

Small Group Session

Séance en petit groupe

Commissioners / Commissaires

The Honourable / L'honorable J. Michael MacDonald,
Chair / Président

Leanne J. Fitch (Ret. Police Chief, M.O.M)

Dr. Kim Stanton

Audio file(s): 20220919_SGS_Fisher_AUD_MP3

Held at:

Best Western Truro - Glengarry
150 Willow Street
Truro, Nova Scotia
B2N 4Z6

Monday, September 19, 2022

Tenue à:

Best Western Truro - Glengarry
150 Willow Street
Truro, Nouvelle-Écosse
B2N 4Z6

Lundi, le 19 septembre 2022

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II Appearances / Comparutions

Ms. Carole Fisher	
Mr. Adam Fisher	
Ms. Grace MacCormick	Participant's Counsel
Mr. Leo Artalejo	Facilitator
Ms. Emily Hill	Commission counsel
Dr. Kim Stanton	Commissioner
J. Michael MacDonald	Commissioner
Leanne Fitch	Commissioner

III

Table of Content / Table des matières

	PAGE
Small Group Session with Ms. Carole Fisher and Adam Fisher	1

Truro, Nova Scotia

--- Upon commencing on Monday, September 19, 2022 at 4:00 p.m.

MR. LEO ARTALEJO: Thank you both for being here. As I mentioned we are recording the audio of this small group session for families. It will be transcribed into English and French [sic] and will be a public document on the Commission website. So, I just wanted you to know that that is under way. We thank you for being here. We know as survivors of the mass casualty that you have a very unique perspective and we are really hoping to hear from you and learn from you today to make sure that the recommendations coming out of this Commission are meaningful and effective for Canadians in the future.

My role as a facilitator is to support each of you in the conversation today and that means I will help with the flow of conversation. I will keep track of time and I may ask a follow-up question or two if that would help with the Commission's understanding.

Some of the topics that we are hoping to hear from you about today is, your experiences during the mass casualty particularly on how you were accessing information. What were the supports and services that were most helpful to you during and immediately after the mass casualty and then really, you know, what was missing that could have helped you.

Particularly because you have a special perspective as survivors and we want to make sure that the recommendations coming out of the Commission will be helpful to Canadians involved in these kind of tragedies in the future. So, there are three rounds of questions that will --- that we will use. They are open ended and I want you to feel free to speak as little or as much as you want on each. You will be listened to respectfully as you speak.

And if you lose track of the question or how long we have spent on the question I am happy to jump in and help. If you need a break at any point, please let us know. We are happy to take a break and recess the Commission staff and give

1 you time. This room is really for you. So, just let me know if you need a break at any
2 point, okay. And again, thank you for being here.

3 So, round one, the question is, what do you want to tell us about
4 your experience seeking information and getting support during and immediately after
5 the mass casualty?

6 **MS. CAROLE FISHER:** Go.

7 **MR. ADAM FISHER:** Go ahead.

8 **MS. CAROLE FISHER:** During and after the mass casualty, for
9 supports, being a survivor, there was very little support actually directly allowed for us in
10 some cases. It was the first time that I had --- was offered support was when I met you
11 in March and you had your support staff here. And it wasn't until December of 2021 that
12 I was actually able to receive some help. So, I have been connected with someone on
13 a virtual basis only for mental health support.

14 During the mass casualty when things were shared about what
15 happened on our property at the end of March, I had expressed quite a bit of concern of
16 the after effects of the decisions that the Mass Casualty was wanting to share to the
17 public. I expressed that directly to each of you and I was suggested and recommended
18 I believe by Ms. Hill to reach out to the support staff.

19 And I did receive a call from Mary that evening at about 9 o'clock
20 the night before things were publicly released and my biggest concern was what does
21 the Mass Casualty have for supports in place after this is publicly released for a
22 survivor. How do I handle the outcome that was decided? And how do I move forward
23 with that decision? What supports and help is there out there for me and my husband?

24 And she said that there wasn't anything line, written out or --- they
25 never really looked at it that way, I guess, of the decisions that you made by publicly
26 sharing more about us and exposing our property directly. Because of the decisions
27 that you made, I had to leave my home for three days and I didn't feel safe in my home
28 again because it allowed more people to know directly where we lived.

1 **MR. ADAM FISHER:** We asked the RCMP to respect our privacy
2 and not release that tape --- those tapes and they did exactly what we asked but the
3 Mass Casualty ignored all that in our request and did whatever the hell they wanted. So
4 ---

5 **MS. CAROLE FISHER:** The outcome of that is exactly what I knew
6 would happen. The general public wants to be their own private investigators. They
7 want to share everything publicly and that is exactly what they did. So, there was a lot
8 of re-enactment those next few days and the next weeks after things were released and
9 I wasn't able to feel safe in my home. I received phone calls. I received disturbing
10 emails and I watched people be down in front of our home on a regular basis.

11 **MR. ADAM FISHER:** Well, also people just driving up in our yard
12 for no reason and stopping and turning. That was because --- probably because there
13 is no trespassing sign on our driveway that was released when that video was released.
14 Why anybody felt that it was fine to pass a no trespassing sign and go show people ---

15 **MS. CAROLE FISHER:** Our property.

16 **MR. ADAM FISHER:** --- our property, our private area is beyond
17 me. Why? So, how you would --- why that would be released on national television in
18 an area that had a no trespassing --- beyond a no trespassing sign.

19 **MS. CAROLE FISHER:** So, yeah, during, after being a survivor of
20 this, it has been very difficult. It has been a very alone feeling. We have been as
21 supportive as we possibly can to the families. Adam and I directly lost eight friends and
22 family members in the mass casualty and we were directly targeted as a victim as well
23 from the shooter. And when that happened, he took a lot from a us. He took being able
24 to be in my home and feeling safe. It is where I work and ---

25 **MR. ADAM FISHER:** We have a unique situation in that its our ---
26 our home is our place of business so it is, you know, a unique situation. It is not some
27 place you escape away from for ---

28 **MS. CAROLE FISHER:** Well, there is no escape. There was ---

1 we were doing this during a pandemic when at times you were not to leave your
2 province. You were not to leave your county. I couldn't even go to our cottage to find
3 an escape. So, the pain was in every area that I looked or felt. And it was very hard
4 and I had to do a lot of work myself to overcome or to try to just live with what I had to
5 deal with at home. He left a terrible mark when he came to take our lives and it was an
6 image that I struggle with every day.

7 It is the first thing I see when I wake up and it is the last thing I see
8 when I go to bed. And that was my biggest fight that I was trying to prevent by you guys
9 sharing that publicly because that then allowed everyone to have the rights and to
10 torture me for days and months and years into my future that I can't take back now.
11 There is no --- I never know when it is going to hit me. I never know who has control of
12 it and it is something I no longer can control that I try to work with.

13 And my biggest frustration that I have to honestly share of what you
14 experience with this form of mental health or distress. The system is very broken and
15 the way that --- the only way I can explain it myself as I try to live through this is, if I was
16 diagnosed with Diabetes, I have a low sugar issue and my doctor understands that and
17 gives me supports or medications or follow-up supports.

18 But when you are told you have PTSD and you are experiencing
19 extreme mental health feelings that I have never ever had before in my life, I don't know
20 how to handle it. I was never given any coping skills or understanding what to expect or
21 how it will happen. And when I went to my doctor many times to try to get help, the help
22 was not available. Pills were available. And I wasn't feeling that was what I was able to
23 do.

24 But where I recognized being in a mental health situation that was
25 put upon me, the broken part of it is, you are suggested to go to speak to a psychologist
26 or counselling or social worker of some sort to provide you a spot to share your
27 experiences or troubles that you have but none of that goes back to your family doctor.
28 So, how is a family medical doctor able to help you going forward when they are not

1 receiving this type of information that is part of your whole body, your whole health. And
2 that is where I kind of look at it like being a Diabetic.

3 If I am Diabetic, I can get that help and I am referred to a clinic to
4 get Diabetic help for my overall well being and that is shared back with my doctor if
5 there is blood work or if there is exercise routine or a heart attack or anything like that.
6 You have a follow up back to your doctor but when it comes to mental health, it is
7 suggested to me to go find that help. It is suggested to me to find the individual that is
8 suited best for me.

9 And it is all on my shoulders to do that. And I have realized and I
10 knew at the time that even though I was told what I need to do, I didn't have the strength
11 or the capability to do that. But it was all put on me to handle. That was one of the
12 hardest things I have ever had to do.

13 I have a lot of health troubles myself. **C1 - Personal Information**

14 **C1 - Personal Information** and I can work through all of those things
15 because I have the support staff in place for specialists or doctors and they all are able
16 to help me with that. But this situation with mental health you are on your own. There
17 isn't the supports to help you.

18 **MR. ADAM FISHER:** Everybody in this industry is so busy. You
19 know, you may get an appointment this week. Well, you are three weeks before you
20 can get back in or a month or --- you know. It is not --- it is not come whenever you feel
21 like coming. It's come when you're --

22 **MS. CAROLE FISHER:** Yeah, like I --- when I was offered through
23 Victim Services, it was virtual only. It wasn't to sit with someone. It was someone two
24 hours away.

25 **MR. LEO ARTALEJO:** And I mean, was that because of Covid or
26 the ---?

27 **MS. CAROLE FISHER:** No, that was what I was offered through
28 the connection with Mary.

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MR. LEO ARTALEJO: Okay.

MS. CAROLE FISHER: With the person that she connected me with. That person told me that she won't meet with me and she was only virtual. So, I had to accommodate that through my work days.

MR. ADAM FISHER: That could have been because of Covid too, for her reasoning.

MS. CAROLE FISHER: Possibly but it was --- I mean, it is not now and it continued to be with that. That is what she told at the beginning that going forward that is what it would be, so.

MR. LEO ARTALEJO: What about Victim Services? Were they helpful at all in helping you find mental health resources?

MS. CAROLE FISHER: Well, we received a document in the mail from them and again, like, I looked at that document and I saw names and I read the descriptions but I didn't feel I was in the mental health state to pick the right person for me.

And the people that I did have connections with through mental health in the hospital told us at the very beginning that they have never experienced this and they didn't know how to help us. And they apologized for that, that they weren't trained for something like this. So, those were the answers I got.

And then it was, you know --- Victim Services gave me this offering of people to seek but when you are trying to just keep your head above water and keep working through all this, we had no sick days. Adam and I didn't. We are both self-employed and I didn't have the mental time to be able to care for myself and take time to meet with this one and if she didn't work, go to this one if she didn't work.

And that is, again, back to, you know, the whole health system of mental health. In any other health concern, I have had a doctor recommend the best doctor that is needed to help me. But it is not the same way for your mind. And I find it

1 very disturbing to see that broken process. It has made me really understand people
2 that have struggled with mental health and not have the strength to help themselves but
3 yet you are expected to and it is on you to figure it out yourself.

4 **MR. LEO ARTALEJO:** So, a support and service that would be
5 helpful for Canadians in the future would be a more proactive --- someone to help. Not
6 just send you a list.

7 **MS. CAROLE FISHER:** Yes.

8 **MR. LEO ARTALEJO:** And help you really --- something on
9 streamlining getting in, making sure there is availability if you want in-person helping
10 you find someone that is going to deliver in person?

11 **MS. CAROLE FISHER:** Yeah.

12 **MR. LEO ARTALEJO:** So, it is more of a --- almost a concierge
13 type of proactive instead of just, here you go and serve yourself.

14 **MS. CAROLE FISHER:** That's right, yeah.

15 **MR. ADAM FISHER:** Another thing is, there is no one having any
16 answers. You know, we were months finding out, you know, anything. Three months
17 before anybody told us even just anything. Like, it is not --- you know, people --- there
18 are no answers, you know, a lot of times where, what anybody's gone through in this
19 and you know, how do you --- how do you --- you know. That is why you kind of --- that
20 is what I was saying earlier was, you know, what is the help? You know, nobody, you
21 know, is it just talking?

22 **MS. CAROLE FISHER:** Nobody knows.

23 **MR. ADAM FISHER:** Or is it, you know, telling your story and
24 breaking down to a mess and then going --- and that is what we found it was. Like, you
25 know, you go and you would talk to someone. Well, they would want to know right from
26 the beginning to the end and then --- so, you would be in a terrible state when you came
27 out of there. Then --- and they say, well, I am sorry but I don't really have any
28 experience with this.

1 So, then you go somewhere else. Well, go talk to this person.
2 Well, you go to them and you do the same thing all over again and you leave there a
3 mess and --- What is the healing process here? Like it is ---

4 **MS. CAROLE FISHER:** It is a triggered state over and over again.
5 It is a trauma state of --- I have recognized that having to talk about this and deal with
6 this, it does put me back from ten to fourteen days I am not myself. I don't sleep again.
7 I have agitated moods. You know, all kinds of feelings that I have never experienced,
8 you know. Where it is hard for people around you to know why Carole is off today.

9 But yeah, just the same to the effects of the outcome of the
10 decision that was made. And that was my question to Mary over and over again. I
11 know that she was doing the best that she could offer but she didn't have a solution for
12 me. I was looking for a solution. How do I handle and cope with this going forward after
13 this decision is made? And she apologized and said, I don't know, Carole. I really am
14 not sure what I can do.

15 Because there was no help given to her, I guess, to say, you know,
16 we need to really think about this decision that we have made to a survivor. The impact
17 of it.

18 **MR. ADAM FISHER:** Over --- just ---

19 **MS. CAROLE FISHER:** --- of living through this. The other 22
20 victims are not here to speak but we are. And by attending each of those sessions that
21 I was able to, it put me back to the exact same spot and the feelings of their last
22 moments. I lived through every experience of the other 22 victims and how their lives
23 were taken. That was a very traumatic thing that traumatized me and haunted me
24 because I know what it was like for them.

25 **MR. ADAM FISHER:** It consumes your --- it really consumes you.
26 You know, it's two and a half years almost and what do I ---when I see people I haven't
27 seen for a long time, what do they want to talk about? Guess what? You know? So,
28 then it is ---then you are right back in it again and you are like, staring into space ---

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MS. CAROLE FISHER: And living in it.

MR. ADAM FISHER: MS. CAROLE FISHER: Yes.

MR. ADAM FISHER: --- thinking no one --- about which --- like it was for the first three weeks afterwards, you know, just staring at the wall. You know, looking for some answers and thinking of all the different solutions that we would have died in which were hundreds and thousands over time. But it is scenarios and --- so, what is the solution to healing? Just cope. Outside of coping there is ---

MS. CAROLE FISHER: Numbness and coping. It is pretty much what you have to do because living in a small community and we are known, not only in our small community but many different locations and we try to cope the best we could by --- we have never spoken publicly about this.

MR. LEO ARTALEJO: Right.

MS. CAROLE FISHER: Because I just never felt strong enough to do that. Nor did I want to expose myself in that manner but it just exposed us in a whole other way that we could control. It allowed people to ask that many more questions and want to understand or have their comments. And it prevents you to actually be out in public. You minimize what you used to do in life to just remove yourself from the chances of that exposure.

MR. LEO ARTALEJO: So, thank you for that. That is really helpful and I am hearing a lot of different pieces there. I am hearing that understanding the mental health supports and how they integrate with your family doctor is an important piece in terms of mainstreaming mental health support.

I am hearing that there is the trauma that happened during the event and then the --- when you have a Commission process like we have, there can be further moments and we need to think through how do we help, not only survivors deal with the original incident but then also, you know, as things are brought forward in the Commission process, that there is probably going to be a need to support people as we

1 go, as well. So, thank you, that is very helpful as we think about that.

2 Is there anything else when you think about the weeks and months
3 after the event that might be important for our Commission to understand?

4 **MS. CAROLE FISHER:** Well, it just --- there are many days that I
5 look at myself and I realize that there is not another person across this country that I
6 can pick up the phone and call and just ask them for some guidance or understanding
7 of how you feel from being a survivor in a mass casualty of this. You know, there are a
8 lot of supports in place to help the grieving families but there was never really direct
9 acknowledgement or understanding of the survivor.

10 And I am not taking that away from anything because I put a lot of
11 my energy to try to understand why I am feeling this way or my experience with the loss
12 of grief of family members because at the time I was a walking human with no soul, a
13 spirit. He had stolen all of that from me and it made me understand when you are
14 facing evil like that, that that is the first thing they take is your spirit and your soul and
15 then they claim your body and that is what he wasn't able to take of mine.

16 But I am trying to find those other pieces or put them back together
17 in a broken state because there isn't really a lot of support for someone to, in my
18 situation or our situation. There is not a support for Adam and I together to work
19 through this. At the beginning, when we did have a little bit of support through Covid, it
20 was a virtual opportunity but it was only allowed for one of us. So, we together couldn't
21 grieve through this pain process.

22 So, that causes problems. It causes aloneness of each of us trying
23 to avoid, not understand how to cope with what the other person is feeling. We do it
24 separately and differently but there is not a support for a couple that has survived a
25 mass casualty. We both handle it differently.

26 **MR. ADAM FISHER:** Like Carole said, it was -- we knew eight
27 people that died that night and the next day, you know it's --- Our situation is, when
28 those pictures come up of the --- all the victims' pictures, there are always two spots in

1 the picture that are blank because --- filled, you know. So, that is --- you know, it is just
 2 eerie, every time a picture goes up, it is like, well look. Our pictures should have been --
 3 - that is where we should have been. And, you know, there is nine people that died
 4 after he left our house. You know, survivor's guilt, you know, every day thinking about
 5 that and the families and the children and you know, how ---

6 Why didn't, you know, why didn't --- when I called 911 or called the
 7 dispatch eleven minutes before that, you know, prepare or help me prepare or do
 8 something that could have stopped that or stopped --- you know, it is just, I was one of
 9 the only people --- well, I was the only person in that 24-hour span that --- or how ever
 10 many hours, 13 hours, that could have stopped it. I am the only person other than the
 11 police, like, and they weren't there to stop him. So, how does that make me feel every
 12 day? It is just like ---

13 **MS. CAROLE FISHER:** That is our trouble. We struggle a lot with
 14 survival guilt because he did come for our lives and there was a lot of innocent lives that
 15 were taken after our home that --- We don't know how to handle that. We don't know
 16 how to cope. I feel my life should have been taken.

17 **MR. ADAM FISHER:** That is where we live.

18 **MS. CAROLE FISHER:** Not the lives of mothers and
 19 grandmothers and aunts and people that lost a very important person in their family.
 20 People that were good Samaritans trying to help and their lives got taken.

21 **MR. ADAM FISHER:** Yeah, and he came to take ours but we are
 22 still alive.

23 **MR. LEO ARTALEJO:** Thank you for sharing that. Would you like
 24 to take a break? Or how are you feeling?

25 **MS. CAROLE FISHER:** I will be okay, thank you.

26 **MR. LEO ARTALEJO:** So, if you are okay, I am going to go to the
 27 second question. Now the second question is, the work that lies ahead for this
 28 Commission is to make recommendations that will be effective and meaningful. Which

1 issues are most important for you, for the Commission to focus on as we finalize those
2 recommendations?

3 **MR. ADAM FISHER:** I think gun control is probably for both of us
4 is huge. If we were --- if we were, again, the scenario --- every scenario of not having a
5 gun, of, you know, going oh, being an open-hearted greeter because nobody is going to
6 hurt you and going to the door and answering the door that day, we both wouldn't be
7 here right now.

8 So, because we had an ability to protect ourselves and I personally
9 think that that was, you know --- he knew me. He knew that, you know, that I was able
10 to protect myself and defend myself and that day, you know, there was a combination of
11 things. Reasons why he left our home and one is the fact that there was a threat ---
12 could have been a threat there to him. So, you know, and I was a threat to him. I was
13 ready to kill. I was ready to blow his head off, so, you know --- There is no question
14 about what was going to happen if the opportunity came up because I was able to
15 protect myself and my wife and my family.

16 So, people saying gun control like Justin Trudeau just need
17 afterwards wanting, you know, try to relate this on to gun control, you know. Yes, he
18 shouldn't have had those guns. Yes, guns are, you know, in the wrong person's hands
19 they are a threat to everyone but also, they are not a threat to law abiding citizens that
20 are able to protect themselves. And I truly feel a big reason --- well, if I didn't have a
21 gun and I would have answered the door, you wouldn't be talking to me right now. I
22 guarantee you that.

23 `But if I had have went to the door with a gun then it might have
24 been a solution, but a way, but it was --- it was hunt or be hunted at the time and he was
25 hunting and I was being hunted. So, it turned out that, you know, I invariably ended up
26 hunting him but he cowered off and left. So, you know, that is a huge issue to make this
27 about, you know --- it is both ways. It is not just villains carrying guns. It is about
28 citizens being able to protect themselves.

1 And I truly feel the only way a recommendation is going to ever
2 make a meaningful change coming out of this is that the 911 system has to basically tell
3 people what --- it has to be incorporated into the 911 system, all these scenarios. Why
4 wasn't there a --- you know, why wasn't there people down at the end of the --- at the
5 intersection a kilometre and a half from our home? Why wasn't there a car there? It is
6 a major intersection. Why wasn't there a car down at the other intersection?

7 You know, you get 19 cars sitting down at the Great Village Firehall
8 waiting to --- waiting --- standing there while he is --- drive looping around so it's --- you
9 know, so 911 system has to put all this in place because you can't rely on humans to ---
10 every human to be able to make their own decisions and be able to follow guidelines. It
11 has got to be implemented into the 911 system.

12 Like, you know, we are probably, for sure, partially alive because of
13 the 911 system. No question that it helped save our lives but, you know, at the same
14 time, like, when I was on 911, you know, and she was there to protect me. She was
15 wanting to protect me but I was wanting to protect other people.

16 So, like she didn't want me to do any --- you know, to do --- go out
17 or look, you know, to see what was going on or any of that. And I realized that, you
18 know, that was the reason. She is protecting me but nine people died afterwards, you
19 know. So, it is --- I would give my life to protect them. So, the only way you are going
20 to be able to this is the 911 system. Just to take the --- just to take the human error out
21 of it.

22 **COMMISSIONER STANTON:** Do you mean they are directing ---
23 directing the responders to perimeter places? Is that what you mean?

24 **MR. ADAM FISHER:** Well, that yeah. So, to --- during the whole,
25 you know, not just --- the whole night, you know?

26 **MS. CAROLE FISHER:** But during the situation they were trying
27 to ---

28 **MR. ADAM FISHER:** During the ---

1 **MS. CAROLE FISHER:** --- keep us out of the windows.

2 **COMMISSIONER STANTON:** Right.

3 **MS. CAROLE FISHER:** They were making it very clear for us to
4 get hid and to not go near a window ---

5 **COMMISSIONER STANTON:** I am sure.

6 **MR. ADAM FISHER:** Mmhmm.

7 **MS. CAROLE FISHER:** --- to avoid to keep us as safe as they
8 could ---

9 **MR. ADAM FISHER:** I never ---

10 **MS. CAROLE FISHER:** --- until people could actually get to us.

11 **MR. ADAM FISHER:** I never --- we never suspected he was
12 leaving our property. That was not even a --- that thought never even went through my
13 mind that he was leaving. Like, the thought was ---

14 **MS. CAROLE FISHER:** We had no idea.

15 **MR. ADAM FISHER:** --- the thought was, he was there. Like, it
16 was --- he was in the house as far as I was concerned, right, until a time that, you know,
17 I did get an opportunity to look out the window and after, when things really slowed
18 down and she was, you know --- and it is like, then I would go searching to see what ---
19 and I just noticed the car wasn't there.

20 Well, okay, is there a second person? Is he on foot now? Like,
21 that is why our neighbours, like I asked the 911 to contact our neighbours and --- which
22 they never did, but then my neighbours called them after, like, after the fact. But he
23 wasn't --- yeah, he wasn't ---

24 **COMMISSIONER STANTON:** The dropped ball was in --- the
25 police saw that he had gone but nobody told you that and had the police told the 911
26 operator --

27 **MR. ADAM FISHER:** Nobody even knew he was gone until there
28 was a report of a gun shot in Plains Road. That is when ---

1 **MS. CAROLE FISHER:** But they didn't even know then and we
2 didn't know he ---

3 **MR. ADAM FISHER:** You know, they never knew. It could have
4 been another perpetrator, right. Nobody knew anything at the time. Like, I ---

5 **MS. CAROLE FISHER:** We were over an hour and fifty minutes in
6 a locked down state of fear in our home. Adam and I were separated for 45 to 50
7 minutes from each other but we went an hour and 50 minutes and both of us locked
8 down, still feeling he was on our property.

9 **MR. ADAM FISHER:** Yeah well, they didn't know. The car was
10 gone.

11 **MS. CAROLE FISHER:** There was no notification.

12 **MR. ADAM FISHER:** That didn't mean that there wasn't somebody
13 else driving it or ---

14 **MS. CAROLE FISHER:** We couldn't ---

15 **MR. ADAM FISHER:** --- because that is near --- right where we
16 live there is another scenario exactly the same as the ---

17 **MS. CAROLE FISHER:** Portapique.

18 **MR. ADAM FISHER:** Portapique Loop, or the Portapique Beach
19 Road it's a dead-end road with five houses on it or six houses on it with all families in
20 the houses and my first instinct was, he's gone. He could have went – he could have
21 had a --you know, again scenarios. He could have had a motorcycle. He could have
22 had anything. He could have with the Debert Airport and got on a plane and gone. Like
23 ---

24 **MS. CAROLE FISHER:** Yeah, it was just this supports the fact
25 that we had no sense of security. No one stayed behind. Like, after the 12-minute
26 mark I was hung up on by 911. They let me go and I went all that other time with feeling
27 he was in our home and my life was going to be taken very shortly.

28 And I had no feeling of --- like after she --- you know, I pleaded for

1 them to please not let me go and they were saying they were getting more calls. But in
2 my mind at the time, I thought, well, it is our --- people in our community calling because
3 of our situation. And I wasn't understanding that, you know, things had moved on at all.
4 So, yeah, so, we went from that state to getting notification from a friend that he was ---
5 that his life was taken to going into three straight days of hell in our home feeling that
6 there still might have been a way that he is going to kill us.

7 Because when we saw the images of other people's properties, we
8 felt he had explosives. We knew after we saw the video, he had something in his left
9 hand. That has never really been verified if it was an explosive or a clip or a radio. So,
10 when we saw that image afterwards, to try to understand where was he at on our home
11 or where is he, we were --- we couldn't --- we were scared to death that there was still a
12 means of killing us in an explosion of some sort.

13 And that was Sunday, Monday, Tuesday afternoon before we had
14 any form of help from an RCMP to come back.

15 **MR. ADAM FISHER:** Like, we didn't know who was --- you know,
16 but he just done, you know, dug a little hole and put something in or a walkway or under
17 a step or under the barbeque in a cooler or put something in my truck. And where did
18 he go?

19 **MS. CAROLE FISHER:** But there has to be some sort of ---

20 **MR. ADAM FISHER:** Where do you go when you don't know if
21 there is something that is going to blow up.

22 **MS. CAROLE FISHER:** --- help. Like, I guess, if you are looking
23 for reasons, there has to be a --- I know that it all boils down to manpower and supports
24 and availability but in our situation, it was --- we were just sitting ducks for a long time
25 with no help. No form of --- we were still in a hunt for many days afterwards.

26 **MR. ADAM FISHER:** Right.

27 **MS. CAROLE FISHER:** And we continued that feeling.

28 **MR. ADAM FISHER:** Literally, if they had of --- if someone at the --

1 - right at that moment, you know, had have, that you know, through 911 and through ---
2 because we had from camp signs all over our property saying video surveillance and
3 you know. So, if someone had of just come in instead of three days after and said, you
4 know --- but they already knew what he was driving anyway but, you know, they could
5 have known, had pictures of him and had pictures before he even got to Truro or before
6 he even got to Onslow or you know, it could have been --- we had videos of him.

7 **MS. CAROLE FISHER:** But like to give you, you know, to go
8 forward of how – I think was the question of how do we ---

9 **MR. LEO ARTALEJO:** Yeah, I just want to --- I want to go back to
10 the 911. I want to make sure that we get your recommendation. What would have
11 been helpful for you when it comes to the 911 service? I am hearing ---

12 **MR. ADAM FISHER:** Well, you know ---

13 **MR. LEO ARTALEJO:** So, you know ---

14 **MR. ADAM FISHER:** Sitting here able bodied and healthy, like
15 they did their job but, you know, they could have ---

16 **MR. LEO ARTALEJO:** So, it is coordination between 911 and the
17 security forces that are on the ground?

18 **MS. CAROLE FISHER:** Yeah, and I guess, even there like the
19 disconnection. Like, what Adam experienced was completely different than what I
20 experienced. All I had was sense.

21 **MR. ADAM FISHER:** She had terror. I had ---

22 **MS. CAROLE FISHER:** I had terror and he had kill. He was ready
23 to kill and I was feeling a tremendous amount of terror from the sounds because that
24 was all I could hear and with the notification of people on our property, with coming up
25 our driveway, it was just non-stop but when he came and when he left that never
26 notified.

27 So, there was never a notification to know he had left our property.
28 But then when it came on, you know, I had the sounds of the helicopter and knowing

1 that help was there and then I was surrounded by heavy military or heavy --- people
2 with guns that were --- you know, my life was going to be taken. To try to properly get
3 him, we were going to be involved in that.

4 And then, I had no help, you know. So, I --- the 911 operator let me
5 go and then I was in a very vulnerable state of --- I am going to die and I have to say
6 goodbye to my family right now. I have to let them know and there was, you know,
7 there were no supports after that or no connection or --- So, it was just such a very
8 vulnerable situation.

9 Yeah, and Adam stayed. He had a gun in his hand. He was able
10 to probably protect him and myself and I didn't have anything and that was hard for me.
11 So, I really, really want to stress the importance of having your own mean of defence in
12 a rural community. You have to be able to have something because help is going to be
13 a long time before it will appear. And I still have to have that.

14 **MR. ADAM FISHER:** Yeah, so the recommendation would be, you
15 know, I guess for 911 would be, just overall guidelines of how to secure perimeters.
16 You know? Even automatically. You know, as far as being right prepared for anything
17 like this, it wouldn't matter if it is New York City. Nobody is prepared for this let alone a
18 rural community at the end of the --- you know, end of the continent. A small peninsula,
19 like, that is not something anybody could see coming and to be prepared for that you
20 would need, you know, manpower of probably a hundred people to be prepared.

21 **MS. CAROLE FISHER:** And just even, you know, when you hear
22 the police that did attend, and the police that patrolled that area for the last four to five
23 years, it was really upsetting to see how little understanding they really knew of the
24 area. You know? So, that just made me feel that much more vulnerable and reasons
25 why we need to be able to protect ourselves.

26 We don't know what tomorrow is going to bring and we don't know
27 if this situation will occur again but we have experienced it and my first thought is, I
28 know the new police officer that now has transferred to Bible Hill doesn't know where

1 our road is.

2 And, you know, like when I hear about how they gathered, like, we
3 were led to believe that they were at the bottom of our driveway and they weren't. They
4 were down at the highway exit. No one knew where they were and they didn't know
5 how to find to get to the right place.

6 **MR. ADAM FISHER:** And then when they left it was all in one
7 direction and like, where we are there is two ways anywhere or three ways to go
8 anywhere. So, they're all of them turning, burning in the same direction when they
9 could have split and went --- got to the same place at the same time.

10 **MS. CAROLE FISHER:** They just need to have a better --- you
11 know, we are not all in Truro that Bible Hill Dispatch is covering or whatever the
12 situation is and to see that like being a local in the area, you know how to --- you would
13 think the police would know that too. And that was what was very disturbing and
14 upsetting to see that the police did not one of them, turn left at the end of our driveway.
15 Not one of them really knew where they were at or how to respond in the best way that
16 they could. They had their skills but they didn't have their locations.

17 **MR. ADAM FISHER:** Those people, they were there --- they
18 weren't there on their own. Well, they weren't there on their own. They weren't
19 individually --- they were there, you know, being told where to be. So, it is --- it's just
20 overall being able to manage your --- manage people more efficiently in a way that
21 could end up making results.

22 **MS. CAROLE FISHER:** And I think they could have acted a lot
23 quicker if they didn't have so much top heavy people making the decisions for them.
24 They --- the boots on the ground, the people that we are very grateful for --

25 **MR. ADAM FISHER:** They did an amazing job.

26 **MS. CAROLE FISHER:** We are very thankful for what they did but
27 the decision makers, they need to get the damn boots back on their feet because they
28 really are pulled away from how to respond or help.

1 **MR. ADAM FISHER:** Well, they need --- they need 911 --- they
2 need something over top of them, talking --- you know, giving them a structure instead
3 of letting them do their --- play their own scenario. They need a --- okay, this is the
4 structure, you know, and this --- when it drops down this is where --- how people act.

5 **MS. CAROLE FISHER:** Yeah, like, when you understand how the
6 RCMP reacted in every situation, it was just really upsetting to see how little decision
7 making they had. They were no different than us, really, besides they had an RCMP
8 suit on. Not one of them really could respond to help in a timely manner.

9 **MR. ADAM FISHER:** Well, then we come to find out, which we
10 never found out for three months, you know, as to why he was at our property. You
11 know, initially, it was, you know, there was a list and were we on the list and was this ---
12 ? Were we part of the process or, you know, were we the next ones to go? Or was it ---
13 ?

 Three months after we finally found out that he had met a car up
14 the road. Police car going to Wentworth and they --- he turned into our place to be ---
15 to, you know, to get away from them. And you know, then to find out that the police
16 officer he did meet kept on driving for a kilometer and a half up the road because he
17 was scared --- You see, he was scared he was going to get shot. So ---

18 **MR. LEO ARTALEJO:** Where did you get that information? Was it
19 through the Commission?

20 **MS. CAROLE FISHER:** Through the Mass Casualty.

21 **MR. LEO ARTALEJO:** Through the Mass Casualty? So, it was 18
22 months later?

23 **MS. CAROLE FISHER:** Yeah, we had a little bit of an
24 understanding from the RCMP ---

25 **MR. ADAM FISHER:** Well, its just ---

26 **MS. CAROLE FISHER:** --- that they had met him but we didn't
27 really know what the decision was made by that RCMP. You know, he kept choosing to
28 drive forward versus ---

1 **MR. ADAM FISHER:** Because ---

2 **MR. LEO ARTALEJO:** Right.

3 **MS. CAROLE FISHER:** --- doing a quick turn and coming back to

4 ---

5 **MR. ADAM FISHER:** Coming back to protect people.

6 **MS. CAROLE FISHER:** Coming back to protect people.

7 **MR. ADAM FISHER:** Protect the people he is getting paid for,
8 right. But we just ---

9 **MS. CAROLE FISHER:** But I also think, like, in the way the Mass
10 Casualty rolled things out, it made it that much more painful to see the RCMP's
11 information at the end. We really needed to know that at the beginning because the
12 RCMP didn't share it with us. The lawyers tried to have a private investigator to see
13 what they could find out.

14 So, we have gone a long time and then to go at the very end and
15 hear all these RCMP officers tell us really how they responded, we should have heard
16 that a long time ago. So, then that caused more anger I think than --- you know, it gave
17 us an understanding but it made me mad. It just made more anger inside to think.

18 **MR. ADAM FISHER:** You know, like last week it broke ---

19 **MS. CAROLE FISHER:** The suffering you have gone through and
20 that could have helped a lot of people knowing things a lot earlier.

21 **MR. LEO ARTALEJO:** Yes.

22 **MS. ADAM FISHER:** You know, like a month ago I was leaving
23 the driveway and I have a diesel truck and it gave a little puff of smoke out of it when I
24 was pulling out of the driveway. And a police car came around the same corner that the
25 perpetrator evaded them on, and she had me pulled over within --- within 300 feet. She
26 whipped that thing around like there was no tomorrow. Like, on the same highway, she
27 had that thing turned around and was on me like within seconds. But yet ---

28 **MS. CAROLE FISHER:** He couldn't.

1 **MR. ADAM FISHER:** --- the other guy just kept on driving because
2 he didn't feel it was a safe place to turn. So, she turned on a blind --- on a corner. So,
3 then to think that he --- you know, the --- he just kind of kept on going, right.

4 **MR. LEO ARTALEJO:** I wanted to reflect back to you. You've
5 touched on so many things and you have brought a perspective that is different, as you
6 mentioned, being survivors gives you a different set of things. And so, I just really
7 wanted to thank you for touching on all of these different pieces, whether it is rural
8 policing, guns and I just want to kind of keep track of time.

9 And the third question is, is there anything else that we haven't
10 talked about today that would be helpful or that you would like the Commission to
11 understand?

12 **MS. CAROLE FISHER:** I think I just really go back to the wanting
13 the Commission to understand the exposure. To try to live through something like this
14 you have to find the best way possible to just be grateful that we did survive that, be
15 thankful that we had our wits about us at the time, that my mum was caring enough to
16 wake me up in the night no matter if I was going be mad or not, you know, to give me a
17 warning there was danger in our community.

18 Our community to us is from Five Islands to Debert, Glenholme.
19 Like, we have --- that is our own community and that is how people work in rural areas.
20 You care for one another and if it wasn't for people doing that to bring awareness. It is
21 a different perspective, you know. When you live in the city most people don't know
22 their neighbours. They don't know them. They don't have a relationship with people
23 down the street or a street across from them and that is not the way in rural Nova
24 Scotia.

25 People really want to help each other and care for each other. And,
26 you know, mum gave me that notice and warning and my gut instinct woke me up early
27 that morning to be aware of what's the follow-up from last night. And for the police to
28 not have put out a proper notification was the most disturbing thing. To not be warned.

1 We would have ---

2 So many more people would have been alive to know and that's the
3 only way we were alive was from mum calling to say, Carole, just be --- make sure your
4 doors are locked and I got up and locked them. The police really dropped the ball there
5 and it is still frustrating to understand why they didn't tell people. And it seems that their
6 most important thing was to protect their own first. They were concerned of, you know,
7 sharing that information that maybe someone in the public will injure a police officer
8 wrongly.

9 Well, they didn't. They did that themselves and there has to be a
10 better way to notify people because it was really rural Colchester that was trying to
11 notify each other.

12 **MR. ADAM FISHER:** If it she hadn't of had Twitter we probably
13 wouldn't be here right now.

14 **MS. CAROLE FISHER:** Yeah, I was ---

15 **MR. ADAM FISHER:** She seen it on Twitter and then like, you
16 know, I made the phone call, you know, just saying that he had a police car. But then
17 even at that point, 911, or whoever I was talking to on --- you know on the ---

18 **MS. CAROLE FISHER:** Bible Hill Dispatch.

19 **MR. ADAM FISHER:** --- on the Dispatch with 911 or the
20 Dispatcher, you know, all they said is, there's rumours going around that he is driving ---
21 that he may have a police car. A rumour.

22 **MS. CAROLE FISHER:** That was ---

23 **MR. ADAM FISHER:** Well, it wasn't a rumour anymore. It wasn't a
24 rumour at 10:30 the night before. It wasn't a rumour. It was a fact.

25 **MS. CAROLE FISHER:** But they, at that point, should have told
26 us the truth. There should have been a truth to share.

27 **MR. ADAM FISHER:** Yeah, and then when the police car come
28 flying in our driveway, we wouldn't have thought, oh, it is somebody here to talk to me

1 about the --- about knowing him.

2 **MS. CAROLE FISHER:** Yeah.

3 **MR. ADAM FISHER:** That was my first instinct was, was seeing
4 this car come flying up the driveway ---

5 **MS. CAROLE FISHER:** They were here to talk to us.

6 **MR. ADAM FISHER:** --- and I thought, holy shit. That was quick.
7 They were --- you know, are they wanting to talk to me about knowing he has a police
8 car? Is that the reason they are here? Luckily, Carole, like, they went around --- as you
9 probably seen on the videos but, you knew, just blew right by her, you know, on the
10 grass. And then she was like, what is going on here? And luckily, that is the only thing
11 that saved our lives, like between that and him not stopping where people stop. Like,
12 people stop ---

13 Because the next day, one of the victims came to our home. One
14 of the victim's husbands came to our home and he pulls up to the driveway and stopped
15 where people stop. He instantly made eye contact with both of us and we were both
16 sitting in the exact same location that, you know, we were the day before. And it is like,
17 that is probably --- that part of it and, you know, just the fact that he didn't stop where he
18 should have stopped, probably saved both our lives because if he had of, he would
19 have looked right at us.

20 **MS. CAROLE FISHER:** Yeah, in a weird way he really did. He
21 did save our life because he did something stupid that made me be aware that
22 something is not right here. If he had of come in like everyone else approaches in our
23 yard, we would be dead. I wouldn't have --- we were going to get changed to answer
24 that door. So, I guess that was maybe his only place that he messed up really because
25 every where else he was very efficient and he was a professional at what he did.

26 **MR. LEO ARTALEJO:** Okay.

27 **MS. CAROLE FISHER:** Yeah, just ---

28 **MR. ADAM FISHER:** The scenario is that he would have been

1 dead and ---

2 **MR. LEO ARTALEJO:** Yeah, you guys have --- you really --- I
3 want to reflect back that you have really brought --- given us the sense for, you know, all
4 of the different pathways that things could have gone ---

5 **MR. ADAM FISHER:** Well, the other victims can't tell you their
6 story.

7 **MR. LEO ARTALEJO:** Right, yeah.

8 **MS. CAROLE FISHER:** I can't sleep and a lot of that weighs on us
9 to try to speak, not for them, but with them.

10 **MR. LEO ARTALEJO:** Yeah.

11 **MS. CAROLE FISHER:** So, that is what their families are trying to
12 do is be their voice and just that there was a lot of wrongs but that there some good
13 rights. And those were some of the --- like, there is a guilt of feeling that there were 43
14 police officers came and responded to try to help us but the other ones didn't get to
15 experience that. They ---

16 It was just one casualty after another and I experienced a lot of
17 what they felt. I don't know how to overcome it but I do hope that going forward that you
18 do recognize the break in the system of our medical health care to care for someone
19 with mental health. It is really on those people's shoulders to figure it out on your own
20 and there needs to be more accountability for our doctors to do a follow-up.

21 Like, you know, a report needs to come back to them from the
22 psychologist so that that patient isn't back in that office saying, I am still not well. And
23 they can't understand why because to them time has passed and you should be better.
24 That is really what you get besides a prescription for medications that I am not going to
25 monitored on. So, there has got to be a lot stronger glue there to say ---

26 **MR. LEO ARTALEJO:** Kind of a fuller team approach?

27 **MR. ADAM FISHER:** I don't know if there is ---

28 **MS. CAROLE FISHER:** A fuller team approach.

1 **MR. ADAM FISHER:** --- you know, the client patient confidential,
2 doctor to doctor confidential is a thing or not but like, say her family doctor had no idea
3 what would be --- what even happened for months. It is ---

4 **MS. CAROLE FISHER:** Yeah. Someone should have ---

5 **MR. LEO ARTALEJO:** The other thing you guys have really
6 shared that is helpful is that, you know, it is only through Mary who is Commission
7 Mental Health Support that you were able to connect with that person and you know,
8 that required an entire federal --- joint federal and provincial Commission. So, we need
9 to make sure that those supports are there for people.

10 **MS. CAROLE FISHER:** Yeah, I have to recognize that at the very
11 beginning and I think I had shared before but, we had received a phone call within the
12 first two weeks from Adam's doctor who was retiring to acknowledge that someone had
13 shared we were directly impacted and was there something she could do to help. So,
14 that is when she said, can I refer to you to Mental Health here in Truro which she did.

15 And then is when we got the calls back from those people that they
16 were listen if we wanted to talk but they were very clear in saying that they didn't have
17 experience with something like this and were not sure how to help us. So, it just puts
18 you down that much further and ---

19 **MR. ADAM FISHER:** The family psychologists don't ---

20 **MS. CAROLE FISHER:** You don't know how to ask. Like just that
21 whole message of --- you were told many times you need to go speak to someone,
22 Carole. Or Adam, you need to speak to someone.

23 **MR. LEO ARTALEJO:** And feeling like ---?

24 **MS. CAROLE FISHER:** It was my job to find that right person.

25 **MR. LEO ARTALEJO:** Yeah.

26 **MS. CAROLE FISHER:** And you don't --- I didn't know ---

27 **MR. LEO ARTALEJO:** And not only that, your lived experience is
28 something that very few other humans have ever experienced. So, it is difficult to ---

1 **MS. CAROLE FISHER:** Yeah.

2 **MR. ADAM FISHER:** Yeah, I have never talked to anybody myself.
3 I have never. I just --- I am trying to run a business. I am self-employed and that is my
4 focus and like, you know, the Commission and all the --- you know, we went down two
5 days in Halifax and you know, found it very good, informative to sit there listening but at
6 the end of the day, like I said earlier, you know, I was the only one in the room who
7 wasn't being paid to be there.

8 Like, being self-employed, you know, there is nobody saying, okay,
9 you take today or yeah, you're --- I am going to take a sick day because I am not able to
10 --- you know, I want to go down to the Commission or you know, it just wasn't an option.
11 You know? I felt --- and I would say looking --- you know, some days it was very well
12 attended and that is probably a big reason why. It is not, you know, people can't afford
13 to go sit around, you know. They have a job or are self-employed.

14 **MR. LEO ARTALEJO:** I am going to check with the
15 Commissioners and see if they have any other questions or comments.

16 **COMMISSIONER FITCH:** Thank you. I just have one question
17 and I know it is a common one that I think a lot of us have and it has to do with when he
18 was approaching your house and we don't know what he had in his hand. And you
19 have made comment about him knowing probably that you had a gun. Did at any time,
20 did he --- did you see him? Did he see you at all? I am getting the impression that you
21 never saw one another.

22 **MR. ADAM FISHER:** Oh, I seen him. He never seen me.

23 **COMMISSIONER FITCH:** Yeah.

24 **MR. ADAM FISHER:** Oh, absolutely.

25 **MS. CAROLE FISHER:** Yeah.

26 **COMMISSIONER FITCH:** And so, but he would have known that
27 you had a firearm in the house?

28 **MR. ADAM FISHER:** [Questioning sound effect].

1 **MS. CAROLE FISHER:** Probably over discussions that we have
2 had like, and just similar interests.

3 **MR. LEO ARTALEJO:** Well yeah, it's ---

4 **MS. CAROLE FISHER:** We would have that talk of hobbies or ---

5 **MR. ADAM FISHER:** Yeah, he would know I had one. He didn't
6 know where it would be, of course.

7 **MS. CAROLE FISHER:** Yeah.

8 **COMMISSIONER FITCH:** No, one of the questions that we have
9 all had is, you know, is it possible that he had a hand held radio or a scanner in his hand
10 and if he heard cars being dispatched, if that is why he left.

11 **MR. ADAM FISHER:** Well, there is no question in my mind. I still
12 can't believe that it has got to this point and, you know, in the whole ---

13 **COMMISSIONER FITCH:** We are still asking these questions?

14 **MR. ADAM FISHER:** Yeah.

15 **COMMISSIONER FITCH:** Yeah, yeah.

16 **MR. ADAM FISHER:** Because the day --- the first day when they
17 came to --- the investigators came to talk to us, you know, he ---

18 I would rather that you just shut this off --- the tape.

19 **MR. LEO ARTALEJO:** I can't shut that off. Can we? Or--?

20 **COMMISSIONER MACDONALD:** Not that comfortably. I mean,
21 we can have an informal conversation afterwards but ---

22 **MR. ADAM FISHER:** Yeah.

23 **MR. LEO ARTALEJO:** Yes.

24 **MR. ADAM FISHER:** No comment.

25 **COMMISSIONER FITCH:** Okay.

26 **COMMISSIONER MacDONALD:** Okay. Sorry, I am just trying to
27 explain the process but ---

28 **MR. ADAM FISHER:** Yeah.

1 **COMMISSIONER MacDONALD:** We undertook to the public that
2 this --- these would be made public and if we turn the tape off then ---

3 **MR. ADAM FISHER:** Yeah.

4 **MS. CAROLE FISHER:** Understandable. You are wondering if
5 we are wondering if he does have a --- had a radio that day?

6 **COMMISSIONER FITCH:** If that is the reason that he left because
7 he ---

8 **MR. ADAM FISHER:** No comment.

9 **MS. CAROLE FISHER:** My gut tells me he did.

10 **MR. ADAM FISHER:** Stick with no comment.

11 **MR. LEO ARTALEJO:** Commissioner Stanton? Commissioner
12 MacDonald?

13 **COMMISSIONER MACDONALD:** I just wanted to thank you very
14 much. I acknowledge your great upset in our decision and I acknowledge that and ---
15 but yet, you are still here. You came tonight, and in many ways, had a reliving
16 experience but helped us in quite a few important recommendations. So, I am just very
17 grateful. So, thank you.

18 **MS. CAROLE FISHER:** You are welcome.

19 **COMMISSIONER STANTON:** Yeah, thanks very much.

20 **MS. CAROLE FISHER:** Yeah, you're welcome.

21 **MR. LEO ARTALEJO:** Do you have final words?

22 **MS. CAROLE FISHER:** I just hope no one ever has to experience
23 this again.

24 **COMMISSIONER FITCH:** We are so sorry that you have gone
25 through what you have gone through.

26

27 --- Session concludes

28

CERTIFICATION

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I, SHIRLEY BENNETT, hereby certify the foregoing pages to be an accurate transcription of the audio recording provided to the best of my skill and ability, and I so swear.

Shirley Bennett

SHIRLEY BENNETT