

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON

JAMES P. CHASSE, JR.; JAMES P.)
CHASSE; LINDA GERBER; and MARK)
CHASSE, individually and in his)
capacity as Personal Representative)
of the ESTATE OF JAMES P. CHASSE,)
JR.,)

Plaintiffs,)

v.)

CHRISTOPHER HUMPHREYS; KYLE NICE;)
CITY OF PORTLAND; CITY OF PORTLAND)
JOHN DOE FIREFIGHTERS/PARAMEDICS;)
PORTLAND POLICE BUREAU and OTHER)
PORTLAND JOHN and JANE DOE)
OFFICIALS; BRET BURTON; MULTNOMAH)
COUNTY; MULTNOMAH COUNTY JOHN and)
JANE DOE DEPUTY SHERIFFS and MEDICAL)
PERSONNEL; MULTNOMAH COUNTY JOHN and)
JANE DOE SHERIFF'S OFFICE and OTHER)
OFFICIALS; TRI-COUNTY METROPOLITAN)

TRANSPORTATION DISTRICT OF OREGON;)
and AMERICAN MEDICAL RESPONSE)
NORTHWEST, INC.,)

Defendants.)

COPY

No. CV-07-0189-HU

DEPOSITION OF

JON ROBERT OLSON

Taken in behalf of Defendants

* * *

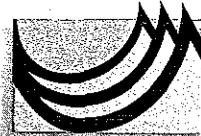
July 30, 2008

1211 S.W. Fifth, Suite 1900

Portland, Oregon

Shannon K. Krska, CSR

Court Reporter



400 Columbia, Suite 140
Vancouver, WA 98660
(360) 695-5554
Fax (360) 695-1737

Schmitt & Lehmann, Inc.
COURT REPORTERS
www.slreporting.com

121 SW Morrison St., Suite 850
Portland, OR 97204
(503) 223-4040
slinc@qwestoffice.net

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APPEARANCES:

For the Plaintiffs: MR. THOMAS M. STEENSON
Attorney at Law
815 S.W. Second, Suite 500
Portland, OR 97204

For the Defendants MR. DAVID LANDRUM
Humphreys, Nice, and Attorney at Law
City of Portland: 1221 S.W. Fourth, Suite 430
Portland, OR 97204

For the Defendants MS. SUSAN DUNAWAY
Burton and Multnomah Attorney at Law
County: 501 S.E. Hawthorne, Suite 502
Portland, OR 97214

For the Defendant MS. JEAN BACK
AMR: Attorney at Law
1211 S.W. Fifth, Suite 1900
Portland, OR 97204

Also Present: Kari Furnanz

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EXHIBITS

[None marked.]

1 PORTLAND, OREGON; WEDNESDAY, JULY 30, 2008

2 2:14 PM

3 * * *

4 JON ROBERT OLSON

5 called as a witness in behalf of the Defendants,

6 having first been sworn by the Reporter,

7 testifies as follows:

8 EXAMINATION

9 BY MR. LANDRUM:

10 Q. Mr. Olson, my name's David Landrum, and I'm
11 a deputy city attorney in the Portland Police
12 attorney's office. And in this case, which is brought
13 by Mr. Chasse's family, I represent the city and some
14 of the police officers, and then Miss Back represents
15 the ambulance company, and Miss Dunaway down there
16 represents the county.

17 A. Okay.

18 Q. And we're going to be asking you some
19 questions today about this event with Mr. Chasse. And
20 just as a reminder, that happened on September 17 of
21 2006 which was a Sunday afternoon. Is that how you
22 remember it?

23 A. Yes, I do.

24 Q. Okay. Have you ever had your deposition
25 taken before?

1 A. No, not in this setting.

2 Q. Have you ever given testimony in trial
3 before?

4 A. No.

5 Q. Okay.

6 A. I did -- I appeared in front of the grand
7 jury after this happened downtown, but it wasn't a
8 trial.

9 Q. Okay. Well, there's just a couple three
10 ground rules for taking a deposition. First thing is
11 you and I need to make an effort to let the other one
12 finish before we begin speaking and so that's so the
13 court reporter can transcribe everything that gets
14 said. Second thing is in answering questions make
15 sure you say yes or no or whatever it is you're going
16 to say in answer to the question and don't say uh-huh
17 or huh-uh or shake your head or nod your head because
18 she can't transcribe those.

19 A. Okay.

20 Q. And then -- right, very good.

21 And then the third thing is it's important
22 that you and I understand each other today, so if at
23 any time you don't understand the question that I'm
24 asking you, feel free to tell me and I'll rephrase it
25 until you've got a grip on what it is I want.

1 A. Okay.

2 Q. Oh, and one other thing. We often say I
3 don't remember that in answer to some different kinds
4 of questions, and sometimes we mean something
5 different by I don't remember that. Sometimes what we
6 mean is in my recollection of the event what you, the
7 questioner, are suggesting to me, that didn't happen,
8 I don't remember that that happened. So if you
9 mean -- if that's what you mean when you say I don't
10 remember that, say I don't remember that that happened
11 or in my recollection that didn't happen. Sometimes
12 what we mean is, well, that may have happened, it may
13 not have happened, I just can't remember whether it
14 did or not.

15 A. Okay.

16 Q. So in an instance where you say that we'll
17 say that but let's distinguish between I don't
18 remember that.

19 A. Okay.

20 Q. Okay, thanks.

21 All right. So can you tell me your full
22 name?

23 A. Jon Robert Olson.

24 Q. Okay. Have you ever gone by any other
25 names?

1 A. I have not.

2 Q. Okay. What's your date of birth?

3 A. April 4th, 1965.

4 Q. And let's see. Do you -- where do you live
5 now?

6 A. At 1327 N.E. 33rd Avenue in Portland.

7 Q. Okay. Now, as I said before, the events
8 that we're focused on happened on September the 17th,
9 2006. Is that where you lived at that time also?

10 A. Yes.

11 Q. Okay. How long have you lived there?

12 A. About 14 years. Actually more than 14.

13 Q. Are you originally from Portland?

14 A. Originally from Rapid City, South Dakota.

15 Q. How did you make it out to the northwest?

16 A. Well, I was in medical sales living in Los
17 Angeles and took over the state of Oregon and just
18 fell in love with Portland, and after the earthquake
19 in '94 I said (indicating verbally) I'm moving.

20 Q. And when you moved to Portland, did you move
21 to that house on 33rd first?

22 A. I did.

23 Q. Okay. I guess it's not so important. Where
24 did you go to high school?

25 A. Stevens High School in Rapid City.

1 Q. What year did you graduate?

2 A. 1983.

3 Q. Okay. And where did you go to college?

4 A. University of Nebraska in Lincoln.

5 Q. Did you get a degree?

6 A. I did.

7 Q. What was it?

8 A. Business administration, graduated in 1987.

9 I also spent a semester at the University of
10 Copenhagen during that time.

11 Q. I would have said Swede, but we're in a
12 deposition, I'm not supposed to do that, so --

13 All right. So -- and what do you do for a
14 living now?

15 A. I produce and host a TV show.

16 Q. Here in Portland?

17 A. M-hm.

18 Q. Which show?

19 A. PDXposed.

20 Q. Oh, no kidding. I've seen that.

21 A. Debuting on KGW. It's been on Comcast but
22 we're going on KGW next month.

23 Q. And what did you do before that?

24 A. I was in medical sales. I sold
25 defibrillators.

1 Q. Now, do you have any kind of medical
2 training?

3 A. Yeah, quite a bit actually. I was in
4 medical sales from 1989 up until three years ago full
5 time, so I've been trained to work in the operating
6 room, I've been trained to -- obviously I was CPR
7 trained several times. You have to be trained to sell
8 the equipment, to assist physicians, to assist EMS.

9 Q. Is CPR training, is that separate from
10 training to use those defibrillators? Am I saying
11 that right?

12 A. Defibrillators.

13 It used to be. And you can have it
14 separate. But now CPR training is taught with the
15 defibrillators. The AEDs make it simpler, the
16 presence. But it's even changed since I was there,
17 since I was with the company.

18 Q. And then you were saying you -- did you say
19 you were trained to work in an operating room?

20 A. Yeah. I used to sell sterile procedure
21 packs so I would assist physicians in how to use the
22 products I was selling.

23 Q. In practice, like in the moment when they're
24 working on somebody?

25 A. In the moment, yeah. You're in the sterile

1 field, you're helping them. I didn't actually perform
2 any surgeries on anybody.

3 Q. Well, right.

4 Okay. Well now, let's go to the day of
5 these actual events now. Here's what I've been asking
6 people to do. At some point you became aware that the
7 police officers were over there with a guy on the
8 sidewalk; right?

9 A. Right.

10 Q. And then some time later the guy that had
11 been on the sidewalk gets put in an ambulance and the
12 ambulance drives away; is that right?

13 A. That's right.

14 Q. And were you there when the ambulance took
15 off with him?

16 A. No.

17 Q. Okay. Well, we'll get to that in a minute.
18 So just what I want you to do is I want you to tell me
19 what happened from the time you're first aware police
20 officers are over there, and as you go along I'll
21 probably stop you and ask you some details. So just
22 start with, hey, there's some police officers there.

23 A. I walked outside of my house to go for a run
24 and turned to the left and saw a Portland Police
25 vehicle with its lights on with a body lying down on

1 the sidewalk with two police officers surrounding him
2 and started to perform CPR or they had been performing
3 CPR. One was a Portland Police officer, one was a
4 Multnomah County Sheriff. I remember green and blue.

5 Q. Okay.

6 A. So I ran over to them, I said do you guys
7 need an AED? And they said do you have one? I said
8 yes. I --

9 Q. Well, hang on just a second. When you say
10 they asked did I have one, was it both of them in
11 unison or did one of them say that to you?

12 A. It was just one, one of them that said it.
13 I'm not sure which one.

14 Q. Okay.

15 A. I think it was the Multnomah County
16 Sheriff's officer, but I don't -- I don't remember
17 exactly which one.

18 Q. Okay. So they asked you if you had one and
19 you said?

20 A. Yes, I do. And they said are you trained to
21 use it? And I said yes.

22 Q. Okay.

23 A. Told them that I've sold them. And they
24 said, well, I think it's too late, I think he's gone,
25 but why not go get it. So I ran to get it.

1 Q. How far did you have to go to get it?

2 A. I was back at the scene probably within a
3 minute and a half. Ran to my house which was right
4 there on the corner, down the stairs, grabbed it out
5 of the trunk of my car because I always had it with
6 me, and ran right back to them. It was probably a
7 minute and a half max.

8 Q. Okay. And when you got back over there to
9 them, then what happened?

10 A. They said you need to administer it, we are
11 not trained to use AEDs. I said no problem.

12 Q. Okay. And here when you're telling me when
13 I say and then what happened, you know, give me as
14 much detail as you can about how you went about using
15 this device.

16 A. So we opened his shirt 'cause you have to
17 apply the pads onto bare skin. And at this point he
18 was very gray. I -- and, you know, I thought it was
19 futile as well, but I still did it. So I applied the
20 pads properly, in the proper locations, which you're
21 supposed to do. And then I turned the machine on.
22 And the officers were standing clear at this point.
23 They were not assisting me at all. Their -- their CPR
24 duties were done at that point. So I turned the
25 machine on and it advised no shock.

1 Q. Okay. Hold on right there. Now, those
2 pads, what I was understanding you to say is there's a
3 particular spot, you don't just lay them anywhere?

4 A. Yes. There's a particular place you lay.
5 There's actually pictures on the pads where to lay
6 them. Even if you've never been trained Good
7 Samaritan laws allow anybody to use an AED.

8 Q. So you put the pads where they go and then
9 the device itself, do you have to activate more than
10 one control to make it activate?

11 A. Just one button, just one start button. It
12 fires up, it reads the rhythms.

13 Q. It reads the existing rhythms?

14 A. Yes. Or lack thereof.

15 Q. Right.

16 A. And the machine determines whether to shock
17 the patient, not the user.

18 And the machine advised no shock.

19 Q. Now, is that -- is there like a little LED
20 readout or is there just like -- you know how
21 sometimes it'll just have a couple of phrases and one
22 or the other of them lights up.

23 A. It was just a voice readout.

24 Q. Oh, it's a voice.

25 A. It's a voice that speaks back to you. It

1 was the Phillips OnSite AED.

2 Q. Okay. So let me -- let me ask you a couple
3 things about how it works. You put the -- the paddles
4 on, you press the button, the machine actually speaks.
5 Does it say -- what does it say?

6 A. Well, it'll walk you through everything. If
7 you turn the machine on and you don't have the pads
8 on, it'll say please press the pads on the patient's
9 body. It walks you right through the whole process.
10 It doesn't let you make a mistake. That's what's good
11 about that particular device. It's -- it tells you
12 exactly what to do.

13 Q. Okay. And in this particular instance, what
14 did the machine say in --

15 A. No shock advised.

16 Q. Okay. And then if it controls itself, does
17 that mean that it tells you no shock advised, but it's
18 not going to shock?

19 A. It's not going to shock. I can press the
20 shock button all day long and it won't shock anybody
21 unless they're in a shockable rhythm.

22 Q. Okay. Do you know -- does that have a
23 specific meaning to you when it says no shock advised?

24 A. Yeah. It means they're not in one of the
25 two shockable rhythms, ventricular fibrillation or --

1 typically it's V fib, ventricular fibrillation, is
2 what most people's rhythms are in.

3 Q. Does it necessarily mean that there's no
4 heartbeat at that time or could it mean that?

5 A. It could, yeah.

6 Q. Now, I don't know anything about this so
7 some of this may be very simplistic but maybe helpful
8 for the others, too, I don't know. If the person's
9 heart is not beating, it's not picking up any rhythm
10 at all, does this unit always advise not to shock or
11 does it depend on some other variables?

12 A. Well, it -- I think it depends on other
13 variables. And I would defer to the manufacturer for
14 that. There have been machines that -- that have made
15 errors. It's a machine. But this one, at the time,
16 they had zero failures in the field, not one.

17 Q. Okay. Well, I'm not --

18 A. It's not the rescue -- you know, the
19 ambulance comes up with their manual devices and they
20 do their own manual readings and all this. This is a
21 very automated device that is really foolproof. This
22 is why they're in elementary schools for anyone to
23 use.

24 Q. And I'm not really asking about the
25 reliability of the machine for purposes of what we're

1 doing here today. I'll assume the machine's reliable.
2 I'm just saying if it tells you no shock advised, it's
3 not -- you're not going to be able to make it shock
4 somebody?

5 A. Right.

6 Q. Okay, all right. So once the machine said
7 that, no shock advised, then what happened?

8 A. Fire trucks, ambulance, cop cars. It was
9 crazy. Fire truck pulled up first, and I think the
10 ambulance pulled up right when they did. And then
11 they took over and they basically just kind of whisked
12 me away from the scene and took over the call and I
13 just went back home.

14 Q. When you say they whisked me away from the
15 scene, who do you mean, officers or fire fighters
16 or --

17 A. I think one of the paramedics did. I don't
18 remember exactly how that happened. I don't remember
19 who took me away. I -- what I remember is that it was
20 an absolute swarm of cars and -- and uniformed people
21 all in a very quick period of time. I knew something
22 was very serious at that point.

23 Q. Okay. So did you -- did you like stay in
24 the yard or on your sidewalk or whatever and just
25 observe what was going on or did you just go back in

1 the house?

2 A. There were a lot of people out. I stayed
3 out for a little while kind of explaining to my
4 neighbors who were also outside what I had seen and
5 then I -- then one of the police officers or
6 somebody -- it was a gentleman came over to me and
7 said, you know, just stay close to your house, we'll
8 probably have some questions for you later. So at
9 that point I went back home.

10 Q. Did anybody from the police bureau come and
11 talk to you about those events on that same day?

12 A. Later on that night, I think it was about
13 four hours later, they came in and there were two
14 gentlemen that came into my living room. But they
15 didn't -- I don't remember them giving me specifics of
16 what happened.

17 Q. Did they ask you questions?

18 A. Yes. They just asked me what I'd seen and
19 asked me what -- what -- you know, they needed to take
20 the defibrillator, asked me how to get the data out of
21 it. So I told them to take it to the medical -- the
22 Multnomah County medical director and that he would
23 know what to do. And so they took the defibrillator
24 and that was the last I saw it for a few months.

25 Q. Tell me again, the Multnomah County -- who

1 did you tell them to take it to to get the data?

2 A. Medical director.

3 Q. Okay, thanks.

4 And was there anything about what you told
5 those officers at that time that's different than what
6 you're telling me today?

7 A. Not that I can remember. It was two years
8 ago and it was very cloudy and it was obviously a
9 highly emotional scene.

10 Q. M-hm.

11 A. I was just a little bit in shock I think so
12 I don't remember exactly how the conversations went.
13 But the content, no, I mean, I remember exactly what I
14 saw.

15 Q. Okay. Well, let's go back to the scene a
16 little bit. When you -- when you first came up to the
17 officers to say what's going on, do you need -- well,
18 let me make sure I understood. You told me that they
19 appeared to be doing CPR compressions already when you
20 came up.

21 A. Yes, they were. That's what they were doing
22 when I walked up.

23 Q. You recognized what that was already?

24 A. Yeah.

25 Q. That's what you made think they might need

1 the AED?

2 A. Yes, exactly.

3 Q. Okay. So when you spoke to the officers,
4 were they crouched down by Mr. Chasse's body?

5 A. Yes. One of them was performing the CPR
6 chest compressions and the other one I believe was
7 standing above.

8 Q. And describe for me separately what you can
9 recall about the attitude or the demeanor of the two
10 officers when you first were speaking to them.

11 A. They were very distraught. They were shaken
12 and just seemed incredibly distraught. They were
13 definitely not -- they were definitely affected by it.
14 It wasn't a -- it just wasn't a standard call. It was
15 very clear that they were very affected and upset.

16 Q. Was there anything about what they were
17 doing that you could see that gave you the impression
18 that something beyond the fact that this man on the
19 sidewalk was obviously in some kind of mortal distress
20 that didn't seem right about the scene?

21 A. Not at all. They seemed to be performing
22 CPR properly. I witnessed nothing that didn't seem
23 right with what both the officers were doing.

24 Q. Now, still thinking about when you first
25 come up and you have this initial exchange about do

1 you want the AED, tell me about your observation of
2 the man on the sidewalk.

3 Well, and let me step back for a minute and
4 establish a couple things. Had you ever seen the man
5 on the sidewalk before?

6 A. Never.

7 Q. Okay. Did you know his name at the time?

8 A. I did not.

9 Q. Okay. So describe for me just what you
10 observed about the man on the sidewalk when you were
11 first interacting with the officers.

12 A. He was very thin, very dirty looking. He
13 was -- he smelled like urine. And he -- he was -- he
14 had very baggy jeans on that he had soiled so
15 obviously he was unconscious. He was very gray. He
16 looked very lifeless. And there -- there was -- I
17 don't remember -- there were some shackles I think on
18 his feet. And I don't remember if they were both --
19 I've been trying to rack my brain on this, whether his
20 feet were still tied together or whether they undid
21 one of them, but they were -- I remember there were
22 some shackles on his feet.

23 Q. Could you see his hands? Do you remember
24 whether you could see his hands?

25 A. He was lying like just flat.

1 Q. So this seems like kind of an obvious
2 question, but if he was lying that way, then his hands
3 were no longer restrained by --

4 A. No, I do not remember his hands being
5 restrained at all.

6 Q. Did he have anything on his head?

7 A. No.

8 Q. Did he have any blood on him that you could
9 see?

10 A. I remember a little bit of dried blood on
11 his face, I think. I don't remember it exactly. I
12 didn't obviously take pictures, but I just remember
13 some like crusted -- whether it was blood or -- it was
14 dark colored but I don't remember exactly what it was,
15 though.

16 Q. Let me ask you a different way. You know,
17 when somebody's bleeding and you see blood running
18 from somebody's body at a place where it's coming out
19 at that moment, that looks different than it does if
20 it's pooled somewhere for even a period of several
21 seconds or, you know, minutes later. So did you see
22 any what appeared to be fresh blood on --

23 A. No.

24 Q. -- Mr. Chasse?

25 A. None.

1 Q. Were you near enough to the police car that
2 you noticed the inside of the police car?

3 A. I noticed the door was open. The
4 passenger -- the right passenger door was open. It
5 was still propped open and then the car was pulled
6 over like they just -- 'cause I live right off an exit
7 so they obviously pulled off the exit quickly, got him
8 out of the car and to perform CPR.

9 Q. When you say the passenger door, you mean
10 the front one or the back one?

11 A. Back one. The rear passenger door.

12 Q. Did you see inside of it or take note of
13 anything inside of the -- the car door?

14 A. I didn't.

15 Q. Okay. Now, I'm about to go on to the time
16 that you returned to the officers and Mr. Chasse after
17 you had gone to get the AED. Okay?

18 A. Okay.

19 Q. Before I do that, is there anything else
20 significant about the scene when you first interacted
21 with the officers that you recall that I haven't asked
22 you about?

23 A. No.

24 Q. Okay. So you run to the house, go to the
25 car, get the AED out of the truck, run back?

1 A. Right.

2 Q. And you told us that took about 90 seconds?

3 A. Roughly.

4 Q. Okay. When you came back to them, you knelt
5 down -- as I understood it, you knelt down by
6 Mr. Chasse and the officer sort of stepped back to
7 give you some room?

8 A. Yes.

9 Q. Did you actually pull his shirt open or was
10 his shirt already open?

11 A. I think his shirt was already open.

12 Q. Okay. And you were showing us with your
13 hands a while ago about where the paddles go and it
14 looked to me like -- I may be getting this backwards,
15 but it looked to me like one goes sort of above sort
16 of the top part of your pectoral muscle on the right?

17 A. M-hm.

18 Q. And then the other one goes --

19 A. Right down here.

20 Q. -- farther down your side on the left?

21 A. Right.

22 Q. Okay. Did you have to -- 'cause I've never
23 seen or -- well, I've seen one, but I've not ever seen
24 one taken down to be used. I've seen one of these
25 AEDs hanging in its little station.

1 A. Sure.

2 Q. So when you take those paddles out, are they
3 hard or are they something soft that --

4 A. It's a gel.

5 Q. -- adheres to the person?

6 A. They're soft, they're flimsy, and then
7 there's a gel which is what adheres to the patient.

8 Q. So did you have to pull those out, apply
9 some kind of gel to them, and then apply them to
10 Mr. Chasse's body?

11 A. They're ready to go. You just open the
12 package, pull them out, you peel something off,
13 whatever they're peeled to, and they're ready to go.

14 Q. Okay. And then you applied the two soft
15 paddles to Mr. Chasse's chest?

16 A. I did.

17 Q. Okay. So you could feel of his chest when
18 you did that?

19 A. I did.

20 Q. Did you feel anything, when you pressed
21 those to his chest, that was -- that you took note of?

22 A. Well, it felt like he had -- I mean, his
23 chest was kind of caved in.

24 Q. Okay. Just then you were pointing with your
25 fingertips towards your sternum.

1 A. Yeah.

2 Q. Is that the location you were talking about?

3 A. I mean, when I pressed the pad here he just
4 felt very -- he felt like he had a couple broken ribs,
5 which is very normal for CPR.

6 Q. And this would be on the -- on the front of
7 his chest?

8 A. Front.

9 Q. Okay. And did you have any occasion to
10 touch him -- touch his rib cage or his body besides
11 the front part of his chest?

12 A. I did not.

13 Q. Okay. And while you were near enough to
14 hear it, did you hear Mr. Chasse make any kind of
15 sounds?

16 A. I didn't.

17 Q. You know how to, just by observation, tell
18 if somebody's breathing or not breathing?

19 A. Yes.

20 Q. Okay. Could you tell whether or not he was
21 breathing when you were doing that?

22 A. He was definitely not breathing.

23 Q. Let me ask you something about CPR. What do
24 the letters CPR stand for?

25 A. Cardiopulmonary resuscitation.

1 Q. In your experience with the CPR training
2 that you've taken, if a person is breathing, does that
3 tell you something about whether or not CPR is
4 necessary?

5 A. Yeah. If they're breathing you don't. You
6 just monitor their breath. Call 9-1-1 and wait for
7 the ambulance to show up and take over.

8 Q. And during the time that you were standing
9 there, the time -- I'll give you a time frame. From
10 the time you come back up with the AED on your person
11 to the time that somebody walks you away from the
12 scene, did you ever see Mr. Chasse make any kind of
13 movement?

14 A. None.

15 Q. And did you ever see him appear to be
16 breathing?

17 A. No, I did not.

18 Q. Did you ever hear him make any kind of
19 sounds?

20 A. No, I didn't.

21 Q. Okay. Now, remember I was asking you before
22 about when you -- when you first interacted with the
23 officers I was asking for you to describe their
24 demeanor to me. And now I want -- I want you to think
25 about when you first returned with the AED, I want you

1 to describe for me the demeanor of the officers at
2 that time.

3 A. The same. They -- they were still equally
4 upset. They kind of seemed frustrated that there was
5 really -- seemed like they were just -- there was
6 nothing they could do to help. And they were still
7 very visibly upset. They were shaken.

8 Q. Other than the police officers who came to
9 your house several hours later, did you have any other
10 interaction with any police officers at the scene
11 besides the two that you initially interacted with?

12 A. Yeah. The guy who I -- I don't remember if
13 he was plain clothes, I don't think he was, but he was
14 definitely in charge of the scene. He came over to me
15 and he's the one who said, you know, stay close to
16 your house, we'll -- and we'll come -- we'll be coming
17 back to talk to you and ask you some questions.

18 Q. And was that the extent of that
19 conversation?

20 A. Pretty much, yes, as far as I remember it.

21 Q. Okay.

22 A. We didn't go in depth. There was a lot
23 going on right there.

24 Q. Were you able to see -- well, let me ask you
25 this way: You saw the ambulance arrive; is that

1 right?

2 A. Yes.

3 Q. And you saw the ambulance people get out of
4 the ambulance?

5 A. Yes.

6 Q. Okay. I want you to describe for me what
7 you saw the ambulance people do while you were able to
8 see them. And, you know, if some detail involves
9 telling me what somebody who wasn't an ambulance
10 person was doing you can tell me that, too, but what
11 I'm focused on is what did you see the ambulance
12 people do.

13 A. I saw them swarm him and that was it. I did
14 not see what they did. I didn't see if they intubated
15 him. I didn't see anything that they did to
16 Mr. Chasse. I just remember them pulling up, grabbing
17 their gear, swarming him, and then that was it. That
18 was all I remember.

19 Q. Okay. Well, I am very nearly done with my
20 questions. The other attorneys may have questions for
21 you. Is there anything significant about this event
22 that you want to tell me that I have not asked you
23 about?

24 A. No. I think we've covered it.

25 Q. All right. Then I'll stop there. Thank

1 you, Mr. Olson. The others may have questions for
2 you, too.

3 A. Sure.

4 EXAMINATION

5 BY MS. DUNAWAY:

6 Q. Mr. Olson, I'm Susan Dunaway, and I
7 represent Multnomah County.

8 A. Hi, Susan.

9 Q. Have you ever done CPR in a -- in a --

10 A. In a real-life situation?

11 Q. A real-life situation.

12 A. No. Just in classes.

13 Q. In classes. In classes when they are
14 teaching you CPR, do they teach you about -- how does
15 this work? What are you doing and what's the result
16 supposed to be? Do they teach you about those kinds
17 of things?

18 A. Sure.

19 Q. So when -- after you do CPR, what's -- what
20 is the hopeful result?

21 A. That a person will start breathing again.

22 Q. And what about the heart, does it have
23 anything to do with something --

24 A. Yeah. You're trying to get enough
25 compression, enough pressure down on the rib cage to

1 get the heart pumping again. You're trying to smack
2 the heart back into shape which is what the shock
3 does. And if the heart starts beating again, it --
4 it's all about oxygen, oxygen to the brain.

5 Q. Okay.

6 A. So you're trying to really pump the heart.
7 You're trying to give it a smack.

8 Q. So you're hitting -- basically you're
9 hitting the heart through the sternum --

10 A. Pretty much.

11 Q. -- basically, is that it?

12 A. Yeah.

13 Q. So how much force are you trained to use in
14 terms of your body to be able to get that heart
15 working again?

16 A. Enough where you can feel the rib cage go
17 down. They -- a lot -- most every trained CPR
18 professional will tell you that you're going -- if
19 you're going to do CPR properly and you're going to
20 get enough force on it, you're going to break a rib.
21 It's very common knowledge.

22 Q. So if you undertake that, one of the things
23 you should expect is that you're going to break ribs?

24 A. Probably --

25 Q. Okay.

1 A. -- yeah.

2 If you don't, you're probably not getting
3 enough pressure.

4 Q. Okay. So you would be not an effective
5 giver of CPR if basically you're not using enough
6 force that there's a good potential that you're going
7 to break ribs --

8 A. Right.

9 Q. -- would be right?

10 A. Yeah.

11 Q. Where on Mr. Chasse's chest exactly did you
12 feel where you thought you might have felt a broken
13 rib?

14 A. Right in here, like right just in the
15 center.

16 Q. In the center. So --

17 A. Which is really where you --

18 Q. Just below his sternum?

19 A. Yeah, pretty much. Just right in here.

20 Q. Was there anyplace else on his chest where
21 you touched?

22 A. No.

23 Q. Just the sternum?

24 A. Just the sternum, because I was applying the
25 pad here. That's when I felt -- just kind of felt

1 gelly-ish right in there when I put the pad on there.

2 Q. All right.

3 A. Because I had to put the pad on and make
4 sure it stuck, so, you know, I put a little pressure
5 on to make sure the pad was adhering to his body.

6 Q. And where is the second pad put?

7 A. Right here.

8 Q. Did you feel anything there?

9 A. No. I just remember feeling it right in
10 here.

11 Q. Okay. You didn't feel like when you
12 touched -- that would be his left side?

13 A. Yeah. I didn't feel anything abnormal
14 there.

15 Q. Okay. Did you observe -- besides thinking
16 that there might be a broken rib, did you observe any
17 other injuries on his chest?

18 A. No, not that remember, hm-m.

19 Q. Any contusions, abrasions?

20 A. I don't remember specifically any abrasions
21 or contusions. I do remember some dried blood I think
22 on his face, like I said. And he just was -- he was
23 just very dirty. He just was very, very dirty, like
24 he hadn't showered in days. You can -- that was --
25 and there was lots of smells coming from him. It was

1 just -- he was just very dirty.

2 Q. Uh-huh.

3 A. Seemed very homeless-like to me.

4 Q. Right.

5 And what company were you working for at
6 that time?

7 A. I was working for myself at that time. I
8 had worked for Phillips and that was why I had the
9 Phillips AED. When I left the company I -- I had
10 my -- I kept my sample and I've just always kept it in
11 my trunk because I would hate to pull up to somebody
12 in sudden cardiac arrest and not have it.

13 Q. Okay. So you were an independent
14 salesperson?

15 A. Yeah. But I was doing the show.

16 Q. Oh.

17 A. I was working for the -- for my production
18 company. Still doing some independent sales on the
19 side, which I still do. I have a couple customers in
20 Alaska.

21 Q. I think you mentioned that in order for the
22 AED to work that someone must be in a shockable
23 rhythm?

24 A. Yes.

25 Q. Okay. And then what are the shockable

1 rhythms?

2 A. Ventricular fibrillation and ventricular
3 tachycardia.

4 MR. LANDRUM: Hold on a second.

5 (Discussion off the record.)

6 Q. (By Ms. Dunaway) And then I think if I heard
7 you right, that just because there's no shockable
8 rhythm, that doesn't necessarily mean that there's no
9 heartbeat at all, it just means that there's not a
10 shockable rhythm --

11 A. Right.

12 Q. -- is that right?

13 A. Right.

14 Q. Could you describe for me exactly, because
15 I'm not getting a good picture in my mind, exactly
16 what the police officer was doing when you arrived at
17 the scene and he was doing CPR?

18 A. He was doing chest -- he was bent over, over
19 Mr. Chasse, and performing chest compressions.

20 Q. Okay. So was he on his knees?

21 A. Yes.

22 Q. And was he leaned up over Mr. Chasse?

23 A. Yes. Just over his chest, he was like this.

24 Q. Okay.

25 A. He was down on the ground leaned up with his

1 hands performing CPR.

2 Q. And his hands were in the proper position
3 for performing CPR?

4 A. Seemed to be to me, yes.

5 Q. Do you know what a flail chest is?

6 A. A flail chest?

7 Q. Flail.

8 A. I don't.

9 Q. Okay. Besides the injuries that you've
10 already told us about, are there any other injuries
11 that you can think of that you observed on Mr. Chasse?

12 A. No.

13 Q. That's all I have.

14 EXAMINATION

15 BY MS. BACK:

16 Q. I just have a couple of questions for you.

17 A. Sure.

18 Q. I'm Jean Back, I represent AMR, the
19 ambulance company that was there.

20 Did you, when you had your hands on his
21 chest, did his skin have any sort of feeling to you at
22 all?

23 A. Cold.

24 Q. Any sort of -- any other kind of a feeling?

25 A. No.

1 Q. Okay. When you -- you testified -- his
2 chest -- his shirt was already open?

3 A. I believe it was.

4 Q. Okay.

5 A. I don't recall if they opened it and if it
6 was buttons or if it was ripped, but when I got back
7 his chest was bare and just put the pads on.

8 Q. Okay. And when -- when you put the pads on
9 and you looked at his chest, did one side of his chest
10 look different than the other?

11 A. He was just really caved in up here.

12 Q. Okay.

13 A. But it seemed more like in the middle. I
14 don't remember one side looking different than the
15 other.

16 Q. Okay. And then you testified that as soon
17 as the ambulance folks got there they kind of whisked
18 you away?

19 A. Yeah.

20 Q. And so did you observe the ambulance
21 paramedics attending to him at that time?

22 A. I observed them attending to him. They
23 swarmed in and then that was the last I remember. I
24 don't remember -- I don't -- I didn't see what they
25 did. I didn't see anything that they did. I just

1 remember they swarmed him and at that point, you know,
2 the fire fighters are away, the police officers are
3 away, and they let the paramedics do their thing,
4 so --

5 Q. How long did it appear that the paramedics
6 worked on him at the scene before -- did you see the
7 ambulance leave?

8 A. I didn't.

9 Q. I don't have any other questions.

10 EXAMINATION

11 BY MR. STEENSON:

12 Q. We met in the hallway. I'm Tom Steenson.

13 A. Hi, Tom.

14 Q. I represent the family of James Chasse. I
15 have some questions for you.

16 Do you have any police training background,
17 anything like that?

18 A. Do I have any police training?

19 Q. (Nods head.)

20 A. No.

21 Q. I don't quite understand what your medical
22 training is.

23 A. When you go through -- when you sell
24 equipment or you sell medical products they train you
25 in depth to learn how to use it so you can speak

1 intelligently to ambulance personnel, to fire, EMS,
2 depending on what you're selling. So I've had -- I've
3 sold everything from electrophysiology labs to arm
4 splints to defibrillators, so you have to learn the
5 anatomy and you also have to learn the equipment to be
6 able to speak intelligently about your product. So
7 there's quite a bit of training involved.

8 Q. Do you have any certifications like to be an
9 EMT or a paramedic, anything like that?

10 A. I was certified in CPR.

11 Q. Okay. Nothing beyond that?

12 A. No.

13 Q. And you're not sure whether Mr. Chasse's
14 shirt was open when you first walked up to the
15 officers or when you came back with the AED?

16 A. Yeah, I don't remember that actually.

17 Q. Okay. And you didn't hear a siren, a police
18 siren, at any time that night?

19 A. Not before I walked out of the -- of my
20 house, no.

21 Q. Okay. And there wasn't anything that was
22 going on outside that brought your attention to the
23 police car, it was simply you going outside to start
24 your run?

25 A. Yes.

1 Q. Okay.

2 A. And then the lights were going, but there
3 was no siren.

4 Q. And you don't know how long the police car
5 had been outside there parked before you got out
6 there?

7 A. I do not.

8 Q. Did you learn anything that night from any
9 police officer about any history of what may have
10 happened that night between Mr. Chasse and the police?

11 A. I learned I think from the news that
12 night --

13 Q. Putting aside the night. That night, from
14 the police officers, did you learn anything, either
15 from the two officers who were first present or from
16 any of the officers who showed up later, including the
17 detective who talked to you about what had happened
18 that night?

19 A. I don't recall specifically how I learned
20 it, but I knew by the time the officers came in that
21 the call had been going on before that, that that
22 was -- that this was something that had been going on
23 throughout the afternoon.

24 Q. Okay.

25 A. But they didn't give me any specifics.

1 Q. All right. And that would have been before
2 you'd seen the news, it wouldn't have been on the news
3 by then, would it?

4 A. Well, they came in about 10:15.

5 Q. All right.

6 A. And I had -- there were news cameras there
7 like where the scene was going on, so naturally I knew
8 that something else was going on, it wasn't just about
9 a guy passing out or going into sudden cardiac arrest
10 in the back of a cop car. It was very clear there was
11 a lot more to the story.

12 Q. In your CPR training, were you trained on
13 how to conduct, for example, a physical hands-on
14 assessment of someone who might have injuries?

15 A. Yes.

16 Q. And did you do that that night with
17 Mr. Chasse?

18 A. I did not, because I went and grabbed the
19 AED.

20 Q. Sure.

21 And you didn't see the police officers do
22 that?

23 A. I saw the police officers perform CPR.

24 Q. But they didn't do a physical hands-on
25 assessment?

1 A. I didn't see them do one.

2 Q. And you didn't see that happen?

3 I mean, you didn't do that yourself?

4 A. I did not. He was clearly gray and lifeless
5 when I got to him.

6 Q. There's a -- a medically-trained witness who
7 describes Mr. Chasse as looking beaten up.

8 MS. BACK: Objection, misstates the
9 evidence.

10 Q. (By Mr. Steenson) And did you see anything
11 indicating to you that looked like Mr. Chasse had been
12 beaten up?

13 A. No. Like I said, I saw -- I saw some dried
14 blood on his face, but that was all I'd seen.

15 Q. Were you doing anything that night in terms
16 of looking for contusions or bruising or broken bones?

17 A. No. I was just focused on getting the AED
18 on him and helping if I could.

19 Q. Sure, okay.

20 I take it from what you've described, there
21 wasn't any gasp for air or anything like that from
22 Mr. Chasse 'cause you didn't hear anything at all from
23 him?

24 A. Nothing.

25 Q. Okay. So when you first left your home and

1 looked over and saw the lights of the police car on,
2 what was it you saw in terms of the people over there?

3 A. I saw a body lying on the sidewalk, I saw an
4 officer over him performing CPR, another officer
5 standing.

6 Q. So how far away were you when you first saw
7 that?

8 A. Probably a couple hundred feet.

9 Q. Okay. And which direction or how was
10 Mr. Chasse lying on the sidewalk?

11 A. He was lying pretty much straight in the
12 sidewalk. So there was no -- I don't think he was
13 lying at much of an angle. It's like they just pulled
14 him out of the cop car and placed him straight on the
15 walk.

16 Q. So more or less parallel to the sidewalk and
17 parallel to the police car?

18 A. More perpendicular to the sidewalk.

19 Q. Okay.

20 A. Since the sidewalk was like -- this is the
21 sidewalk going this direction, he was lying like this.

22 Q. Okay. So what you've described is he was
23 lying sort of across the sidewalk --

24 A. Yeah.

25 Q. -- as opposed to lengthwise on the sidewalk?

1 A. Yeah, yes.

2 Q. And where was his head positioned in terms
3 of the police car, nearest the car or away from the
4 car?

5 A. Away from the car.

6 Q. Okay.

7 A. It was -- it looked to me like they pulled
8 him out of the car and put him down on the sidewalk.

9 Q. Okay.

10 A. That's what it looked to me with the door
11 open. All I saw was the rear passenger door open so
12 it was like they pulled him out.

13 Q. Did the officers tell you that night they
14 had looked for some kind of a mask to use to provide
15 mouth-to-mouth resuscitation?

16 A. No.

17 Q. Did you see the officers providing any
18 mouth-to-mouth resuscitation?

19 A. I did not.

20 Q. I think there's been some changes in CPR
21 training over the years about using or not using
22 mouth-to-mouth resuscitation. Is that correct?

23 A. Yes.

24 Q. Have you received training that was
25 different at some point in time?

1 A. My training involved doing mouth to mouth --

2 Q. Okay.

3 A. -- with a mask, though.

4 Q. Okay.

5 A. And now they're -- I believe the training is
6 that there is no mouth to mouth. It's all chest
7 compression.

8 Q. So at least as of the night that we're
9 talking about, had the training you received involved
10 also mouth-to-mouth resuscitation using the mask?

11 A. Yes.

12 Q. Okay.

13 A. But I knew that -- but I knew that the new
14 training was that the mouth to mouth was not part of
15 the protocol.

16 Q. Sure.

17 And you didn't learn that night that the
18 officers didn't have a mask that they would have used
19 for mouth-to-mouth resuscitation?

20 A. I didn't.

21 Q. And you didn't learn anything about whether
22 Mr. Chasse had been in any type of distress of any
23 sort prior to when you observed him on the sidewalk?

24 A. No, I did not.

25 Q. Was there anything about your training in

1 CPR that gave you some reason to believe how long he'd
2 been in that condition where you described him being
3 gray and cold?

4 A. Yeah, I -- I basically -- you know, I heard
5 the officers -- when I ran up and saw him, like they
6 said, you know, I don't think -- this is probably a
7 futile attempt, but if you've got one go ahead and get
8 it. And I kind of felt the same way, it's like, well,
9 it's probably not going to do any good 'cause he's
10 gone, but I'll go get the AED anyway.

11 Q. So when officer said he thought it was a
12 futile attempt --

13 A. I don't remember which one said it.

14 Q. Was it the one that you've described
15 performing the CPR?

16 A. No. I think it was the other one.

17 Q. The one that was standing?

18 A. The one that was standing said, you know, go
19 get it, it's probably too late, but go get it.

20 Q. Anything else those officers said about
21 that?

22 A. No. Just that they weren't trained to use
23 it.

24 Q. The AED?

25 A. The AED.

1 They said you have to do it, we're not
2 trained in that.

3 Q. How much compressions did you see applied to
4 Mr. Chasse?

5 A. I don't remember how many compressions. I
6 just remember he was doing several, but I didn't
7 count. I ran up, had a very quick dialogue, ran to my
8 house, by the time I got back I put the AED on. It
9 all happened very quickly.

10 Q. Okay. So if I understand, you don't know
11 whether they were applying compressions before you
12 looked out and saw compressions being applied;
13 correct?

14 A. I -- no. When I looked out I saw -- the
15 first thing I saw was compressions being applied. I
16 have no idea how long it was going on.

17 Q. And do you know whether they applied or
18 continued to apply any compressions during that minute
19 and a half or so you were gone getting the AED?

20 A. I do not.

21 Q. Okay. Do you know anything about when the
22 officers may have called for medical -- medical help
23 that night?

24 A. I don't know when they called for it, but
25 it -- it came pretty darn quickly.

1 Q. About how long after you first saw the
2 lights flashing do you think it was before the
3 ambulance people were there?

4 A. Probably about three and a half minutes.

5 Q. Is there a hospital right there off that
6 exit?

7 A. Providence is close, but it's not off the
8 exit. It's off 39th, but Providence is close.

9 Q. I can't remember. How many blocks off the
10 freeway then is it on 39th?

11 A. On 33rd?

12 Q. 39th.

13 A. The hospital?

14 Q. Yeah.

15 A. The hospital's up at 47th.

16 Q. Okay, that's the one up there.

17 Getting back to your training on CPR and how
18 to use the AED, I take it in that training process you
19 never encountered anyone with broken ribs or broken
20 bones 'cause it was always in a training session?

21 A. No. You use dummies and they're pretty much
22 already concave. There's no real ribs, but they teach
23 you this is what you need to feel on the chest.

24 Q. Sure.

25 So you, in your training, didn't have

1 experience applying compressions in the manner you've
2 told the other lawyers about today?

3 A. No. Just in the training classes.

4 Q. Okay. To a dummy but not to a live person?

5 A. No.

6 Q. All right. And if I understood correctly,
7 if I listened correctly and heard you, you've never
8 personally applied compressions to someone in
9 distress?

10 A. No, I have not.

11 Q. Likewise, have you never then given mouth-
12 to-mouth resuscitation to anyone in distress?

13 A. I have not.

14 Q. And have you ever applied an AED to anyone
15 other than your attempt that night?

16 A. I have not.

17 Q. So have you ever felt someone's body for the
18 purpose of providing actual live medical care,
19 attention, it can include compressions, resuscitation,
20 anything like that? Have you ever done that before?

21 A. No.

22 Q. Just for the record, how big are these pads
23 that are applied with the AED?

24 A. They're about a third of the size of this,
25 about like that.

1 Q. So roughly three or four inches by three or
2 four inches?

3 A. Oh, bigger than that.

4 Q. Bigger?

5 A. Yeah.

6 Q. Okay.

7 A. They're probably about four inches by six
8 inches.

9 Q. All right. And did you learn that night
10 from anyone anything about any force that had been
11 used, any physical force, that had been used on
12 Mr. Chasse? Again, putting aside what you may have
13 heard later on the news.

14 A. Right. I don't remember how I had heard
15 about -- I don't remember exactly how it came about
16 that the events that happened, how it started. And in
17 the streets in the Pearl District I think is where it
18 all started and there was force used and people
19 witnessed it. I -- I remember hearing about it on the
20 news and reading about it and I don't remember how it
21 got -- I don't remember if I saw it on the news or --
22 I know the cops didn't tell me specifically what
23 happened. But I knew that had gone on throughout the
24 day and then of course the news jumped on it and --

25 Q. Just so I'm clear, did you overhear, though,

1 any of the officers that night talking about what had
2 happened previously to Mr. Chasse?

3 A. No.

4 Q. Okay. Who do you sell the AED to when
5 you're doing that? To private parties or public
6 bodies or --

7 A. Well, right now my only customer is a bank,
8 it's a credit union up in Alaska.

9 Q. And when you were more active in your
10 business, who did you sell to?

11 A. Sold to EMS, sold to fire fighters, I sold
12 to school districts, to government buildings, to law
13 firms, to dentists, everybody.

14 Q. So did you actually have experience selling
15 to AMR; for example?

16 A. Sure.

17 Q. And how about to the city or the county,
18 were you involved in selling to them?

19 A. I was.

20 Q. Okay. That's all I have. Thank you.

21 FURTHER EXAMINATION

22 BY MS. DUNAWAY:

23 Q. When you were receiving CPR training, what
24 kind of training did you receive generally in regard
25 to using a mask during mouth to mouth?

1 A. Well, there's different types of masks,
2 so -- it was just about, you know, applying a mask to
3 the mouth and performing -- it was -- at the time it
4 was -- I think it was 15 chest compressions and five
5 breaths. I don't remember exactly what the protocol
6 was at the time. It was less on the breathing 'cause
7 the protocols were coming down from American Heart
8 Association it was more about the chest compressions.
9 But most importantly it was getting the AED. It was
10 less about CPR, more about getting the AED. Because
11 CPRs saves five percent of the people. It's kind of
12 ineffective.

13 Q. And what's the percentage on AEDs?

14 A. Depends. In casino studies it's upwards of
15 80 percent. Airplanes and casinos is the highest
16 because it's -- they're on you quickly. It's all
17 about how quickly you can get the AED on the person.

18 Q. Well, were you taught anything in terms of
19 when to use a barrier mask and when it's appropriate
20 to do mouth to mouth without using a mask?

21 A. No. I mean, it was -- it's a judgment call
22 by the rescuer the way -- the way we were taught.
23 Obviously if you didn't have a mask -- the whole
24 breathing thing -- I think we were going through all
25 this with American Heart Association and Red Cross as

1 well, it was real controversial because, you know, the
2 hepatitis and the different diseases that you can
3 contract giving mouth to mouth without a mask. So it
4 was -- I just remember it being -- the breathing part
5 of it wasn't as big a deal as the chest compression
6 and getting the AED. We didn't -- we didn't go into
7 in-depth discussions about the masks and the different
8 options to be used. It was kind of in the middle of
9 that gray area where should we be doing breathing,
10 should we not be doing rescue breathing.

11 Q. Because the actual CPR part is much more
12 important than the mouth to mouth?

13 A. The chest compression they found were.

14 Q. Yes.

15 A. Which there was some new technology coming
16 out that actually just thumped the chest which I think
17 is still out. It was really all about the AED.

18 Q. Okay. One last thing. This was an exhibit
19 that was prepared by the witness right before you.

20 (Discussion off the record.)

21 Q. (By Ms. Dunaway) And he represented that
22 this is the cul-de-sac --

23 A. Correct.

24 Q. -- right?

25 This is Clackamas?

1 A. Yep.

2 Q. 33rd, your house?

3 A. Yep, correct.

4 Q. His house, he said he lived -- was living
5 over here at the time. That this is about where the
6 car was, the police car?

7 A. That's right, yeah.

8 Q. And then he represented that Mr. Chasse was
9 perpendicular --

10 A. I don't --

11 Q. -- to the car?

12 A. I don't think so. I think he was more that
13 way.

14 Q. I mean that he was paralegal.

15 You're saw he was perpendicular?

16 A. I'm saying he was perpendicular. He was
17 definitely perpendicular.

18 Q. This doesn't look right then, his --

19 A. No.

20 Q. -- head up here, feet down here?

21 A. No. Head was up here, feet towards the car.

22 Q. Okay, thanks.

23 A. That I'm positive of.

24 But this is an accurate drawing definitely.

25 Q. It's pretty good?

1 A. Yeah.

2 Q. Yeah.

3 FURTHER EXAMINATION

4 BY MR. STEENSON:

5 Q. (By Mr. Steenson) I have one other
6 follow-up.

7 Did you say PDA or PDXposed?

8 A. It's PDXposed.

9 Q. PDXposed, got it.

10 A. Right there.

11 Q. And what's the show about?

12 A. It's an arts, entertainment, and travel
13 show.

14 Q. Okay. That's all. Thanks.

15 A. Sure.

16 FURTHER EXAMINATION

17 BY MS. BACK:

18 Q. I have one more question.

19 The fact that you may have sold an AED to
20 AMR or the county, that wouldn't affect the answers
21 that you've given here today and --

22 A. None.

23 Q. -- the fact that you're giving honest
24 testimony and that you're under oath?

25 A. Yes, it would not affect anything.

1 Q. Thank you.

2 MR. LANDRUM: Now we're really done.

3 (The deposition concluded at 3:13 PM.)

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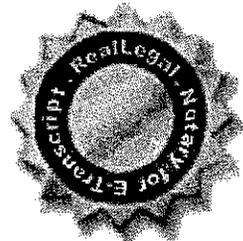
C E R T I F I C A T E

STATE OF WASHINGTON)
) ss.
COUNTY OF CLARK)

I, Shannon K. Krska, a Certified Shorthand Reporter for Oregon, do hereby certify that, pursuant to stipulation of counsel for the respective parties hereinbefore set forth, JON ROBERT OLSON personally appeared before me at the time and place set forth in the caption hereof; that at said time and place I reported in Stenotype all testimony adduced and other oral proceedings had in the foregoing matter; that thereafter my notes were reduced to typewriting under my direction; and that the foregoing transcript, pages 3 to 54, both inclusive, constitutes a full, true and accurate record of all such testimony adduced and oral proceedings had, and of the whole thereof.

Witness my hand and CSR stamp at Vancouver, Washington, this 11th day of August, 2008.

Shannon K. Krska



Shannon K. Krska
Certified Shorthand Reporter
Oregon CSR No. 90-0216