STATE OF CONNECTICUT, DEPARTMENT OF PUBLIC SAFETY-INVESTIGATION REPORT (DPS-302-E) (REVISED 2/3/06)

INCIDENT ADDRESS						APARTMENT NO	TOWN CD	TYPE OF EXC	CEPTIONAL CLEARANCE	CASE STATUS	<u>.</u>
CFS NO 1200704559	12/14/2012	TIME 09:41	INCIDENT DATE 12/14/2012	TIME	PRIMARY OFFICER JEWISS, DANIEL E.			BADGE NO 0336			BADGE NO 0336
Attachments:	Statements:	□ Те	letype: 🗌 Ph	otos:	☐ Sk	etchmap: 🗍 E	vidence:	☐ Other:			
Report Type:	Initial Report: ☐ Prosecutors Report: ☐ Supplement: ☐ Re-open: ☐ Assist: ☐ Closing: ☐										
Report #: 120070455	9 - 00173520										

--- NEWTOWN POLICE MEETING REPORT ----(Newtown PD Police Officers - 03/04/13)

ACTION TAKEN:

On 03/04/13 at approx. 1400 hrs., the WDMC-A office held an informational meeting with the Newtown Police Department at the Newtown Library located at 25 Main Street, Newtown, CT. The purpose of this meeting was to offer some basic case information to Newtown Police Officers to assist in their mental health recovery process, especially since they are not part of the investigation and therefore do not have access to many of the confirmed facts of the event. In addition to Chief Michael Kehoe and several members of the Newtown Police Department, the following personnel were in attendance:

CT State Police - LT David DelVecchia #034, SGT Josh Pattberg #130, Det. Daniel Jewiss #336, Det. Michael Mudry #824, Det. Michael Downs #502 and Det. Alison Peters #816 and STOPS personnel - SGT Troy Anderson #175 and SGT Matthew Garcia #191.

Other Attendees - State's Attorney Stephen Sedensky, Newtown 1st Selectwoman Patricia Llodra and Behavioral Health Consultant James Riscatti.

The meeting was opened by Chief Kehoe and 1st Selectwoman Llodra, after which LT DelVecchia conducted a moment of silence in remembrance of the victims. LT DelVecchia then presented a basic timeline of the events (known as of 01/15/13) that occurred on 12/14/12 and he answered several questions that had been submitted ahead of time by Newtown Police Officers. He then answered several new questions ranging from details of the event, to background of the shooter, to our investigative steps and evidence. Some of the answers were not known and/or could not be

THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAININGTO THIS INCIDENT NUMBER.											
THAT THE INFORMATION CONTAINED THEREIN WAS SECURED AS A RESULT OF (1)MY PERSONAL OBSERVATION AND KNOWLEDGE: OR (2)INFORMATION RELAYED TO ME BY OTHER MEMBERS											
OF MY POLICE DEPARTMENT OR OF ANOTHER POLICE DEPARTMENT: OR (3)INFORMATION SECURED BY MYSELF OR ANOTHER MEMBER OF A POLICE DEPARTMENT FROM THE PERSON OR PERSONS											
NAMED OR IDENTIFIED THEREIN, AS INDICATED IN THE ATTACHED REPORT. THAT THE REPORT IS AN ACCURATE STATEMENT OF THE INFORMATION SO RECEIVED BY ME.											
INVESTIGATOR SIGNATURE:	INVESTIGATOR I.D.#:	REPORT DATE:	SUPERVISOR SIGNATURE	SUPERVISOR I.D.#:							
/TFC DANIEL E JEWISS/	0336	08/14/2013 03:28 pm	St. Ill tall	130							

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released at this time. No specific victim information was disclosed. It was also explained to everyone in the meeting that the information relayed was not for public release and was requested to be kept in confidence out of respect for the victims' families and our on-going investigation.

---- END REPORT ----

THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAININGTO THIS INCIDENT NUMBER.

THAT THE INFORMATION CONTAINED THEREIN WAS SECURED AS A RESULT OF (1)MY PERSONAL OBSERVATION AND KNOWLEDGE: OR (2)INFORMATION RELAYED TO ME BY OTHER MEMBERS

OF MY POLICE DEPARTMENT OR OF ANOTHER POLICE DEPARTMENT:OR (3)INFORMATION SECURED BY MYSELF OR ANOTHER MEMBER OF A POLICE DEPARTMENT FROM THE PERSON OR PERSONS

NAMED OR IDENTIFIED THEREIN, AS INDICATED IN THE ATTACHED REPORT. THAT THE REPORT IS AN ACCURATE STATEMENT OF THE INFORMATION SO RECEIVED BY ME.

08/14/2013 03:28 pm 01052

INVESTIGATOR SIGNATURE:

/TFC DANIEL E JEWISS/

INVESTIGATOR I.D.#: 0336 REPORT DATE:

SUPERVISOR SIGNATURE

SUPERVISOR I.D.#:

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