then be used as fully as though signed unless the court holds that the reasons given for the refusal to sign require rejection of

the deposition wholly or partly, on motion under  
rule 1.330(d)(4).

DISCLAIMER: THE FOREGOING CIVIL PROCEDURE RULES  
ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.  
THE ABOVE RULES ARE CURRENT AS OF APRIL 1,  
2019. PLEASE REFER TO THE APPLICABLE STATE RULES  
OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS

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