

CARVER COUNTY SHERIFF'S OFFICE

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CN: Det. Chris Nelson, #839      MS: Dr. Michael Todd Schulenberg, [REDACTED]

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CN: Okay, this is a recorded statement given by ah, Michael Todd Schulenberg, date of birth of [REDACTED] from, answering questions from Detective Chris Nelson, badge 839. This statement's being taken at Chanhassen City Hall in Chanhassen, Minnesota, ah on 4/21/2016 at approximately 11:57am. Ah, present as a witness during this statement is no one. Ah, again, this in reference to ah, 16012559 and correction it's actually 10:57.

MS: 10:57.

CN: Okay, go ahead and just tell me your name again for the record please, sir.

MS: Michael Todd Schulenberg.

CN: Okay, and what's your mailing address?

MS: [REDACTED]

CN: And what's a phone number for you?

MS: Ah, home number is [REDACTED]

CN: Okay.

MS: [REDACTED]

CN: And cell phone.

MS: [REDACTED]

CN: Okay, you understand you're not under arrest and this is a voluntary statement, correct? Okay. Um, what would you like to be called? Would you like to be called Michael, or...?

MS: Mike. Mike's fine.

CN: Okay, Mike, I understand that you're a doctor or physician that has...

MS: Correct.

CN: Had seen ah...

MS: Professional contact with the decedent.

CN: Okay, and the deceased is, I, it's Prince, his name, but his real name is Roger Nelson, correct?

MS: Ah, I thought his name, and he's in our electronic record as Prince Rogers Nelson.

CN: Okay, perfect. Okay, can you just give me a brief history how you became in contact with him?

MS: Ah, sure. Um, Kirk Johnson who was present this morning ah, has been a patient of mine for probably 16 plus years and ah, last fall Kirk contacted me to see if I would be open to ah, helping him with his ah, boss. Ah, at that point and time it just was, you know, kind of the idea of like doing a physical, getting things checked out, um, and that's what was ah, shared with me. Um, nothing ever came to fruition with that until about ah, two weeks ago on April 7<sup>th</sup>. I received a text message, I think at 5:45 in the morning.

CN: Okay.

MS: Um, asking if I would be able to ah, help out and potentially administer some I.V. fluids that day.

CN: Okay.

MS: So, um, after speaking with ah, Kirk, ah, I came over to Paisley Park at about 6:45 in the morning.

CN: Okay.

MS: Um, met ah, Prince, ah took a history, did what physical exam I could ah, at his ah, house, or studio.

CN: Yup.

MS: Um, and then, since he wanted I.V. fluids, that's not something I could do there so then we arranged to meet up at my ah, office um, and, ah...

CN: Where is your office located at?

MS: My office is at 15450 Highway 7, Minnetonka 55345. So, um, so Kirk ah, brought ah, Prince over. Ah, Meron, who is Prince's Personal Assistant then met us there too.

CN: Okay.

MS: And ah, just for privacy purposes, we entered through the back of the building and came into the urgency center part which was not open for patient care.

CN: Okay.

MS: Um, placed an I.V., gave him a liter of I.V. normal saline, ah, he said he felt better and then left in the ah, presence of ah, Meron.

CN: Okay.

MS: Um, let's see, two days later he called me to let me know he was feeling better, um, that some of the symptoms that we had discussed on the 7<sup>th</sup>, or no, it was, sorry, it couldn't be two days later.

CN: Okay.

MS: It was on the 8<sup>th</sup>.

CN: On the 8<sup>th</sup>?

MS: Yeah, so on the 8<sup>th</sup> um, Meron texted me at lunch and said, could Prince talk to you? And then about 10 minutes later Prince called me and I spoke to him on the phone for about 15 minutes um, just ah, reviewed that some of the symptoms he had been complaining of on the 7<sup>th</sup> had improved after the I.V. fluids, um, and ah, then ah, we just kind of talked about ah, a plan. He was, had seen a Chiropractor that night. He was having some new symptoms and we just kind of talked about that and I offered to see him again um, and do some blood work if he felt that was necessary. Um, but we just kind of left it at that.

CN: At that.

MS: Ah, and then the next um, my next contact with him was on the 21<sup>st</sup>, yesterday.

CN: Okay.

MS: Where, I gotta look at the, I don't re, ah Kirk contacted me.

CN: Okay.

MS: Ah, by text and um, let's see here, ah, or actually I had talked to Kirk on, I think, Wednesday? Yes, and then we had talked about having Prince come over for kind of an assessment, maybe some blood work, ah, and ah, on Thursday at 7pm and then it, then it happened actually at 5. Kirk got in touch with me and then he came, we, they, Kirk and Prince came over to the office at 5pm.

CN: Okay.

MS: So, in the interim um, I had learned from Kirk who stated to me that he had just learned this, ah, concern that ah, Prince was using ah, opiates.

CN: Opiates? Did he say, ah, how much he was using?

MS: Kirk didn't know.

CN: Okay.

MS: Um, what he told me is that he had been in contact with a lot of people who knew Prince ah, and who, apparently, were aware of this, but Kirk told me that he had not been aware of it.

CN: Okay.

MS: So...

CN: And the first time that they called you and contacted you, what kind of symptoms, the first time you seen him, was he....?

MS: Ah, you know, he was complaining of like, ah, numbness, ah, and tingling in one of his legs. I think it was the right leg and then numbness and tingling in his hands. Ah, and that he had had some ah, vomiting ah, the night before that ah, he had attributed to ah, some soup he had eaten.

CN: Okay.

MS: I mean, I didn't ...

CN: You didn't do any....

MS: Walk around to...

CN: Yeah.

MS: Look to see if there was any vomit around or...

CN: Sure.

MS: Stuff like that, so.

CN: And then at any time did Prince tell you that he was suffering from, if that's the case, that he was taking opiates or anything like that?

MS: I asked him if he was taking any prescription medications ah, and I th, I believe he said, "No." Um, and then I asked again if he was taking anything for like, ah, the hands and he said that he had a medication but he didn't know what it was.

CN: Was, okay, and in your time you didn't prescribe him any new medications or anything like that.

MS: I did not prescribe any medications on the 7<sup>th</sup>.

CN: Okay.

MS: Yesterday I prescribed medications to treat opiate withdrawal.

CN: Okay.

MS: Symptoms. So, ah, so Prince came in at 5 yesterday. We arranged again to, at that time, because the clinic is ah, empty....

CN: Yeah.

MS: There are no patients around cause he, my impression was that he wanted privacy, and um, so we met, we took vitals, did kind of the routine stuff. I did a history, physical examination, um, asked him about ah, blood work which he was ah, consenting to do at that time and then I had one of the nurses come in to draw blood

CN: Okay.

MS: And um, place an I.V. so that we could give him another ah liter of I.V. saline. So...

CN: And...

MS: Prince told me that he wa, had, was taking Tylenol.

CN: Okay.

MS: I asked him if there were any other ingredients in the Tylenol and, I believe, he either said, "No," or that he did not know.

CN: Did not know.

MS: Um, and I asked him when he had last taken Tylenol and he said it was that morning.

CN: Okay.

MS: Ah, and his main complaint when he came in is that he was feeling antsy.

CN: Antsy.

MS: Ah, he denied any nausea or vomiting. Ah, he said he felt a little shaky, ah, denied any diarrhea.

CN: Okay.

MS: I was asking about opiate withdrawal symptoms.

CN: Okay.

MS: So.

CN: And has the blood work and everything, has that, all the results come back on all that yet?

MS: Ah, it has.

CN: Okay.

MS: Um, I'm sorry, how I ended up at Paisley Park this morning ah, and then so the story continued, so...

CN: Okay.

MS: Um, we administered the liter of I.V. fluids. Um, I sent a prescription to the Walgreens on 101 and 7

CN: Okay.

MS: For Clonidine and Kirk then left to go pick that up. Ah, and Prince did take two doses of Clonidine before he left the office and one dose of Hydroxyzine. Do you need me to spell those?

CN: Yeah.

MS: Clonidine is C-l-o-n-i-d-i-n-e. It's a blood pressure medication that has, for many years, been used to treat symptoms of opiate withdrawal.

CN: Okay.

MS: And Hydroxyzine ah, H-y-d-r-o-x-y-z-i-n-e is an antihistamine similar to like, Benadryl.

CN: Okay and he took one dose of that?

MS: Took one dose of those because he felt that he needed something to relax. He asked if something could be given intravenously and I said, "No," we didn't keep things like that in the office.

CN: Okay.

MS: Which, in the clinic we don't, in the urgency center they do, but I, frankly, I didn't wanna, I didn't wanna make the problem worse.

CN: Sure.

MS: By doing, by giving, you know some other type of controlled medication...

CN: Sure.

MS: Intravenously in the office.

CN: So, the doses you gave him were in pill form?

MS: Yeah, Clonidine 0.1 and the Hydroxyzine was 25 milligrams.

CN: And last night when he left did he seem like he was in good spirits?

MS: Yeah, yeah, he walked out. He appeared comfortable. He left with Kirk and that was around 6:30.

CN: Okay, and when people want I.V.s and you give people I.V.s what does that help with? Is that just like, flushing out your system?

MS: Mostly people just feel better if they're dehydrated.

CN: Okay.

MS: I guess I would say that maybe he was mildly dehydrated. His mouth looked a little dry.

CN: Dry.

MS: Ah, in this setting, mostly I was just giving a liter of normal saline because that's what the patient wanted and the potential for harm is low.

CN: Low, okay, and do you know if he filled his prescription? You don't know?

MS: I only know that he filled the prescription for the Clonidine.

CN: Clonidine.

MS: Um, the other two prescriptions ah, that I issued, I printed. You'd have to ask Kirk...

CN: Kirk.

MS: If those were filled because I gave them to Kirk. Ah, one was for a prescription of the Hydroxyzine.

CN: Yup.

MS: And, after looking up opiate withdrawal treatment on the computer, ah, I issued a prescription for Valium.

CN: Okay.

MS: Prior to discharge, um, there was still, he, Prince and Kirk left around 6:30 ah, cause I had picked my daughter up at gymnastics at 6:45 over by Paisley Park, actually. Um, the, ah, I just had a frank discussion and stated to Prince with Kirk in the room that ah, Kirk had been a long time patient of mine, um, I did not want to violate trust. Ah, Prince explicitly asked what the two prescriptions were and I didn't want to lie so I, cause Kirk's preference was to not even have the Valium available, which I totally understand.

CN: Yup, cause he had an issue with...

MS: Um, but felt that if it could be administered in a, well, I wasn't aware that he had an issue with Valium.

CN: Okay.

MS: So, but if it could be administered in a supervised setting it, it would be a safe thing to use, but I explicitly stated to Prince that ah, just my understanding that ah, what, it was my responsibility to be a good doctor and I didn't want to substitute one problem for another.

CN: Another, sure.

MS: And he said, "Understood, I will use the other two first."

CN: Okay.

MS: Ah, exp, you know, speaking explicitly about the Valium.

CN: Valium.

MS: So...

CN: What um, what....

MS: Um, and then that was the last time when they left the office, that's the last time that I physically seen Prince.

CN: Okay, and what kind of effect does Valium have on your system?

MS: So, the types of symptoms that Valium would be used to treat it for in this setting are primarily the anxiousness.

CN: Okay.

MS: Jitteriness, ah, it's widely used as a tranquilizer, a muscle relaxant, ah I do vasectomies. I give men Valium to take before the procedure...

CN: Okay.

MS: To help them relax.

CN: Okay.

MS: So, and I prescribed what I thought were ah, reasonable, short term quantities. I think for the Clonidine it was 30 for the Hydroxyzine it was 30 capsules and for the Valium it was just 15 ah, tablets.

CN: If you were to mix all of those kind of things would that cause problems within your system?

MS: It certainly could if you intentionally overdosed on all of these, but as far as like are they given together for opiate withdrawal? Probably on a routine basis.

CN: Okay, and then this morning you were going over there...

MS: Well...

CN: And then I cut you off.

MS: No, actually ah, last night ah, I received a call from Phaedra. Ah, Kirk had ah, given her my contact information to her. I'm just checking. I think it was around ah, 8:30. So, 8:17, I don't mind showing this. We had an 11 minute phone call.

CN: Okay.

MS: Where she asked me if I would be ah, willing to speak to a Dr. Kornfeld. Ah, Prince, I believe Prince or Kirk had reached out to Phaedra.

CN: Okay.

MS: Um, to arrange a chemical dependency assessment and treatment and so she was calling me as ah, the doctor of record regarding this.



CN: Okay.

MS: Um, wanting to know if I would speak with ah, Dr. Kornfeld. Um, I gave her ah, information about our interaction. Ah, what medications I had prescribed because, ah, potentially, I was told Dr. Kornfeld might reach out to a doctor in Minnesota who could prescribe um, anti-withdrawal medications.

CN: Sure.

MS: Um, that medication is Suboxone. I've not gone through the training and so I don't prescribe Suboxone.

CN: Okay.

MS: You have to go through training to prescribe it for that.

CN: And Dr. Kornfeld's out in...

MS: Kornfeld.

CN: Korn...

MS: F-e-l-d. He's out in California. Um, runs, he's an addiction medicine specialist.

CN: Okay.

MS: Um, and ah, so she was gonna reach out back to him. Um, and wanted to know if ah, if I would speak to him.

CN: Okay.

MS: So, and then the second phone call, which occurred at 10:47 ah, was Phaedra calling me again and then we were conference called with Dr. Kornfeld.

CN: Okay.

MS: And so Dr., I reviewed....

CN: I'm sorry, was that...

MS: Yeah.

CN: A.M.?

MS: P.M. 10:47 pm, So, um...

CN: And Phaedra, at this time, was out in California, correct?

MS: As far as I know. The area code's from San Jose.

CN: Okay.

MS: But everyone has cell phones these days, so.

CN: Yeah.

MS: Um, after the first conversation with Phaedra, I texted Kirk to say I spoke to this person. I hope it's legitimate.

CN: Yup.

MS: And he texted back, said yes, thanks.

CN: Okay.

MS: So, um, so I spoke briefly with Dr. Kornfeld. Ah, explained ah, what I had, the medications I had given. He agreed that those were appropriate medications to manage withdrawal and then shared with me that he was having his son come out who is here.

CN: Yup.

MS: Um, as ah, kind of ah, ah, and try to convince Prince to come out to California for ah, ah, opiate withdrawal treatment and...

CN: Okay.

MS: Management. Ah, and had thought that, just shared that had thought what I did was medically appropriate.

CN: Okay.

MS: So, um, then I received, then I went back to bed cause I had been sleeping.

CN: Sure.

MS: Ah, and I received a couple texts from Kirk that came at 11:12pm after he mistakenly sent me a photo of the interior of Paisley Park at 9:38. I got it and I'm like, what's that? Um, but I didn't see these texts until this morning. Ah, and so then I went into the office, arrived at my office at about 8:15, finished ah, my documentation on the note, um, and asked Kirk if he was still in town. Ah, Kirk texted me back as you can see there. I'm still here waiting for him to wake up to give him something to take edge off and that the other doctor, I presume, he's referring to...

CN: Yeah (inaudible)

MS: Andrew, who's not a medical doctor, ah is in town to help. Ah, thanks for the help. Ah, and then I said, I've rec, have records and test results that I can fax over to Paisley if you have a fax machine. Prince had given me verbal ah, permission to communicate all test results and medical concerns to Kirk.

CN: Kirk, okay.

MS: Um, and Kirk texted back, do you have a fax? Ah, and then as I was texting him he texted me about the email. Um, we don't have confidential or secure email so I don't like to...

CN: You don't like to do it?

MS: Conduct or send medical records through email, not to mention I don't have a scanner at the office. So that's when I said I just, I'll drive over, drive over. He said that would be good. Let me know when you're coming, so I texted him. That was probably about ah, 9:30, um saying I'll be over in about 10 minutes, which ent, entrance should I meet you at? And, to make a long story short, that's how I ended up at Paisley Park this morning, was just simply to drop off these records to...

CN: Sure.

MS: Smooth the medical transition over to Dr. Kornfeld, um, in California. Ah, and then I arrived at the scene ah, that you're now well aware of.

CN: Okay.

MS: Totally um, by coincidence.

CN: Okay.

MS: I was not aware that anything bad had happened.

CN: Okay.

MS: Kirk had not responded to my last text, so, obviously.

CN: Do you know how to take ah, pictures of this stuff and then...

MS: I don't.

CN: Okay.

MS: I'm pretty cell phone illiterate, I'm sorry.

CN: Okay, because, like I said, I will want to capture the conversation that you had at, you know...

MS: That's fine.

CN: Going back and forth with Kirk.

MS: The conversations that Kirk and I had back in the fall were also on my cell phone, but that cell phone, unfortunately, took a swim in the Dominican Republic last month, and no longer functions.

CN: Okay.

MS: So.

CN: Well, with your permission, can I take pictures of this? And then....

MS: Ah, yeah, let me see here.

CN: Just of the conversation that you had.

MS: Ah, ah, yeah, that's...

CN: Cause I know how important the phone is to ya'.

MS: I think that's the beginning.

CN: Okay. I'll do that at the end.

MS: Okay.

CN: When we're all done here.

MS: Sure.

CN: Is there anything else that you can think of that's important to this?

MS: Ah, so, on, so when I talked to Prince, you know, on Friday, he had informed me that he had cancelled his shows. That he was supposed to go to that night.

CN: Okay.

MS: On the 14<sup>th</sup> um, Kirk contacted me asking if Prince could have some pain medication because his hip was bothering him. I did feel comfortable issuing a prescription um, because I had evaluated him the week before and I issued a prescription for 15 Percocet. Um, and then Friday night I, like everybody else, heard about the, or was it Saturday? Yeah, Saturday, heard about the emergency landing and everything and then um....

CN: I didn't hear about the emergency landing (inaudible)

MS: Oh, yeah, he was flying back from Atlanta

CN: Okay.

MS: And had an emergency landing in Illinois and was in an E.R. for 3 hours to get ah, fif, ah, I.V. fluids.

CN: Okay.

MS: And then....

CN: Was that on his private plane?

MS: I believe so.

CN: Okay.

MS: Yeah. Um, and then on Monday, the 18<sup>th</sup>, Kirk texted me, and if you take pictures you'll see this, can you call me? So I called him and it was at that time that Kirk ah, informed me about the ah, concerns regarding opiate use.

CN: Okay.

MS: Ah, he apologized that he had asked me to issue ah, prescription ah, for that and that he had only just found out and had, over the weekend contacted a number of people. He did not tell me specifically who they were other than he mentioned an ex-wife, um, who verified that, potentially, I guess Prince had had a problem for many years.

CN: Okay.

MS: With ah, opiate use.

CN: Opiates.

MS: Ah....

CN: Over a prolong, prolonged period of time of abusing that. What can that do to your body?

MS: Well, ah, prolonged use of opiates um, causes ah, dependence so if you stop you're gonna go through withdrawal.

CN: Sure.

MS: Ah, you can have habituation where people require increasing amounts of opiates to treat whatever symptom....

CN: Sure.

MS: They're experiencing. Um, men can go through premature testicular failure. That's probably why the low T market's so big right now.

CN: Yup.

MS: Ah, women can go through premature menopause, so it can have some endocrine effects.

CN: Okay.

MS: Um, beyond that, ah, I would not necessarily consider myself an expert in the long term effects of opiates. Ah, and I did not inquire about like, how long is, exactly how long this has been going on. I did not inquire exactly like, who Kirk had talked to to get this information.

CN: Sure.

MS: And so then that kind of came the urgency of this week with the idea of doing this evaluation as um, hopefully to potentially find some medical evidence that these medications were harming Prince as a way to ah, potentially convince him to seek ah, treatment.

CN: Sure. Okay. If I was gonna seek to get the medical records would that go through North Memorial or...?

MS: Yeah.

CN: Okay.

MS: There's virtually nothing there.

CN: Nothing.

MS: We did do lab tests yesterday. Really the only thing that was remarkable was ah, mild anemia, not even really enough to cause symptoms.

CN: Okay.

MS: Um, and at the end of the visit ah, Prince, ah, asked to use the bathroom so we collected a sample and ran a urine drug screen on it is, was positive for opiates.

CN: Okay.

MS: Ah, and nothing else, ah, drug screen of abuse. Um, I always order drug screens with confirmatory testing but that's not back yet. Confirmatory testing is where it gets...

CN: Yeah, it gets sent out....

MS: Exactly which one it is.

CN: Yup. Okay, is there anything else you can think of?

MS: Ah, not unless you had any other questions for me.

CN: No.

MS: So these are the...

CN: I think you pretty much explained everything and explained (inaudible)

MS: These were the only two times that I've had contact with Prince.

CN: Yeah.

MS: Um, and ah, I think ah, was trying to help as best I could.

CN: Yeah.

MS: You know, given the ah, information available and I totally agreed with the plan to set up, you know...

CN: Yeah.

MS: Chemical dependency um, treatment. So, I may have mentioned to ah, I had given Kirk ah, a contact at our clinic who had a confidential contact at Hazelden as well.

CN: Okay.

MS: Cause, understandably, we're trying to do this, that's hence the very early morning and after clinic hours visits, but....

CN: To keep it confidential.

MS: But I play by the rules and it's all documented in our electronic medical record.

CN: No, that's good.

MS: And, and I have not provided any other services or prescriptions or anything outside of what's been documented in the electronic record.

CN: And all the pre....

MS: Well, I take that back. When I saw him on the 7<sup>th</sup> I prescribed ah, prescriptions for Zofran which is an anti-nausea medication.

CN: Okay.

MS: And vitamin D.

CN: Well.

MS: Um, under Kirk's name.

CN: Okay.

MS: Because ah, they're not controlled.

CN: They're not controlled substances.

MS: And ah, yeah. Ah, the only thing I regret, and I'll be perfectly honest is that ah, Kirk said it would be better if I provided the Percocet prescription under his name.

CN: The Percocet.

MS: Yeah.

CN: Okay.

MS: And so, that's in our electronic medical record. I documented it.

CN: Okay.

MS: That ah, it was being provided for back pain.

CN: Okay.

MS: Um, I've known Kirk for 16 years. Ah, to the best of my recollection, that's probably the first prescription for a controlled medication I have ever issued to him.

CN: Okay. And you said that was on April 14<sup>th</sup>?

MS: Ah, I believe so.

CN: Okay.

MS: It would be in our electronic, well, it would be in our electronic record but it would not be under Prince's chart.

CN: Yup, it would be under Kirk's.

MS: Yes, so I do regret that I did that, but I don't do things like that. Actually this is probably the first time I've ever done anything like that.

CN: And how many Percocet pills was that? Do you remember?

MS: It was Percocet 5/325 ah, 15 pills.....and that was before I was aware.....

CN: Of the opiate.

MS: Of the opiate problem, which I learned about on the 18<sup>th</sup>.

CN: Sure. Okay. Well, I don't think there's anything else that I need to get from you except for I'll go get a camera. I'll just take pictures of the conversation that you had with you and Kirk.

MS: Sure.

CN: But, and no time Prince never called you or anything like that did he?

MS: Prince called me that Friday the 8<sup>th</sup>.

CN: Okay.

MS: Ah, and we had talked on my phone for about 15 minutes, on my cell phone for about 15 minutes.

CN: Okay, but you, he didn't text you or anything like that?

MS: No.

CN: Okay.

MS: I've not had a texting conversation with ah, Prince and I'm not even sure ah, I'm not even sure I have his phone number on my phone anymore.

CN: Okay.

MS: Um, you know, I, it is um, not my mission in life to be a doctor to the stars.

CN: Yeah.

MS: Um, let me see here, yeah, there's, that's the ah, phone number right there.



CN: [REDACTED]

MS: Ah, yeah, on April ah, incoming call...

CN: Yup.

MS: 1:30 so, and that was shortly after ah, Meron, who's his Personal Assistant had texting me, had texted me asking if I could speak with Prince.

CN: Okay.

MS: And in that conversation, as I mentioned before, he basically, he said the, a lot of the symptoms that he had complained about the day before had improved with the I.V. fluids. Ah, and then he had mentioned the chiropractor had come that night, but it wasn't his usual one. He was concerned about some symptoms he was having after ah, one of the adjustments.

CN: The numbness?

MS: Well, he was having symptoms. I can't recall exactly and I didn't document this conversation in our electronic record that he was having symptoms, I think, down the left leg that sounded like a nerve root that...

CN: Okay.

MS: Had been irritated by the chiropractic manipulation.

CN: Sure.

MS: So, and I just tried to reassure him that it'll probably get better. Just give it a little bit of time.

CN: Yeah.

MS: It does not mean you're out of balance.

CN: Sure. Okay, well is there anything else that you can think of?

MS: Ah, no, that's pretty much it to the best of my recollection.

CN: Okay. Is everything that you told me here today true?

MS: To the best of my knowledge.

CN: Um, have I made any threats or promises to you?

MS: No.

CN: Do you agree to sign the statement after it's typed and you've had a chance to read it?

MS: Certainly.

CN: Do you understand you can receive a copy of your statement?

MS: I do now.

CN: Okay. We will end this statement at approximately 11:30am on 4/21/16.

INADVERTENT ERRORS AND/OR OMISSIONS MAY HAVE OCCURRED DURING THE TRANSCRIBING OF THIS CONVERSATION. PLEASE REFER TO TAPE FOR PRECISE DIALOGUE.