



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

Report #: 1200704559 - 00274759

Report Type: Initial Report: Prosecutors Report: Supplement: Re-open: Assist: Closing:

Attachments: Statements: Teletype: Photos: Sketchmap: Evidence: Other:

CFS NO 1200704559	INCIDENT DATE 12/14/2012	TIME 09:41	INCIDENT DATE 12/14/2012	TIME	PRIMARY OFFICER JEWISS, DANIEL E.	BADGE NO 0336	INVESTIGATING OFFICER PETERS, ALISON A.	BADGE NO 0816
INCIDENT ADDRESS 00012 Dickinson Dr/ Newtown 06482					APARTMENT NO	TOWN CD	TYPE OF EXCEPTIONAL CLEARANCE Death of Offender	CASE STATUS X-Cleared

ACTION TAKEN: On 12/11/13, I received a supplemental Report of Investigation from Alfredo Camargo, an investigator with the Office of the Chief Medical Examiner, pertaining to the autopsy report of the shooter, Adam Lanza. The purpose of the supplemental report is to correct errors that were noted in the original report that was dated 12/15/12. SEE ATTACHED REPORT.

CASE STATUS: The status of this case is X-Cleared.

<p>THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAINING TO 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.</p>				
<p>INVESTIGATOR SIGNATURE: TFC ALISON A. PETERS/ <i>[Signature]</i></p>	<p>INVESTIGATOR I.D.#: 0816</p>	<p>REPORT DATE: 12/12/2013 09:19 am 04842</p>	<p>SUPERVISOR SIGNATURE: <i>[Signature]</i></p>	<p>SUPERVISOR I.D.#: 130</p>

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