

North Carolina
State Highway Patrol



VOLUNTARY STATEMENT

☐ Driver Statement ☒ Witness Statement

Date of Collision/Incident: 6-18-20

Time of Collision/Incident: 5:00 ☐ A.M. ☒ P.M.

Name: Malecene Joseph Rd. DOB: _____

Address: [REDACTED] Goldsboro State: NC Zip: 27534 Phone Numbers:

(Home) (____); (Work) (____); (Cell) [REDACTED] (Kim - Wife's

Initial Traveling Speed Prior to the Collision/Incident: _____ MPH

Cell Phone)

Begin statement here to include events that occurred before, during, and after the collision/incident:

I was mowing + saw the guy on helicopter + heard a "popping noise" + the next thing the helicopter was going to the ground. I went to see what's going on + when I got there + saw the man + hit him about 2 times to see if he was alive. I saw I could not help him by myself + I went to get 2 guys that work with him to help + when we get over there. they do the best they can to help him + were doing CPR + I heard one of them say "he's gone, we can't help him."

First person I called was Paul Daw - the farmer I work for + who he was spraying for - to call 911. Then I went + got the guys.

NOTE: I hereby certify that the information provided by me in this statement is a true and accurate representation of the facts as known to me.

Signature: [REDACTED]

Date: 6-18-2020

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State Highway Patrol



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☐ Driver Statement ☒ Witness Statement

Date of Collision/Incident: 6/18/20

Time of Collision/Incident: 5:00 ☐ A.M. ☒ P.M.

Name: John William Anderson DOB: [REDACTED]

Address: [REDACTED] City: Jefferson State: VA Zip: 22724

Phone Numbers: (Home) () ; (Work) () ; (Cell) [REDACTED]

Initial Traveling Speed Prior to the Collision/Incident: _____ MPH

Begin statement here to include events that occurred before, during, and after the collision/incident:

We were spraying chemical over corn. I was getting my truck loaded when a guy on a tractor came flying up yelling that the helicopter crashed. I jumped on the tractor and he took me to the crash. My partner was there first and said he thought he had a ~~flat~~ pulse so I shut the power to the heli off and we pulled him out. Tried to do cpr and after a couple min realized he was gone and stopped. 5 min later the first responders showed up.

We cut the seat belt off of him before trying to pull him out

-Wife: Lynne Krutler

Caloper VA 22701

Notified at 6:00 by Dave Montague

NOTE: I hereby certify that the information provided by me in this statement is a true and accurate representation of the facts as known to me.

Signature: [REDACTED]

Date: 6/18/20

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☐ Driver Statement ☐ Witness Statement

Date of Collision/Incident: _____

Time of Collision/Incident: _____ ☐ A.M. ☐ P.M.

Name: Jordan Elmore DOB: _____

Address: _____ City: Stantonsburg State: NC Zip: 27883

Phone Numbers: (Home) (____) _____; (Work) (____) _____; (Cell) _____

Initial Traveling Speed Prior to the Collision/Incident: _____ MPH

Begin statement here to include events that occurred before, during, and after the collision/incident:

At around 5:00 farmer called to say farmhand had seen helicopter crash behind potato house. I drove up to the field and picked up Phil Up and John and drove down the path where farmhand had seen the helicopter crash. We found the helicopter on the side of path and the pilot was still in the seat. We removed Pilot from the aircraft while they attempted CPR. The pilot was unresponsive, we called for 911 and help. Waited on scene till police arrived.

NOTE: I hereby certify that the information provided by me in this statement is a true and accurate representation of the facts as known to me.

Signature: _____

Date: 6-18-20

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Date of Collision/Incident: 6-18-2020

Time of Collision/Incident: _____ ☐ A.M. ☐ P.M.

Name: PHILIP H. CHAMBERS II DOB: [REDACTED]

Address: [REDACTED] City: BRIGHTWOOD State: VA Zip: 22715

Phone Numbers: (Home) () N-A; (Work) () N-A; (Cell) [REDACTED]

Initial Traveling Speed Prior to the Collision/Incident: N-A MPH

Begin statement here to include events that occurred before, during, and after the collision/incident:

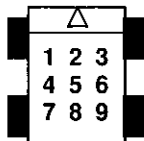
At approximately 5:00pm on 6-18-2020 a Farm Employee came speeding up the road on a Farm Tractor screaming that our aircraft had went down in a crash at the back of the Cornfield in the North East corner right at the Edge of the Tree line.

JOHN ANDERSON and myself came ^{P.C.} racing back here as fast as possible. I was in a Pickup with ~~JOHN~~ JORDAN ELMORE (FARMER & CHEMICAL REP) & JOHN WAS ON THE Tractor with the Farm Employee. When I arrived at the Crash site, I thought I felt a pulse on Gene Knitter (Pilot & my Boss) he was kind of hanging out of the HELICOPTER face down against the ground, my main focus was to try to save his life if possible, he was also my good friend. I started ripping stuff away because his legs were pinned there. JOHN, JORDAN, MYSELF & the Farm Worker pulled him out as quickly and carefully as possible. JOHN & MYSELF started performing CPR. I cleared his mouth of dirt & grass. JOHN WAS giving chest compressions & I was giving Gene the BREATHS on about the 3rd Breath Fluid came out of his Lungs & we knew he was gone. His eyes were open.

NOTE: I hereby certify that the information provided by me in this statement is a true and accurate representation of the facts as known to me.

Signature

Date: 6-18-2020



Record the Location of Occupant
Information Based on the
Diagram of the Vehicle

Pos. No.	Name (First, MI, Last)	Street Address (include City, State, and Zip Code)	DOB (MM/DD/YY)	Sex (circle)	Race (circle)	Seatbelt Used?	Describe Injury from collision or check block indicating ☒ No Injury
1	DRIVER	Use check blocks if address same as Driver ☒		Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No	☐ No Injury
2	Front - middle			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
3	Front - right			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
4	Second seat - left			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
5	Second seat - middle			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
6	Second seat - right			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
7	Third row - left			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
8	Third row - middle			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury
9	Third row - right			Male Female	White Black Amer. Indian Hispanic Asian Other	☐ Yes ☐ No ☐ Child Seat	☐ No Injury

STATE HIGHWAY PATROL
VEHICLE TOWING AUTHORIZATION

I, _____ of _____
Name of Person who gives consent Street Address

City, State, Zip Home Phone/Business Phone/Cell Phone

with _____ registration plate number _____
State Year and Make of Vehicle

Check appropriate block:

- ☐ I hereby consent to have this vehicle (towed) (removed) and stored by: _____
☐ I hereby consent to have this vehicle moved to the shoulder of the road by the undersigned law enforcement officer and left at this location.

Signature of Owner/Possessor Date

Trooper Name and Registry Number Date