

## Episode 7 Pt. 1 - Opioids Kill, So Do Kids: Bryce Lake

(theme music) Ring around the rosies, a pocket full of posies, ashes ashes, we all fall down.

**Sherry:** Welcome to the Parricide Podcast I'm Sherry ...

**Marie:** ...and I'm Marie...

**Sherry:** ...and today we're talking about the murder of **Kevin Lake**, the father of Jonah Bryce Lake.

**Marie:** This case is interesting because it requires us to take a deep dive into the criminal activities of Kevin, the father. But we think it will be completely worth your time. We have a lot to cover so this will be a **two-part episode and we** will release Part 2 next Tuesday, so we've got you covered.

A quick heads up, this episode contains discussions of illegal activities drug use and violence. If you enjoy listening to our podcast, please subscribe to it (or like) it while we chat.

(musical interlude)

**Sherry:** Susan Elizabeth Conti and Kenneth Bryce Lake, who goes by Kevin, met each other while both were attending Ohio University's College of Osteopathic Medicine. They graduated and married in 1992. They were both 26 at the time. In 1998 they had their first and only child, Jonah Bryce Lake. Jonah, who usually goes by Bryce - but his parents called him Jonah grew up to be kind of a different kid. From what I could find - which wasn't a lot - he'd had an unremarkable childhood (which isn't a bad thing). As a young teen, Bryce liked science, animals. Traveling. and hanging out with his family. He also liked Harry Potter and playing Halo; like most teens at the time. Bryce graduated from Albany High School and went on to attend Capitol University where he'd made the Dean's List in Spring of 2017 and Fall of 2018.

**Marie:** Oh, so a pretty bright kid.

**Sherry:** Yeah. I think he was a very bright kid. His parents are very intelligent. Columbus Monthly reports he was known to be a bit of an exaggerator. He mostly lied big, so everyone knew it was B.S. For example, he was reported to have tried to convince one girl that he was an international bodyguard who traveled the world to protect this one woman. Everybody knew it wasn't true, but no one ever really confronted him. He also liked to hunt and attend sporting events with his dad. But his friends say he didn't really like his dad. In fact, one of them told investigators that Bryce made no secret about not caring for his dad at all.

**Marie:** Why didn't he like his dad?

**Sherry:** Well, I think that his dad kept, kind of, messing up their life - which is really kind of a part of this story. There was only Bryce and his mom and his dad, and his dad rocked the boat by having an affair. The parents separated and then the parents got back together for the sake of their child. But I'm not sure that they really ever liked each other after that - which kind of left Bryce in a very awkward home.

**Marie:** Yeah, that's a hard position for a kid to be in.

**Sherry:** Right. And then we'll get into, kind of, the activities that his dad was engaged in that probably also contributed to that instability. Early pictures show the two of them did spend a lot of time together and with family - and Bryce seems engaged and happy to be there. I'm just speculating, but it's possible

that that affair that I was telling you about hurt their relationship and it's also possible that Bryce just went through his teens and came out the other side kind of grumpy.

**Marie:** That's very possible. A lot of times, um, a perfectly happy child, through the teenage years, is a little bit grumpy or a little harder to deal with.

**Sherry:** Right. Either way, Bryce stated that his dad did everything for him and that his parents had only reunited for his sake when they separated - and that would really kind of be a lot for a kid to handle.

**Marie:** I'm surprised they told him that, because that does put a lot of responsibility for both parents' unhappiness on the kid. I'm sure that's not what they meant to do, but you shouldn't tell your kids if you do that.

**Sherry:** I could see that. Anyway, Bryce also liked playing video games with his friends, but he didn't seem to have a lot of friends - you know, the ride or die buddies that you get as you're growing up. He also was known to wear an eye patch to school. They said it was for attention, but none of my research revealed why or how that was working for him. He was Catholic - like his parents - but he didn't seem to have a congregation or spend much time in church. And there seemed to be a recurring theme that he didn't have a lot of friends.

**Marie:** So, is he kind of a loner type?

**Sherry:** Not really. He wasn't really a loner; he just didn't seem to connect with others on a very deep level.

**Marie:** Okay. So, he had people to hang out with - he just didn't have real friends.

**Sherry:** Yes, and I think that, when we get further into this, you'll see that a little bit more. Anyway, a year after Bryce was born (in 1999) these two doctors leased a shabby brick building at 2912 High Street and started the Columbus Southern Medical Center.

**Marie:** Well, that's nice! So, his parents went into practice together.

**Sherry:** When he was an infant. It seems like, kind of a sweet beginning, don't you think?

**Marie:** A nice little family business.

**Sherry:** Right. And Ohio was going to be their permanent home, so life looked good! But three years later, in 2002, Dr. Susan broke away from the medical center and began a separate family practice on the other side of town. She later left that practice to work at the local Veterans Hospital.

**Marie:** Hmm. So, maybe working together wasn't everything that it's cracked up to be.

**Sherry:** Might not be.

**Marie:** But what about the dad? Did he continue working at the High Street Clinic?

**Sherry:** Yes. He continued working at that clinic. According to the US Department of Justice. Dr. Kevin...

**Marie:** Maybe we should just call him Kevin, because he loses his medical license right about now for unprofessional conduct, right?

**Sherry:** Okay. Yes, I agree. Kevin made the choice to move his practice away from osteopathic care in favor of the more lucrative practice of maintaining his clinic as a drug premise as early as 2004.

**Marie:** So, Jonah - or Bryce - would have been, like, five years old at that point?

**Sherry:** He was born in '98, so...about seven.

**Marie:** Oh, okay. So, what do you mean by 'running the clinic as a drug premise?'

**Sherry:** He turned it into a Pain Clinic, instead of a Family Practice Center - and he started catering to people who wanted, specifically, opioids.

**Marie:** Okay. So, he was one of those doctors who you could go to and it didn't really matter. They were going to give you drugs whether or not it was good for you.

**Sherry:** Right. But it's much more efficient than that. A lot of people call them Pill Mills because you're just churning out prescriptions for pills. You're not really seeing patients. You're just making money off of the patients.

**Marie:** Okay.

**Sherry:** So, for seven years he operated the Columbus Southern Medical Center as a Pill Mill.

**Marie:** I bet his customers really loved calling it the High Street Clinic then. (laughter)

**Sherry:** Right, because it was on High Street...and it's kind of funny that the Pill Mill was over on High Street.

**Marie:** Right.

**Sherry:** Well, anyway, his busy cadre of doctors, physician's assistants, and staff were prescribing controlled substances - you know oxycodone, hydrocodone, and Xanax - to patients without legitimate purpose. Making Kevin rich by feeding the addictions of hundreds and hundreds of people with Substance Use Disorder and helping to accelerate the Opioid Crisis in Ohio and the surrounding states.

**Marie:** Well, that's really unfortunate. I'm not sure if all of our listeners are aware, but opioid misuse has become one of the deadliest public health crises America's ever faced.

**Sherry:** According to the National Institute on Drug Abuse, opiate abuse is a huge ongoing problem in America. More than 11 million people use opioids without a prescription each year. Approximately 78 Americans die each day from opioid overdoses - 46 of them were receiving these opioids as prescription pain relievers. Opioid deaths involving prescription opioids were more than four times higher in 2018 than in 1999.

**Marie:** So, if 46 of the 78 were getting them as prescriptions, more than half are prescribed the painkillers that kill them? That's so sad.

**Sherry:** It really is. This increase has been attributed to several factors; good doctors were unwittingly dispensing highly addictive opioids to relieve pain and unethical doctors were illegally distributing opioids to enrich themselves.

**Marie:** Like Kevin.

**Sherry:** Yes. Thousands of patients receiving legitimate prescription medication for chronic pain were inadvertently caught in cycles of addiction when the doctors were admonished to carefully consider what was touted as the new Fifth Vital Sign – pain - and to medicate their patients accordingly.

So, what happened is Purdue [Pharmaceuticals] actually came up with this new drug, opioids, that they wanted to market to the public. So, they told doctors they were safe and then they paid for some research that created the Fifth Vital Sign - which is pain - so that they could medicate patients. Then they paid to do some marketing and came up with these little smiley faces/frowny faces and patients were asked to say where their pain was on the Smiley Face Scale. If you remember that at the doctor's office? That was all part of the marketing by Purdue to get people to use opioids.

**Marie:** That's terrible. And no wonder, the Smiley Face Scale doesn't make any sense and is really hard for patients to use.

**Sherry:** Yes. Yes. And no wonder Purdue ended up getting sued. Doctors weren't aware that this Fifth Sign had been carefully crafted to help sell newly marketed opioid prescription pain relievers. But a few of the unethical doctors, like Kevin, quickly recognized the value of these prescription opioids to recreational drug users. They abandoned their traditional practices so they could open lucrative pill mills.

**Marie:** That makes sense. It would be tempting to profit from this, um, and kind of get in on the first wave of what they thought was a revolution.

**Sherry:** Right. But a 50-million-dollar wave seems a bit ridiculous.

**Marie:** Well, I'm sure some doctors just thought, 'Wow, this is great! My chronic pain patients don't have to hurt all the time.'

**Sherry:** Well, I think that some doctors did that and I think that the pain clinics did open up that were legitimately doing that. But this goes beyond that. This is not a set of doctors who were going in and talking to patients and saying, "Okay, let's manage your pain.'

This was a group of doctors who decided that they were going to go in and prescribe as many drugs as they could and make a profit quickly. They weren't seeing patients; they weren't caring for patients. They were just pushing out prescriptions. Hence, the name, Pill Mill.

**Marie:** Yeah. I think when you're not developing that doctor-patient relationship, you know exactly what you're doing.

**Sherry:** Right. They're supposed to First, Do No Harm - and they were doing a lot of harm!

(musical interlude)

**Sherry:** So, today the traditional measure of opioid addiction is counting deaths - but that no longer works.

**Marie:** Why not?

**Sherry:** Because we found naloxone – or Narcan is what it's usually called.

**Marie:** Oh, okay. I've heard of that.

**Sherry:** Right. It's a powerful prescription medicine and it's an Opioid Receptor Antagonist; which means that it instantaneously reverses opiate overdose, thereby saving lives.

**Marie:** That's amazing!

**Sherry:** It's very cool! It's been used countless times to literally save the lives of people who have overdosed, and it's been conscripted into service recently as part of the Reduction Strategy. It's a very powerful tool. So powerful that many States have revised the rules and laws which govern its dispensing in order to get it into the hands of friends and family members of those with Opioid Substance Use Disorder - so they can save their lives when they accidentally overdose. Because they won't have time to go to the pharmacy and get it.

**Marie:** Yeah, you can die really quickly. So, I think it's great that a lot of States are making it easier for people to access it. So, I know that eight different states have made it that if so that a pharmacy can dispense Naloxone without a prescription.

**Sherry:** That's right.

**Marie:** But then other states have a Blanket Prescription by Order of the Governor - which I didn't even know Governors could do.

**Sherry:** Right.

**Marie:** And it lets people go and get it at their local pharmacy. So, anyone can go and just pick up some Naloxone - which is great because it means that if you have a brother or a cousin that you know is an addict, then you know that you can save them. And you don't have to wait for an ambulance or the police, um, because in a lot of places the police carry it now, too. But there's not always time.

**Sherry:** Right. And the eight States where you can actually just go to a pharmacy and ask for Naloxone are California, Kentucky, New Hampshire, New Mexico, New York, Rhode Island, Vermont, and Washington. Because all of the States have different rules, there have been a couple of lists that have been compiled so that you can actually go, 'Hmm, this is the state I'm in' - go down the list, and see what you can do for your loved ones. Prevention Solutions and the JAMA Network both created some very comprehensive guides regarding how to obtain Naloxone and we're going to make them available to our listeners. If you're interested, head over to [parricide.org](http://parricide.org) to find out the details for your State.

(musical interlude)

**Sherry:** Back to our story. Each year, the number of clinic patrons grew as Kevin found a growing source of return customers who were pleased with the Clinic's process - no checkup required, no inquiries made, just some disinterested doctor who was willing to fuel an endless addiction to opioids. His Clinic enjoyed an 85 percent return rate for their customers - and I call them customers, not patients, because they were not seeing them as patients.

**Marie:** No, they weren't treating them. They were just handing them a prescription.

**Sherry:** Right. And Kevin was reaping the profits of this successful pill mill. They were dispensing more than a million doses of opioid painkillers each year. According to court documents, the staff at the "High Street Clinic" (chuckling) would see between 40 - 100 patients a day. Each patient was required to pay \$100 in cash up front to obtain their prescriptions. Medical personnel, most usually the PA, would briefly

appear to sign the prescription - but that was all the contact they had with the doctor the entire Clinic visit. Which is why I say they're customers, not patients. Then the customers were instructed to either go to the Pharma-1 Pharmacy (which was also on High Street) or the Drugstore Pharmacy (on Groveport Road) to have their prescription filled. The doctors would, kind of, collude with the pharmacies so that other pharmacies would not turn them in when they realized what they were doing.

**Marie:** That makes sense, because I remember we watched a documentary where one pharmacist noticed this and got mad.

**Sherry:** Down in Louisiana.

**Marie:** So, not all pharmacists are okay with this and have tried to make some changes.

**Sherry:** That's right. And that show's actually called The Pharmacist if anyone wants to see it. I think it was on Netflix.

**Marie:** Highly recommended. Great show!

**Sherry:** It was very good.

But Kevin wanted to maximize these ill-gotten gains. It wasn't enough for him to be making money at the High Street Clinic by writing prescriptions endlessly. He knew that a doctor's time is billed at a higher amount than the time of a Physician's Assistant, so he instructed his administrative staff to up-bill all charges. Although the PA was writing the scripts and doing the face-to-face contacts, all of the clinic visits were billed as though a physician was seeing the patients. This small change brought in more than \$260,000 to the clinic. He knew that everything he was doing was illegal and he didn't want to get in trouble, so he put some corporate distance between himself and his Clinic utilizing Corporate and Trust entities as a buffer. But he didn't want to lose control of his money, so he maintained exclusive control over all of the financial operations at the Clinic. Recognizing that his drug operation could be easily discovered simply by following the money trail, Kevin took a page from the Good Girls book.

**Marie:** I love that show!

**Sherry:** I do, too! And laundered the bulk of the money careful to keep a weight she could legitimately earn in the public view. And he also did more.

**Marie:** They never can seem to stop.

**Sherry:** Right. No, he takes this to amazing limits. Kevin paid himself more than \$90,000 between 2010 and 2013 in corporate funds. But he didn't want to pay a wage tax on that money, so he fraudulently reported that income as rental income; claiming the clinic had rented out his home for a corporate retreat. I'm not sure which of their homes he was using for this claim. In addition to their home on Schleppe Street (where he's killed) they owned a lodge on 55 acres in Canal Winchester, a 6,800 square foot mansion on 73 acres in Leesburg, and a total of 391 acres of farmland spread throughout Columbus and Pickaway counties. And he didn't stop there.

Kevin inflated his charitable contributions to the max and, of course, inflated his depreciation deductions by more than \$7.4 million - for what he called equipment purchases by his corporations between the tax years of 2005 and 2011. Always one to double dip, he also falsely reported the equipment purchases as capital gains on his trust tax returns, rather than as ordinary income, so he

could secure a much lower tax rate. The entirety of Dr. Lake's tax crimes saved him more than \$3.5 million.

**Marie:** That is so much money! He must have had one very corrupt accountant or something. I don't know how he managed all of this.

**Sherry:** Right. I wondered if he did that, or if he had some bookkeeping classes of his own. I'm not sure, but wow, right?

**Marie:** Ummhmm.

**Sherry:** Anyway, June of 2010 was a very good - and a very bad - month for Kevin. The good news; the wealth he had amassed caught the eye of Governor Ted Strickland - and Kevin was appointed to the Board of Trustees at Ohio University. This validated his status within the community and pleased him. He would remain in this appointment, denying his illegal activities and drug charges, until he resigned in January of 2017. In June of 2010, the DEA came to town to pay him a visit. His High Street Clinic began to draw the attention of the authorities, who were concerned about this deeply increased use of opioids in their communities. They were aware of red flags that indicate a potential Pill Mill, and this clinic was waving a neon red flag. An inordinate number of patients were showing up each day and queuing up for service as early as 6 30 a.m. Additionally these patients didn't appear to be ill or infirm as much as they appeared to be high and set to party while they waited for their turns to be served. But Kevin had developed a highly circuitous business model. They were able to stall out both the medical board and the Columbus police before the DEA showed up to serve an Administrative Warrant.

**Marie:** What is an Administrative Warrant?

**Sherry:** So, an Administrative Warrant authorizes entry into private property to allow the investigation of health safety or nuisance abatement violations. And it authorizes actions necessary to test, photograph, secure, remove, or demolish property - or remove debris found in violation of those ordinances.

**Marie:** Okay.

**Sherry:** The DEA had a seasoned expert Narcotics Detective, named David Allen, who was heading up this investigation. They began the slow meticulous sleuthing that was going to be needed to successfully uncover the elaborate criminal operation Kevin had created. But this task would be arduous. Kevin had been particular in those whom he had hired at this clinic. He tended to garner loyalty by hiring either young inexperienced employees - who simply needed to do as they were told in exchange for an exorbitant paycheck - or he would hire those who were what we would call, damaged goods. People who didn't really ever expect to work again due to legal problems or they had a history of their own Substance Use Disorder themselves. Getting these employees to talk to the investigators was going to be a monumental, if not impossible, task - because everybody owed Kevin.

**Marie:** That makes sense.

**Sherry:** He's pretty smart.

**Marie:** If you hire vulnerable people and then give them a chance at a life they couldn't access otherwise, they have a hard time giving it up - even if they know that they're doing the wrong thing.

**Sherry:** Right. So, Kevin was spooked. He knows now that it's not if they get busted, it's when. Because he knows eventually - and usually the third time is the charm - that they're going to be in trouble. So, he quickly concocted a new scheme to distance himself from his own clinic, hoping to leave the poor chumps at the clinic holding the bag.

**Marie:** Okay. So, my head is spinning. Let's take a little break and then we can talk more about how he separated himself from the clinic.

**Sherry:** Perfect.

(musical interlude)

**Marie:** Okay, before we proceed let's just acknowledge that Kevin Lake was far from the only doctor who converted his clinic into a Pill Mill. So, these clinics were popping up all across America - and they still exist. But if you google Pill Mill and the name of any State - I suggest your home State - you'll find DEA raids and lots of doctors who lost their licenses over this. Between 2011 and 2017, 22 pharmacists and 85 physicians across America had their licenses revoked for illegally prescribing and dispensing opioids. So, while he's a bad guy, he's far from the only bad guy.

**Sherry:** And we probably should say that most of the doctors who decide to run Pill Mills will work in concert with other clinics and/or with pharmacies – in, kind of, in an effort to protect themselves or insulate themselves from the law. They're hoping to avoid detection.

**Marie:** Yeah. You can work a lot longer that way.

**Sherry:** Right. Anyway, this information is still from the Department of Justice. Realizing the DEA could uncover his shenanigans at any moment and believing he was way too clever to have to suffer the consequences of his actions, Kevin did what any good drug dealer would do. He started to distance himself from his operation while keeping a tight rein from a distance. First, he had to disappear from the Clinic - so he removed his name from all Clinic-related documents and stopped paying himself a formal salary from the Clinic.

**Marie:** Oh, that had to hurt.

**Sherry:** Not really. Because he just pulled the money from a different direction.

**Marie:** Ohhh.

**Sherry:** It's just, it stopped showing up on his taxes, so it looks like he was divorced from the Clinic.

**Marie:** Okay.

**Sherry:** He left his staff with strict instructions that they should never admit that he was the Clinic owner. Next, he upped the number of Corporations and Trusts through which he hid his ownership of the Clinic to 35.

**Marie:** So, he's laundering money...

**Sherry:** ...through 35 corporations.

**Marie:** That's crazy!



**Sherry:** And Trusts.

**Marie:** Right.

**Sherry:** So, like a Shell Corporation within a Shell Corporation within a Shell Corporation. He held friends and family members - even his own mother - out as the owners of several of these entities as he directed them all without appearing to be the person in charge.

**Marie:** Well, doesn't that expose his mother to prosecution?

**Sherry:** Oh, absolutely! He exposed so many people to prosecution - and had this all come tumbling down, his mom would have been in big trouble.

**Marie:** That's terrible!

**Sherry:** Right! Because this is fraud. He also took his employee micromanagement remote. Where before, he would be at the Clinic telling them to keep working and work harder and harder - he either bought or leased the house across the street from his Clinic and he used it as his covert Command Center. He had a computer program on his laptop, and it used a series of colored dots appearing over the examining rooms to let him know the status of each patient in that room. A green dot indicated a patient was waiting for a doctor. If he saw too many green dots, he would push his employees to up their performance.

**Marie:** That's crazy! He sounds like a terrible boss.

**Sherry:** Well...

**Marie:** I guess they made lots of money.

**Sherry:** A really terrible boss; in many different ways. Next, he suddenly discovered a personal disability = which remained unnamed - for which he filed for disability payments from his two disability insurers. Both companies ultimately denied his claims, but they paid him \$18,000 before doing so.

**Marie:** It sounds like he really knew where to collect little extra bits of money.

**Sherry:** He was really good at that! Eventually, he created a cool deal for his clinic employees - or at least they thought so - but he knew better. He sold the clinic's remaining stock to the employees through an Employee Stock Ownership Program for the inflated price of \$14 million. And then he ensured all of that money came back to him as soon as he dumped the stock and realized his disability claims had been denied. He ordered a person he put in charge of one of his Trusts to fire him and - he applied for unemployment benefits. He defrauded the government of more than \$20,000. He hoped that this would create a paper trail refuting the fact that he was in charge.

**Marie:** He really worked hard to make this look like it was real.

**Sherry:** He did! He was still receiving money from the clinic, but it wound its way to him on a circuitous route that took experts to uncover. But, alas, Kevin was in deep trouble. On May 21, 2013 the long-awaited DEA raid on the High Street Clinic actually happened. That effectively closes the office when they have the raid.

**Marie:** Okay, that makes sense.

**Sherry:** Yeah.

**Marie:** So, the DEA had started investigating in 2010 - like three years before. So, what finally got them to closing the clinic?

**Sherry:** Ah. David Allen - remember the man who was over the DEA team?

**Marie:** Mmhmm.

**Sherry:** He and his team cracked the Pill Mill case wide open when they interviewed the Office Manager Karen Climer. Karen had been directing the office staff under Kevin's direct and very specific orders from across the street. She came to realize Kevin had been directly implicating her in this drug case.

**Marie:** Oh, she must have been so mad!

**Sherry:** Yes. She quickly agreed to cooperate with the Feds and, boy, did she cooperate! A few days after their warrant closed down the Clinic, she gave the DEA an invaluable gift - the clinic's computer server!

**Marie:** So basically everything.

**Sherry:** Yeah. The Investigative Team had spent three years chipping away at the lower levels of this drug ring; convincing people to cooperate as they slowly built their case. But no one had ever been able to just hand them the hard evidence they needed until now. This server detailed every pill ever prescribed by the Clinic and documented for whom the prescription was written. As a result of the DEA Investigation, a former Staff Physician - here's another drug thing for you; remember it's High Street? This is Terry Dragash. He pled guilty to conspiring to distribute Oxycodone in 2014. He was sentenced to one year in prison.

**Marie:** That doesn't seem like very long. Only one?

**Sherry:** Not for all those lives they ruined; don't you think?

**Marie:** Yeah. Did he make some sort of deal?

**Sherry:** I don't think so. None of these people get very long sentences.

**Marie:** Hmm.

**Sherry:** I think they must sentence them as they would a drug dealer.

**Marie:** Okay.

**Sherry:** [That would be my guess, but I don't know for sure.

**Marie:** Yeah.

**Sherry:** Well, Terry Dragash personally had a history of cocaine and alcohol abuse. Remember, I talked about damaged people who would work for him? He was one of them.

**Marie:** Yeah. So, he kind of hired people who would have been otherwise unemployable and so they felt like they were getting a second chance - but had to do kind of this gray work - but now they're in prison and even more unemployable.

**Sherry:** Right, right. And the next year, two other former staff members - Dr. David Rath and Karen Climer (the office manager) - also pled guilty to conspiring to distribute Oxycodone. Dr. Rath, who was the one who supervised the PAs when they conducted the face-to-face visits with the customers - he died before he could be sentenced. And Ms. Climer was sentenced to six months.

**Marie:** Okay. So, she probably did get a reduced sentence for cooperating.

**Sherry:** Yes, absolutely. But you can't really reduce one year by much.

**Marie:** No.

**Sherry:** Anyway, Ohio's Attorney General, Mike DeWine, speaking specifically about Kevin said - and this is a quote - "There is no doubt that today's opioid epidemic is due in large part to the over-prescribing of prescription pain medication across this state. This defendant preyed on those battling addiction in an effort to make millions from their suffering." Kevin was going down.

(musical interlude)

**Sherry:** The DEA absolutely understood what had happened at Kevin's Clinic. They soon seized \$29 million - the proceeds from his illegal drug peddling activities. Also, Kevin was in trouble with the IRS for failing to pay taxes on those ill-gotten gains.

**Marie:** That one always cracks me up - that you get in trouble with the IRS for not paying taxes on your criminal activity.

**Sherry:** Right! I remember when they decided they were going to use a drug stamp. And if you were selling marijuana and got caught then you were in trouble because you hadn't purchased a drug stamp to put on your tax forms so that they could come and get you for selling marijuana.

**Marie:** Yeah, this is just...

**Sherry:** ...it's kind of crazy - but it's kind of nice, too.

**Marie:** It is, because sometimes if they can't get you for the drug charges - they can get you for the tax charges. And then, either way, they've got you.

**Sherry:** That's right. (laughter) After a bit of legal wrangling, Kevin pled guilty to Federal charges of fraud, tax evasion, and drug charges. His medical license was, of course, revoked and - adding to his troubles - he was now on the court dockets for September of 2017; when he was to be sentenced for his crimes. Hoping to better his position, he agreed to turn on his former co-conspirators in the drug pushing scheme and help the Feds with their investigation. His deal with the feds left Kevin fairly sure of what would happen in the very worst case at sentencing. He'd be sentenced to approximately five years in prison, the \$29 million that had been confiscated would be lost to him forever, his clinic would be forfeited - so he'd be out of work, and four of his properties would be confiscated - because they'd all been purchased with drug money,

**Marie:** Oh. I wonder what hurt more, the five years in prison or losing his profits.

**Sherry:** I don't know - and you can't ask him.

**Marie:** That's a little dark but...

**Sherry:** Judgy. (laughter)

**Marie:** You know, he just seems so focused on amassing land and money. um But five years in prison, especially when all of your co-conspirators only got one, would probably make you a little mad. But I guess he also committed the fraud and tax evasion that they didn't commit.

**Sherry:** And the money laundering.

**Marie:** That's true.

**Sherry:** So, he did quite a bit - and that's a pretty good sentence for someone who had done all of that.

**Marie:** Yeah. I mean it could have been a lot worse.

**Sherry:** I agree. I actually think that more than the money and the property that he was losing - I think he was really bothered by losing the status.

**Marie:** Oh, Because he'd the been on the Board for Ohio University, right?

**Sherry:** Right. So, I think that he was probably amassing this money because he had some kind of need for status. That's just a feel that I get, I could be wrong.

**Marie:** That would make sense. A lot of people - what they really want is to be recognized.

**Sherry:** Right. So, Kevin's life plan was falling apart. He was out on bond awaiting this sentencing and most likely felt he needed to make the most of his summer. But his summer was about to go sideways.

On June 21<sup>st</sup>, Kevin Lake and his son Bryce appeared at the FBI offices asking for help. They had received a threat. Someone had allegedly broken into their home while they were sleeping, snapped a picture of Bryce, and left that picture - along with a threatening note - demanding Kevin meet the author at a cell phone tower at 3 a.m. Strangely, the letter admonished him to burn the letter; and ended, "Sincerely, a friend."

**Marie:** That sounds really creepy.

**Sherry:** And kind of like a kid wrote it, don't you think?

**Marie:** Umhmm. It sounds very much like something you'd get from TV.

**Sherry:** Right. He feared that this was some sort of retaliation for his agreeing to cooperate in the ongoing investigation for the Pill Mill scheme, so he took it pretty seriously. He made his housekeeper and his groundskeeper swap phones with him - just in case his phones were being tapped - or tracked.

**Marie:** That sounds more like he's afraid the government is listening.

**Sherry:** Kind of, right? Except he went to the FBI, so I'm not sure what he was thinking. But the FBI didn't believe him, and they didn't take it seriously at all. They suspected that the letter was a scheme cooked up by Kevin to get him out of having to cooperate with the ongoing Pill Mill investigation. They instructed Kevin to ignore the letter, but they scheduled both Kevin and Bryce to take a lie detector test the next day. But they won't make it to that test, because that was the morning of the shooting.

**Marie:** Oh, that's an interesting twist.

**Sherry:** Right. So, that's everything for today.

What do you think listeners? We'd love to hear your thoughts on this episode.

**Marie:** Feel free to join our discussions on Instagram at Parricide Podcast Facebook Parricide Podcast or by writing to us at [parricidepodcast@parricide.org](mailto:parricidepodcast@parricide.org). And, if you like our podcast, please subscribe to the Parricide Podcast and share it with your friends.

**Sherry:** We'd like to thank Jade Brown for our theme music and - hold on to your hats this is a long list - we'd like to thank the Journal News, the Columbus Monthly, the US Department of Justice, the National Institute on Drug Abuse, the DEA, Prevention Solutions, the JAMA Network, 10TV, Zillow, WCBE 90.5 FM, This Week's Community News and a special thanks to Chris Gaitten and Bethany Bruner of the Columbus Dispatch for a variety of information and the photos that we used for this show. You can see the photos at [parricide.org](http://parricide.org). Just click on the Parricide Podcast tab once you get to the website.

**Marie:** And be looking out for Part 2 next week. See you on Tuesday!

**Sherry:** Bye!

(theme music) Ashes, ashes, we all fall down.