

AUTOPSY REPORT - CCN 04-117071
BY SGT MATTSON'
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On 5/17/04 at 0900 hours SGT MATTSON attended the autopsy at the Hennepin County Medical Examiner's on victim HARRY BERTON SHERER. Dr. KENNETH GALLAGHER was performing the autopsy. Dr. KATHERINE BERG was also in attendance from the HCME along with HCME assistant staff of the doctor. From MPD Officer NORRIS was present from the Identification Bureau and myself from the Homicide Unit.

I noted that the body bag in the autopsy suite was sealed and on an autopsy table. The seal was opened at approximately 908 a.m. I noted a white male and that this person appeared to be the same man that I saw laying on the floor of the flower shop at 3300 Lyndale North the day before this autopsy. I noted that this male was shirtless and was clad in blue jeans with a black leather belt and I noted that the blue jeans had BLS in the crotch area and on the left leg. This individual was also wearing black shoes. The victim's hands were noted to be bagged with paper bags and taped sealed over his hands per normal procedure. These bags covering victim's hands were removed by HCME staff and the victim's fingernails were clipped and bagged in evidence envelopes. HCME staff also took some hair samples from the victim and bagged these samples in evidence envelopes. The victim's clothing and watch were removed. I also noted that a sterile sheet had been spread out over the floor in a different area of the autopsy suite and there was a shirt and jacket, which had been spread out on this. This was said to be the victim's shirt and jacket that he had been wearing at the time of his death and it had been removed by Fire Department Personnel attempting to resuscitate him.

I noted this white male victim to be laying on his back.

ANTERIOR VIEW OF VICTIM:

While victim was on the autopsy table on his back I noted that there was a defect (possible bullet hole) in victim's upper left chest approximately 4 inches above his left nipple. On the left lateral side of victim's chest I noted a red or purple colored bruise that was in an oblong shape. This was below the nipple line considerably lower than the defect in victim's upper chest. This did not appear to be a penetrating wound. There also appeared to be a bruise on the inner aspect of victim's right forearm near his elbow.

POSTERIOR VIEW:

There was noted to be a defect (possible bullet hole) in victim's right torso on his back when victim was turned over. This was on victim's right side and approximately 3 to 4 inches below the armpit area. Dr. GALLAGHER stated that this wound appeared to be larger than the one in the front and that he believed the defect in victim's upper left chest was the entrance wound and that the defect (hole) in victim's back which was larger appeared to be the exit wound by the bullet.

A blue t-shirt and olive-drab green jacket that had been laid out on a sterile cloth at the autopsy had some holes in the clothing. This jacket and shirt had holes that corresponded to the entry and exit holes on victim's body and where they had been a bruise on victim's left side wall of his chest which was believed to be a graze by a bullet there appeared to be a elongated hole on the left side of these clothing articles. These clothing defects appeared to match where the defects on the victim were noted.

Dr. GALLAGHER informed me that the bullet had entered victim's left chest through the first rib on the left and entered the upper lobe of victim's left lung and then penetrated the arch of the aorta and went through victim's trachea and through the upper right lobe of his right lung. The bullet exited victim's chest cavity through a portion of the posterior sixth rib where it exited victim's torso.

DR. GALLAGHER stated that the cause of death is a gunshot wound to the chest and stated that

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Case Supplement

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the manner of death was homicide.

REC: CASE CONTINUED OPEN

SGT MATTSON

HOMICIDE UNIT

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