THE STATE OF NEW HAMPSHIRE JUDICIAL BRANCH

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On with Name of	nttp:	//www.courts.state.nn.us			
Court Name:					
Case Name:					
Case Number:	Charge ID:				
CONVICTION	FOR PERSONAL		RECORD OF ARREST OR IARIJUANA (3/4 oz. or less) IBER 16, 2017		
	PLEASE COMPLETE	A SEPARATE FORM FOR EA	ACH OFFENSE		
	APPLI	CANT'S INFORMATION			
Full Name:			Date of Birth:		
Address:					
City/Town	State	Zip Code	Telephone Number:		
E-mail Address: (option	,	ARGE INFORMATION			
RSA/Statute:		Charge: Possession of ¾ ounce or less of marijuana			
					Arrest no conviction
Offense Date:		Date of Conviction:	Charge Degree at Conviction:		
Description of Sentenc	e and Date Sentence C	Completed:			

Case Name:		
Case Number:		
	of law, that the abo	ove facts are true and correct to the best of my be or in my possession at the time of this charge
Date		Applicant's Signature
		Name of Counsel
		Counsel's Signature
		Address
		Address
COURT COMPLETES: Date sent to Prosecutor:		Sent by (initials):
Name of Prosecutor:		
hearing. At the hearing the prose the petitioner knowingly or purpos	cutor will be require ely obtained, purch her control, mariju D:	tor within 10 days the court will schedule a ed to establish beyond a reasonable doubt that hased, transported, or possessed, actually or lana in an amount exceeding 3/4 of an ounce.
	CERTIFICATE O	FANNULMENT
	or charge therein, id d under the statute.	
Date		Signature of Judge
		Printed Name of Judge
CC: Prosecutor Defense Attorney DMV	Police Department	 □ Defendant □ Dept. of Safety – Criminal Records □ Dept. of Corrections □ Other
Attorney General Sentence Review	2 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	District Division #