

#### Ohio Attorney General's Office Bureau of Criminal Investigation Investigative Report



2022-1190

Officer Involved Critical Incident – 1551 Meadowlark Lane, Marysville, Ohio 43040 (L)

Investigative Activity: Information Provided/Obtained

Involves: Matthew Ryan Todhunter (S)

**Date of Activity**: 05/30/2022

Author: SA Perry K. Roeser, #114

#### Narrative:

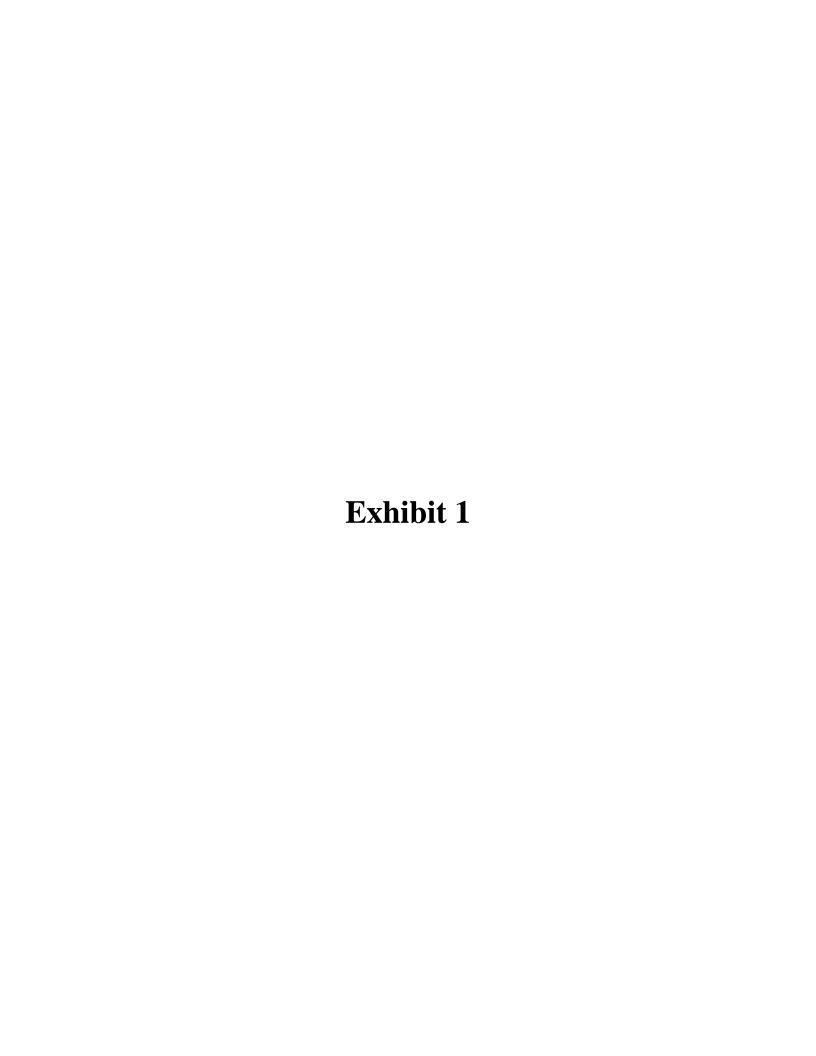
On May 30, 2022, Ohio Bureau of Criminal Investigation (BCI) Special Agent (SA) Perry Roeser received several handwritten witness statements from the Union County Sheriff's Office and the Marysville Police Department. Uniformed officers conducted a neighborhood canvass before BCI arrived at the Officer-Involved Critical Incident (OICI) on Meadowlark Lane, Marysville, Ohio.

SA Roeser reviewed all the witness statement forms and found that none of the witnesses observed the OICI. The witness statements (attachment #1) have been uploaded and can be reviewed for additional details.

#### Attachments:

Attachment # 01: Union Co SO/Marysville PD Witness Statements

This document is the property of the Ohio Bureau of Criminal Investigation and is confidential in nature. Neither the document nor its contents are to be disseminated outside your agency except as provided by law – a statute, an administrative rule, or any rule of procedure.



Name: DAYID B		DOB: 7-	15-65	SSN:	LRN;	
Address: 1522 MEA Marysulle	OH 430	1. 040	Home Phone: (	437 247-10 6141 <b>6</b> 766-0	275 Date/time	e of statement: 2/22 7, 30p
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ignature of Deputy:	Unit#		Signature of Wit	ness: MBin		-30-22

Name:	REBECCA	BURDEN	DOB: 4/1	0/68	Sav.	LRN:
Address	: 1522 M Marysv	EADOWLARK ILLE, OH 43	2 W	Home Phone:	937,243-159 137-644-144	11 5/30/22 1,29 PM
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lame: Thomas J.	Kersten DOB:	9-3-88 SSN:	in:
S27 N. Main St	. Apt. B	Home Phone: (614) 907-1037	Date/time of statement:
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	(m) (i)		
nature of Deputy:		Signature of Witness:	Date: 5-30-27

Name: THOMAS KERSTEN	DOB: 6/23/66	SSN:	LRN:
10. 60 - 11. 11. 10.			7000
Address: 1921 CREEKVIEW DC	Home Phon	ne: 937,707 - 9346	Date/time of statement:
MARYSVILLE, OH 43040			7:25 5/30
I hereby make this voluntary statement to a Deputy of t		s attested to by my signature be	
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144			
ignature of Deputy: Unit#	Signature of	Witness:	Date:
	Sh	- 1/1 )	5(30/22

Name: MCOON KUNZE	DOB: 21201	O \ ssn:		N:
Address: 1543 La Costa Dr. Narysville, 04430	Home PF Work Ph	one: ( )	1374	te/time of statement:
I hereby make this voluntary statement to a Deputy of the Ur	nion County Sheriff's Office	e as attested to by my si	gnature below.	
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statement, I can be charged criminally. AS ON	111 mil	1 FMM+ 1	WHO	VICK T
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Signature of Deputy: Unit#	Signature	of Witness:	Dat	5130122
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1000	20121	10/20/05		
Name: OSSICA		DOB: 6/30/95	SSN	RN;
Address: 1517 Meado Marysuille, o	04. 43040	Home Phone: (	1937,537 2707 1	Date/time of statement: 5/30/2Z 7-30PM
I hereby make this voluntary state	ement to a Deputy of the Un	lon County Sheriff's Office as a	ttested to by my signature b	elow. This was also given on my
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Signature of Deputy:	Unit#	Signature of W	Vitness:	Date: 5130   22

Name: Jamie Ly	nne Clark	ров: 4-1	2-79	SSN:	LRN;
Name: Jamie Ly Address: 1531 Mead Marysville	lowlark Lan , Ohio 43040	e	Home Phone:		Date/time of statement:
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Signature of Deputy:	Unit#		Signature of W	my J. C	Date: 05-30-22