

UCR DATA

BURGLARY <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> HOTEL/MOTEL <input type="checkbox"/> COMMERCIAL (NOT HOTEL/MOTEL) <input type="checkbox"/> NIGHT (6 P.M. - 6 A.M.) <input type="checkbox"/> DAY (6 A.M. - 6 P.M.) <input type="checkbox"/> TIME UNKNOWN METH. OF ENTRY <input type="checkbox"/> FORCE <input type="checkbox"/> NO FORCE		LARCENY <input type="checkbox"/> GRAND LARCENY <input type="checkbox"/> LARCENY FROM A PERSON <input type="checkbox"/> ATTEMPT CLASSIFICATION <input type="checkbox"/> POCKET-PICKING <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> AUTO PARTS & ACCES. <input type="checkbox"/> FROM ANY COIN-OPER. MACHINE <input type="checkbox"/> OTHER (EXPLAIN)		PROPERTY BY TYPE & VALUE <input type="checkbox"/> CURRENCY, NOTES, ETC. \$ <input type="checkbox"/> JEWELRY, PRECIOUS METALS <input type="checkbox"/> CLOTHING & FURS <input type="checkbox"/> OFFICE EQUIPMENT <input type="checkbox"/> TV'S, RADIOS, CAMERAS <input type="checkbox"/> FIREARMS <input type="checkbox"/> HOUSEHOLD GOODS <input type="checkbox"/> CONSUMABLE GOODS <input type="checkbox"/> LIVESTOCK <input type="checkbox"/> MISCELLANEOUS TOTAL LOSS \$	
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ROBBERY LOCATION IDENTIFIER <input type="checkbox"/> HIGHWAY (ST. ALLEYS) <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> GAS OR SERV. STATION <input type="checkbox"/> CHAIN STORE <input type="checkbox"/> RESIDENCE (ANYWHERE OR PREMISES)		TYPE WEAPON/ FORCE USED <input type="checkbox"/> FIREARM <input type="checkbox"/> KNIFE OR CUT. INSTRUMENT <input type="checkbox"/> OTHER DANG. WEAPON <input type="checkbox"/> STRONG ARM <input type="checkbox"/> SIMULATED		CRIMES AGAINST PERSONS <input type="checkbox"/> RAPE <input type="checkbox"/> RAPE BY FORCE <input type="checkbox"/> ASSAULT <input type="checkbox"/> TO RAPE <input type="checkbox"/> ATTEMPT <input type="checkbox"/> CRIMINAL HOMICIDE <input type="checkbox"/> MURDER OR NON-NEGLIGENT <input type="checkbox"/> MANSLAUGHTER <input type="checkbox"/> MANSLAUGHTER BY NEGLIGENCE <input type="checkbox"/> ASSAULTS <input type="checkbox"/> FIREARM <input type="checkbox"/> KNIFE OR CUTTING INSTRUMENT <input type="checkbox"/> OTHER DANGEROUS WEAPON <input type="checkbox"/> AGGRAVATED <input type="checkbox"/> NOT AGGRAVATED	
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SUSPECT (LAST, FIRST, MIDDLE)		RESIDENCE ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)							
SEX	RACE	HAIR	EYES	HEIGHT	WEIGHT	AGE OR D.O.B.	BUILD	ARRESTED	I.D.
							<input type="checkbox"/> YES <input type="checkbox"/> NO		
IDENTIFYING MARKS AND CHARACTERISTICS						COMPLETE DESCR. OF TOOLS OR WEAPON USED			
LAST SEEN WEARING									

SUSPECT (LAST, FIRST, MIDDLE)		RESIDENCE ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)							
SEX	RACE	HAIR	EYES	HEIGHT	WEIGHT	AGE OR D.O.B.	BUILD	ARRESTED	I.D.
							<input type="checkbox"/> YES <input type="checkbox"/> NO		
IDENTIFYING MARKS AND CHARACTERISTICS						COMPLETE DESCR. OF TOOLS OR WEAPON USED			
LAST SEEN WEARING									

VEHICLE INFORMATION - SUSPECT									
YEAR	MAKE	BODY TYPE	MODEL	LICENSE NO.	STATE	COLOR	MARKS OF IDENTIFICATION		

PERSONS CONTACTED									
CODE	NAME (LAST, FIRST, MIDDLE)			BEST DAYTIME POINT OF CONTACT (BDPC)			TIME	BDPC PHONE	
PR	LAZAR, BOB								
RESIDENCE ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)				RES. PHONE		D.O.B.	RACE	SEX	
1933 ANN GRETA LV							W	M	
KNOWLEDGE OF EVENT CIRCUMSTANCES				STATEMENT OBTAINED		OCCUPATION AND BUSINESS FIRM NAME			
FOUND VICTIM				<input type="checkbox"/> YES <input type="checkbox"/> NO		RARE CAR DRIVER			
CODE	NAME (LAST, FIRST, MIDDLE)			BEST DAYTIME POINT OF CONTACT (BDPC)			TIME	BDPC PHONE	
RESIDENCE ADDRESS (NO., STREET, CITY, STATE, ZIP CODE)				RES. PHONE		D.O.B.	RACE	SEX	
KNOWLEDGE OF EVENT CIRCUMSTANCES				STATEMENT OBTAINED		OCCUPATION AND BUSINESS FIRM NAME			

NARRATIVE INCLUDE ELEMENTS OF CRIME AND EXPLAIN SOLVABILITY FACTORS.

ON 4/21/86 ABOUT 0735 BOB LAZAR RETURNED TO HIS RESIDENCE AND FOUND HIS WIFE APPARENTLY DECEASED IN HER VEHICLE IN THE GARAGE OF THE RESIDENCE. MEDICAL AND POLICE PERSONNEL WERE REQUESTED AND RESPONDED AND FOUND THE DECEASED AN APPARENT VICTIM OF A SUICIDE, SEE OFFICERS REPORTS FOR FURTHER DETAILS.

LAS VEGAS METROPOLITAN POLICE DEPARTMENT
EVIDENCE IMPOUND REPORT

EVIDENCE

FOUND PROPERTY

SAFE KEEPING

DR NO: 86-55563

Incident: Dead Body Date: 4-21-86

Location: 1933 Ann Geretz Drive

Victim No. 1: Capt. Nadine Lezdy Victim No. 2: _____

Recovered By: R. Rodbreck 211 Phone: 386-3471

Address: L.V.M.P.D. Crime Lab

Hold for Prosecution: YES NO Registration Check: S+W 9mm - Negative Wnts + Registration

Safe Custody: YES NO List Connecting Reports: _____

ITEMIZED DESCRIPTION:

Package # 1

Item # 1

Location Recovered

One Stainless Steel Smith & Wesson
Model 469 Serial TAC3846 PISTOL

From The Drivers Seat of A
Honda Car V. # JHMAF5330F-
S052055 Neg. License Plates
Located in The Garage.

Item # 2

One Geco 9mm Para. Cartridge

From Chamber of Item # 1

Item # 3

One Magazine

From Item # 1

Item # 4

Nine 9mm Cartridges

From Item # 3

Package # 2

Item # 5

One Hand Written Note with
one Piece of Tape (Clear) Attached
to the Top of the Note.

From The **ENTERED** Table
BMC

Copy of the Note is Attached

DATE AND TIME TYPED • DIVISION • CLERK

APPROVED BY: N. Tushley

10/24

1007 R. Rodbreck 211

DIV. T.S.D.

DATE: 4-21-86

DISTR:
INDEX
STATS

LAS VEGAS METROPOLITAN POLICE DEPARTMENT

OFFICER'S REPORT

D.R. No. 86-55563

SUICIDE

Subject

Division Reporting..... I.S.D. Division of Occurrence..... F.S.D.

Date and Time Occurred..... BET. 4/19/86, UNKNOWN HRS. Location of Occurrence..... 1933 ANN GRETA, LVN
AND 4/21/86, 0735 HRS.

DETAILS:

VICTIM:

LAZAR, CAROL N.
Residence address:
1933 Ann Greta, LVN
WFA, DOB: '42
S.S.#: _____

VICTIM'S VEHICLE:

Red Honda 2D, no license plates
VIN#: JHMAF5330FS052035

PERSONS CONTACTED:

LAZAR, BOB
(Husband of victim)
Residence address:
1933 Ann Greta, LVN

F.S.D. PERSONNEL:

SGT. R. HILLIARD
Arrived 0750 hrs.
OFFICER M. MALONE
Arrived 0744 hrs.
OFFICER M. BECKEFLER) Arrived 0745 hrs.
OFFICER R. BURNE)

I.S.D. PERSONNEL:

DET. K. GOOD)
DET. N. ZIOLA) Arrived 0805 hrs.

FIRE DEPARTMENT:

SCOTT PRISBREY)
RICK GROVE) Arrived 0738 hrs.

I.D. PERSONNEL:

R. RODERICK
Arrived 0815 hrs.

Date and Time of This Report..... 4/21/86, 1004 HRS. Officer..... DET. N. ZIOLA Per. No. 568

Approved..... *[Signature]* Officer..... Per. No.....

ENTERED
EPL

SIGNATURE..... *[Signature]*

APR 21 1986

SECTOR/BEAT

INCIDENT SUICIDE		DR- 86-55563
VICTIM'S NAME: (LAST, FIRST, MIDDLE) FIRM NAME IF BUSINESS RES. LAZAR, CAROL N.		OFFICER(S) P.NO. DET. N. ZIOLA 568
LOCATION OF OCCURRENCE 1933 ANN GRETA, LVN	PHONE: BUS. REFER BELOW	

CONTINUATION/FOLLOW-UP REPORT

Upon the arrival of I.D. Specialist RODERICK at 0815 hrs., the scene is photographed in its entirety. The gun lying on the driver's seat is impounded along with the note, by I.D. Specialist RODERICK.

Upon arrival of Deputy Coroner RAY BINDER at 0835 hrs., the victim is pronounced deceased. The victim is removed at 0903 hrs. by Davis Mortuary to the Clark County Medical Examiners Office.

In conclusion, it is, through interview and investigation, concluded that CAROL LAZAR died as the result of possible carbon monoxide asphyxiation. However, this is pending an autopsy. Investigators do believe that the subject died as the result of a suicide.

NZ/gc - Trans: 4/21/86, 12:20 PM