ATTACHMENT A

OFFICE OF THE STATE PUBLIC DEFENDER



STATE OF MONTANA

Phone: (406) 496-6080 Fax: (406) 496-6098 44 WEST PARK STREET BUTTE, MONTANA 59701

Investigation Request

(To be completed for all FTE and contractor requests)

Attorney requesting investigation:		Date:
Case Number :	OPD #:	_
Defendant's Name:		
Attorney's Investigation Request: (Please desire, any photos needed to be taken and additional	e identify what you want investigated, information needed to assist in your ca	names of people to be interviewed, what questions you ase, any deadlines known)
Was discovery provided with request:	Yes	No
Date request received	Investigator	
	For Office Use Only [APPROVED / DENIED]
PDPD/Conflict Coordinator/MCU Supp		Data