



**Rick Staly, Sheriff**  
**FLAGLER COUNTY SHERIFF'S OFFICE**

"An honor to serve, a duty to protect."

Voluntary Witness Statement					
Witness Information			FCSO Case #: 18-39202		
First Name: Robert	M.I.: W	Last Name: Rhoads			
Address: 16 Riverbend Dr					
City: Palm Coast	State: FL	Zip: 32137	Race: W	Sex: M	
Home Phone: 386-569-9833	Cell Phone: 386-569-9833		DOB: 9-14-77		
E-Mail Address: rrhoads43@yahoo.com			Age: 41		
Place of Employment/School: Flagler County Public Schools					
Work Address: 1700 E. Moody Blvd #2					
City: Busnell	State: FL	Zip: 32110	Work Phone: 386-439-7526		

Unofficial Document

I do hereby make the following voluntary statement to Deputy Williams, who has identified him/herself as a Deputy Sheriff with the Flagler County Sheriff's Office, at FPC

At approximately 11:30 AM on April 24, 2019 I was called to Mrs. Jardans room to assist an son Willford, a student that was getting physical with another employee, Jake Gambone. When I got to the room Jon was hitting Jake and using profanity. I walked up to Jon and tried to calm him down. When I approached him he said "Get the fuck out of my face before I punch you in the face." Right after that he swung to hit me in my face but I moved and he hit me in my shoulder. Jake and I put him in a restraint along w/ Mr. Rinaldi, Melanie Olson and Katie Kastler. Jon also kicked Mr. Rinaldi multiple times in the knee.

I have read each page of this statement, with each page bearing my signature and corrections, if any, bear my initials. I certify that the facts contained herein are true and correct.

Robert Rhoads 4/24/19  
 Signature of Affiant Date

Sworn and subscribed this 24 day of April, 2019  
[Signature] #1630  
 Signature of Deputy ID#

Page 1 of 1

Taron Williams  
 Printed Name of Deputy

Distribution: Completed Original Attach to Original Report  
 Linked To: N/A  
 FCSO Form # PATL-061 (12/16)