 State Police	Crime Laboratory Evidence Submission	Agency: Maine State Police
		Incident # 23S056156

LAB USE ONLY - Bar Code Label	*LAB USE ONLY*	Method of Transmittal
	In Person	
	Cert/Reg Mail	
	Fed Ex/UPS	
	Other	

Investigating/Case Officer (Case Agent/Person Managing Investigation)

Name (Last, First, MI)		Rank
Bond, Reid, C		Detective
Office #	Cell #	Email
(207) 624-7076		reid.c.bond@maine.gov

Submitting Officer (Officer Delivering Evidence to Lab, if Different than Case Officer)

Name (Last, First, MI)	Rank	Email	Agency
Cookson, Christopher, L	Sergeant	christopher.cookson@maine.gov	Maine State Police

Incident Details (Specific Facts of the Case - Use LAB-2A for Additional People Involved)

Offense Date (mm/dd/yyyy)	County of Occurrence	CTV (City/Town/Village)	Type of Offense (Burglary, Murder, Rape, etc.)
10/25/2023	Androscoggin	Lewiston, ME	Murder
Name (Last, First, MI)		Title (Specify: Complainant/Deceased/Def/Subject/Suspect/Victim/Other)	
Card, Robert		Suspect	

Description of Events (Specific details of incident):

Mass Shooting in Lewiston, ME where Robert Card entered a bowling alley and bar where he shot and killed 18 people. [REDACTED]

Priority Status (Case Status at Time of Evidence Submission - Send Status Updates to: FICCMR@troopers.ny.gov)

Pending	<input type="checkbox"/>	Grand Jury	<input type="checkbox"/>	Trial	<input type="checkbox"/>	Court Date:
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Evidence (Use LAB-2A for Additional Items)

Agency Item #	Item Description (Include source if applicable, i.e. victim, suspect, owner)	Specific Analysis Requested (DNA/Serology, Drugs (ID/Weight), Tox, Latents, Firearms (NIBIN, S/N, Test Fire), Trace Section (Fire Debris, Forensic Unknown, Fracture Match), CCU, Audio/Video/Image, Odontology)
37.1	[REDACTED]	[REDACTED]

 Is there a different *INCIDENT* to which this submission should be compared? If Yes, provide Incident or Lab #
****CUSTOMER AGREEMENT****

By submission of this form and the evidence described above, the submitting agency acknowledges any analytical reports issued by the NYSP Crime Laboratory will be formatted in accordance with the Laboratory's standard procedures and contain all information necessary for the interpretation of test results.

Go to https://www.troopers.ny.gov/Crime_Laboratory_System/Laboratory_Test_Report_Information/index.php for identification of the reporting information required by ISO/IEC17025:2017 that might not appear in the test report.

Advanced Process Consent	Case #:

***Read Information Below**

The New York State Police Computer Forensic Laboratory (CFL) has advised me that all attempts to conduct a data extraction of the aforementioned item(s) of digital evidence have been incomplete or unsuccessful. In order to fully analyze the item, advanced data extraction methods must be employed. The CFL will start with the least destructive method available and progress, if needed, to methods that will permanently destroy the item in the process of the data extraction.

The advanced data extraction methods employed by the [REDACTED]

[REDACTED]

I am hereby acknowledging that I have been advised of the risks and wish for the CFL to proceed with advanced data extraction methods.

I have read and understand the above disclaimer and request the New York State Police, to conduct an advanced process on the following:

Agency Case #: 23S056156	Lab Case #:
Lab Item(s) #: 37.1	Authorizing Agent: Sgt. Christopher L. Cookson
Signature: Cookson, Christopher	Digitally signed by Cookson, Christopher Date: 2023.11.15 08:22:30 -05'00'
Date: 11/15/2023	

Additional Information or Comments



NYSIC New York State Intelligence Center

INCIDENT INFORMATION

AID - ATTEMPT TO LOCATE PERSON

Incident Number	Case Number	Cad Number	TraCS Number
11520342	231970148	11368981	

Initial Report

Reported Date	Time	Reported Method
07/16/2023	9:55 AM	7 DIGIT PHONE LINE

TZS	Agency/ORI
K331 - CORTLANDT	NY1590200 - K3 TROOP K - ZONE 3

Dispatch						
Dispatch Time	Dispatcher	Officer Name	Car	Arrival Time	Clear Time	
10:01 AM		TPR ANTHONY CLEVINGER		10:12 AM		

Dispatcher Notes
 3K84 FOLLOWING AMBULANCE TO WEST POINT HOSPITAL CAMP SMITH BUILDING 508 ROOM 108 MEET SGT URICK IN THE MAIN LOBBY CONCERNED FOR MALE SOLIDER WHO WAS HIGHLY INTOX LAST NIGHT AND MAKING THREATING REMARKS HE WOULD NOT LET ANYONE IN THE ROOM LAST NIGHT DOES NOT BELIEVE HE HAS WEAPONS

Incident Location
Business
 CAMP SMITH

Address	Location	Caution
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	TOWN OF CORTLANDT	

Summary

Occurred On/From	Time	Occurred To	Time	Weapons Involved	Victims	Suspects
07/16/2023	9:55 AM	07/16/2023	1:30 PM		0	0

Narrative List

Date of Action	Date Written	Officer Name
07/16/2023	07/16/2023	TPR ANTHONY CLEVINGER

Narrative

Officer Name	Date of Action	Date Written
TPR ANTHONY CLEVINGER	07/16/2023	07/16/2023

Narrative
 INITIAL / CLOSING:
 On the above date, P/TPR Castro and I were dispatched to Camp Smith for an individual who was acting in threatening manner towards other soldiers in his unit.
 Upon arrival, we interviewed [REDACTED] who stated that ROBERT CARD was intoxicated the night before (07/16/2023) and was threatening other members in his unit. CARD refused to let Commanding Officers conduct a room inspection due to his behavior. [REDACTED] informed us that in the last couple of months CARD has experienced a decline in mental health. [REDACTED] states that CARD has begun to hear others "bad mouthing" him behind his back. We interviewed [REDACTED] who stated the same.
 We interviewed CARD who states that he was fed up with hearing others talk behind his back. CARD did not state that he wanted to harm himself or others. Commanding Officer, [REDACTED] initiated a command directive to have CARD mentally evaluated at Keller Community Hospital.
 We escorted [REDACTED] and CARD, who traveled in a personal vehicle, from Camp Smith to Keller Hospital with no incident. CARD was turned over to CPT Dicwinson.
 No further SP services needed.
 CLOSED

To Narrative List

Incident Administrative Information

Status	Status Date	Bias Crime	Computer Related	Notified / TOT Related
CLOSED BY INVESTIGATION	07/16/2023	NO BIAS/NOT APPLICABLE	COMPUTER NOT USED TO COMMIT OFFENSE	
Reporting Officer	Supervisor			
TPR ANTHONY CLEVINGER	SGT KULJEET GOSAL			

P Incident

	e	DOB		Ra	Caution
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
T				HI	

< REVIEWED > P

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location		
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	TOWN OF CORTLANDT		
Home Phone	Ext/Pin	Work Phone	Ext/Pin
[REDACTED]			

Characteristics

Ethnicity	Skin/Complexion	Eye Color	Eyewear
HISPANIC			

< PERSON INTERVIEWED > MOTE, KELVIN L

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location		
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567			
Home Phone	Ext/Pin	Work Phone	Ext/Pin
[REDACTED]			

Characteristics

Ethnicity	Skin/Complexion	Eye Color	Eyewear

NOT HISPANIC

<PERSON INTERVIEWED> NOYES, MATTHEW

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	

Home Phone	Ext/Pin	Work Phone	Ext/Pin
[REDACTED]			

Characteristics

Ethnicity	Skin/Complexion	Eye Color	Eyewear
NOT HISPANIC			

<PERSON INTERVIEWED> REED, DARYL

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	TOWN OF CORTLANDT

Home Phone	Ext/Pin	Work Phone	Ext/Pin
[REDACTED]			

Characteristics

Ethnicity	Skin/Complexion	Eye Color	Eyewear
NOT HISPANIC			

<PERSON INTERVIEWED> YUREK, EDWARD

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	TOWN OF CORTLANDT

Home Phone	Ext/Pin	Work Phone	Ext/Pin
[REDACTED]			

Characteristics

Ethnicity	Skin/Complexion	Eye Color	Eyewear
NOT HISPANIC			

<PERSON REPORTING> SGT.VERDERAME

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
[REDACTED]						
Home Phone	Ext/Pin	Work Phone	Ext/Pin			
		[REDACTED]				

<SUSPECT> CARD, ROBERT

Name	Date of Birth	Sex	Race	Country of Birth	State of Birth	Citizen
CARD, ROBERT	[REDACTED]	M-MALE	WHITE	USA	NEW YORK	Yes

Contact Information

Home Address	Location
11 BEAR MOUNTAIN BRIDGE RD CORTLANDT, NEW YORK 10567	TOWN OF CORTLANDT

Characteristics

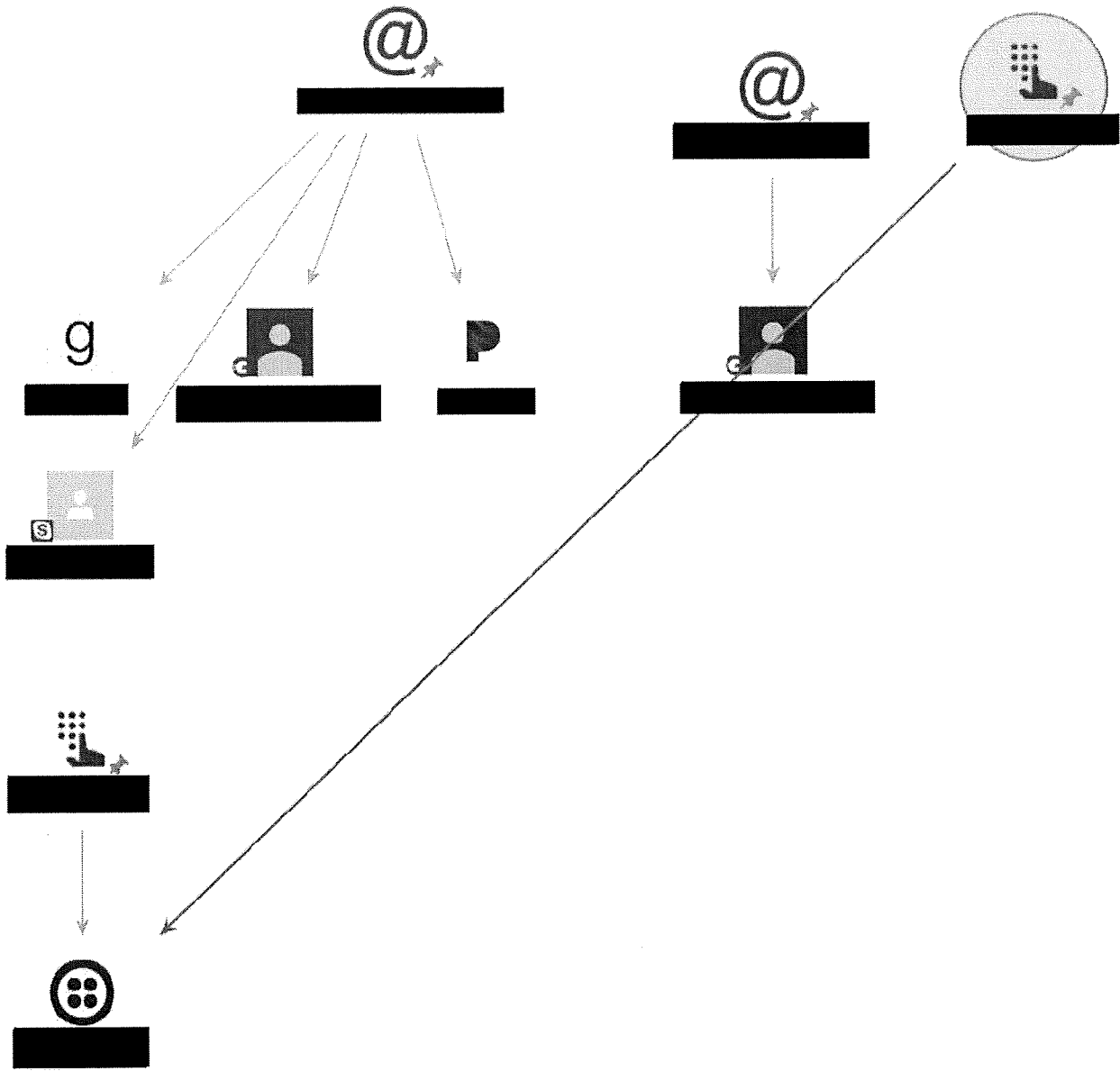
Ethnicity	Skin/Complexion	Eye Color	Eyewear
NOT HISPANIC			UNKNOWN

Physical Markings

Scar(s)	Mark(s)	Tattoo(s)
UNKNOWN	UNKNOWN	UNKNOWN

LAW ENFORCEMENT SENSITIVE

(Not for public release. This document is for official use only. Limit dissemination to law enforcement personnel and designated local, state, federal, tribal and military officials with a need to know.)



1. Top 10 Entities

Total number of entities 10
 Total number of links 7

Ranked by Incoming Links

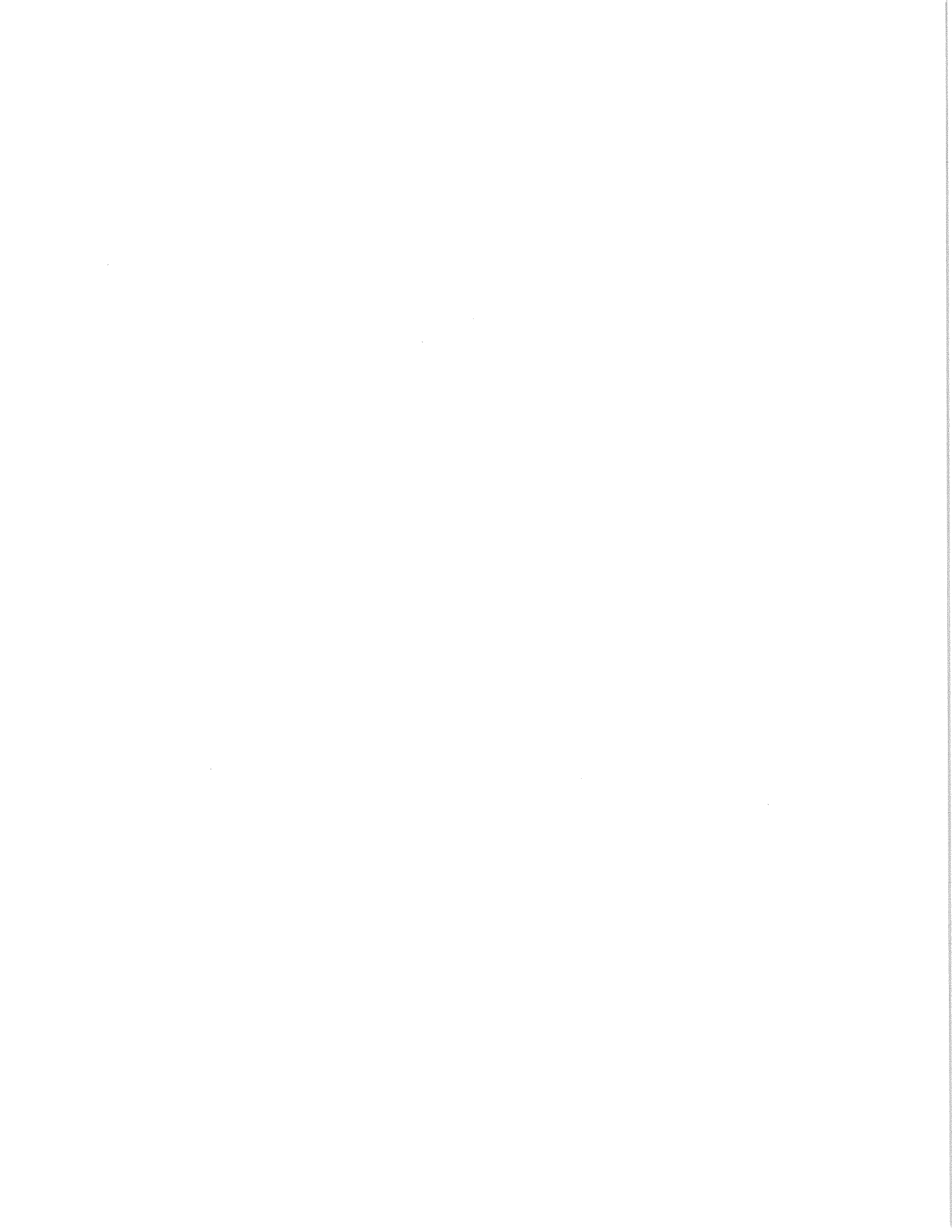
Rank	Type	Value	Incoming links
1	Twilio PhoneNumber		2
2	Google User		1
3	Goodreads User		1
4	Google User		1
5	Pandora User		1
6	Skype User		1
7	Phone Number		0
8	Email Address		0
9	Phone Number		0
10	Email Address		0

Ranked by Outgoing Links

Rank	Type	Value	Outgoing links
1	Email Address		4
2	Phone Number		1
3	Phone Number		1
4	Email Address		1
5	Twilio PhoneNumber		0
6	Google User		0
7	Goodreads User		0
8	Google User		0
9	Pandora User		0
10	Skype User		0

Ranked by Total Links

Rank	Type	Value	Total links
1	Email Address		4
2	Twilio PhoneNumber		2
3	Phone Number		1
4	Phone Number		1
5	Email Address		1
6	Google User		1
7	Goodreads User		1
8	Google User		1
9	Pandora User		1
10	Skype User		1



2. Entities by Type

Email Addresses (2)

[REDACTED]

[REDACTED]

Goodreads Users (1)

[REDACTED]

Google Users (2)

[REDACTED]

[REDACTED]

Pandora Users (1)

[REDACTED]

Phone Numbers (2)

[REDACTED]

[REDACTED]


Skype Users (1)

[REDACTED]

Twilio PhoneNumbers (1)





[REDACTED]


3. Entity Details

 Email Address
[Redacted]

Weight 0
Email Address [Redacted]
Before
After
Include Media Type
Exclude Media Type
owner

Outgoing (4)



-  Goodreads User [Redacted]
-  Google User [Redacted]
-  Pandora User [Redacted]
-  Skype User [Redacted]


 Twilio PhoneNumber
[Redacted]

Weight [Redacted]
ID [Redacted]
Name [Redacted]
Phone Number [Redacted]
Caller Type [Redacted]
Country Code [Redacted]
National Format [Redacted]
Carrier [Redacted]

Industry
Associated People
Addresses
Alternate Phone Numbers

Incoming (2)

-  Phone Number [Redacted]
-  Phone Number [Redacted]

 Phone Number
[Redacted]

Weight [redacted]
Phone Number [redacted]
Country Code [redacted]
City Code [redacted]
Area Code [redacted]
Last Digits [redacted]

Outgoing (1)

 Twilio PhoneNumber [redacted]



Phone Number [redacted]
[redacted]

Weight [redacted]
Phone Number [redacted]
Country Code [redacted]
City Code [redacted]
Area Code [redacted]
Last Digits [redacted]

Outgoing (1)

 Twilio PhoneNumber [redacted]

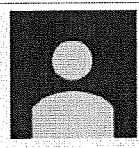


Email Address [redacted]
[redacted]

Weight [redacted]
Email Address [redacted]
Before [redacted]
After [redacted]
Include Media Type [redacted]
Exclude Media Type [redacted]
owner [redacted]

Outgoing (1)

 Google User [redacted]



Google User [redacted]
[redacted]

Weight
ID
Name
Image
Email
URL
Image URL
Cover Image URL
Updated At

[Redacted]
[Redacted]
[Redacted]
[Redacted]
Incoming (1)
@ Email Address [Redacted]



Goodreads User

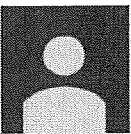
[Redacted]
[Redacted]

Weight
ID
Name
URL
About
Details
Image URL
Is Private
Website URL
Created At
Last Active At
Birth Place
Birth Date
Death Date
Friends Count
Bookshelf Count
Works Count
Ratings Given Count
Ratings Received Count
Reviews Given Count
Reviews Received Count
Rating
Author ID
Followers Count
Genres
Links



Incoming (1)

@ Email Address [Redacted]



[Redacted Name]
[Redacted Email]
[Redacted Email]

Weight [Redacted]
ID [Redacted]
Image [Redacted]
Email [Redacted]
URL [Redacted]
Image URL [Redacted]
Cover Image URL [Redacted]
Updated At [Redacted]

[Redacted]
[Redacted]
[Redacted]
[Redacted]

Incoming (1)

@ Email Address [Redacted]



Pandora User

[Redacted Name]
[Redacted Email]

Weight [Redacted]
ID [Redacted]
Name [Redacted]
URL [Redacted]
Image URL [Redacted]
About [Redacted]
Links [Redacted]

[Redacted]

Incoming (1)

@ Email Address [Redacted]



Skype User

[Redacted]
[Redacted]

Weight

[Redacted]

ID

[Redacted]

Avatar URL

Name

[Redacted]

Image

[Redacted]

URL

Image URL

[Redacted]

Username

[Redacted]

About

Location

Gender

Language

Birthday

Website URL

[Redacted]

[Redacted]

Incoming (1)



Email Address

[Redacted]



**State
Police**

Forensic Investigation Center
Building 30, 1220 Washington Avenue, Albany, NY
12226-3000 | (518) 457-1208 | www.troopers.ny.gov

Crime Laboratory Case Receipt Record

Lab Number **23HL-05791** Agency Case Number 23S056156

Submitting Agency OUT OF STATE

Submission Date-Time 11/16/2023 - 1:25 PM Received By Miranda M. Drowne

Tracking Number FED EX 9622001900005750193700786411773100

Comments

Associated Names

Last Name	First Name	Middle Name
Card	Robert	

Associated Items

Container Desc.	Lab Item #	Packaging / Item Type	Described As / Source
	37.1	One (1) sealed plastic bag containing: Digital Video/Audio Recorder (DVR)	

End of Case Receipt Record for 23HL-05791

Items/containers are not inventoried at the time of submission. All item descriptions and counts listed are obtained directly from agency submission documents and/or evidence.



1. Agency K3 TROOP K - ZONE 3	2. Div/Precinct K331	New York State INCIDENT REPORT	3. ORI NY1590200	5. Case No. 231970148	6. Incident No. 11520342
7,8,9. Date Reported (Day, Date, Time) SUNDAY 07/16/2023 09:55		10,11,12. Occurred On/From (Day, Date, Time) SUNDAY 07/16/2023 09:55		13,14,15. Occurred To (Day, Date, Time) SUNDAY 07/16/2023 13:30	
16. Incident Type AID-ATTEMPT TO LOCATE PERSON			17. Business Name CAMP SMITH		
19. Incident Address (Street Name, Bldg. No., Apt. No.) 11 BEAR MOUNTAIN BRIDGE RD					
20. City/State/Zip CORTLANDT NEW YORK 10567					
21. Location Code (TSLED) CORTLANDT TOWN 6051		23. No. of Victims 0	24. No. of Suspects 0	26. Victim also Complainant?	
Location Type GOVERNMENT OFFICE					
Dispatcher Notes 3K84 FOLLOWING AMBULANCE TO WEST POINT HOSPITAL CAMP SMITH BUILDING [REDACTED] MEET SGT URICK IN THE MAIN LOBBY					

ASSOCIATED PERSONS

25. TYPE	Name (Last, First, Middle, Title)	DOB	Street Name Bldg., Apt.No., City, State, Zip	Res Phone Bus Phone
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	[REDACTED]
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	[REDACTED]
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	[REDACTED]
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	[REDACTED]
PERSON INTERVIEWED	[REDACTED]	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	[REDACTED]
PERSON REPORTING	[REDACTED]			[REDACTED]
SUSPECT	CARD, ROBERT	[REDACTED]	11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567	

SUSPECT

Person ID # 11089059	34. Type SUSPECT	35. Name (Last, First, Middle) CARD, ROBERT				
37. Apparent Condition			38. Address (Street Name, Bldg., Apt. No., City, State, Zip) 11 BEAR MOUNTAIN BRIDGE RD CORTLANDT NY 10567			
39a. Home Phone	39b. Work Phone	40. Social Security	41. DOB	42. Age	43. Gender	44. Race
			[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
45. Ethnicity NOT HISPANIC		46. Skin		47. Occupation		
48. Height	49. Weight	50. Hair	51. Eyes		52. Glasses UNKNOWN	53. Build
54. Employer/School			55. Employer Address NY			
56. Scars/Marks/Tattoos /Description						

36. Alias/Nickname/Maiden Name

Last Name	First Name	MiddleName

NARRATIVE

Date of Action	Date Written	Officer Name & Rank
07/16/2023	07/16/2023	CLEVINGER, ANTHONY (TPR)
Narrative		
<p>INITIAL / CLOSING:</p> <p>On the above date, P/TPR Castro and I were dispatched to Camp Smith for an individual who was acting in threatening manner towards other soldiers in his unit.</p> <p>Upon arrival, we interviewed [REDACTED] [REDACTED] ROBERT CARD was intoxicated the night before (07/16/2023) and was threatening other members in his unit. CARD refused to let Commanding Officers conduct a room inspection due to his behavior. [REDACTED] in the last couple of months CARD has experienced a decline in mental health. [REDACTED] CARD has begun to hear others "bad mouthing" him behind his back. We interviewed [REDACTED] who stated the same.</p> <p>We interviewed CARD who states that he was fed up with hearing others talk behind his back. CARD did not state that he wanted to harm himself or others. [REDACTED] initiated [REDACTED] to have CARD mentally evaluated at Keller Community Hospital.</p> <p>We escorted [REDACTED] CARD, who traveled in a personal vehicle, from Camp Smith to Keller Hospital with no incident. CARD was turned over to CPT Dicwinson.</p> <p>No further SP services needed.</p> <p>CLOSED</p>		

ADMINISTRATIVE

74. Inquiries	75. NYSPIN Message No.	76. Complainant Signature	
77. Reporting Officer Signature (Include Rank) TPR ANTHONY CLEVINGER	78. ID No. 1618	79. Supervisor Signature (Include Rank) SGT KULJEET GOSAL	80. ID No. 5564
81. Status CLOSED BY INVESTIGATION	82. Status Date 07/16/2023	83. Notified/TOT	
			Solvability Total 0