


00063183

 State of Connecticut, Department of Public Safety- Investigation Report (DPS-302-C) (Revised 06/27/05)	DPS INCIDENT NUMBER CFS-12-00704597 Page 1 of 2 INCIDENT: HOMICIDE/ASSIST WDMC
	REPORT TYPE: <input type="checkbox"/> INITIAL <input type="checkbox"/> ASSIST <input checked="" type="checkbox"/> SUPP <input type="checkbox"/> RE-OPEN <input type="checkbox"/> CLOSING

Medical Examiner Supplemental Report

Date and Time of Investigation:

December 15, 2012 through December 16, 2012.

Summary of Incident:

On December 14, 2012 at approximately 0935 hours, the Newtown Police Department and the Connecticut State Police responded to an active shooter situation at Sandy Hook Elementary School located at 12 Dickinson Drive in Newtown, Connecticut. The incident involved the suspect, Adam Lanza (DOB 04/22/82), who entered the school, shot and murdered numerous victims, which ultimately ended with Adam Lanza dying of a self inflicted gunshot wound.

Action Taken:


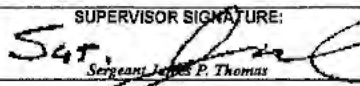
From December 15, 2012 through December 16, 2012, members of the Connecticut State Police Central District Major Crime Squad (CDMC) attended the autopsies for the victims and suspect of the above mentioned incident at the Office of the Chief Medical Examiner in Farmington Connecticut. The following is a list of CDMC members that were present at the autopsies:

- Sgt. James Thomas
- Det. Matthew Gunsalus
- Det. Matthew Greenstein
- Det. Patrick Meehan
- Det. Christopher Fongemie
- Det. Peter Farr

The following is a list of Medical Examiner's that performed the autopsies:

- Chief Medical Examiner H. Wayne Carver II, MD
- Associate Medical Examiner Susan Williams, MD
- Associate Medical Examiner Frank Evangelista, MD
- Associate Medical Examiner Ira J. Kanfer, MD

The following is a list of the Medical Examiner numbers (ME#) corresponding with the victims and suspect, the doctor that performed the autopsy, the manner of death and cause of death:

CASE STATUS:				
<input checked="" type="checkbox"/> 1 ACTIVE <input type="checkbox"/> 2 CLEARED BY ARREST <input type="checkbox"/> 3 SUSPENDED <input type="checkbox"/> 4 EXCEPTIONAL CLEARANCE <input type="checkbox"/> 6 NO CRIMINAL ASPECT <input type="checkbox"/> F FUGITIVE				
TYPE OF EXCEPTIONAL CLEARANCE:				
<input type="checkbox"/> A OFFENDER DECEASED <input type="checkbox"/> D VICTIM UNCOOPERATIVE <input type="checkbox"/> B PROSECUTION DECLINED <input type="checkbox"/> E JUVENILE-NO CUSTODY <input type="checkbox"/> C EXTRADITION DENIED				
<small>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.</small>				
INVESTIGATOR SIGNATURE:  Detective Matthew Greenstein	INVESTIGATOR I.D.#: 864	REPORT DATE: 02/05/13	SUPERVISOR SIGNATURE:  Sergeant James P. Thomas	SUPERVISOR I.D.#: 1289
			APPROVAL DATE: JUN 21 2013	



INCIDENT: HOMICIDE/ASSIST WDMC

REPORT TYPE:
 INITIAL ASSIST SUPP RE-OPEN CLOSING

ATTACHMENTS: STATEMENTS TELETYPE PHOTOS
 SKETCH MAP EVIDENCE OTHER

OCME #	Last	First	Dr. Performing Autopsy	Cause of death	Manner of death
01 02 03 12			Evangelista	Multiple gunshot wounds	Homicide
			Williams	Gunshot wound of neck	Homicide
12-17609	Davino	Rachel	Williams	Multiple gunshot wounds	Homicide
01 02 03 12			Williams	Multiple gunshot wounds	Homicide
			Kanfer	Multiple gunshot wounds	Homicide
			Kanfer	Multiple gunshot wounds	Homicide
			Evangelista	Multiple gunshot wounds	Homicide
12-17592	Hocksprung	Dawn	Kanfer	Multiple gunshot wounds	Homicide
01 02 03 12			Carver	Multiple gunshot wounds	Homicide
			Williams	Multiple gunshot wounds	Homicide
			Carver	Multiple gunshot wounds	Homicide
			Williams	Gunshot wound of head	Homicide
			Evangelista	Multiple gunshot wounds	Homicide
			Williams	Multiple gunshot wounds	Homicide
12-17603	Murphy	Anne marie	Evangelista	Multiple gunshot wounds	Homicide
01 02 03 12			Evangelista	Multiple gunshot wounds	Homicide
			Carver	Multiple gunshot wounds	Homicide
			Carver	Multiple gunshot wounds	Homicide
			Kanfer	Multiple gunshot wounds	Homicide
			Williams	Multiple gunshot wounds	Homicide
			Kanfer	Multiple gunshot wounds	Homicide
12-17606	Rousseau	Lauren	Evangelista	Multiple gunshot wounds	Homicide
12-17595	Sherlach	Mary	Williams	Multiple gunshot wounds	Homicide
12-17610	Soto	Victoria	Carver	Multiple gunshot wounds	Homicide
01 02 03 12			Evangelista	Multiple gunshot wounds	Homicide
			Kanfer	Multiple gunshot wounds	Homicide
12-17618	Lanza	Adam	Carver	Gunshot wound of head	Suicide

Attachments:

1. Twenty- seven (27) separate Notification To Police reports form (ME-123) from the Office of Chief Medical Examiner with regards to each of the victims and the suspect.

Case Status:

This case remains active and under investigation.

CASE STATUS:					
* 1 ACTIVE <input type="checkbox"/> 2 CLEARED BY ARREST <input type="checkbox"/> 3 SUSPENDED <input type="checkbox"/> 4 EXCEPTIONAL CLEARANCE <input type="checkbox"/> 5 NO CRIMINAL ASPECT <input type="checkbox"/> 6 FUGITIVE <input type="checkbox"/>					
TYPE OF EXCEPTIONAL CLEARANCE:					
<input type="checkbox"/> A OFFENDER DECEASED <input type="checkbox"/> D VICTIM UNCOOPERATIVE <input type="checkbox"/> B PROSECUTION DECLINED <input type="checkbox"/> E JUVENILE-NO CUSTODY <input type="checkbox"/> C EXTRADITION DENIED					
I, 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 OR A MEMBER OF MY POLICE DEPARTMENT OR OF ANOTHER POLICE DEPARTMENT; OR (2) INFORMATION RELAYED TO ME BY ANOTHER MEMBER 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: <i>Matthew Greenstein</i> Detective Matthew Greenstein	INVESTIGATOR I.D.#: 864	REPORT DATE: 02/05/13	SUPERVISOR SIGNATURE: <i>Sergeant James Thomas</i>	SUPERVISOR I.D.#: 129	APPROVAL DATE: JUN 21 2013

08

08

08, 01 02 03 12

08, 01 02 03 12

08

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08

08, 01 02 03 12

08, 01 02 03 12

08

08, 01 02 03 12

08

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12

08, 01 02 03 12