

REPORT OF MICROBIOLOGICAL ANALYSIS
CHIEF MEDICAL EXAMINER-CORONER'S OFFICE
Bacteriology Laboratory
Hall of Justice
Los Angeles, California

File No. 69-8795

Name of Deceased Jay Sebring

Date Submitted 8/10/69

Autopsy Surgeon T. Noguchi, M.D.

Material Submitted Blood for ABO and Rh typing.

Laboratory Findings:

BLOOD: Group O Rh-negative.

Examined By Robert A. Luke

Date 8/25/69

Jay Sebring

P8779

Autopsy 8-10-69 at about 2:15 p.m.
Supervised and directed autopsy performed
by Dr. R. C. Henry

Cause of death: Exsanguination due to multiple stab wounds.

"exsanguination is a medical term designating conditions which, perhaps if I use the words, the term is "bled to death" - might be the term.

Identification of photographs, taken under your direction, on August 10, 1969, prior to the autopsy.

At scene: Did you see Jay Sebring's body? Yes. In proximity of Miss Tate's body, in living room of residence; a rope around neck at time; rope around Mr. Sebring's neck extended to S. Tate's neck? Yes.
(Finken cut rope at scene to separate bodies? Yes)
Rope still around neck on arrival at coroner's office.

At H/J: Did you remove rope? Yes, I did. Turned over to a representative from LAPD.

How many stab wounds? 7 stab wounds.

Original autopsy report indicated 6? Yes.

You found an additional stab wound? Yes.

How many fatal in and of themselves? At least 3 would be fatal.

All 7 penetration wounds? Yes.

Any gunshot wound? Yes. 1 gunshot wound.

Was gunshot wound fatal wound? Yes, it could be classified as a fatal wound.

Original autopsy did not indicate that particular gunshot wound was a fatal wound? That is true.

You re-evaluated and feel it could have been the fatal wound?

Yes. To clarify: The term "fatal wound" - it could be fatal -- that would be a division of the severeness of the wound, the injury to the body. Naturally, when injury is extensive, there are multiple stab wounds involved, one would be most fatal and other stab wounds could be fatal by itself if no medical attention is given. But in light of additional stab wounds, by separating which one is the fatal one, we often find difficulty, and we use the term, "could be fatal", and this is a category that you might also use the words, "potentially fatal"/

Diagrams.

Indicate on diagram the location of each wound, the part of the body penetrated, if fatal and why, and the direction of the thrust of each wound. Also the wound tract on the bullet wound.

- #1 ~~Fatal~~ Side of the mid-chest -- on the left side of the mid-chest. Measures 1 1/2 skin surface, penetrated front to back, and left to right, in an upper direction; ~~XXXXXXXXXX~~ severed a portion of the aorta, causing massive. Fatal
- #2 located slightly below location of #1, still in the chest, the mid-portion of the chest, slightly to the left side; measures 1 1/2 inches skin length, penetrating into the chest cavity.
- #3 Located on left side of upper chest, penetrating into the chest cavity.
- GSW: Found in the left axilla, inside the armpit, slightly in front of the midline of the left side of the chest; wound tract penetrated downward, penetrated to the left fifth rib, and through the left lung. Bullet was found adjacent to the exit wound, found in the back, basically the left side of the mid-back. "I personally recovered during fluoroscopic x-ray - under fluoroscopic examination I found what appears to be fragments of lead which still remained in the bony structure which we did not attempt to pick up."
- But you recovered part of the bullet? Yes. Near the exit wound Bullet had penetrated the body but did not penetrate through his garment, shirt, so the bullet was trapped in between the surface of the skin and the shirts. I might say that the gunshot wound did not disclose any powder residue or powder deposit on the surface of the entrance area. Significance: if muzzle distance is close, there are powder burns around the gunshot wound? Yes. You found no such powder burns? True.
- #4 Stab wound in mid-back,; measures 1 1/2 inches skin length.
- #5 ~~FATAL~~ Left side of mid-back; measures 1 1/2 inches skin length.
- #6 ~~FATAL~~ Lower portion of left mid-back; measures 1 1/2 skin length, and is one of three stab wounds penetrating into the lung, which if not immediately fatal, is potentially fatal. Fatal.
LEFT main pul artery
- #7 Left shoulder, measures 1/2 inch skin length; superficial.
- Additional: Wounds found in back of the left hand, precisely between ring finger and middle finger of left hand; slicing type

Series of contusions -- on face -- tissue damage caused by a blunt force, dark, red, swollen soft tissues. This contused area found on nose, left upper and lower eyelids, and also lip, showing considerable swelling Caused by application of blunt force against facial structure, causing breakage of capillaries underneath the skin, called subcutaneous tissue, causing hemorrhage into tissues, causing swelling. Could be delivered by a number of objects, but without obvious breaking of skin would exclude probability of sharp object such as axe or hammer, more likely the soft padded -- a heavy object capable of delivering blunt force. (most common usually a fist)

P. 8794. Going back to powder burns and the absence thereof, how close does muzzle of weapon have to be before it will leave powder burns?

Varies quite a bit because:
where a person exposing the skin without having any clothing on;

If muzzle is close to skin, contacting the skin, the almost entire burnt and unburnt powder is propelled right into the tissue, which causes sometimes a tearing of the skin showing a singeing of hair and a large amount of deposit of the powder in the subcutaneous tissue; sometimes it goes deeper into the bony structures. It may show unburnt powder.

If muzzle distance is greater, then such unburnt powder may not be detectable in the wound tract, but on the surface. These are the grayish, dark grayish, round particles, deposits on the surface. Depending on weapon and cartridge, varies a great deal. In fact, very difficult to determine the muzzle distance unless the suspected weapon is tested.

Generally speaking, powder usually visible within 15 inches that is muzzle distance from skin is 15 inches, by careful examination we will see either unburnt powder or black smoke on surface of skin. Beyond that level, not detectable by naked eye, but often we can perform a chemical analysis.

Re Jay Sebring: Muzzle in excess of 15 inches from body? Yes.

MORNING RECESS

Identification of damaged bullet? First seen 8-10-69 during the examination; at the time of the fluoroscopy examination? Yes.

Mr. Sebring still had shirt on? Yes.
Looking through fluoroscopy, you saw this bullet? Yes.
You removed bullet? Yes.
Placed in envelope for evidence and turned over to Mr. Lee (Sgt. Lee) of LAPD Crime Lab.

There was an exit wound? Yes. In the vicinity of his back.
Was this bullet close to the exit wound? Yes - within two or three inches from the exit wound.

Bullet is damaged? Yes. The base, and also one side of the bullet is flattened.

Parts of the bullet no longer attached to the bullet? Yes.

Parts of the bullet have fallen off? Yes.

In the fluoroscopy examination did you find any bullet fragments? Yes, I did; in the back, in the center portion of the ~~xxxxxxx~~ body structure. I would think that the fragments were lodged in the spinal processes -- that is a portion of the spine. Did you remove these fragments?
No -- I did not attempt to do so.

COUNTY OF LOS ANGELES

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

AUTOPSY CHECK SHEET

Name

Jay Sebring

File #

69-8795

Date

8/10/67

Time

2:15 PM

EXTERNAL EXAM

Sex M
 Race W
 Age 26?
 Height 66 1/4"
 Weight 122
 Hair Black
 Eyes Br. 4mm
 Sclera Clear
 Teeth own
 Mouth little blood
 Tongue
 Nose Contusion at root.
 Chest " left eye
 Breasts " tip of nose + upper lip
 Abdomen Stab + GSW's
 Scar see chts.
 Genital OK circum
 Edema -
 Skin -
 Decub -
 HEART Wt 340
 Pericard -
 Hypert OK
 Dilat -
 Muscle -
 Valves -
 Coronary -
 AORTA stab at root inominat
 VESSELS almost comp. severance
 LUNGS Wt
 R 800
 L 300 collapsed
 Adhes stab wound left.
 Fluid main ant.
 Atelectasis GSW lower lobe
 Oedema } 4+ 2500 cc
 Congest }
 Consol -
 Bronchi -
 Nodes -
 HARYNX
 RACHEA OK
 HYROID
 HYMIS

PERITONEUM

Fluid -
 Adhes -
 LIVER Wt 1200
 Caps -
 Lobul -
 Fibros OK
 G B -
 Calc -
 Bile ducts -
 SPLEEN Wt 150
 Color -
 Consist OK
 Caps -
 Malpig -
 PANCREAS -
 ADRENALS -
 KIDNEYS Wt 210
 Caps -
 Cortex -
 Vessels Neg
 Pelvis -
 Ureter -
 BLADDER -
 GENITALIA 510g
 Prost -
 Testes -
 Uterus OK
 Tubes -
 Ovar -
 OESOPHAGUS
 STOMACH fluid meal
 DUOD & SM INT -
 APPENDIX -
 LARGE INT -
 ABDOM NODES
 SKELETON
 Spine
 Marrow
 L 5 rib fr by bullet PAL
 Sternum + ribs
 proved by slabs

BRAIN Wt 1320

Dura
 Fluid
 Ventric 1 C+E
 Vessels
 Ears
 Nasal Sin
 PITUITARY

TOXICOLOGY

Yes

SECTIONS

No

GROSS IMPRESSION

1. Stab wound aorta
2. " " lt. lung
3. GSW left lung
4. Massive left hemothorax
5. Multiple stab wounds of chest + back
6. Contusion nose + eye
7. "Defense" lac. left hand

R. C. Humphreys
 Deputy Medical Examiner

COUNTY OF LOS ANGELES

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
BODY FULL LENGTH ANTERIOR

NAME

Jay SEBRING

Date

File #

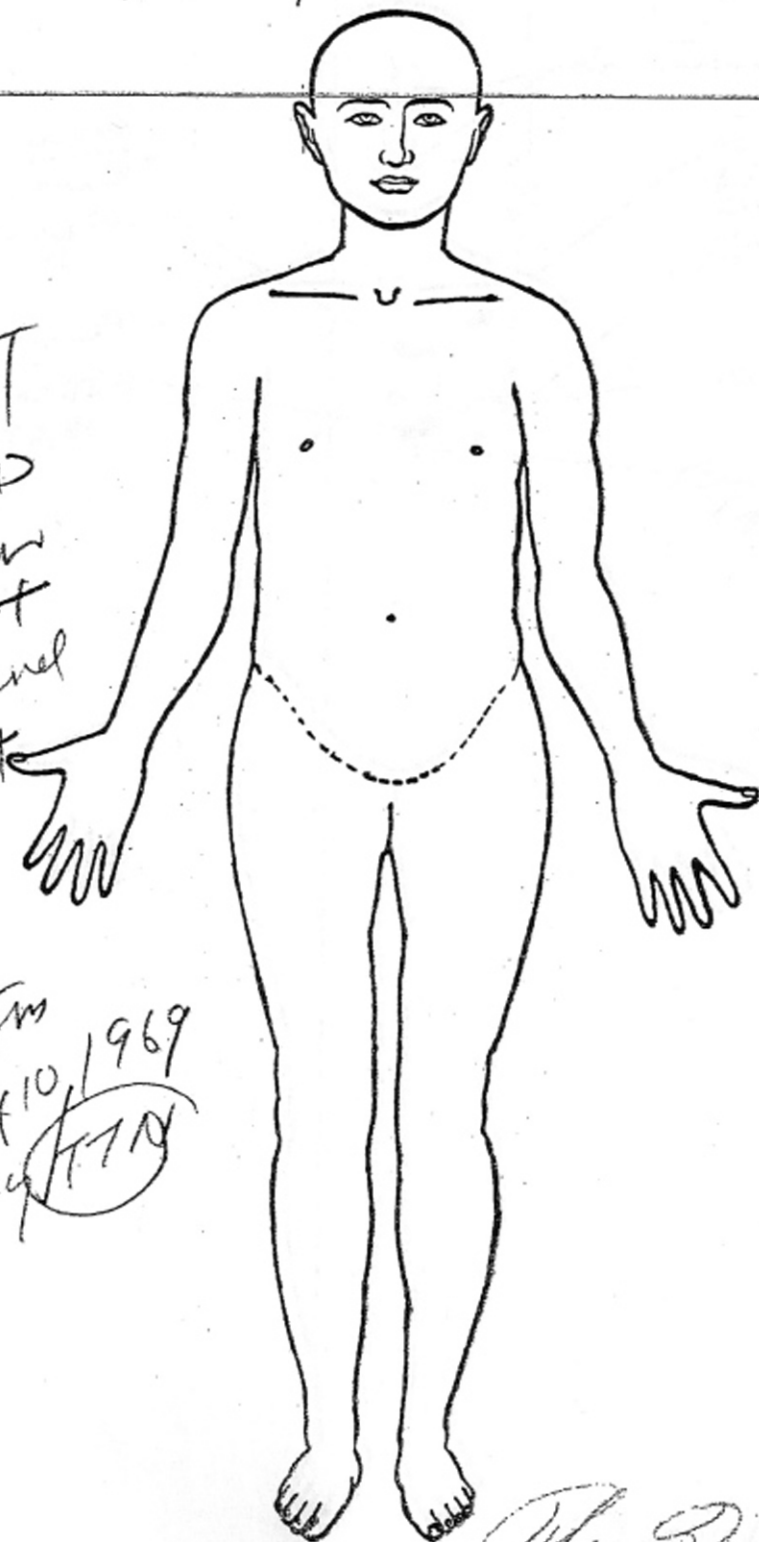
69-8793

A BULLET
FOUND
under
shirt
at the level
of right
iliac
area.

R

9:50
AM
Aug 10 / 1969
H. T. T. N.

L



Walter B. Nye, M.D.
County Medical Examiner

COUNTY OF LOS ANGELES

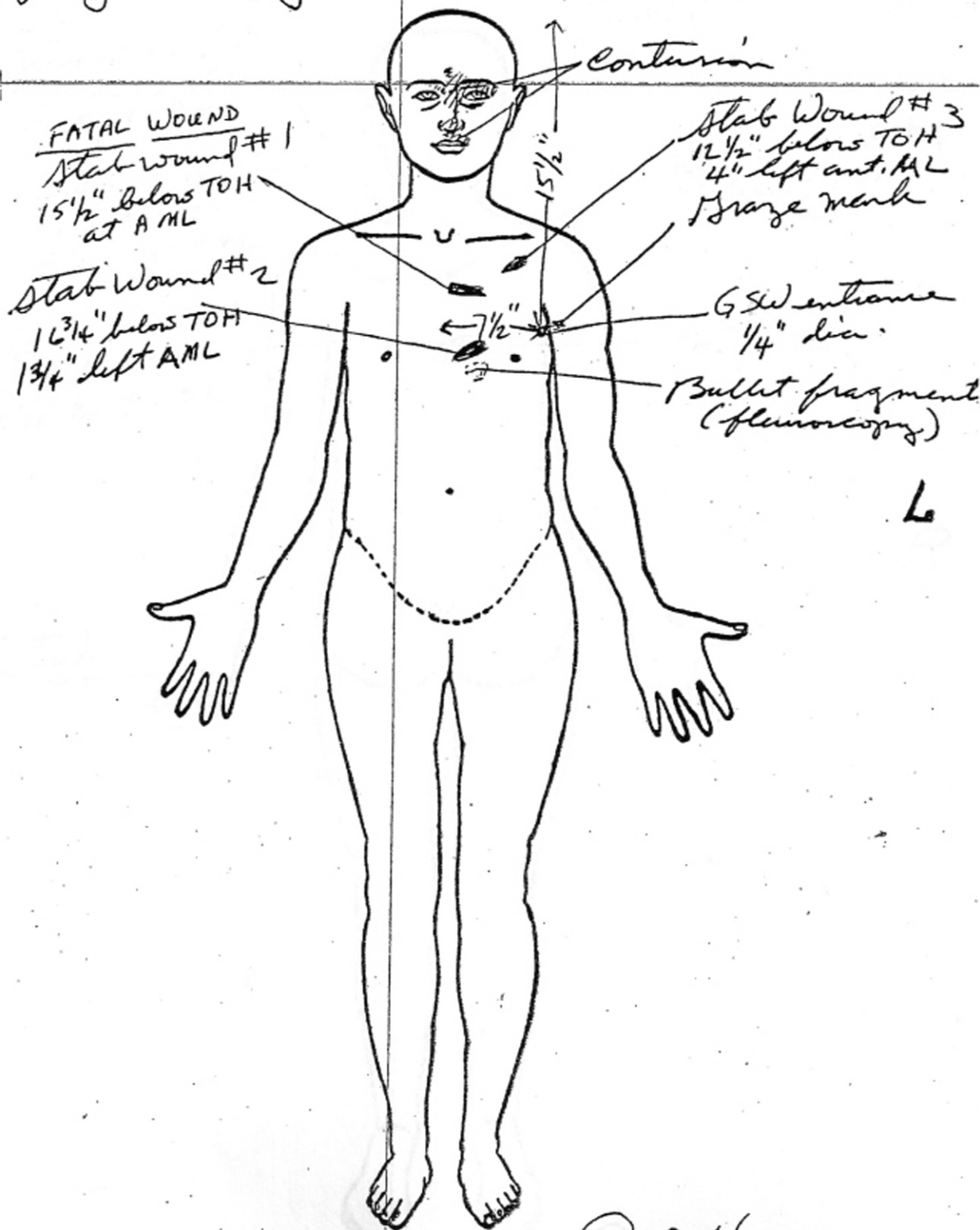
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
BODY FULL LENGTH ANTERIOR

NAME

Jay Sebring

Date 8/10/69

File # 69-8795



R.C. Henry M.D.
Deputy Medical Examiner

COUNTY OF LOS ANGELES

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
BODY FULL LENGTH POSTERIOR

NAME

Jay Sebring

Date ~~69-8795~~
8/10/69

File # 69-8795

Stab Wound #7
9" below TDH
3" left PML

Stab Wound #5
14" below TOH
2 1/2" left PML

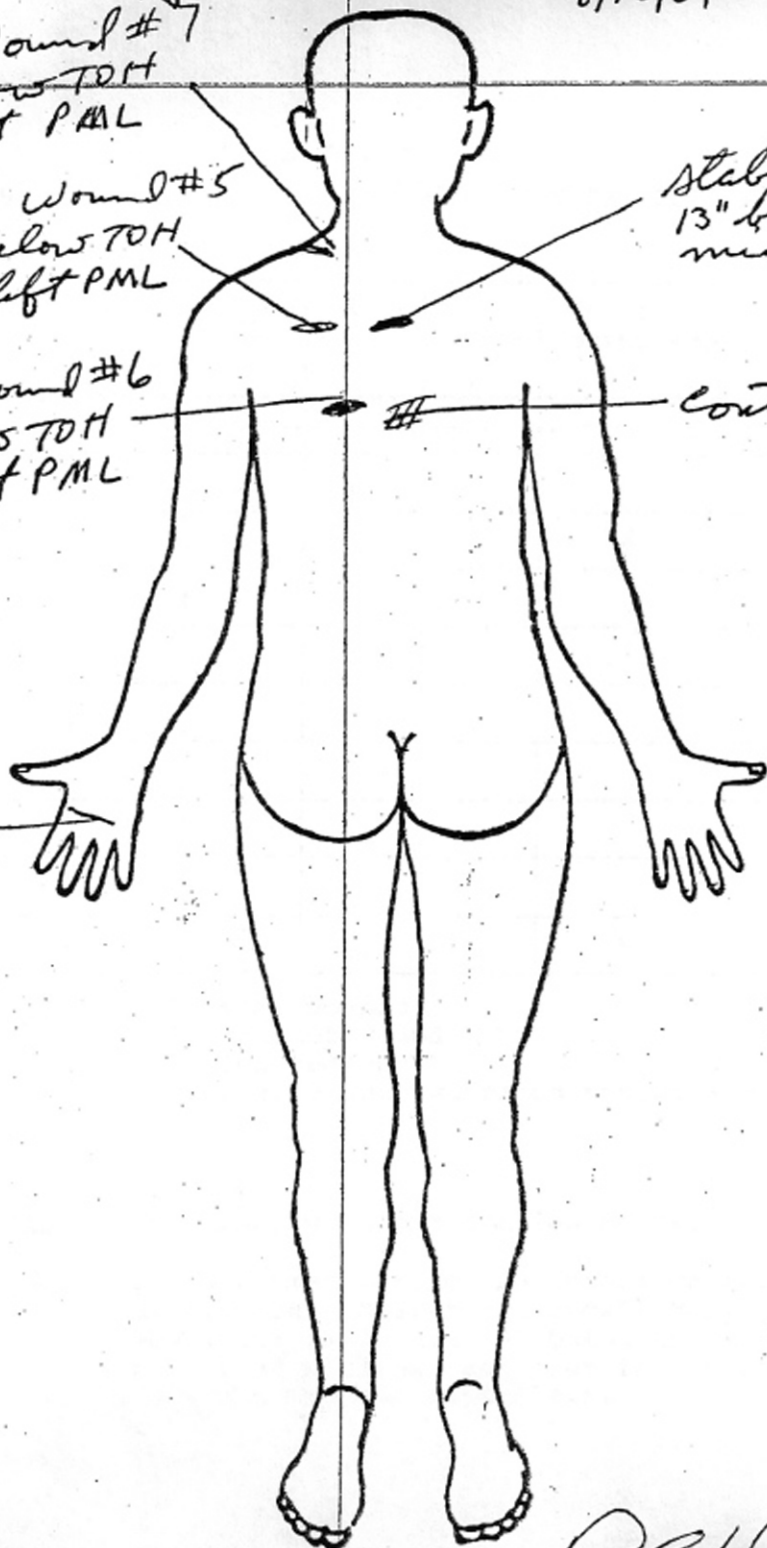
Stab wound #6
18" below TOH
1 3/4" left PML

Stab wound #4
13" below TOH
midline

Contusion

L
Laceration

R



R. C. Henry M.D.

DOCUMENTED WOUNDS	STAB	GSW	I cuts	Severe Contusions
Chest	3	1		
Back	4			
Hand - left (back)			1	
Face				X
TOTAL DOCUMENTED	7	1	1	X

SUMMARY OF WOUNDS: 7 stab wounds
 1 gunshot wound
 1 incised cut
 Severe contusions to facial area

FATAL WOUNDS:

WOUNDS NOT DOCUMENTED: none, with explanation below.*

- * Stab Wound #7 - is diagrammed but not described on autopsy protocol. Description: Measures approximately 1/2" in skin length and is located 9" below the top of head and 3" to left of midline, and lies in a horizontal position; the wound appears superficial.

REPORT OF CHEMICAL ANALYSIS
LOS ANGELES COUNTY MEDICAL EXAMINER-CORONER
 Toxicology Laboratory
 Hall of Justice
 Los Angeles, California

File No. 69-8795Name of Deceased Jay Sebring Lab No. 8-145-69Date Submitted August 7, 1969 Time 8 A.M.Autopsy Surgeon R. Henry, M.D.

Material Submitted:	Blood ^X	Liver	Stomach
	Brain	Lung	Lavage
	Femur	Spleen	Urine
	Kidney	Sternum	Gall bladder
	Drugs	Chemicals	

Test Desired: Poisons

Laboratory Findings:

1. Blood: Ethanol, Barbiturates, Doriden, Meproamate, Phenacetin, Quaalude and Soma absent
 2. Urine: Amphetamine absent
- Bile: Codeine and Morphine absent

Lawrence Plutchak

 Examined By 1. Lawrence Plutchak ~~XXXX~~ Toxicologist. Date August 13, 1969

J. I. Park

 2. J. I. Park

Toxicologist August 13, 1969

OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

Date AUGUST 10, 1969 Time 2:15 p. m.

I performed an autopsy on the body of

JAY SEBRING

at OFFICE OF CHIEF MEDICAL EXAMINER-CORONER, HALL OF JUSTICE, LOS ANGELES,

and from the anatomic findings and pertinent history I ascribe the death to:

EXSANGUINATION

DUE TO:

MULTIPLE STAB WOUNDS

(final 8/19/69)

ANATOMIC SUMMARY

1. Stab wound of aorta.
2. Stab wound of left lung.
3. Gunshot wound of left lung.
4. Massive left hemopleura.
5. Multiple stab wounds of chest and back.
6. Contusion of left nose and eye.
7. Defense lacerations left hand.

EXTERNAL EXAMINATION:

The unembalmed body is that of a normally developed, normally nourished white male which measures 66 and one-quarter inches in length and weighs 122 pounds. Rigor mortis is complete; post-mortem livor is posterior and dependent. Body heat is absent. The hair is black and is normal in amount and distribution. Inspection and palpation of the scalp reveals no evidence of injury. The external ears are unremarkable. There is a recent severe contusion involving the left periorbital region, the root bridge and tip of the nose and extending over into the upperlip. The irides are brown. The pupils are round and equal measuring 4 mm in diameter. There is ecchymosis in the left conjunctival area associated with the noted contusion. The teeth are the deceased's own and in good repair. There is a small amount of fresh blood within the mouth. The tongue is unremarkable. The neck is symmetrical and free from injury. The thorax and abdomen are symmetrical and contain numerous stab and gunshot wound which will be detailed below. The external genitalia are adult male. The penis is circumcised. Inspection of the back reveals numerous stab wounds which will be included in the description below. The extremities are normally developed and are unremarkable except for the injuries to be noted. There is a laceration of the back of the left hand measuring approximately 2 1/2 inches in length. This is superficial and probably constitutes a "defense" mark.

#69 8795
JAY SEBRING
AUGUST 10, 1969

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LISTING OF STAB WOUNDS

FATAL WOUND:

This is the fatal wound and is about 1 1/2 inches in length. It is almost exactly in the mid-line, 15 1/2 inches below the top of the head. This wound penetrates deeply into the thorax and results in severance of the artery to be described.

Stab wound #2:

This is a penetrating stab wound measuring 1 1/2 inches in length. It lies 16 3/4 inches below the top of the head and 1 3/4 inches to the left of the anterior mid-line.

Stab wound #3:

Stab wound #3 lies 12 1/2 inches below the top of the head and 4 inches to the left of the anterior mid-line. It is 1 1/2 inches in length and has a sharp edge and is directed toward the mid-line and a blunt edge, laterally, and upward.

Gunshot wound:

On the left chest just at the axillary fold 15 1/2 inches below the top of the head and 7 1/2 inches to the left of the anterior mid-line is the gunshot wound of entrance 1 1/4 inches in diameter. This shows a peripheral abrasion ring and is clearly an entrance wound.

At fluoroscopy bullet fragments are noted anteriorly about 3 inches below the gunshot entrance wound. These fragments are small and can be seen in the fluoroscope, but are not detectable and locatable on dissection.

Stab wound #4:

This is a penetrating stab wound 13 inches below the top of the head and at the mid-line. It is 1 1/2 inches in length and has a sharp edge directed toward the left.

Stab wound #5:

This is a penetrating stab wound 1 1/2 inches in length, 14 inches below the top of the head, 2 1/2 inches to the left of the posterior mid-line.

Stab wound #6:

This is a penetrating stab wound 18 inches below the top of the head and 1 3/4 inches to the left of the posterior mid-line. It measures about 1 1/2 inches in length and has a sharp edge directed toward the left. To the right of this is a recent contusion.

INTERNAL EXAMINATION:

The body is opened by the usual Y-shaped incision. The subcutaneous fat is found to be normal in amount, color and distribution. The sternal plate is removed. The left pleural cavity contains an estimated 2500 cc of blood. The right contains only a very small amount of blood. There are no adhesions. The pericardial cavity is clear. The abdominal cavity contains a very small amount of blood.

HEART:

The heart weighs 340 grams and is symmetrical. It is opened along the course of the blood. The valve measurements are within normal limits. The valves are free of disease. The myocardium is dark red. There is no evidence of old or recent infarction. The coronary arteries are patent throughout.

LUNGS:

The right lung weighs 800 grams. The left approximately 300 grams and is completely collapsed by the surrounding blood. The pleural surfaces are smooth. The right lung shows marked congestion and edema, but no consolidation. There is marked evidence of aspiration of blood. The left lung is collapsed. There is severing of the left main pulmonary artery at its entrance into the hilum of the lung. This is the apparent continuation of stab wound #5. There are several other superficial stab wounds of the left lung.

AORTA:

The aorta arises normally from the heart. The right subclavian and common carotid arteries are unremarkable. The innominate artery is almost severed from its attachment to the arch of the aorta, the origin of the fatal hemorrhage and appears to be the continuation of stab wound #1.

NECK ORGANS:

The neck organs are dissected and removed. There is no evidence of injury. The hyoid bone is intact as are the laryngeal cartilages. The airway is patent.

LIVER:

The liver weighs 1200 grams. The capsule is smooth and transmits a dark reddish brown color. On section there is congestion, but no other remarkable change.

#69 8795
JAY SEBRING
AUGUST 10, 1969

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SPLEEN:

The spleen weighs 150 grams. The capsule is somewhat tense. On section there is intense congestion.

PANCREAS:

Grossly unremarkable.

ADRENALS:

Bilaterally symmetrical; grossly unremarkable.

KIDNEYS:

The kidneys weigh 210 grams together. On section the capsules strip easily leaving a smooth surface. The architecture is well preserved and the cut surface is congested. The bladder contains only about one ounce of urine. The prostate is unremarkable to palpation.

GASTROINTESTINAL TRACT:

The GI tract is removed from esophagus to rectum. The esophagus is unremarkable. The stomach contains a fluid type meal in which particles are not identified. The meal remains in the stomach. The remainder of the GI tract is unremarkable.

MUSCULOSKELETAL SYSTEM:

The left 5th rib is fractured by a bullet track in the posterior axillary line. The sternum and ribs are penetrated by stab wounds.

HEAD:

The scalp is incised and reflected. There is no evidence of injury. The calvarium is removed by saw-cut and there is no fracture. The dura is intact. No epidural or subdural hematoma is noted. The brain weighs 1320 grams. There is congestion of the surface vessels. On serial section congestion and edema are noted which contain no petechiae. The pituitary lies in its normal place and is unremarkable.

Russell C. Henry, M.D.
RUSSELL C. HENRY, M. D.
DEPUTY MEDICAL EXAMINER

RCH/ah/g
8/21/69

DIRECTED AND SUPERVISED BY

Thomas T. Noguchi, M.D.
THOMAS T. NOGUCHI, M.D.
Chief Medical Examiner-Coroner

COUNTY OF LOS ANGELES MEDICAL REPORT
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER

Name JAY SERRINE Occupation Taxicologist Case No. 69-8795

Date 8/10/69 Time 2:15 PM IN Crypt # 24 OUT MORTUARY M.E. CORONER

INVESTIGATION AUTOPSY PENDING FINAL ON 8/10/69 Dr. Henny

CAUSE OF DEATH: EXSANGUINATION Micro. Neuro Bact. Med. History P. R. S. P. R. Photo By X RAY A. S. S.

Due to: MULTIPLE STAB WOUNDS Toxicology Alcohol Over 24 Hrs. Barbs. C. O. Other - Explain Below

Due to: RCH:p Final 8/19/69 Ampl. tissues, narcotic SPECIMENS SUBMITTED

OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH blood, bile, sin
lines, skin
gaster content

NATURAL ACCIDENT SUICIDE HOMICIDE UNDETERMINED

Evidence of Injury: Yes No At work Yes No SUICIDE NOTE Yes No FETAL DEATH CERTIFICATE Yes

Embalmed by: Bodky License No. 4753 Blood Sample Taken No - Explain _____

Rx No. none Date Filled: _____ Contents: _____ Amount Prescribed: _____ Amount Remaining: _____

PHYSICAL DESCRIPTION Age 26? Sex M Race CAU Complexion NEO Wt. 22 lbs. Ht. 66 1/2 in.

Hair Black Teeth Lower Eyes Blue Pupils NR Scars, amputations, LRO SCAR AARREN

Appliances on body CARD AROUND NECK Tattoo or deformity NONE

Hospitalized Yes No Hospital Report Yes No Hospital No. _____ Unit _____

In A HOUSE Jail Hospital Duration _____

For APP ASSAULT Physician _____ Address: _____ Phone: _____

Diagnosis or Comment: _____ Information taken by M. H. Johnson

MEDICAL EXAMINER'S COMMENTS:
Multiple stab wounds of chest + back
Stab wound of innominate artery
GSW left chest
Massive exsanguination
Massive left hemothorax

R.C. Henny, M.D.

CERTIFICATE ISSUED TO MORTUARY Pending By _____ FINAL By _____

74M107 - 8-68 CERTIFICATE MADE Pending By _____ INQUEST By _____ FINAL By P

COUNTY OF LOS ANGELES
DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER
PRELIMINARY EXAMINATION REPORT

Name JAY SEBRING

Case No. 19-8745

RIGOR MORTIS:

TEMPERATURE:

NECK:

ENVIRONMENT TEMPERATURE = 74° F

Anterior flexion 4+
Posterior flexion 4+
Right lateral flexion 4+
Left lateral flexion 4+

DATE 8-9-69 TIME 6:12 AM
PM

LIVER TEMPERATURE = 82.5° F

WHERE TAKEN OFFICE

JAW: 4+ HIP: 4+
SHOULDER: 4+ KNEE: 4+
ELBOW: _____ ANKLE: 4+
WRIST: _____

DATE 8-9-69 TIME 6:14 AM
PM

(L) SHOULDER (4+)
(R) SHOULDER (2+)

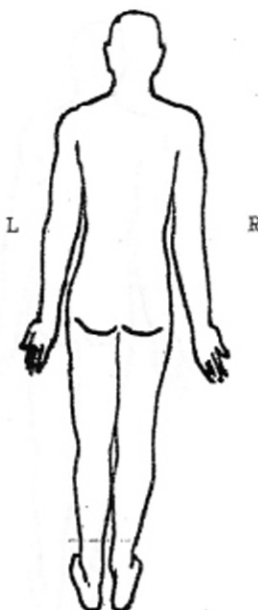
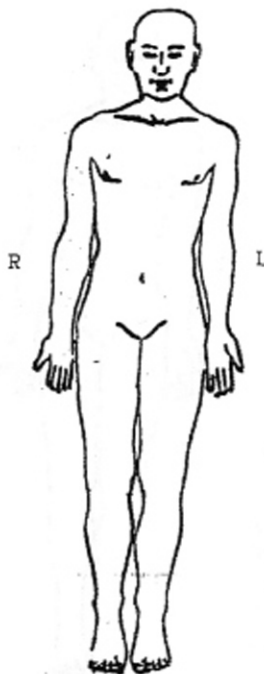
LIVOR MORTIS:

(R) ELBOW (2+)
(L) ELBOW (4+)

Use shading on diagrams to illustrate location.

Describe intensity of coloration. (use scale)

Permanent or blanches under pressure? Describe.



SCALE

4+ = Extreme Degree
3+
2+
1+
0 = Absence/Negative

Remarks: Body fully clothed

J. H. Gallagher
Coroner's Investigator

Date 8-9-69 Time 6:16 AM
PM

COUNTY OF LOS ANGELES
DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER
PRELIMINARY EXAMINATION REPORT

Name Jay Sebring

Case No. 69-8795

RIGOR MORTIS:

TEMPERATURE:

NECK:

ENVIRONMENT TEMPERATURE = 75° F

Anterior flexion 0
Posterior flexion 0
Right lateral flexion 0
Left lateral flexion 0

DATE 8-9-69 TIME 8:48 AM
PM

LIVER TEMPERATURE = 82° F
IN CRYPT 5 MINUTES

WHERE TAKEN (OFFICE)

JAW: 4+ HIP: 3+
SHOULDER: 2+ KNEE: 3+
ELBOW: 2+ ANKLE: 3+
WRIST: 3+

DATE 8-9-69 TIME 8:43 AM
PM

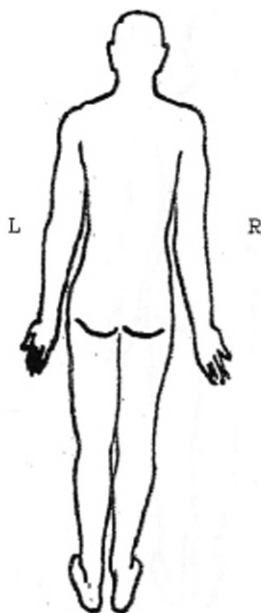
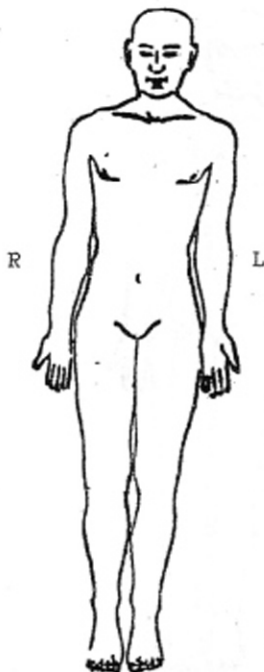
(LT) SHOULDER (4+)
(RT) SHOULDER (2+)

LIVOR MORTIS:

Use shading on diagrams to illustrate location.

Describe intensity of coloration. (use scale)

Permanent or blanches under pressure? Describe.



SCALE

4+ = Extreme Degree
3+
2+
1+
0 = Absence/Negative

Remarks:

Callaghan
Coroner's Investigator

Date 8-9-69 Time 8:45 AM
PM

COUNTY OF LOS ANGELES
DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER (L) *forensic*
PRELIMINARY EXAMINATION REPORT

Name D. Jay Sebring

Case No. 69-8795

RIGOR MORTIS:

TEMPERATURE:

NECK:

ENVIRONMENT TEMPERATURE 83 F

Anterior flexion 4+
Posterior flexion 4+
Right lateral flexion 4+
Left lateral flexion 4+

DATE 8 9 TIME 2:00 PM

LIVER TEMPERATURE = 83° F

WHERE TAKEN scene

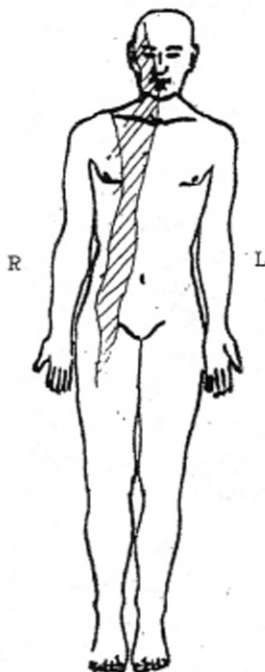
JAW: 4+ HIP: 4+
SHOULDER: 4+ KNEE: 4+
ELBOW: 4+ ANKLE: 4+
WRIST: 4+

DATE 8-9-69 TIME 3:10 PM

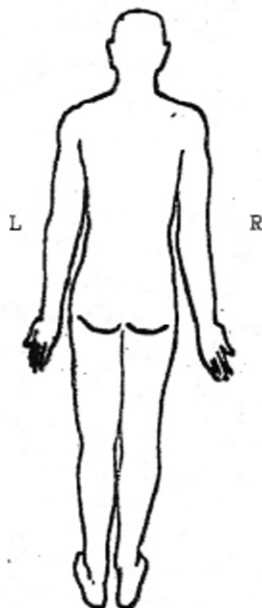
rectal 33° 78°

LIVOR MORTIS:

Use shading on diagrams to illustrate location.
Describe intensity of coloration. (use scale)
Permanent or blanches under pressure? Describe.



*3+ livor
pressure*



SCALE

4+ = Extreme Degree
3+
2+
1+
0 = Absence/Negative

Remarks:

Coroner's Investigator _____

Date _____ Time _____ AM
PM

COUNTY OF LOS ANGELES
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
MEDICAL REPORT

Case No. 69-8792

8-9-69

Dr. _____

CONTINUATION SHEET

apparently entertaining a mixed group of 4-5 young people at Jim Lier Insurance, 2nd St. garage. - is a type home. The party was noticed in neighborhood across the street and nearby during that afternoon into early evening 8-8-69.

At about 12:30 pm 8-9-69 a nearby neighbor contacted later to heard a sound of what echo about 1000. Approximately 9:00 pm 8-9-69 house built mud mortar for entry to find a some of apparent entrance. House doors opened & some light get on - witnesses a person. An inscription in blood upon front door. One apparently dead body located in driveway part of late model Rambler Am. Buick, parked in parking area at entrance gate (John Doe 85)

Another apparently dead body (69-8793) crumpled to lawn in front of veranda. Body dressed casually for occasion (A/S). The third apparently dead body on lawn about 60 feet south of (69-8793) lying on back and dressed apparently for sleep. This labeled case # 69-8794. (A/S)

Two bodies - a man (69-8795) and woman - accident were found in living room in front of exit fire place at foot of large sofa. Bodies on floor. Man in casual party dress and decollete in bra and briefs. (A/S) A long possibly 1/4 inch nylon cord was looped about each of these persons necks and also looped over a supporting beam of ceiling left over head. A bath towel apparently placed over head of man prior to looping of rope. (A/S)

A caretaker - occupying small house at end of large lot and some what away from house had entertained a young man earlier in evening to visit 12:15 a.m. 8-9-69 when this man was last seen. The John Doe 85 in auto. This possibly have been the same young man. The caretaker's wife questioned by police appeared unaware of apparent fact that the premises at time happened. (A/S)

- continued -

COUNTY OF LOS ANGELES
OFFICE OF CHIEF MEDICAL EXAMINER-CORONER
MEDICAL REPORT

Case No. 41-65746

CONTINUATION SHEET

Scene of struggle appeared localized in
back of living room where accident and
some broken dishes were scattered and
some small blood covering an area of about 2'x2'
Small amount blood in open garage
at rear of house also a small amount in
passing pool smear upon back steps leading to
entrance pool at rear of house and adjacent
to entry (69-8794)

No weapons nor suspects in custody.
Central Homicide witnessing autopsy.

RETAIN BLOOD AT AUTOPSY

Fisher

SEBRING - FATHER

BENARD J. HUMMER
16626 STANBURY
DETROIT, MICHIGAN