

DOUGLAS, LEONARD & GARVEY, P.C.

NEW HAMPSHIRE CRIMINAL DEFENSE CHECKLIST

I. GENERAL INFORMATION

Your Name _____ Date of Birth: _____

Address _____

Home Phone Number _____ Work Phone Number: _____

Marital Status: _____

E-Mail Address: _____

Your Social Security Number: _____

Current Employer: _____

Work Address: _____

Length of Time With Employer: _____

Does your job require you to drive? _____

II. MOTOR VEHICLE AND CRIMINAL HISTORY

Please list for our eyes only, all motor vehicle or criminal charges, arrests or convictions you have ever had in any state. If none, please say so: _____

III. WHAT DID YOU DO DURING THE 24-HOURS PRIOR TO YOUR ARREST?

(Please include whether you worked, what meals you ate and what you consumed, who you were with, where you were, any prescription or other drugs you ingested, how much you drank (if any) and over what time span, how much you slept and when, and any other facts that you believe might be relevant.) DO NOT DESCRIBE THE CRIME THAT YOU ARE ACCUSED OF COMMITTING AT THIS TIME.

IV. ARREST DOCUMENTS

Please provide copies of the following documents, if applicable. If you do not have any of these documents, please indicate.

- Complaint or Summons
- Bail Order and Bond
- BAC printout or ALS refusal form (if applicable)

- Search warrant documents (warrant, receipt, inventory)
- Documents received from court

V. **WITNESSES**

<u>Name</u>	<u>Address</u>	<u>Age</u>	<u>Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Return to:

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