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424. My mother didn't have the benefit of an outpatient psychologist for 16 years, as I did, beginning when I was 13 years old. She had a child at barely age 19, born to her and to a man who, I am sorry to say, was a liability. Her responsibilities and her life lived against the wall have robbed her of time and opportunity for any further development.

425. Everything my mother does is out of desperation. She is extremely naïve. She is a pushover to the extreme. One cannot but have mercy on her. One may feel less inclined to have mercy on the people at Atrium Health. Your information would be safer on a billboard at a racetrack than it is in the computer systems and in the psyches of the employees at this place.

426. In the next visit with Kathy, after I had figured out that Kathy and my hospital were up to no good, Kathy's demeanor had changed. The contempt was gone. It was a very enthusiastic "how are you?" at the beginning. Then followed a very cooperative and seemingly compassion driven interaction. This was, I feel certain, her wanting to be my friend for her benefit; I believe this was the impetus for this behavior.

427. Through her ongoing illegal contact with Jenny and others, Kathy has figured out that I am not so worthy of contempt. She has learned, as Jenny had, that almost nothing they do gets by me. She has learned that what does get by me doesn't get by me for long. She knows that I know she's up to no good.

428. In this same visit, I also notice that Kathy is very wary of going near the topic of my hospital's crimes. At one point I said "my mother is talking to Jenny and I'm sure this hospital is the one who gave her the number." In reaction to this, Kathy is dead quiet. She reacts as if she is scared to engage in any discussion about this topic. It is a

heightened awareness of my nailing every sign of deception or culpability that they put up that drives this reaction; this is my strong belief.

429. Then there is yet another set of oddities. In recent months, I have obtained screenshots of my younger sister sending my mother the number to my hospital. My sister does this by using google to search for the phrase "kathleen psychiatry charlotte nc", and sending a screenshot of the results to my mother. How on earth does my sister know that my doctor's name is Kathleen, when I have never told her or anyone else in my family? Why does my mother send my sister texts that read "I told Clint's doctors that I think they need to put him on the same medicine they had him on a few years ago"? Why does she send texts that say this when I've never given her any of my doctors' numbers? Why does she send texts that say this when I have deauthorized Atrium's speaking to her more times that I can count?

X. September of 2019 to the Present Day

430. I had to handle this situation where I am a prisoner at will of my hospital, Wells Fargo, and anyone else with an employee of my hospital on their contacts list. To that end, in August, 2019, I reached out to my old psychologist from the mountains, John Monguillot. John is extremely smart and capable. He is also, crucially, not a member of this Charlotte-Mecklenburg cabal of criminals, formerly known as my coworkers, the healthcare system, and the police.

431. I needed a few things from John, all of which I eventually got. The main thing was that I needed him to intervene in the civil commitment process. Atrium's medical staff cannot be evaluating me. They are far from an impartial and unbiased. They are facing prison time. I cannot have this tactic of kidnapping under the guise of

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civil commitment used again. The prospect of this happening is terrifying. The other thing I needed from him was medical treatment.

432. Then things take another downturn when, in September, 2019, Discover Bank sues me. Then around the beginning of November 2019, Discover records a default judgement on the local county clerk's records. Part of the remedies available to them to enforce their judgement is to attach their judgment to my assets and sell them. In December, 2019, they pursue just this. At this point, I am in a very bad situation.

433. Discover Banks (now discovered to be unlawful) attempt to sell my assets would not have been a problem had I not been disabled with traumatic stress. My state, North Carolina, allows a debtor to exempt property. The allowed exemptions include one vehicle + \$12,500 personal and business property + health aids. In my case, the effect of this is that 100% of everything I own is exempt.

434. There is one hurdle, however. If my property is to be exempted, I have 20 days from the date Discover Bank pursues attachment to fill out paperwork that lists my exempt property. I will list my exempted assets and their value. If I do not send in the paperwork by the due date, everything I own is eligible for sale (and will be sold, I am certain, at this time). By this time, my traumatic stress symptoms are through the roof. I am far past the point that I can fill out paperwork. I am in such acute distress that I cannot concentrate enough to complete any paperwork.

435. At the point in time where Discover Bank begins to pursue attachment, I have a very strong intuition that there is some process for disabled people to halt Discover Bank's litigation process in my county. I am also certain, and the same point in time, that without a doubt I am in the throes of severe post-traumatic stress disorder.

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This means I should be able to get this process halted. The problem with this is that I have diagnosed myself. I have not been diagnosed by a professional, and I cannot go to anyone at Atrium to get diagnosed.

436. Atrium would love nothing more than to use the legitimate distress I am under as an excuse to say I need inpatient care. They could then, once I am behind their walls, make me say that my belief that they have engaged in obvious criminal behavior is false. They could have this statement documented on their records. They can have me declared incompetent, in effect. In short, they have an array of options, with which they can use to further victimize me for their benefit.

437. John has many responsibilities. He has a busy career as a psychologist for the N.C. Department of Corrections. He is still able to help. He provides me a letter to hand to any officer processing any civil commitment and also to any medical facility. The function if the letter is to direct the evaluation to him.

438. John is also able to conduct multiple diagnostic interviews, after which he issues a diagnosis of post-traumatic stress disorder, chronic. The timing, unfortunately, was too short for me to seek relief from Discover Bank's actions through the local court system.

439. I filed an emergency petition for Chapter 7 Bankruptcy on January 15th, 2020. This was 14 minutes before the clerk's office closed, on the day that the exemption paperwork related to Discover Bank's fraudulent attachment process had to be turned in. I averted a sale of everything I own by 14 minutes. I did so in a state of being a broken mess of a human being. I was disheveled and in a state of complete panic.

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440. I have continued to see Kathy for medication refills, and she is, at this point, a full-on coconspirator with Wells Fargo. In our appointments, she asks questions which are designed for Wells Fargo's benefit and which have nothing to do with my medical care. She has asked me "what is the charge?" related to what I aim to sue Wells Fargo for. She has asked "what is the trustee's name?" in relation to my bankruptcy case. Why would, one might ask, my nurse practitioner ask for the name of my bankruptcy trustee?

441. I had told Jenny and others about a not entirely well-known feature of the bankruptcy process. The trustee, who is responsible for my estate, can liquidate any and all nonexempt assets. This includes obvious assets, such as collectibles, home furnishings, or other personal or business property in excess of the \$12,500 I can exempt. My estate also includes less tangible personal assets, like accrued causes for civil litigation. The trustee can litigate Wells Fargo and others who have harmed me and use the non-exempt portion of the proceeds to pay my creditors. I told Jenny of this threat, and I hinted it to others.

442. My purpose for telling Jenny this was to try to prod Jenny into coming clean. I alert her of this threat in hopes she will tell the truth and join my side. I don't want any painful consequences for her.

443. This tactic ends up being no help to me, but it apparently puts Wells Fargo on point to buy yet another soul. They appear to be asking Kathy to get this info. What other reason would she possibly have to ask for this?

444. I have often come to my visits in a state of extreme distress. This distress is either absent or discounted in her notes for my clinical visits. This is obviously for the

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benefit of Wells Fargo. I have zero doubt that all my records and everything I tell Kathy and Atrium are being shared with Wells Fargo.

445. Atrium Health knows exactly what Kathy and everyone else is up to. Everyone at the behavioral health center knows very well what has happened. *Everyone at Atrium's corporate privacy office knows what number **not** to answer.*

446. Atrium, and in particular Kathy, appear to have fallen into a behavior pattern that is common among people who are facing stiff consequences. Facing a loss, they are compounding their problems by engaging in more extreme risk taking. Their risk taking is in the form of additional criminal and civilly unlawful behavior.

447. In my desperation, there was one more potentially life altering step that I took. I needed someone to vet the evidence I had compiled. I needed someone with more credibility than this increasingly disheveled man I have become.

448. I have valued my privacy above all else. I hate the thought of being known to the masses in any way. I especially hate the masses knowing the very hard to explain and incredibly painful details of my life.

449. I have realized, however, that I have nothing to lose in becoming known to the masses. It is closer to reality to say that I have no choice. The stewards of my private information behave like out of control demons.

450. In a world where over 80% of all human communication is gossip, once your information gets out there to enough people it will be wherever you go. Any hope you have for privacy is over at some point in this process.

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451. My choices are thus to either let the entire world become stigmatizing hell, one city at a time, or to get it over with fast. Both options feel like a nightmare. I do not have a third option, unfortunately.

452. There is an entity out there with the ability to reason and the other capabilities needed to understand my evidence. They have exposed crimes before, and they have done so on their own dime. This entity, crucially, for sure is not and for sure will not be bought by Wells Fargo. I reach out to them.

453. The entity in question is known as The Los Angeles Times. They are a very big megaphone. They have infinitely more character and infinitely more objectivity, it seems, than the increasing number of smaller megaphones that are out there sharing my private information.

454. It was not a tough decision; it was made out of pure rationality. It was made knowing that the criminal carelessness of my healthcare provider and the wanton, demonic behavior of my former employer have robbed me, forever, of any hope of privacy.

455. I had nothing to lose and I stood to gain the credibility I needed. I have been speaking with The L.A. Times and sending its encrypted tip line bits of my long, complicated story for nearly a year at this point. They are in possession of most of the evidence I have accumulated during my investigation. Through this media outlet, though it will be a close call, I may have beaten my employer and my healthcare provider to the punch, in the endeavor to spread the unbearably painful and very private details of my life to the entire world.

X. Final Thoughts**XI.(a) Final Thoughts on Atrium Health**

456. My relationship with Atrium started when I came to their behavioral health center in 2011, and it worked out for both of us for a long time. I had moved to Charlotte and had no job when I found them online. I later had a job working at Bank of America under a temp agency. Following that, I had a very good paying job working at Wells Fargo. During the time I was at Wells Fargo, I had very good insurance. I had insurance that paid the bills, *for Atrium*.

457. After I walked out on Wells Fargo, I became part of what Atrium so often refers to as its "vulnerable populations". I had lost my insurance, and I had little income. At the time I was not part of any Medicaid or disability program.

458. To the end of serving these vulnerable populations, Atrium has received, in the past 5 years, well over \$1 billion in public funds through Medicaid GAP funding. This is in addition to the implicit funds received through reduced rate government bonds. They have also taken in billions of dollars of government-funded gross revenue during this same time period.

459. With these funds Atrium has generated huge, positive operating cash flows to put to use. The ever-expanding healthcare corporation has produced such cash flows for each year it has received this funding. Atrium has deployed these dollars by gobbling up real estate in my area and others.

460. Atrium's various business units have clearly not deployed any significant portion of these funds to protecting the rights of their vulnerable populations. After all I have witnessed and described here, you cannot tell me that the employees of Atrium's

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behavioral health units have had as much as one single meeting about the importance of patient privacy. It is possible they have had one or more since they accrued some dozens of felonies related to me. If so, this unfortunately came too late.

461. This is a great way to beef up Atrium's cash flows and Atrium's balance sheet. If all you have is some software and one team invested in patient privacy, the remaining \$0 expense keeps your capital expenditures budget fat. This has some very real consequences.

462. The consequences of all of this have to be put in the context of economics. There is not an unlimited amount of real estate in my county. There is not an unlimited amount of government funds, funded by taxpayers like me.

463. Atrium has gobbled up a lion's share of all of this. The onus is on Atrium to act out the purpose for which its nonprofit status is given, or to turn its corrupt employees in and then to surrender what it has acquired with public funds to someone else. Plenty of potential "someone else's" are not in business, due to the funds and real estate getting gobbled up by Atrium.

464. There are a lot of nice people at Atrium, and it always seemed to have so much going for it. I've always liked the people at the pharmacy. The majority of the inpatient staff at that unit (save their disregarding my privacy) knocked the ball out of the park. Atrium gives the appearance, at times, as having been corrupted out of nowhere by an obviously corrupt entity to be addressed later in this complaint.

465. Sadly to me, at the present moment, I shy from making the case that Atrium's staff and management have been corrupted by anyone other than themselves. I have offered them to speak. I offered to talk to their media department. I wanted them

to turn on and fight this corrupt bank, and in return I planned to do what I could to help save their image. I am, sadly, left to characterize them as follows: I, after having lived a nightmare of being stigmatized for years, have found myself in the "care" of a hospital that, overall, takes a lesser view of me, just like so many of the people outside of its facilities.

466. Rather than having an excess of compassion, the staff members at Atrium are really pumped up by the spot I am in. They are really pumped up by the fact that I am broke. They are really pumped up by my perceived lack of credibility in a courtroom. This all pumps them up about what they can get away with. They think they can get away with it all, so they act like the law doesn't exist, and they act in their own interests. Their vulnerable populations appear to be a career, a load of government funds, and a potential bonus for staff if a friend like Wells Fargo needs a favor.

467. Atrium, in its financial statements, mentions its "vulnerable populations", over and over. I'm sorry to say that this appears to be nothing but a marketing gimmick. It gives Atrium a good image, an image it can use to continue to hoard funds that others may be competing for.

468. The vulnerable populations Atrium provides services for appear to have one very serious vulnerability that isn't mentioned in Atrium's financials; that being that they are prisoners at will of anyone in the extended social networks of the numerous pumped up, out of control healthcare criminals that work for Atrium Health. The people in this city deserve a list of these people. That way they can be prepared for the day that they are teleported to Atrium's inpatient unit to be treated kindly, served peanut butter and jelly

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sandwiches, and then leave saddled with a \$7,000 bill. Maybe Medicaid will foot the bill for their kidnapping too, as it ultimately did mine.

469. Atrium will offer some defenses; I am sure. I will preempt some of the expected defenses, with responses, in paragraphs that will follow. For so long, I wanted to defend this hospital, but I cannot; the ongoing criminal behavior of its employees gives not one reason to.

470. I offered the people that work and manage Atrium the opportunity to turn against this bank, and to help me. I lavished them with praise that they didn't deserve, even after they had already violated my rights. They are only concerned with themselves. They have even chastised me and said they will not deal with the less comfortable aspects of my PTSD, *which I developed over **theirs** and Wells Fargo's abuse.*

471. One defense that I will offer on their behalf is that they have helped me tremendously. Some of my medications are extremely expensive. I get them at huge discount, filled by the kind people at their pharmacy. I have done so for years, even when I had good paying jobs (insurance doesn't get you far with some of my medications).

472. The next expected defense will be how I kept mostly silent, only referring to this privacy invasion by Wells Fargo as "emotionally painful things I am dealing with". This situation caught the hospital off guard, they are likely to say. I would like to know how my telling them the full details of what happened with Wells Fargo would have helped, given the facts I have laid out.

473. If at any time I told them, what would be different? Would Wells Fargo's cash account be empty? Would Wells Fargo be less vicious in perpetrating crimes? Would these medical professionals run wild be any less pumped up about what they can get away with? Will they have less desire for a healthy bonus from a friend like Wells Fargo? This clearly will never work out.

474. The only thing that had a chance of helping in any case, in my opinion, is for this hospital to have had controls that are enforced. This would need to be added to a culture where patient rights and privacy are taken seriously. By this, I mean taken seriously as reflected in Atrium's actions, not as reflected in Atrium's marketing materials.

475. The final defense that I anticipate is that I "brought them all this trouble." This is my intuition based on my feel for human psychology. This is the saddest and also the most ridiculous excuse conceivable, but I do see it coming.

476. When I am kidnapped, in a scam perpetrated by your hospital and Wells Fargo, and I then arrive at the door to your hospital in handcuffs, I have to tell you that I did not bring **you** anything. It is a very comfortable place for Atrium to be in, to put the blame on me by saying that I "brought them all of this trouble." What is less comfortable is the following, much more reasoned and evidence-based conclusion: Wells Fargo brought them all of this trouble.

477. The statement "Wells Fargo brought us all this trouble" is far less convenient to the staff at Atrium. They can offload the blame to Wells Fargo, but then they are left to fight this \$2 trillion behemoth. That's a tough battle to win. I sometimes feel as if I am the only one on earth who will take on that challenge.

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478. Atrium seems to not like even the thought of a battle with Wells Fargo, and blaming Wells Fargo for what has occurred will create all sorts of unpleasant side effects. Who will be their new counterparty to interest rate swaps, as Wells Fargo currently is? Who will underwrite and finance Atrium's bond debt once Atrium boots its current financier, Wells Fargo? It's far easier to take advantage of my relative powerlessness and to beat the hell out of me.

479. Faced with such an inconvenient reality, there is an all too human tendency to depart from reality and make absurd statements like "our kidnapping victim brought us all this trouble. The freely chosen behavior of our corrupt and out of control healthcare professionals is *his* fault."

480. That last sentence has a hint at who is to blame. In fact, it, just maybe, has more than a hint; it may have the answer. Where is the number one source to go to if one is looking for primary party to blame for the consequences of one's behavior? This absurd sounding question has an obvious answer. Atrium Health has chosen to operate in a certain way. The way Atrium has operated worked out great for Atrium and its management for a very long time. It has come back to bite them, possibly, in my case.

481. The nice thing, from a financial perspective, about serving "vulnerable populations" is that by definition those populations are mostly powerless. Powerless people in many cases do not know their rights. In most cases they lack any means to enforce their rights.

482. This all means that there is no probable consequence for not taking the rights of vulnerable people seriously. By seriously, I mean seriously enough to dump some of their \$600 million operating cash flow, reported on their fiscal year end 2018

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audited financial statements, into protecting the rights of these vulnerable populations.

Keeping all this cash works, *for Atrium*.

483. In me, they have found a possible outlier that alters any projected financial outcome of this method of operating. That they had no substantial complaints filed from members of their "vulnerable populations" until I came along, ***this is not evidence that I caused them problems; it much more likely the case that I am the first from within these populations to have the technical know-how and ability to go home and conduct a criminal investigation on my healthcare provider, and report them to the F.B.I.*** I cannot believe these words, as I am typing them.

XI.(b) Final Thoughts on the Charlotte Mecklenburg Police

484. There is little to say here. I have lived in this city for going on 9 years. The interactions I have had with the Charlotte Mecklenburg Police, save the one that is included in the subject matter of this complaint, lead me to believe they are very ethical and hardworking people. The officer who kidnapped me has participated in some terrible wrongdoing. If, however, he is my friend Jenny's neighbor, as I expect he is, I had long considered him a friend. This was without him even knowing who I was. Jenny often asked her "police officer neighbor" for advice about people who were causing her trouble. Her asking for advice was often done at my implied or explicit direction. I liked it very much that someone with a gun lived next door. Sadly, all the good he has done for others and that he treats others fairly does me no good.

XI.(c) Final Thoughts on Mobile Crisis

485. These counselors have participated in a high-risk criminal transaction, with a correspondingly high reward. I have some terrible feelings towards these people.

They have participated in the destruction of my life. As to my opinion, I tend to want them to be punished very harshly. It would seem to me that the cost of engaging in these transactions has to be enforced.

486. You can't have a free for all, with \$100s of thousands being paid, and a slap on the wrist punishment. That just causes the same behavior to run wild in society. I hedge my bets, however, based on the fact that this girl is Jenny's friend.

487. Wells Fargo has, typical of its despicable behavior, used Jenny and her social network to commit crimes. They have done her massive harm. It has been hell on this girl, and I make no bones about the fact that *I* have been *hell* to deal with during this downward spiral. I don't like the idea of compounding this poor girl's trauma.

XI.(d) Final Thoughts on Wells Fargo

488. Wells Fargo is the most unbelievably corrupt company I have ever seen in my life. This glazy-eyed megabank offers a composite picture of everything *not* to be, if you are a company. If you listen to the words its executives speak, Wells Fargo seems to be fond of "doing the right thing", to give one variation of a buzz phrase that is repeated over and over. They forgot the other half of that sentence, which reads: "...for Wells Fargo". It's about doing the right thing *for Wells Fargo*. It's all about them. This is the bottom line. I have lived the reality of who this bank is; I am saturated in it. That's it, in one sentence. They act in their interests, period, not concerned with what is right, but instead concerned with what they can get away with.

489. "their interests", from the immediately preceding sentence, has to be defined. When they act in this their interest, what are the interests and who is taking the actions? One might be tempted to say that it is the shareholder's interest, reflected in

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the numbers listed on Wells Fargo's financial statements. Although this is indeed Wells Fargo's legal mandate, I shy from making that statement. The rampant crime this bank engages in and its boundless ambition to get away with the next thing leaves Wells Fargo's shareholders hurting.

490. "their interests" refers to the interests of the incompetent, shortsighted cabal of criminals that this bank seems to inevitably attract for or create out of the people who manage it and the people who pull the levers of its moral behavior. It's about them and their desire to do as they please, unconstrained by concerns about what is right and what is wrong.

491. In my case, I feel as if I am dealing with a singular entity with nightmarish qualities. This entity I am dealing with is immoral to the extreme. It is as if I am contending with a demon. This demon is most likely composed of a collection of people who are extremely privileged and also extremely *despicable*.

492. This demon has no decency. It seems to have no conscience. It has no bravery. It seems to be composed, solely, of a self-preservation instinct combined with wanton criminal ambition.

493. This demon's complete lack of decency is apparent in its actions and its motives. Wells Fargo has plotted to use my health condition as a weapon against me. Wells Fargo has cold-bloodedly hijacked the social infrastructure of my city. Wells Fargo has diverted funds intended for the most vulnerable populations within my city to cover up Wells Fargo's crimes. Wells Fargo has used hospital facilities intended for the vulnerable populations of my city as if they are ***toys which belong to Wells Fargo***.

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Wells Fargo has done this while hiding, like a coward, behind a pitiful little woman who was my best friend.

XI.(e) Final Thoughts on Me

494. My life has been destroyed. My soul has been murdered by this bank and by those whom they have colluded and conspired with. I have been treated as a man with no dignity. I have lived a nightmare. I have lost what I valued most, my privacy, and it will never be regained. It is irreversible.

495. After killing myself for years to be the best person I can be, I have found myself in the company of people who do not share this ambition. I have found myself pulverized by people who see life in terms of their own interests and what they can get away with. Just as I killed myself to be the best person I could be in life, I killed myself to be the best employee I could be for Wells Fargo. They repay me by destroying my life, and then declaring war on me when I ask to be told the truth and to have a simple conversation.

496. It will *never* be ok for me. Please do not suggest that it will be. It only hurts further when people make light of or don't understand the gravity of the destruction I have been dealt. I cannot put into words the pain I feel and the damage I have been caused. There is no amount of anything that I wouldn't give to take this all back. My life, now, is mostly a question of how much I will suffer and for how many more days.

497. What do I want? I want this bank, and also those it has conspired with and corrupted, prosecuted. I am turning them over to the criminal authorities and I want them civilly pursued.

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498. I want them pursued civilly because I want them to pay me. I want them to pay me so that I can stop listening to my mother cry when I ask her for money because I am disabled and cannot make any. She has none and her credit is running out. Further, I want them to pay me so that I can defend myself. I do not trust anyone but *me* to take on this bank when they do it again.

499. They will be terrorizing me again. No one will never convince me that it is over. For sure, they will never convince me that it is over. If they promise, they will break their promise; their word is worth *nothing*. I need to be able to defend myself and to be in a position to inhibit their wanton criminal ambition.

500. This is so that I don't have to sit here and be pulverized by them and an entire city they corrupt, all while I am disabled and am about to lose everything that I own. I cannot live like this anymore. I cannot live like anything as I had a chance of before they destroyed me, but I especially cannot live like this.

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I have compiled a partial list of crimes and civil law violations that I believe may have occurred. Filing this complaint has recently become a more urgent matter, and this is the best I can do at the moment. I intended to make a complete list before submitting my complaint. Note that I am fully aware that criminal law enforcement authorities have no interest in civil matters. Civil matters are still included, if only for the sake of completeness.

In both lists, "Wells Fargo" refers to the parties related to the economic entity that does business as Wells Fargo and who have also committed unlawful acts described in the complaint. All parties are not known to me and I am not certain of who (or what entity or entities) would ultimately be legally accountable for their actions.

I believe the following criminal law violations are likely to have occurred:

- a) Violation of 18 U.S.C. § 1347 by Atrium Health, to the extent Atrium intended to file a fraudulent Medicaid application to cover its tracks.
- b) Violation of 18 U.S.C. § 1349 by Wells Fargo, who conspired to obtain my healthcare records through the means stated above. This offense would also include Atrium Health as a coconspirator.
- c) Potential violation of 18 U.S.C. § 1956 by Allie Roe, to the extent she has deployed funds received for her criminal behavior or has otherwise conspired to conceal the nature of the proceeds obtained for her unlawful behavior in a manner that meets the elements of 18 U.S.C. § 1956(a)(1)
- d) Potential violation of 18 U.S.C. § 1956 by Wells Fargo to the extent that they have cooperated or conspired in the preceding offense.
- e) Violation of N.C. Gen. Stat. § 14-39 by Charlotte-Mecklenburg Police officer Christopher D'Avanzo. D'Avanzo, not being in the possession of the civil commitment petition, did not have any legal right to do any of the following:
 1. Enter my residence, against my consent
 2. Handcuff me, against my consent
 3. Transport me to Atrium's inpatient unit, against my consent

In a deliberate violation of my constitutional right to due process of law, D'Avanzo committed each action in this numbered list. These were engaged in as part of a conspiracy to commit healthcare fraud and as a means to facilitate the commission of healthcare fraud.

This item is accompanied by a conspiracy to commit a felony involving the following:

- Atrium Health
- Allie Roe
- Cheryl Horton
- Ginger Marsh

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- Christopher D'Avanzo
- Jennifer Cox
- Wells Fargo

It is also accompanied by a criminal false imprisonment involving D'Avanzo and a separate criminal false imprisonment involving Atrium Health.

f) Violation of 18 U.S.C. § 1621 involving the following:

- Allie Roe
- Jennifer Cox

This item is accompanied by a conspiracy to commit a felony, potentially involving Wells Fargo, Atrium Health, and Christopher D'Avanzo in addition to Allie Roe and Jennifer Cox

g) Ongoing violations of the HIPAA Act involving Atrium Health

f) Unlawful conspiracy to obtain healthcare records involving Wells Fargo.

In addition, I believe the following civil law violations may have occurred:

- (a) The original intrusion upon seclusion, perpetrated in roughly the first week of December 2017 and also the accompanying ADA of 1990 violation.
- (b) Personal injury for the emotional distress caused by Wells Fargo's disparate treatment of me
- (c) Negligent hiring, perpetrated by Wells Fargo
- (d) Constructive fraud perpetrated by Mobile Crisis counselors Allie Roe, Cheryl Horton, and Ginger Marsh
- (e) Civil constructive fraud perpetrated by Atrium Health, for each instance in which Atrium Health has used my personal health information or betrayed its responsibilities to me for Atrium or its employees' gain
- (f) Repeated civil torts of negligence related to HIPAA violations.
- (g) A civil trespass perpetrated by the Charlotte-Mecklenburg Police by entering my apartment against my consent, having no legal right to do so.
- (h) A civil battery perpetrated by the Charlotte-Mecklenburg Police in the act placing me in handcuffs
- (i) A civil offense of false imprisonment perpetrated by the Charlotte-Mecklenburg police by placing me in handcuffs

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- (j) A civil tort of intentional infliction of emotional distress perpetrated by the Charlotte-Mecklenburg Police.
- (k) A civil false imprisonment, perpetrated by Atrium Health, by keeping me in its inpatient unit on 501 Billingsley road against my consent. Atrium did this having full knowledge that there was no legal basis to do so and that I was delivered to their unit by means of kidnapping
- (l) A civil conspiracy, including and perpetrated by all of the following for their participation in the civil conspiracy to have me kidnapped and falsely imprisoned by the Charlotte-Mecklenburg Police and then subsequently falsely imprisoned at the inpatient unit on Billingsley road:
- Wells Fargo
 - The Charlotte Mecklenburg Police
 - Mobile Crisis
 - Atrium health
 - Jennifer Cox
- (m) A civil tort of abuse of process perpetrated by each of the parties listed in (l), for their using the State of N.C.'s civil commitment process to avoid consequences for or otherwise cover up criminal and/or civil wrongdoing, or alternatively, for personal gain
- (n) Independent acts of civil intrusion upon seclusion in each and every case where Wells Fargo has attempted to obtain my personal information through any means. This includes through asking my friend Jenny or inducing her to obtain information to be delivered to them



AH Behavioral Health Charlotte

501 Billingsley Road

Charlotte, NC 28211-

Admit Date: 4/22/2019 03:35 EDT
Disch Date: 4/24/2019 12:30 EDT
Admitting: MORCIGLIO ,APRIL HARRELL MD
Attending: MORCIGLIO ,APRIL HARRELL MD
Printed: 1/22/2020 16:31 EST

Pt Name: WILLIAMS III, LEONARD CLINTON
MRN: 0000642066 Acct#: 6437633200
DOB: 11/1/1980 Age: 38 years Sex: Male
Location: OUH
Print ID: 347553371

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

Legal

Admit Date: 4/22/2019 03:35 EDT
Disch Date: 4/24/2019 12:30 EDT
Admitting: MORCIGLIO ,APRIL HARRELL MD
Attending: MORCIGLIO ,APRIL HARRELL MD
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Pt Name: WILLIAMS III, LEONARD CLINTON
MRN: 0000642066 Acct#: 6437633200
DOB: 11/1/1980 Age: 38 years Sex: Male
Location: OUH
Print ID: 347553371

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* Custody Order - Auth (Verified) *

STATE OF NORTH CAROLINA		File No.	
MECKLENBURG County		In The General Court Of Justice District Court Division	
IN THE MATTER OF:		FINDINGS AND CUSTODY ORDER INVOLUNTARY COMMITMENT	
Name And Address Of Respondent LEONARD CLINTON WILLIAMS III [REDACTED] TO: 606 RANDOLPH ST BILLINGSLEY RD CHARLOTTE NC 28211		(PETITIONER APPEARS BEFORE MAGISTRATE OR CLERK)	
Social Security No. Of Respondent	Date Of Birth	Drivers License No. Of Respondent	State
	11/01/1980		G.S. 122C-252, -261, -263, -281, -283
I. FINDINGS			
The Court finds from the petition in the above matter that there are reasonable grounds to believe that the facts alleged in the petition are true and that the respondent is probably: (Check all that apply) <input checked="" type="checkbox"/> 1. mentally ill and dangerous to self or others or mentally ill and in need of treatment in order to prevent further disability or deterioration that would predictably result in dangerousness. <input type="checkbox"/> In addition to being mentally ill, the respondent probably is also mentally retarded. (If this finding is made, see G.S. 122C-261(b) and (d) for special instructions.) <input type="checkbox"/> 2. a substance abuser and dangerous to self or others.			
II. CUSTODY ORDER			
TO ANY LAW ENFORCEMENT OFFICER: The Court ORDERS you to take the above named respondent into custody WITHIN 24 HOURS AFTER THIS ORDER IS SIGNED and take the respondent for examination by a person authorized by law to conduct the examination. (A COPY OF THE EXAMINER'S FINDINGS SHALL BE TRANSMITTED TO THE CLERK OF SUPERIOR COURT IMMEDIATELY.) → IF the examiner finds that the respondent IS NOT a proper subject for involuntary commitment, then you shall take the respondent home or to a consenting person's home in the originating county and release him/her. → IF the examiner finds that the respondent IS mentally ill and a proper subject for outpatient commitment, then you shall take the respondent home or to a consenting person's home in the originating county and release him/her. → IF the examiner finds that the respondent IS mentally ill and a proper subject for inpatient commitment, then you shall transport the respondent to a 24-hour facility designated by the State for the custody and treatment of involuntary clients and present the respondent for custody, examination and treatment pending a district court hearing. → IF the examiner finds that the respondent IS a substance abuser and subject to involuntary commitment, the examiner must recommend whether the respondent be taken to a 24-hour facility or released, and then you shall either release him/her or transport the respondent to a 24-hour facility designated by the State for the custody and treatment of involuntary clients and present the respondent for custody, examination and treatment pending a district court hearing.			
Date	Time	Signature	<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input checked="" type="checkbox"/> CSC <input checked="" type="checkbox"/> Magistrate
04/21/2019	9:40 AM	J. Wilson	
This Order is valid throughout the State. If the respondent is taken into custody, this Order is valid for seven (7) days from the date and time of issuance.			
III. RETURN OF SERVICE			
A. CUSTODY CERTIFICATION			
<input type="checkbox"/> Respondent WAS NOT taken into custody for the following reason: <input checked="" type="checkbox"/> I certify that this Order was received and respondent served and taken into custody as follows:			
Date Respondent Taken Into Custody	Time	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	
04/21/2019	11:43		
Name Of Law Enforcement Officer (Type Or Print)	Signature Of Law Enforcement Officer		
C. D'Averno	[Signature]		
Name Of Law Enforcement Agency	Badge No. Of Officer		
CMFD	5504		
NOTE TO LAW ENFORCEMENT OFFICER: If respondent is not taken into custody within 24 hours after this Order is signed, check the appropriate box above and return to the Clerk of Superior Court immediately. If respondent is served and taken into custody, complete return of service on the reverse. When taking respondent into custody you must inform him or her that he or she is not under arrest and has not committed a crime, but is being transported to receive treatment and for his or her own safety and that of others.			
Original-File Copy-24-Hr		WILLIAMS, LEONARD CLINT* CSN: 6437633200 FAC: H MRN: 0000642066 Adm Date: 4/21/2019 DOB: 11/01/1980 (38 yrs) Male Att Phy: 99047 BHR EMERGENCY MEDIC*	
AOC-SP-302A, New 11/12 © 2012 Administrative Office of the Courts			

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* Custody Order - Auth (Verified) *

LI WILLIAMS *WILSON*

B. PATIENT DELIVERY TO FIRST EXAMINATION SITE			
The respondent was presented to an authorized examiner as shown below:			
Date Presented <i>04/26/2019</i>	Time <i>11:43</i>	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Name Of Examiner (Type Or Print) <i>Silver</i>
Name Of Examining Facility <i>CMC Billingsly</i>		County Of Examining Facility <i>Mecklenburg</i>	
Name Of Law Enforcement Officer (Type Or Print) <i>C. D. A. Aza</i>		Signature Of Law Enforcement Officer <i>[Signature]</i>	
Name Of Law Enforcement Agency <i>CMPD</i>		Badge No. Of Officer <i>5504</i>	
C. FOR USE WHEN TRANSPORTING AFTER FIRST EXAMINATION: PATIENT RELEASED OR DELIVERED TO 24-HOUR FACILITY			
<input type="checkbox"/> 1. The examiner found that the respondent does not meet the commitment criteria, or meets the criteria for outpatient commitment, or meets the criteria for substance abuse commitment and should be released pending a hearing. I returned respondent to his/her regular residence or the home of a consenting person and <u>released respondent from custody</u> .			
<input type="checkbox"/> 2. The examiner found that the respondent is mentally ill and meets the criteria for inpatient commitment, or meets the criteria for substance abuse commitment and should be held pending a district court hearing. I transported and <u>placed the respondent in the custody of the 24-hour facility named below</u> for observation and treatment.			
Name Of 24-Hour Facility		County Of 24-Hour Facility	
<input type="checkbox"/> 3. Respondent was temporarily detained under appropriate supervision at the site of first examination because the first examiner recommended inpatient commitment and a 24-hour facility was not immediately available or medically appropriate. Upon further examination, an examiner determined that the respondent no longer meets inpatient commitment criteria or meets the criteria for outpatient commitment. I returned the respondent to his/her regular residence or the home of a consenting person and <u>released respondent from custody</u> .			
Date Delivered	Time Delivered	<input type="checkbox"/> AM <input type="checkbox"/> PM	Name Of Examiner (Type Or Print)
Name Of Examining Facility		County Of Examining Facility	
Name Of Law Enforcement Officer (Type Or Print)		Signature Of Law Enforcement Officer	
Name Of Law Enforcement Agency		Badge No. Of Officer	

NOTE TO LAW ENFORCEMENT OFFICER: Upon completing this section, immediately return this form and a copy of the examiner's written report (Form No. DMH 5-72-01) to the Clerk of Superior Court of the county where the petition was filed and the custody order issued (See top of reverse side).

WILLIAMS, LEONARD CLINT*
CSN: 6437633200 FAC: H
MRN: 0000642066 Adm Date: 4/21/2019
DOB: 11/01/1980 (38 yrs) Male
Alt Phy: 99047 BHR EMERGENCY MEDIC*

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* ERIC - Auth (Verified) *

STATE OF NORTH CAROLINA Department of Health and Human Services
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

County: Mecklenburg

1ST ERIC

EXAMINATION AND RECOMMENDATION TO
DETERMINE
NECESSITY FOR INVOLUNTARY COMMITMENT

2ND ERIC

Name of Respondent: Williams, Leonard Age: 38 DOB: 11/1/80 Sex: M Race: CA M.S. Single

Address (Street, Box Number, City, State, Zip (use facility address after 1 year in County: Mecklenburg)

City: [REDACTED] Phone: [REDACTED]

Legally Responsible Person Next of Kin (Name and Address) Relationship:

Self Phone: [REDACTED]

Attitioner (Name and address) Relationship: Friend

Jennifer Cox Phone: [REDACTED]

The above-named respondent was examined on 4/23, 2019 at 2:07 o'clock P. M. at BHC ED/OBS

OR, I examined the respondent via telemedicine technology on 20 at [REDACTED] o'clock M. Included in the examination was an assessment of the respondent's: ☒ (1) current and previous mental illness or mental retardation including, if available, previous treatment history; (2) dangerousness to self or others as defined in G.S. 122C-3 (11*); (3) ability to survive safely without inpatient commitment, including the availability of supervision from family, friends, or others; and (4) capacity to make an informed decision concerning treatment. ☒ (1) current and previous substance abuse including, if available, previous treatment history; and (2) dangerousness to himself or others as defined in G.S. 122C-3 (11*). The following findings and recommendations are made based on this examination. For telemedicine evaluations only: ☐ I certify to a reasonable degree of medical certainty that the results of the examination a telemedicine were the same as if I had been personally present with the respondent OR ☐ The respondent needs to be taken to a facility for face to face evaluation. (*Statutory Definitions are on reverse side)

SECTION I - CRITERIA FOR COMMITMENT

Inpatient. It is my opinion that the respondent is: ☐ mentally ill; ☐ dangerous to self; ☐ dangerous to others
(1st Exam - Physician or Psychologist) ☐ in addition to being mentally ill is also mentally retarded
(2nd Exam - Physician only) ☐ none of the above

Outpatient. It is my opinion that: ☐ the respondent is mentally ill
(Physician or Psychologist) ☐ the respondent is capable of surviving safely in the community with available supervision
☐ based upon the respondent's treatment history, the respondent is in need of treatment in order to prevent further disability or deterioration which would predictably result in dangerousness as defined by G.S. 122C-3 (11*)
☐ the respondent's current mental status or the nature of his illness limits or negates his/her ability to make an informed decision to seek treatment voluntarily or comply with recommended treatment
☐ none of above

Substance Abuse. It is my opinion that the respondent is: ☐ a substance abuser
(1st Exam - Physician or Psychologist; 2nd Exam - If 1st exam done by Physician, 2nd exam may be done by Qual. Prof.) ☐ dangerous to himself or others
☐ none of the above

SECTION II - DESCRIPTION OF FINDINGS

Clear description of findings (findings for each criterion checked above in Section I must be described):

No acute suicidal, homicidal or assaultive ideation.
No psychotic symptoms.
Willing to comply with voluntary services.
No longer meets criteria for involuntary commitment.

over

Form No. DMH 5-72-01
Revised December 2009

EXAMINATION AND RECOMMENDATION FOR INVOLUNTARY COMMITMENT

WILLIAMS, LEONARD CLINT*
CSN: 6437633200 FAC: H
MRN: 0000642066 Adm Date: 4/21/2019
DOB: 11/01/1980 (38 yrs) Male
Att Phy: 99047 BHR EMERGENCY MEDIC*



03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* ERIC - Auth (Verified) *

Notable Physical Conditions:

None acute

Impression/Diagnosis:

Bipolar I Disorder

Current Medications (medical and psychiatric)

See chart

COPY

SECTION III - RECOMMENDATION FOR DISPOSITION

- ☐ Inpatient Commitment for _____ days (respondent must be mentally ill and dangerous to self or others)
- ☐ Outpatient Commitment (respondent must meet ALL of the first four criteria outlined in Section I, Outpatient)
- Proposed Outpatient Treatment Center or Physician: (Name) _____
- (Address and Phone Number) _____
- LME notified of appointment: (Name of LME and date) _____
- ☐ Substance Abuse Commitment (respondent must meet both criteria outlined in Section I, Substance Abuse)
- ☐ Release respondent pending hearing - Referred to: _____
- ☐ Hold respondent at 24-hour facility pending hearing - Facility: _____
- ☐ Respondent does not meet the criteria for commitment but custody order states that the respondent was charged with a violent crime, including a crime involving assault with a deadly weapon, and that he was found not guilty by reason of insanity or incapable of proceeding; therefore, the respondent will not be released until so ordered following the court hearing.
- ☒ Respondent or Legally Responsible Person Consented to Voluntary Treatment
- ☒ Release Respondent and Terminate Proceedings (insufficient findings to indicate that respondent meets commitment criteria)
- ☐ Respondent was held 7 days from issuance of custody order but continues to meet commitment criteria. A new petition will be filed.
- ☐ Other (Specify) _____

Signature of _____ M.D.
Signature of _____
Print Name of Examiner
Behavioral Health Charlotte (Atrium Health)
501 Billingsley Rd
Charlotte NC 28211
704 358 2800

This is to certify that this is a true and exact copy of the Examination and Recommendation for Inpatient Commitment

Original Signature - Record Custodian
BHC
Address or Facility
4/23/19
Date

NOTE: Only copies to be introduced as evidence need to be certified

CC: Clerk of Superior Court where petition was initiated (initial hearing only)
Clerk of Superior Court where 24-hour facility is located or where outpatient treatment is supervised
Respondent or Respondent's Attorney and State's Attorneys, when applicable
Proposed Outpatient Treatment Center or Physician (Outpatient Commitment); Area Program / Physician (Substance Abuse Commitment)
NOTE: If it cannot be reasonably anticipated that the clerk will receive the copies within 48 hours of the time that it was signed, the physician or eligible psychologist/qualified professional shall communicate his findings to the clerk by telephone.

*STATUTORY DEFINITIONS

"Dangerous to self". Within the relevant past: (a) the individual has acted in such a way as to show: (1) that he would be unable without care, supervision, and the continued assistance of others not otherwise available, to exercise self-control, judgment, and discretion in the conduct of his daily responsibilities and social relations or to satisfy his need for nourishment, personal or medical care, shelter, or self-protection and safety; and (2) that there is a reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment is given. A showing of behavior that is grossly irrational, of actions that the individual is unable to control, of behavior that is grossly inappropriate to the situation, or of other evidence of severely impaired insight and judgment shall create a prima facie inference that the individual is unable to care for himself; or (b) the individual has attempted suicide or threatened suicide and that there is a reasonable probability of suicide unless adequate treatment is given; or (c) the individual has mutilated himself or attempted to mutilate himself and that there is a reasonable probability of serious self-mutilation unless adequate treatment is given. NOTE: Previous episodes of dangerousness to self, when applicable, may be considered when determining reasonable probability of physical debilitation, suicide, or self-mutilation.

"Dangerous to others". Within the relevant past, the individual has inflicted or attempted to inflict or threatened to inflict serious bodily harm on another, or has acted in such a way as to create a substantial risk of serious bodily harm to another, or has engaged in extreme destruction of property; and that there is a reasonable probability that this conduct will be repeated. Previous episodes of dangerousness to others, when applicable, may be considered when determining reasonable probability of future dangerous conduct.

"Mental illness": (a) when applied to an adult, an illness which so lessens the capacity of the individual to use self-control, judgment, and discretion in the conduct of his affairs and social relations as to make it necessary or advisable for him to be under treatment, care, supervision, guidance or control; and (b) when applied to a minor, a mental condition, other than mental retardation alone, that so lessens or impairs the youth's capacity to exercise age adequate self-control and judgment in the conduct of his activities and social relationships so that he is in need of treatment.

"Substance abuser". An individual who engages in the pathological use or abuse of alcohol or drugs which produces an impairment in personal, social, or occupational functioning. Substance abuse m

WILLIAMS, LEONARD CLINT* that
CSN: 6437633200 FAC: H
MRN: 0000642066 Adm Date: 4/21/2019
DOB: 11/01/1980 (38 yrs) Male
Att Phy: 99047 BHR EMERGENCY MEDIC*
4/23/19

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* ERIC - Auth (Verified) *

STATE OF NORTH CAROLINA Department of Health and Human Services
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
County: Mecklenburg

1ST ERIC

Examination and Recommendation to Determine Necessity for Involuntary Commitment
Patient Record # _____ Film # _____

Name of Respondent: Williams, Leonard Age 38 DOB 11/1/80 Sex M Race Cauc. M.S. Single
Address (Street, Box Number, City, State, Zip (use facility address after 1 year in city): _____ County: Mecklenburg
Phone: _____

Legally Responsible Person Self Next of Kin (Name and Address) _____ Relationship: _____
Phone: _____

Detainer (Name and address) Jennifer Cox _____ Relationship: Friend

The above-named respondent was examined on 4/22, 2019, at 0300 o'clock A.M. at 5110 _____
OR, I examined the respondent via telemedicine technology on _____ 20 ____ at _____ M. Included in the examination was an assessment of the respondent's: (1) current and previous mental illness or
mental retardation including, if available, previous treatment history; (2) dangerousness to self or others as defined in G.S. 122C-3 (11*); (3)
ability to survive safely without inpatient commitment, including the availability of supervision from family, friends, or others; and (4) capacity to
make an informed decision concerning treatment. (1) current and previous substance abuse including, if available, previous treatment history;
and (2) dangerousness to himself or others as defined in G.S. 122C-3 (11*). The following findings and recommendations are made based on
this examination. For telemedicine evaluations only: ☐ I certify to a reasonable degree of medical certainty that the results of the examination
a telemedicine were the same as if I had been personally present with the respondent OR ☐ The respondent needs to be taken to a facility for
face to face evaluation. (*Statutory Definitions are on reverse side)

SECTION I - CRITERIA FOR COMMITMENT

Inpatient. It is my opinion that the respondent is: ☒ mentally ill; ☐ dangerous to self; ☐ dangerous to others
1st Exam - Physician or Psychologist ☐ in addition to being mentally ill is also mentally retarded
2nd Exam - Physician only ☐ none of the above

Outpatient. It is my opinion that: ☐ the respondent is mentally ill
(Physician or Psychologist) ☐ the respondent is capable of surviving safely in the community with available supervision
☐ based upon the respondent's treatment history, the respondent is in need of treatment in order
to prevent further disability or deterioration which would predictably result in dangerousness
as defined by G.S. 122C-3 (11*)
☐ the respondent's current mental status or the nature of his illness limits or negates his/her
ability to make an informed decision to seek treatment voluntarily or comply with
recommended treatment
☐ none of above

Substance Abuse. It is my opinion that the respondent is: ☐ a substance abuser
(1st Exam - Physician or Psychologist; 2nd Exam - If 1st ☐ dangerous to himself or others
exam done by Physician, 2nd exam may be done by Qual. Prof.) ☐ none of the above

SECTION II - DESCRIPTION OF FINDINGS

Clear description of findings (findings for each criterion checked above in Section I must be described):

Friend and former co-worker reported that patient sent numerous texts detailing plans to harm self. Patient needs further psychiatric evaluation.

over

Form No. DMH 5-72-01 EXAMINATION AND RECOMMENDATION FOR INVOLUNTARY COMMITMENT
Revised December 2009

WILLIAMS, LEONARD CLINT
CSN: 643733200 FAC: H
MRN: 000642056 Adm Date: 4/21/2019
DOB: 11/01/1980 (38 yrs) Race: W
DOB: 99047 BHR EMERGENCY MEDIC
ADP: 99047 BHR EMERGENCY MEDIC

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* ERIC - Auth (Verified) *

Notable Physical Conditions: *see chart*

Impression/Diagnosis: *Bipolar Disorder*

WILLIAMS, LEONARD CLINT*
CSN: 6437633200 FAC: H
MRN: 0000642068 Adm Date: 4/21/2019
DOB: 11/01/1980 (38 yrs) Male
Att Phy: 99047 BHR EMERGENCY MEDIC*

ications (medical and psychiatric)
el chart

SECTION III - RECOMMENDATION FOR DISPOSITION

☒ Inpatient Commitment for *30* days (respondent must be mentally ill and dangerous to self or others)

☐ Outpatient Commitment (respondent must meet ALL of the first four criteria outlined in Section I, Outpatient)

Proposed Outpatient Treatment Center or Physician: (Name)
(Address and Phone Number)

LME notified of appointment: (Name of LME and date)

☐ Substance Abuse Commitment (respondent must meet both criteria outlined in Section I, Substance Abuse)

☐ Release respondent pending hearing - Referred to:

☐ Hold respondent at 24-hour facility pending hearing - Facility:

☐ Respondent does not meet the criteria for commitment but custody order states that the respondent was charged with a violent crime, including a crime involving assault with a deadly weapon, and that he was found not guilty by reason of insanity or incapable of proceeding; therefore, the respondent will not be released until so ordered following the court hearing.

☐ Respondent or Legally Responsible Person Consented to Voluntary Treatment

☐ Release Respondent and Terminate Proceedings (insufficient findings to indicate that respondent meets commitment criteria)

☐ Respondent was held 7 days from issuance of custody order but continues to meet commitment criteria. A new petition will be filed.

☐ Other (Specify)

Signature: *[Signature]* M.D.
Physician Signature

Signature/Title - Eligible Psychologist/Qualified Professional
[Signature]
Print Name of Examiner

Behavioral Health Charlotte (Atrium Health)
501 Billingsley Rd
Charlotte NC 28211
704 358 2800

This is to certify that this is a true and exact copy of the Examination and Recommendation for Involuntary Commitment

Original Signature - Record Custodian

Title

Address or Facility

Date

NOTE: Only copies to be introduced as evidence need to be certified

CC: Clerk of Superior Court where petition was initiated (initial hearing only)
Clerk of Superior Court where 24-hour facility is located or where outpatient treatment is supervised
Respondent or Respondent's Attorney and State's Attorneys, when applicable
Proposed Outpatient Treatment Center or Physician (Outpatient Commitment); Area Program / Physician (Substance Abuse Commitment)

NOTE: If it cannot be reasonably anticipated that the clerk will receive the copies within 48 hours of the time that it was signed, the physician or eligible psychologist/qualified professional shall communicate his findings to the clerk by telephone.

*STATUTORY DEFINITIONS

"Dangerous to self". Within the relevant past: (a) the individual has acted in such a way as to show: (1) that he would be unable without care, supervision, and the continued assistance of others not otherwise available, to exercise self-control, judgment, and discretion in the conduct of his daily responsibilities and social relations or to satisfy his need for nourishment, personal or medical care, shelter, or self-protection and safety; and (2) that there is a reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment is given. A showing of behavior that is grossly irrational, of actions that the individual is unable to control, of behavior that is grossly inappropriate to the situation, or of other evidence of severely impaired insight and judgment shall create a prima facie inference that the individual is unable to care for himself; or (b) the individual has attempted suicide or threatened suicide and that there is a reasonable probability of suicide unless adequate treatment is given; or (c) the individual has mutilated himself or attempted to mutilate himself and that there is a reasonable probability of serious self-mutilation unless adequate treatment is given. NOTE: Previous episodes of dangerousness to self, when applicable, may be considered when determining reasonable probability of physical debilitation, suicide, or self-mutilation.

"Dangerous to others". Within the relevant past, the individual has inflicted or attempted to inflict or threatened to inflict serious bodily harm on another, or has acted in such a way as to create a substantial risk of serious bodily harm to another, or has engaged in extreme destruction of property; and that there is a reasonable probability that this conduct will be repeated. Previous episodes of dangerousness to others, when applicable, may be considered when determining reasonable probability of future dangerous conduct.

"Mental illness": (a) when applied to an adult, an illness which so lessens the capacity of the individual to use self-control, judgment, and discretion in the conduct of his affairs and social relations as to make it necessary or advisable for him to be under treatment, care, supervision, guidance or control; and (b) when applied to a minor, a mental condition, other than mental retardation alone, that so lessens or impairs the youth's capacity to exercise age adequate self-control and judgment in the conduct of his activities and social relationships so that he is in need of treatment.

"Substance abuser". An individual who engages in the pathological use or abuse of alcohol or other drugs in a way or to a degree that produces an impairment in personal, social, or occupational functioning. Substance abuse may include a pattern of tolerance and withdrawal.

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* Petition - Auth (Verified) *

STATE OF NORTH CAROLINA		File No.	
MECKLENBURG County		In The General Court Of Justice District Court Division	
IN THE MATTER OF		AFFIDAVIT AND PETITION FOR INVOLUNTARY COMMITMENT	
Name And Address Of Respondent LEONARD CLINTON WILLIAMS III [REDACTED] TO: CMC RANDOLPH 501 BILLINGSLEY RD CHARLOTTE NC 28211		G.S. 122C-261, 122C-281	
Social Security No. Of Respondent (if available)	Date Of Birth 11/01/1980	Drivers License No. Of Respondent	State
<p>I, the undersigned affiant, being first duly sworn, and having sufficient knowledge to believe that the respondent is a proper subject for involuntary commitment, allege that the respondent is a resident of, or can be found in the above named county, and is:</p> <p>(check all that apply)</p> <p><input checked="" type="checkbox"/> 1. mentally ill and dangerous to self or others or mentally ill and in need of treatment in order to prevent further disability or deterioration that would predictably result in dangerousness.</p> <p><input type="checkbox"/> in addition to being mentally ill, respondent is also "mentally retarded" pursuant to G.S. 122C-261.</p> <p><input type="checkbox"/> 2. a substance abuser and dangerous to self or others.</p> <p>The facts upon which this opinion is based are as follows: (State facts, not conclusions, to support ALL blocks checked.) RESPONDENT HAS RECENTLY EXHIBITED DELUSIONAL BEHAVIORS AND SUICIDAL IDEATIONS. HE BELIEVES THAT CO-WORKERS ARE "OUT TO GET" HIM, AND THAT HE'S IN IMMEDIATE DANGER FROM THEM. HIS SPEECH IS PRESSURED AND INCOHERENT, AND HIS APARTMENT IS UNKEMPT AND NEGLECTED. HE SENT PETITIONER (FRIEND/ CO-WORKER) NUMEROUS TEXTS OUTLINING HIS INTENTION TO SELF-HARM. RESPONDENT HAS PREVIOUS DIAGNOSIS OF SCHIZOAFFECTIVE DISORDER. UNKNOWN MEDS. PETITIONER FEARS FOR HIS ULTIMATE SAFETY.</p>			
Name And Address Of Nearest Relative Or Guardian		Name And Address Of Person Other Than Petitioner Who May Testify	
Home Telephone No.		Business Telephone No.	
Petitioner requests the court to issue an order to a law enforcement officer to take the respondent into custody for examination by a person authorized by law to conduct the examination for the purpose of determining if the respondent should be involuntarily committed.			
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME		Signature Of Petitioner	
Date 04/21/2019	Signature J. Wilson	Name And Address Of Petitioner (type or print) JENNIFER COX 7235 CITY VIEW DR CHARLOTTE NC 28212	
<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court <input checked="" type="checkbox"/> Magistrate		Relationship To Respondent FRIEND	
<input type="checkbox"/> Notary (use only with physician or psychologist petitioner)		Date Notary Commission Expires	
SEAL	County Where Notarized	Home Telephone No. 7049435731	Business Telephone No.
<p>Original Filed Copy Hospital</p> <p>WILLIAMS, LEONARD CLINT* CSN: 6437633200 FAC: H MRN: 0000642066 Adm Date: 4/21/2019 DOB: 11/01/1980 (38 yrs) Male Att Phy: 99047 BHR EMERGENCY MEDIC*</p> <p>AOC-SP-300, Rev. 5/17 © 2017 Administrative Office of the Courts</p>			

03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)

Documents Abstract (continued)

* Petition - Auth (Verified) *

PETITIONER'S WAIVER OF NOTICE OF HEARING	
I voluntarily waive my right to notice of all hearings and rehearings in which the Court may commit the respondent or extend the respondent's commitment period, or discharge the respondent from the treatment facility.	
Signature Of Witness	Date
	Signature Of Petitioner

NOTE: "Upon the request of the legally responsible person or the minor admitted or committed, and after that minor has both been released and reached adulthood, the court records of that minor made in proceedings pursuant to Article 5 of [Chapter 122C] may be expunged from the files of the court." G.S. 122C-54(e).

WILLIAMS, LEONARD CLINT*
 CSN: 6437633200 FAC: H
 MRN: 0000642066 Adm Date: 4/21/2019
 DOB: 11/01/1980 (38 yrs) Male
 Att Phy: 99047 BHR EMERGENCY MEDIC*


03/26/2021 - Patient Message in Novant Health Neurology And Sleep (Randolph) (continued)**Documents Abstract (continued)**

Memo on Atrium Health Healthcare Records

Atrium Health is involved in ongoing, serious criminal behavior. They have been engaged in criminal behavior since April of 2019. As of recent, an Atrium Health provider named Patrick Murray is making notes in my healthcare records that I "think the banking system and the healthcare system are cooperating", and that I say that "I was kidnapped", to paraphrase.

I *did not* and I *never have* claimed that the banking system and the healthcare system are cooperating. I *have* claimed that I have been kidnapped and that Atrium Health was involved. An explanation will be provided in the succeeding paragraphs.

I have claimed and do continue to claim that I have been victimized, both civilly and criminally, by numerous entities. I make this claim because it is categorically true. A partial timeline of events is as follows:

November 2013 - I begin to work at Wells Fargo.

November to December of 2017 - during my tenure at Wells Fargo, a former employee named Jennifer Cox "inquires about my past", at what would be discovered to be the request of Wells Fargo management. Jennifer Cox "inquires about my past" by getting me to give her a link to my Facebook profile and then contacting a woman named Abbey Best. Abbey is presumed to have told Jenny many facts and untruths about me, including that I had been sent to a "mental institution" in the past.

In doing this, Wells Fargo perpetrated a civil intrusion upon seclusion. I was subsequently subject to discriminatory and stigmatizing behavior by my coworkers at Wells Fargo. It is a fact that I have a history of hospitalization for mental health issues.

December 2017 to April 2019 - I beg, plead, and eventually make legal threats, in attempts to get Jennifer Cox (hereafter referred to as "Jenny") to discuss what had happened. I wanted to be told the truth and to have a conversation. I didn't initially know that Wells Fargo was behind what had happened.

April 21st, 2019 - In response, Wells Fargo initiates a wave of crime directed at me. This includes abusing the mental health system. They have a fraudulent healthcare record prepared by a local group of crisis counselors. They then have one of these crisis counselors accompany Jenny to the Mecklenburg County Magistrate's Office. Jenny and the crisis counselor prepare a false pretense, fraudulent civil commitment petition. On this petition, my claim that a workplace

Documents Abstract (continued)

privacy violation had occurred was characterized as me believing that "my friends are out to get me."

April 21st, 2019 – Officer Christopher D'Avanzo of the Charlotte Mecklenburg Police arrives at my door, at roughly 11:03 pm. He enters my residence against my consent. He places me in handcuffs against my consent. He then places me in his patrol car, against my consent, and transports me to Atrium Health Behavioral Health Charlotte. He says that he does this because "someone has called and said that she is worried about me", and that "we're going to have to take you to get looked at", to paraphrase. As the officer is transporting me, he admits that he doesn't have the civil commitment petition in his possession. Note that I have strong reason to believe that D'Avanzo is Jenny's neighbor and personal friend.

April 21st, 2019 – I arrive at Atrium Health Behavioral Healthcare Charlotte's inpatient unit located on 501 Billingsley road, Charlotte N.C. Several minutes after I arrive, D'Avanzo brings the petition to the gentleman at the door. D'Avanzo and the gentleman have an exchange where D'Avanzo tells the gentleman at the door "we will just make them the same. That way we can just say that we put the wrong time." The gentleman at the door nods and the officer fills in information on the petition.

When I later retrieve the petition from Atrium Health, I discover that both the time taken into custody and the time delivered to the inpatient unit were entered as 11:43pm. This makes obvious the meaning of the officer's communication with the gentleman at the door. The gentleman at the door very obviously knows that this petition was processed unlawfully, and that in fact this entire process was a kidnapping.

This series of events constituted a kidnapping per the following:

- 1. The civil commitment petition in the officer's possession is what gives the officer the right to curtail my liberty against my consent. The officer did not have the petition in his possession.**
- 2. Further, there is no legal right conveyed by a known to be fraudulent petition. It is a reasonable presumption that D'Avanzo knew that this petition was fraudulent. He appears to have knowingly participated in a series of unlawful events.**
- 3. Having no right to do so, the officer placed me in handcuffs, placed me in his patrol car, and transported me 17 miles. He did this in a process of a series of**

healthcare frauds. In this context, his actions meet the elements of the crime of kidnapping, under North Carolina law.

4. Note that even in the event the officer was not aware of the fraudulent nature of this civil commitment petition, and even in the event that he did not knowingly participate in healthcare fraud, he has still committed a felonious restraint. This is a side note because he has quite obviously participated in the fraud.

This is the reason that I say that *Atrium* and *Wells Fargo* cooperated in committing crime (not the banking system and the healthcare system). Wells Fargo is quite obviously behind the healthcare fraud and the kidnapping, and the gentleman at the door at Atrium clearly knew what was happening. The gentleman at the door at Atrium clearly played a role. This is evidenced by his nodding and understanding the meaning of what is said when D'Avanzo says "we will make them the same."