



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

Report #: 1200704597 - 00173337

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

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

CFS NO 1200704597	INCIDENT DATE 12/14/2012	TIME 10:13	INCIDENT DATE 12/14/2012	TIME	PRIMARY OFFICER KEITH, KAROLINE A.	BADGE NO 0019	INVESTIGATING OFFICER RUP SIS, STEVEN A.	BADGE NO 1260
INCIDENT ADDRESS 00012 Dickinson Dr Dr/ Newtown 06482					APARTMENT NO	TOWN CD T097	TYPE OF EXCEPTIONAL CLEARANCE Not Applicable	CASE STATUS Pending

CFS12-00 704 597

Exhibits 506 to 510 to forensic laboratory.

**ACTION TAKEN:**

On Wednesday, 07 August 2013 at approximately 1205 hours, I removed the above exhibit from the Western District Major Crime Evidence Room and drove it to the forensic laboratory, Meriden.

I turned the evidence over to evidence control officer Cara Niazi at approximately 1318 hours.

Attachments / MAJOR CRIME TAB

Lab Receipts & Lab Request / -00173334

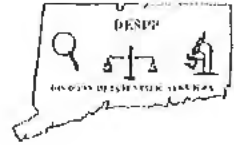
THE UNDERSIGNED, AN INVESTIGATOR HAVING BEEN DULY SWORN DEPOSES AND SAYS THAT: I AM THE WRITER OF THE ATTACHED POLICE REPORT PERTAINING TO THIS INCIDENT NUMBER. THAT THE INFORMATION CONTAINED THEREIN WAS SECURED AS A RESULT OF (1) MY PERSONAL OBSERVATION AND KNOWLEDGE; OR (2) INFORMATION RELAYED TO ME 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.				
INVESTIGATOR SIGNATURE: <b>/TFC STEVEN A RUP SIS/</b>	INVESTIGATOR I.D.#: 1260	REPORT DATE: 12/02/2013 09:55 am 05770	SUPERVISOR SIGNATURE <b>/SGT JEFFREY T COVELLO/</b>	SUPERVISOR I.D.#: 0167

**DEC 02 2013**



STATE OF CONNECTICUT  
Department of Emergency Services and  
Public Protection  
Division of Scientific Services

278 Colony Street  
Meriden, CT 06451  
Telephone: 203-639-6400  
Fax: 203-639-6484



**Evidence Receipt**

Date: 8/7/13  
Time: 1:18 PM

LABORATORY CASE #: ID-12-002105  
SUBMITTING AGENCY: CSP - Western District Major Crime  
AGENCY CASE #: Squad CFS1200704597  
TOWN (if applicable): Newtown

RECEIVED AT LAB BY (Signature): [Signature]  
Cara Niazi  
Evidence Control Officer

Submission #:	Description:
109	#506 Envelope w/ "one (1) bullet like projectile"
130	#507 Envelope w/ "bullet-like projectile fragments - (located front pass side of trunk CT 144WMD)"
131	#508 Envelope w/ "several bullet-like projectile fragments - (located front pass 'A' pillar CT 144WMD)"
132	#509 Envelope w/ "several bullet-like projectile fragments - (located underneath CT 600TVG)"
133	#510 Envelope w/ "one bullet-like projectile - (located rear driver side CT 913UNY)"

*Agencies submitting evidence to the Division of Scientific Services Laboratories for specific analysis agree to allow the laboratory to determine the appropriate methodology for the evidence submitted. Descriptions of analyses offered by the Division are detailed on our website. If the laboratory needs to deviate from standard test methodologies you or your agency will be contacted prior to the analysis being performed. The laboratory reserves the right to use contract laboratories to perform case analysis as needed. This contract serves to inform you as the client of this potential event. In the event a contract laboratory is used the name and address of the contract laboratory will be stated on the laboratory report to the submitting agency. Any concerns or specific requests about the required testing can be discussed with the section supervisor or Director prior to case analysis.*


Barcode/Local No. Correspond CW  
DELIVERED TO LAB BY (Please Print): RUPSIS, S.A. #1260  
DELIVERED TO LAB BY (Signature): [Signature]  
Detective - Steven Rupsis



STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
Division of Scientific Services

REQUEST FOR EXAMINATION OF PHYSICAL EVIDENCE

- Forensic Science Laboratory
- Toxicology/Controlled Substance Laboratory
- Computer Crime and Electronic Evidence Laboratory

ID-12-002105  
  
 9IYD53UMOSJE6R  
 CSP - Western District Major Crime Squad  
 CFS1200704597

Case Previously Submitted? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If "Yes," Laboratory ID Number: 12-002105	Examined By Other Agency? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," specify: N/A
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Name of Submitting Agency: CT STATE POLICE - WESTERN DISTRICT MAJOR CRIME

Agency Address including Zip Code: 452 BANTAM ROAD, LITCHFIELD, CT 06759	Incident Type: Mass Homicide Incident Town: Newtown Incident Date: 14 December 2012
Telephone ( 203 ) 537.2714 (DET Steven RUPSIS)	Agency Case Number: CFS12-00 704 597

Name of Victim (Last, First, M.I.)	DOB	Race	Sex	Name of Suspect (Last, First, M.I.)	DOB	Race	Sex
				LANZA, Adam		White	Male

**Brief History of Case:**  
 Mass Homicide - Sandy Hook Elementary School.

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Item #	Describe Each Item of Evidence	Type of Examination Requested
506	One bullet-like projectile - (Located Front Driver side of trunk CT 144WMD)	MICROSCOPIC then DNA (SEE ADDITIONAL INFORMATION)
507	Bullet-like projectile fragments - (Located Front Pass side of trunk CT 144WMD)	MICROSCOPIC then DNA (SEE ADDITIONAL INFORMATION)
508	Several bullet-like projectile fragments - (Located Front Pass 'A' Pillar CT 144WMD)	MICROSCOPIC then DNA (SEE ADDITIONAL INFORMATION)
509	Several bullet-like projectile fragments - (Located underneath CT 600TVG)	MICROSCOPIC then DNA (SEE ADDITIONAL INFORMATION)
510	One bullet-like projectile - (Located Rear Driver side CT 913UNY)	MICROSCOPIC then DNA (SEE ADDITIONAL INFORMATION)

Is total property loss or damage over \$2,000.00?  YES  NO  N/A  
 (If "No" was checked, please contact the Laboratory prior to submission of evidence)

**Additional Information:** THIS REQUEST IS TO DETERMINE IF ANY OF THESE EXHIBITS HAD ANY CONTACT WITH A HUMAN  
 \*\*\*\*\* BODY. IF ANY RESULT IS POSITIVE, IT IS REQUESTED THAT POSITIVE RESULTS BE COMPARED TO VICTIMS.

Person Requesting Examination (Print Name) DELVECCHIA, LIEUTENANT	Date of Request 07 AUGUST 2013
Person Submitting Evidence (Print Name) RUPSIS, DETECTIVE	Date of Submission 07 AUGUST 2013

*\*All hard evidence must be fumed prior to submission unless other arrangements have been made with the Laboratory*  
 278 Colony Street, Meriden, Connecticut 06451  
 Telephone (203) 639-6400 Fax (203) 639-6484

# EVIDENCE TRANSFER RECEIPT



## EVIDENCE TRANSFER TRANSACTION

<b>Evidence Relinquished By:</b> Rupsis, Steven	<b>Agency:</b> PIN Entered [    ]
<b>Evidence Received By:</b> Niazi, Cara	<b>Agency:</b> PIN Entered [ X ]
<b>VIA:</b> <b>Note:</b>	
<b>Date &amp; Time:</b> 8/7/13 13:12:03 <b>Hours</b>	
<b>Operator:</b> Cara Niazi	

## LABORATORY CASE INFORMATION

<u>Lab Case #</u>	<u>Lab Evidence #</u>	<u>Evidence Description</u>	<u>Evidence Type</u>	<u>Notes</u>
ID-12-002105	109	#506 Envelope w/ "one (1) bullet like projectile"		

## SIGNATURES

<b>Evidence Relinquished By:</b> RUPSIS, S.A. #120 	<b>Evidence Received By:</b>  8/7/13
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# EVIDENCE TRANSFER RECEIPT



## EVIDENCE TRANSFER TRANSACTION

<b>Evidence Relinquished By:</b> Niazi, Cara	<b>Agency:</b> PIN Entered [ X ]
<b>Evidence Received By:</b> Evidence Receiving - Incoming (room 206)	<b>Agency:</b> PIN Entered [ ]
<b>VIA:</b> <b>Note:</b>	
<b>Date &amp; Time:</b> 8/7/13 13:12:05 <b>Hours</b>	
<b>Operator:</b> Cara Niazi	

## LABORATORY CASE INFORMATION

<u>Lab Case #</u>	<u>Lab Evidence #</u>	<u>Evidence Description</u>	<u>Evidence Type</u>	<u>Notes</u>
ID-12-002105	109	#506 Envelope w/ "one (1) bullet like projectile"		

## SIGNATURES

<b>Evidence Relinquished By:</b>  8/7/13	<b>Evidence Received By:</b> 
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