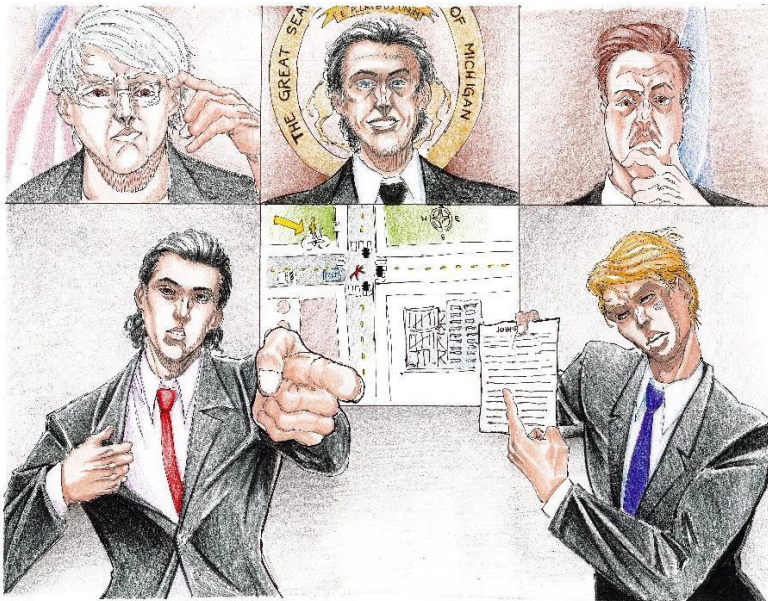


2024 New Mexico High School Mock Trial Competition

STATE OF NEW MEXICO
vs.
JESSE WHITE



CENTER FOR CIVIC VALUES

PROVIDING EDUCATION AND RESOURCES
FOR PUBLIC PARTICIPATION IN THE LAW

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Questions and Contact Information

Questions concerning these case materials should be emailed to Kristen Leeds at the Center for Civic Values.

You may begin submitting questions anytime. **The deadline for submitting questions is noon on February 1, 2024.** The final update will be posted no later than **February 7, 2024.**

Questions must be sent in writing using mocktrial@civicvalues.org. Please be sure to include return contact information in the event we need to reach you to clarify a question.

Answers to questions will be posted on the mock trial website:
<https://civicvalues.org/mock-trial/this-years-case/clarifications/>.

Please check the [website](#) to see if your question has been answered before sending an email.

Introduction and Acknowledgments

Welcome to the 2024 New Mexico High School Mock Trial Competition. Mock Trial, which began in 1978 and is administered by the Center for Civic Values (CCV), is an academic activity set in a competitive environment. It gives students hands-on experience in the law as it helps them develop the skills necessary for the mastery of state content standards for language arts and social studies.

This year's case, *State of New Mexico vs. Jesse White*, is a criminal proceeding in which the State has charged the defendant with controlled substance third degree murder (i.e, causing the death of another person by unlawfully giving away, delivering, exchanging, or distributing a controlled substance).

The case adaptation was done by CCV Executive Director Kristen Leeds and board members Jack Sullivan, Heather Jaramillo, and Jessie Lundschen. The CCV Board and staff thank the hundreds of volunteers who annually contribute their time and energy to the organization and running of the program, including the teachers who sponsor and coach teams, the attorneys who coach those teams, the judges who preside over and score the trials, and the administrative volunteers who provide invaluable assistance in the actual hosting of the qualifier and final competitions.

In addition, CCV expresses its heartfelt gratitude to Chief Judge Joshua J. Sanchez, Bernalillo Metropolitan Court in Albuquerque and Chief Judge Marie Ward, Second Judicial District Court for their support of mock trial. We also express our gratitude to Camille Baca, Bernalillo Metropolitan Court and all the esteemed judges and the dedicated staff of both courts for their support of our mock trial program.

We also extend special thanks to the New Mexico Legislature for the annual funding provided to the mock trial program and the University of New Mexico School of Law for acting as the fiscal agent.

We hope you find these materials interesting and wish you all the best of luck!

Case Summary

This case involves an apparent accidental overdose involving an opioid. On July 5, 2023, Jane Margolin, a prominent accountant, was found unresponsive in her home. The responding officer quickly determined that she was deceased. Jesse White is an accountant who hosts a large party for clients and their families every Fourth of July. Jesse White is accused of providing Jane Margolin with drugs that caused Margolin's death, and White has been charged with controlled substance third degree murder.

The witnesses for the State are:

- *Kelly Fagin*, the Deputy Medical Investigator who performed the autopsy on Jane Margolin and determined the cause and manner of Jane Margolin's death;
- *Pat Sanchez*, a first responder to the scene of Jane Margolin's death, who investigated the circumstances surrounding Jane Margolin's death;
- *Alex Otona*, a small business owner and friend of both Jesse White and Jane Margolin, who attended the party where Jane Margolin was last seen alive and saw interactions between Jesse White and Jane Margolin.

The witnesses for the defense are:

- *Morgan Haozous*, a physician who has reviewed relevant documents in this case, disagrees with some of the methods used by Kelly Fagin, and believes Dr. Fagin did not test for important forensic evidence;
- *Taylor Jenkins*, a friend of Jane Margolin who attended Jesse White's party on July 4, 2023, observed Jesse White and Jane Margolin interacting at the party, and noticed pills scattered in Jesse White's bathroom.
- *Jesse White*, the defendant.

Pleadings

STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendant.

Criminal Information

Henry Schrader, Assistant District Attorney for the Twelfth Judicial District of the State of New Mexico accuses Jesse White of CONTROLLED SUBSTANCE THIRD DEGREE MURDER and charges as follows:

COUNT I: CONTROLLED SUBSTANCE THIRD DEGREE MURDER

That on or about July 4, 2023, in Lincoln County, New Mexico, the above-named defendant proximately caused the death of Jane Margolin in violation of NMSA 1978, Section 30-2-10 by unlawfully giving away, delivering, exchanging, or distributing to Jane Margolin a controlled substance or drug listed in Schedules I through V of the Controlled Substances Act or rules adopted thereto.

Date: October 17, 2023

/s/ Henry Schrader
(Signature of the complainant)

**STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT**

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendant.

Order On Preliminary Examination

Per the Criminal Information, the charge of CONTROLLED SUBSTANCE THIRD DEGREE MURDER in violation of NMSA 1978, Section 30-2-10 appeared before me.

A preliminary examination on the offense set forth in the Criminal Information having been waived, IT IS HEREBY ORDERED pursuant to Rule 5-302(D)(2) NMRA that Defendant Jesse White is BOUND OVER FOR TRIAL in the District Court on the charge of Controlled Substance Third Degree Murder.

IT IS SO ORDERED

Date: November 21, 2023

/s/ Matea Santiago
District Judge

**STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT**

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendant.

Arraignment and Plea Proceeding

THIS MATTER having come before the Court on a Criminal Information charging Defendant Jesse White with controlled substance third degree murder in violation of NMSA 1978, Section 30-2-10; the Court finds as follows:

1. Defendant Jesse White appeared in person accompanied by their attorney, Sydney Goodman, and was formally arraigned in open court.

2. Defendant Jesse White entered a plea of NOT GUILTY to the charge of CONTROLLED SUBSTANCE THIRD DEGREE MURDER contained in the Criminal Information, which plea has been received by the Court and ordered of record herein.

THEREFORE, IT IS HEREBY ORDERED that Defendant Jesse White is hereby released on their own recognizance on the following conditions: Defendant shall obey all laws, make all court appearances, stay in contact with their attorney once a week until trial or disposition of this matter, and remain in the jurisdiction of the State of New Mexico.

IT IS SO ORDERED

Date: November 15, 2023

/s/ Matea Santiago
District Judge

**STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT**

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendant.

Pretrial Order

This matter was heard by the Court upon Defendant's motion in limine to prevent the State from offering into evidence photographs taken of the Victim on July 5, 2023. The Defendant seeks an order precluding photographs of the Victim's body from being admitted into evidence at trial. Defendant asserts that the photographs should be excluded from evidence under Rule 403 of the High School Mock Trial Rules of Evidence. Rule 403, in its entirety, states:

Although relevant, evidence may be excluded if its probative value is substantially outweighed by the danger of unfair prejudice, if it confuses the issues, if it is misleading, or if it causes undue delay, wastes time, or is a needless presentation of cumulative evidence.

Defendant argues that the photographs are of limited probative value and whatever probative value they may have been substantially outweighed by the danger of unfair prejudice. The State argues that the photographs are important to show the manner of death and to corroborate and support of the testimony of witnesses, including the Deputy Medical Investigator and the Police Officer who was at the scene. Both sides agree that the photographs have some relevance to the case. The issue is whether they should nonetheless be excluded because the danger of unfair prejudice substantially outweighs the probative value.

In order to decide the legal issue presented, the Court must determine the probative value of the photographs and compare that value to the danger of unfair prejudice to the Defendant if the jury sees the photographs. Evidence that tends to prove a fact at issue is considered to have probative value. *Young v. Board of Pharmacy*, 81 N.M. 5, 7 (1969). "The purpose of Rule 403 is

not to guard against any prejudice whatsoever, but only against the danger of unfair prejudice.” *State v. Otto*, 2007-NMSC-12, ¶ 16 (citing *State v. Woodward*, 121 N.M. 1, 6 (1995)). Since most evidence tends to be prejudicial to one side or the other’s case, the issue becomes one of fairness. Evidence is unfairly prejudicial “if it is best characterized as sensational or shocking, provoking anger, inflaming passions, or arousing overwhelmingly sympathetic reactions, or provoking hostility or revulsion or punitive impulses, or appealing entirely to emotion against reason.” *State v. Stanley*, 2001-NMSC-037, ¶ 17. It is evidence that will inflame the passions and prejudices of the jury and suggest a decision on an improper basis, commonly, though not necessarily, an emotional one. *Id.*

The determination of unfair prejudice is “fact sensitive,” and, accordingly, “much leeway is given trial judges who must fairly weigh probative value against probable dangers.” *Otto*, 141 N.M. at 447. The New Mexico Supreme Court has held that photographs should be excluded where they “arouse the prejudices and passions of the jury and ... are not reasonably relevant to the issues of the case.” *State v. Boeglin*, 1987-NMSC-002, ¶ 21. In this case, the probative value of the Victim photographs is of limited value and does not offer anything reasonably relevant to the issues of this case. The manner of death was an overdose of opioids, and the photographs add little value to establishing the manner of death. Moreover, the allegations in this case as to the Defendant’s actions leading to the Victim’s death do not have a direct connection to anything shown in the photographs. A jury viewing the photographs, however, may find them disturbing and may feel compelled to reach a guilty verdict. There is a real danger of unfair prejudice to the Defendant if the photographs are shown to the jury.

The Court finds that the limited probative value of the photographs is substantially outweighed by the danger of unfair prejudice to the Defendant. Defendant’s motion in limine to exclude the photographs is granted. However, the State may present pictures of the crime scene that do not depict the victim if those photographs meet the requirements of Rule 401 and other rules of evidence.

BY THE COURT:

/s/ Matea Santiago

District Judge

**STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT**

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendant.

Stipulations

1. All documents, signatures, and exhibits, including pre-markings, included in the case materials are authentic and accurate in all respects; no objections to the authenticity of the documents will be entertained. The parties reserve the right to dispute any legal or factual conclusions based on these items and to make objections other than to authenticity.
2. Jurisdiction, venue, and chain of custody of the evidence are proper and may not be challenged.
3. All statements were notarized on the day on which they were signed.
4. All evidence was constitutionally recovered and all statements were constitutionally obtained. No objection will be entertained to the constitutionality of any evidence, nor will any motions to suppress on constitutional grounds be permitted.
5. Defendant Jesse White has waived her/his/their right against self-incrimination under the Fifth Amendment to the United States Constitution, and either party may refer to White's decision to testify in opening.
6. The drugs ingested by Jane Margolin were tested at and by the New Mexico Department of Public Safety Forensic Laboratory. Any witness who has provided information in an affidavit about those test results may testify as to those test results.
7. The baggies and the pill bottle collected by Pat Sanchez were sent to the New Mexico Department of Public Safety Forensic Laboratory for drug testing analysis. In both baggies, the pills were determined to be timed release 40 mg dose oxycodone. The pills in the pill bottle were found to be timed release 60 mg dose oxycodone and 5 mg dose acetaminophen.

Acetaminophen commonly goes by the name of Tylenol. Any witness who has provided information in an affidavit about these test results may testify to those results.

8. Dr. Quintana is out of the country and is unavailable to testify at trial. The parties do not dispute what Dr. Quintana said to Deputy Sanchez.
9. Exhibit 5 is a true and correct copy of a message posted by Jane Margolin at 2:46 a.m. on July 5, 2023, to the public section of Defendant's Facebook "wall" where it could be seen by anyone viewing Defendant's Facebook page. Someone with control of Defendant's Facebook account deleted the message within three minutes of it being posted on Defendant's "wall."
10. Exhibit 5 and Exhibit 5A are the same document, except that certain information has been redacted from Exhibit 5A. A party may attempt to enter either Exhibit 5 or Exhibit 5A, or both, into evidence.
11. Oxycodone is a Schedule II controlled substance, and Percocet contains oxycodone. A person may have oxycodone or Percocet in their possession only when it has been obtained pursuant to a valid prescription of a licensed medical doctor or other person licensed or certified to prescribe and administer drugs that are subject to the Controlled Substances Act.
12. The baggies and the pill bottle collected by Deputy Sanchez were sent to the New Mexico Department of Public Safety Forensic Laboratory for fingerprint testing analysis. The fingerprint analysis found no usable fingerprints on the baggies. Testing did find Jane Margolin's prints on the pill bottle, and no other usable fingerprints of anyone else on the bottle. Any witness that has provided information in an affidavit about these test results may testify to those results.

/s/ Henry Schrader
Assistant District Attorney

/s/ Sydney Goodman
Defendant's Attorney

Date: December 19, 2023

Applicable Law

Applicable Statutes

NMSA 1978, Section 30-2-10. Controlled Substance Third Degree Murder.

Whoever, without intent to cause death, proximately causes the death of a human being by, directly or indirectly, unlawfully selling, giving away, bartering, delivering, exchanging, distributing, or administering a controlled substance listed in Schedule I or II of the New Mexico Controlled Substances Act, is guilty of murder in the third degree.

Jury Instructions

At the conclusion of a jury trial, the judge will instruct the jury how to apply the law to the evidence. Hypothetically, if the judge in your mock trial case were to provide instructions to the jury, they would look something like the following:

[Please note: A copy of these instructions may not be used as an exhibit during the mock trial competition; however, students may use these concepts in fashioning their case and making arguments to the jury.]

1. Role of Jury.

Members of the jury, you have seen and heard all the evidence and the arguments of the lawyers. Now I will instruct you on the law.

You have two duties as a jury. Your first duty is to decide the facts from the evidence that you have heard and seen in court during this trial. That is your job and yours alone. I play no part in finding the facts. You should not take anything I may have said or done during the trial as indicating what I think of the evidence or what I think about what your verdict should be.

Your second duty is to apply the law that I give you to the facts. My role now is to explain to you the legal principles that must guide you in your decisions. You must follow my instructions carefully. Each of the instructions is important, and you must apply all of them. You must not substitute or follow your own notion or opinion about what the law is or ought to be. You must apply the law that I have given to you, whether you agree with it or not.

Whatever your verdict, it will have to be unanimous. All of you will have to agree on it or there will be no verdict. In the jury room you will discuss the case among yourselves, but ultimately each of you will have to make up his or her own mind. This is a responsibility that each of you has and that you cannot avoid.

Perform these duties fairly and impartially. Do not allow sympathy, prejudice, fear, or public opinion to influence you. You should also not be influenced by any person's race, color, religion, national ancestry, or gender.

2. Jury sole judge of facts; sympathy or prejudice not to influence verdict.

You are the sole judges of the facts in this case. It is your duty to determine the facts from the evidence produced here in court. Your verdict should not be based on speculation, guess, or conjecture. Neither sympathy nor prejudice should influence your verdict. You are to apply the law as stated in these instructions to the facts as you find them, and in this way decide the case.

Although the lawyers may have called your attention to certain facts or factual conclusions that they thought were important, what the lawyers said is not evidence and is not binding on you. It is your own recollection and interpretation of the evidence that controls your decision in this case.

Also, do not assume from anything I may have done or said during the trial that I have any opinion about any of the issues in this case or about what your verdict should be.

3. Presumption of innocence; reasonable doubt; burden of proof.

The defendant, Jesse White, pleaded not guilty to the offense charged. The Defendant is presumed to be innocent, and that presumption of innocence stays with Jesse White unless and until the State has presented evidence that overcomes that presumption by convincing you that Jesse White is guilty of the offense charged beyond a reasonable doubt. The presumption of innocence requires that you find Jesse White not guilty, unless you are satisfied that the State has proved guilt beyond a reasonable doubt.

The presumption of innocence means that Jesse White has no burden or obligation to present any evidence at all or to prove that they are not guilty. The burden or obligation of proof is on the State to prove that Jesse White is guilty, and this burden stays with the State throughout the trial.

In order for you to find Jesse White guilty of the offense charged, the State must prove each and every element of the offense charged beyond a reasonable doubt. A defendant may not be convicted based on suspicion or conjecture, but only on evidence proving guilt beyond a reasonable doubt.

Proof beyond a reasonable doubt does not mean proof beyond all possible doubt or to a mathematical certainty. Possible doubts or doubts based on conjecture, speculation, or hunch are not reasonable doubts. A reasonable doubt is a fair doubt based on reason, logic, common sense, or experience. It is a doubt that an ordinary reasonable person has after carefully weighing all of the evidence and is a doubt of the sort that would cause that person to hesitate to act in matters of importance in that person's own life. It may arise from the evidence, or from the lack of evidence, or from the nature of the evidence.

If, having now heard all the evidence, you are convinced that the State proved each and every element of the offense charged beyond a reasonable doubt, you should return a verdict of guilty for that offense. However, if you have a reasonable doubt about one or more of the elements of the offense charged, then you must return a verdict of not guilty of that offense.

4. Direct and Circumstantial Evidence

There are two types of evidence. One is direct evidence, such as the testimony of an eyewitness, which directly proves a fact. The other is circumstantial evidence. Circumstantial evidence means evidence that proves a fact from which you may infer the existence of another fact.

As a general rule, the law makes no distinction between direct and circumstantial evidence, but simply requires that, before convicting a defendant, the jury be satisfied of the defendant's guilt beyond a reasonable doubt from all the evidence in the case.

5. Nature of the Information

As you know the Defendant, Jesse White, is charged in the information with violation of state law, specifically controlled substance third degree murder. The information is just the formal way of specifying the exact crime the defendant is accused of committing. As the information is simply a description of the charge(s) against the defendant, it is an accusation only. The information is not evidence of anything, and you should not give any weight to the fact that Jesse White has been charged in making your decision.

6. Controlled Substance Third Degree Murder.

For you to find the defendant guilty of controlled substance third degree murder, the state must prove to your satisfaction beyond a reasonable doubt each of the following elements of the crime:

1. Jane Margolin died;
2. Defendant Jesse White proximately caused the death of Jane Margolin by, directly or indirectly, unlawfully giving away, bartering, delivering, exchanging, distributing or administering oxycodone.
3. This happened in New Mexico on or about July 4-5, 2023.

“To proximately cause” means to be a substantial causal factor in causing the death. The Defendant is criminally liable for all the consequences of Defendant’s actions that occur in the ordinary and natural course of events, including those consequences brought about by one or more intervening causes, if such intervening causes were the natural result of the Defendant’s acts. The fact that other causes contribute to the death does not relieve the Defendant of criminal liability. However, the Defendant is not criminally liable if a “superseding cause” caused the death. A “superseding cause” is a cause that comes after the Defendant’s acts, alters the natural sequence of events, and produces a result that would not otherwise have occurred.

The State is not required to prove that the Defendant intended to cause the death of another, nor is the State required to prove that the Defendant acted without intent to cause the death of another. The only intent the State is required to prove is that the Defendant intended to give away, deliver, exchange, distribute or administer oxycodone.

If you find that each of the elements has been proven beyond a reasonable doubt, the Defendant is guilty of this charge. If you find that any element has not been proven beyond a reasonable doubt, the Defendant is not guilty of this charge.

**STATE OF NEW MEXICO
COUNTY OF LINCOLN
TWELFTH JUDICIAL DISTRICT**

No. D-1226-CR-2023-00499

STATE OF NEW MEXICO,

Plaintiff,

vs.

JESSE WHITE,

Defendants.

Verdict Form

To the jury:

To further clarify instructions given to you by the trial judge, you are being provided with the following verdict form. At the conclusion of your deliberations, one copy of this form should be signed by your foreperson and handed to the court clerk. This will constitute your verdict.

Question 1:

Do you find that the State has proven beyond a reasonable doubt that defendant Jesse White proximately caused the death of Jane Margolin by, directly or indirectly, unlawfully giving away, bartering, delivering, exchanging, distributing or administering oxycodone?

Yes _____ No _____

Jury Foreperson

List of Witnesses

The prosecution and the defendant must call each of their respective witnesses. Jesse White is permitted to sit at counsel table as the Defendant.

For the State of New Mexico:

- **Kelly Fagin:** Deputy Medical Investigator who performed the autopsy on Jane Margolin and determined the cause and manner of Jane Margolin's death;
- **Pat Sanchez:** a first responder to the scene of Jane Margolin's death;
- **Alex Otona:** a small business owner and friend of both Jesse White and Jane Margolin.

For the Defendant, Jesse White:

- **Jesse White:** Defendant;
- **Morgan Haozous:** a physician;
- **Taylor Jenkins:** a friend of Jane Margolin who attended Jesse White's party on July 4, 2023.

Pronunciation Guide

- acetaminophen (uh·see·tuh·**mi**·nuh·fn)
- asphyxiation (uhs·fik·see·**ay**·shn)
- Kelly Fagin (**kel**·ee **fay**·gun)
- Morgan Haozous (**moor**·gun **how**·zuhz)
- Jane Margolin (jayn mar-**goal**-un)
- Alex Otona (al·ex uh·**tone**·uh)
- oxycodone (aak·see-**kow**-down)
- pulmonary edema (**puhl**·muh·neh·ree uh·**dee**·muh)
- Percocet (**purr**·kuh·suht)
- rigor mortis (**ri**·gr **mor**·tuhs)

WITNESS STATEMENTS

Statement of Kelly Fagin, M.D.

My name is Kelly Fagin. For the past eight years, I have served as a Deputy Medical Investigator for the State of New Mexico. My work is in forensic pathology, the investigation into cause(s) of death. Under New Mexico law, the State Medical Investigator appoints deputy medical investigators, such as me, to investigate human deaths. We must conduct a preliminary investigation and, if necessary, perform an autopsy – a detailed, intrusive examination of the body. Not every case will result in an autopsy. However, where it is unclear how a death occurred, or if there is evidence that a death was not by natural causes, then we will almost always perform an autopsy, barring an appropriate objection from the family.

Most people are familiar with the basic idea of an autopsy because they are depicted in crime TV shows. During an autopsy, we make incisions into a body to open up its cavities, remove organs, and conduct a comprehensive study of the body for evidence of injuries, health problems and potential causes of death. What the TV shows don't usually show are all the work we do to analyze the evidence after an autopsy. Taking measurements, testing samples, and evaluating peer reviewed research are important parts of the procedure. Also important is the documentation we do. We take meticulous records and photographs of everything in a case, and we write detailed reports of our investigation.

Some jurisdictions use coroners; others use medical investigators. There is a significant difference between the two types of jobs. Only medical investigators are required to be medical doctors with board certification in forensic pathology, which takes a long time and a lot of medical training, totaling approximately 13 years of higher education. I started with a Bachelor of Science from the University of Colorado. I then completed my Medical Doctorate at the University of New Mexico in 2011, and subsequently completed a four-year residency in Pathology at UNM Hospital in 2015, followed by a one-year fellowship in Forensic Pathology in 2016, after which I was hired as a deputy medical investigator in the state's Office of the Medical Investigator.

I have performed more than one thousand autopsies. However, you may be surprised to know that the vast majority of autopsies we conduct are not criminal homicides. Most people die from natural causes, which includes death from medical problems they were experiencing that came about due to genetics, age or illness. Unfortunately, there are also many deaths we investigate that fall in-between, where a death is self-inflicted. Suicides and accidental deaths are issues I have investigated many times.

You may have heard of the opioid crisis. Since the early 2010s, the United States has experienced mounting numbers of deaths from opioid drug overdoses. Hospitals and medical investigator offices are on the frontline of this crisis; we help handle the consequences of this crisis nearly every day. In the last five years, I have done hundreds of autopsies on people from all walks of life who have died from opioid overdoses. It has become so common now that we can often recognize the signs of an opioid overdose immediately, long before we conduct the autopsy, which more or less confirms what we already strongly suspect.

Opioids are powerful, highly addictive drugs. Their desired effect is pain relief. They do this by binding to the opioid receptors in the central nervous system, thereby blocking pain signals to the brain. An unintended effect is that they also bind with receptors that control your alertness, causing a depressant effect. With too many opioids blocking these receptors, you become sleepy. Third, opioids also cause the unintended effect of shutting down the brain's control of the respiratory system. With too many opioids, the lungs will stop receiving signals to function, and the person will die from asphyxiation. By this point, the person has already been rendered unconscious from the depressant effect and is unaware that they are no longer attempting to breathe.

In the early 2000s, pharmaceutical companies began making prescription variants of these drugs available in high numbers. Patients were given large amounts of opioids for pain relief. Many people began overdosing on their prescribed medications. Many others became so addicted that they exhausted legal sources of opioids and turned to drugs on the street or black market. We are still dealing with a massive number of addicts and overdose-related deaths from the opioid crisis. At the time of writing this report in summer of 2023, I have already performed 49 opioid overdose autopsies this year.

My office's involvement in the death of Jane Margolin began on July 5, 2023, the day Ms. Margolin was discovered by police deceased in her home. Within minutes of the body's discovery, my office was called. This is common in overdose deaths. Sometimes, as in this case, it is so obvious that the person is deceased that we will be called at the same time as EMS.

I was not present at this point, but as you may know from other witness testimony, the police purportedly found Jane Margolin, a middle-aged female, lying down on a living room couch, fully clothed and face-up, with the tell-tale sign of opioid overdose: a cone of white foam that had bubbled out of the mouth and collected on the face. Graphic pictures taken at the scene confirm these facts. EMS pronounced the female deceased upon the arrival of our death investigation team.

According to the pictures and reports of the police, there were open and mostly empty bottles of alcohol located on a coffee table, as well as a plastic sandwich baggie with multiple 40 mg oxycodone pills inside. Additionally, a pill bottle with multiple 60 mg oxycodone + 5 mg acetaminophen pills (suspected Percocet) were located upstairs in the decedent's bathroom. It is noteworthy that 40 to 60 mg doses of oxycodone are typically only designed for timed release, and they should not be prescribed to someone unless they have prior tolerance to opioids or are experiencing very severe pain.

Pictures of items found in the house have been included as Exhibits 7 through 10. An investigation could find no sign of a struggle, and no other potential occupants of the home or witnesses of the death could be found.

Because the death did not appear to be natural, our office was required to conduct an autopsy. The body was transported to the Office of the Medical Investigator, where it stayed in cold storage until July 6, 2023. That morning, I led the autopsy.

Most of my findings are contained in Exhibit 6, the autopsy report I completed in this case. However, I can summarize the salient points of that report here.

80 The autopsy began with an examination of the body for exterior characteristics. We looked at the
81 skin, face, and other outside areas for evidence of injuries or health problems. We also evaluated
82 rigor mortis and livor mortis.

83 Rigor mortis is the rigidity of limbs following a death; the muscles will lock up a few hours after
84 death (the exact time varies, usually dependent on temperature). We noted moderate rigor mortis
85 in the arms, legs and neck. We also noted livor mortis, which is a collecting and congealing of
86 blood inside the body after the heart stops pumping. The blood will pool and congeal where gravity
87 causes it to travel after death, creating large bruising patterns under the skin that are visible just by
88 looking at the body without clothes. There was livor mortis in the posterior of the body, mostly in
89 the legs and on the backside area, meaning either immediately or shortly after the death, the body
90 had come to rest on its back and the blood pooled towards the back, consistent with how the body
91 was found on the couch.

92 Aside from the cone of foam on the face, we did not note evidence of injuries or other illnesses on
93 the outside of the body. The cone of bubbled foam was key. When an opioid overdose occurs, the
94 lungs stop working, the body dies, and the lungs gather fluid, called pulmonary edema, which
95 eventually overflows into the trachea, the windpipe, and out of the mouth or nose. Here, it passed
96 through the nostrils because the mouth was closed.

97 The next step we did was an evaluation of the inside of the body. All of the bodily organs, including
98 the brain, were removed, examined, and weighed. We also took fluid samples from organs when
99 it was relevant. The weights of the different organs are noted in my autopsy report, but I do want
100 to bring attention to a few important pieces of data.

101
102 The lungs were both wet and heavy--about twice as heavy as usual. A normal healthy right lung
103 weighs about 450 grams and a normal left lung weighs about 400 grams. This was a strong sign of
104 an opioid overdose, because of the fluid buildup that had occurred. We also found a full bladder,
105 which was at capacity at about 250 milliliters. These were both strong evidence of an opioid
106 overdose-caused death.

107 There were signs of other medical issues in this body. The heart was enlarged and weighed 520
108 grams, but a normal heart weighs 475 grams. The left ventricle of the heart, a chamber inside, was
109 slightly thickened, at 1.7 cm thick (normal max is 1.5). There were also changes to the kidneys,
110 which combined with the heart condition, indicated hypertension (high blood pressure). A normal
111 kidney is perfectly smooth outside; a hypertension kidney has granular kidney texture like an NFL
112 football, from scarring of the tissues that respond to the high blood pressure.

113 The body was slightly overweight. There was a history in medical records we obtained showing
114 high blood sugar. According to medical records, Ms. Margolin had recently started oral
115 medication to try to control her diabetes. We believed she had early stages of Type II diabetes and
116 was overweight. None of these symptoms, however, were indicative of the cause of death.

117 We acquired and tested blood from the femoral artery in the left leg. The femoral artery is the most
118 reliable location in the body to take samples of blood that could contain opioids. Alcohol tends to
119 be consistent through most blood in a body after death, but opioids will collect unpredictably in

certain organs. Arteries serve as more even and reliable sources of blood. The femoral blood tested positive for alcohol, oxycodone, and acetaminophen.

When our preliminary, in-office blood tests are positive for a drug in more than trace amounts, we will send samples of the blood out to the DPS Forensics Laboratory to do more detailed testing, which we did. We asked for specific levels to be measured for alcohol and oxycodone. We did not request specific levels of acetaminophen because the preliminary in-office test results only showed trace amounts.

The DPS Toxicology Laboratory testing of the blood showed an alcohol concentration of 0.09 grams per decaliter of blood, which is slightly above the level at which it becomes illegal to drive a car in New Mexico, 0.08. This is not a lethal amount of alcohol for the vast majority of humans, and particularly not lethal for people who drink regularly. However, there was also a concentration of oxycodone, 0.4 milligrams per liter of blood. This can be a lethal amount of an opioid in a human, even someone who has built some tolerance through repeated consumption. It is more likely to be lethal when combined with alcohol, which exacerbates the symptoms of opioid overdose.

Additionally, there were trace amounts of acetaminophen, the drug found in Tylenol as well as Percocet, which is a brand name prescription drug that combines oxycodone with acetaminophen. However, the levels of acetaminophen only came in at trace amounts from our preliminary tests, so we did not request more precise numbers from the DPS Forensics Laboratory. The pills with acetaminophen, found upstairs in the decedent's bathroom, contained 5 mg of acetaminophen. We expect more than trace amounts of this chemical to register on the preliminary toxicology screen testing when 5 mg of the drug has been consumed within 24 hours of death. We also did not note liver damage that would be expected from acetaminophen abuse or overdose.

Where the different drugs came from was a matter of evidence found in the house, the pictures, and other exhibits. There were beer bottles found on the coffee table, about five, and they were mostly empty. This indicated they had been consumed. Notably, there was a baggie with pills on the coffee table as well, and it was open for easy access. These pills tested positive for the chemical oxycodone. Additionally, there was an unlabeled pill bottle found in the upstairs master bathroom, which had pills that tested positive for oxycodone and acetaminophen, meaning they were likely Percocet or a different brand of the same type of medication. Given the only trace amounts of acetaminophen, and the lack of Percocet found downstairs near the body, it was inconclusive whether Ms. Margolin had consumed any of this drug near the time of her death.

There was nothing but light-tan fluid found in the stomach, so it's impossible to know when exactly the oxycodone found in the blood was consumed, but this is not unusual. In suicide cases, there are often gobs of undigested oxycodone pills found in the stomach, because the user has taken an amount intentionally calculated to cause death. But here, the pills had been digested, indicating a small number had been taken. Only a few pills would be enough to cause the blood levels of oxycodone we found in this case.

We strive to make two determinations for a death, the cause and the manner. The cause is the physical mechanism(s) for how the person died. The manner is a more abstract, quasi-legal determination concerning why a person died. Sometimes a cause or manner of death will be

161 inconclusive given the evidence. Here, we made both determinations to a reasonable degree of
162 medical and scientific certainty.

163 I concluded the cause of Ms. Margolin's death was her consumption of oxycodone, possibly
164 exacerbated by co-consumption of alcohol. The manner of death was concluded to be an accidental
165 overdose. Again, given the lack of pills found in the stomach, it did not seem likely Ms. Margolin
166 had intentionally taken enough of the drug to cause death. There was also no suicide note located,
167 and the body was not arranged in a way that indicated she had planned to die.

168 As far as the trace evidence of acetaminophen, that evidence was inconclusive. It was
169 undetermined how much acetaminophen was in the body; only that it was a very trace amount,
170 unlikely to have been from something that was recently consumed prior to death. Additionally,
171 there was no liver damage associated with an overdose of acetaminophen, so we did not conclude
172 it was a contributor to Ms. Margolin's death. Even if acetaminophen did contribute to the cause of
173 death with the alcohol, it would not change my conclusion that oxycodone was the primary cause
174 of death.

175 Kelly Fagin, M.D.
176 Signature

October 17, 2023
DATE

Statement of Pat Sanchez

My name is Pat Sanchez, and I have been a Deputy Sheriff for Lincoln County since 2018. As a Deputy Sheriff, I patrol parts of Lincoln County, I am dispatched in response to reports of various situations, from domestic disturbances to homicides. I grew up in Lincoln County, and I think I always wanted to work in law enforcement.

I completed a two-year associate degree in criminology at the Lincoln Community College then entered the New Mexico Law Enforcement Academy in 2005. During that time, I took law classes, skills courses and driving courses. When a dispatcher job opened in Lincoln County, I was hired as a dispatcher for the Lincoln County Sheriff's Office. I got to know a lot of first responders and paramedics and decided I would rather do that than be a cop. I trained as a First Responder and ultimately completed the paramedic course at Rio Grande College in 2013. I am a Certified Emergency Medical Technician.

After completing my EMT training, I worked as a part-time dispatcher and on-call EMT. I found myself drawn back toward police work and was hired full time by the Lincoln County Sheriff's Department in 2018, while continuing to work part-time as an EMT. I maintain my EMT certification and my Peace Officer's License through regular mandatory classes. My classwork included Basic Crime Scene Processing and Basic Narcotics Investigation. The homes of Jane Margolin and Jesse White are located in Lincoln County.

On July 5, 2023, at 11:43 a.m., I was working the day shift and was walking into Legal Grounds Coffee Shop when I was dispatched to investigate a report of an unresponsive 48-year-old person with an ambulance already dispatched. The Lincoln County Sheriff's Department responds to all ambulance calls, and a deputy sheriff often is the first person on the scene. I recognized the address as belonging to Jane Margolin. Ms. Margolin was a prominent accountant, served on the Chamber of Commerce and was well-known in the community. On the way to the scene, I became anxious because "unresponsive" usually translates to "found dead" and Jane Margolin dying would be a big deal in Lincoln County.

Upon arrival, I was met at the door by Ms. Margolin's spouse, Walter. Walter Margolin said he had gone home to check on Jane when Jane didn't show up for work. Walter was weepy and kept repeating "I can't wake her up!" Walter brought me to the living room. At first glance, the room seemed normal. The room showed no signs of a struggle and there were empty beer bottles around the room. I recognized Jane lying on the couch, face up and fully clothed on the couch, but with a tell-tale sign of an opioid overdose, a cone of white, fine bubbly foam on the face.

Jane was wearing jeans and a T-shirt, no shoes, one sock and would have appeared to the untrained eye to have simply fallen asleep. However, on closer look, she not only displayed the foam cone, but was also ashen gray. I put latex gloves on my hands for evidence handling, and I reached to touch the body's neck/face. She was cold to the touch. I also detected the odor of beer near her. I immediately radioed in for assistance from EMS and the Medical Investigator, and I began my own personal attempts at resuscitation even though it was clear that the person was deceased. I then took a few pictures with my Sheriff's Department-issued smartphone.

Lincoln County Sheriff's Department procedures require that First Responders attempt resuscitation. Even though I knew Ms. Margolin was dead, I went through the motions and waited for the ambulance crew. As soon as the ambulance crew came through the door, I began a survey of the scene.

On the coffee table in front of the body was a plastic sandwich baggie with what appeared to be over a dozen pills. These pills were tested later; the laboratory positively identified them as oxycodone tablets. I also noted that the baggie seemed to have some sort of tape with numbering on it. After the scene was completely photographed and documented, I flipped the baggie over so I could read it. The numbering written in marker on the label said "3689."

I also counted five beer bottles around the room, all opened and empty. I quickly scanned the surfaces and floor looking for any other signs of illicit narcotics use. There were none. However, under one of the beer bottles found at the scene of death, I found two documents that are apparently from a place called Wayfarer Recovery Residence. One of the documents is called "Exit Form," and the other is called "Critical Incident Form." I collected both documents and placed them into evidence.

I visited every room in the house and, for the most part, did not find anything of note. However, I did find more evidence in the deceased's upstairs master bathroom. On a wooden shelf above the toilet was a closed orange prescription bottle without a label. There were red pills inside that were later tested by the DPS Forensic Laboratory and found to be Percocet, a type of oxycodone.

I photographed the prescription bottle, pills and baggie where I found them. I pulled an evidence baggie out of my cargo pants pocket, put on some gloves, and collected each piece of evidence. Later on, I then separately photographed the tablets.

The baggies were later sent to the DPS Forensics Laboratory for fingerprint and drug testing analysis. First, they came back as oxycodone, in a dosage unit of 40 mg per pill. Second, I learned that there were no usable prints found on the baggie. That wasn't a huge surprise. Based on my training and experience, I know that identifiable fingerprints are often not found on surfaces, even if someone touched the surface. But it was worth trying to find fingerprints, even though the results didn't tell us anything.

In the orange pill bottle found upstairs were red tablets which I later identified as 60 mg oxycodone and 5 mg acetaminophen, meaning they were likely Percocet. The DPS Forensics Laboratory later confirmed my pill identifications. The prescription was from Holcomb's Family Pharmacy in Cortez, Colorado. This struck me as odd, so I called the regional drug task force and asked what to make of this. They told me that addicts who doctor shop often go to Colorado for prescriptions because the pharmacies are not tied in with the New Mexico opiate prescription database.

Investigation quickly revealed that there had been a party at Jesse White's house the night before the death, and there was some indication that painkillers had been discussed. After clearing the death scene, I went immediately to Jesse White's house. White allowed me into the house and agreed I could search the house and their computer. White was informed that they could refuse my request and I would be happy to get a search warrant. White said, "I'm heartbroken to find out about Jane. I want to do whatever I can to help." and invited me to "do whatever you need to do."

81 The search of the house revealed the following items of note:

- 82 1. There was a box of fresh, new sandwich baggies in Jesse White's kitchen drawer
83 that were the same shape, size, and type of baggie that were found on the coffee
84 table in front of Jane Margolin's body.
- 85 2. A Google search had been done on "oxy overdose" on the Defendant's computer
86 within minutes of Walter calling 911 to report the body of Jane Margolin. The
87 search had been deleted in the last twenty minutes. Defendant told me that Walter
88 had called, distraught, and that he explained how he found Jane in the house.
- 89 3. There was evident activity on Jesse White's Facebook page. The postings were in
90 the message section of the page. A subpoena of Facebook records revealed the
91 message contents and its time of deletion. The message appears to be left by Jane
92 Margolin in the early morning hours of July 5, 2023, apparently after receiving a
93 gift from Jesse White. Coincidentally, Margolin was not making much coherent
94 sense in the message and appears to have been manic and likely intoxicated.
- 95 4. A strong box was found under Jesse White's bed in the master bedroom. Found
96 inside was a sandwich baggie matching the sandwich baggie found at Margolin's
97 home, with a similar scotch tape label and black marker numerals, this time for the
98 number "52891." The baggie had a noticeably larger quantity of oxycodone tablets
99 inside than the baggie found at Margolin's house, but DPS Forensic Laboratory
100 testing found that the pills were the same type and dose: 40 mg. Also, in the strong
101 box were two \$100 bills and some personal papers.

102 As required by Lincoln County Sheriff's Department policy, I prepared a crime scene investigation
103 report, which contains an explanation of some of my findings at the scene.

104 Later that day, I met with Jane Margolin's regular physician, Dr. H. C. Quintana in her office near
105 the coffee shop in Lincoln. Dr. Quintana had treated Margolin for various medical issues for
106 several years by this point, and told me that Ms. Margolin had serious chronic back pain dating
107 back to her military service. Margolin had once been addicted to narcotics in college, so Dr.
108 Quintana purposefully kept her at a low oxycodone dosage. When I mentioned finding some 60
109 mg Percocet pills, Dr. Quintana stated that Ms. Margolin had been given a prescription for 60 mg
110 Percocet several years ago following a car accident, but only a sufficient number for about six
111 weeks. Dr. Quintana noted that some pain patients keep a few old, stronger pills "just in case" they
112 have a bad day. Dr. Quintana repeatedly scolded Ms. Margolin about drinking alcohol when on
113 pain meds, but Ms. Margolin would wave the doctor off, saying, "I know, I know – it's a killer
114 combo!" Dr. Quintana added, "The drinking didn't help her diabetes either."

115 Pat Sanchez
116 Signature

October 17, 2023
DATE

Statement of Alex Otona

My name is Alex Otona. I am thirty-five years old and I reside in Lincoln County, New Mexico. I own and manage a local coffee shop, but I also own a bookstore here in Lincoln County. I received a Bachelor of Arts in Business Education, and a minor in Music from New Mexico State University in Las Cruces, New Mexico. The job market wasn't great when I graduated, but I was able to start working for the original owner of the coffee shop when I graduated, and I managed to impress him with some business initiatives. We worked out an agreement to allow me to take over ownership of the business over several years. I am now the sole owner of the "Legal Grounds" coffee shop. I was also able to convert the basement of the building into a separate business and started operating a bookstore about 7 years ago. At this rate, things are going very well for me financially, and I should have all my student loans paid off in another 12 or 13 years.

The actual day-to-day work for both the coffee shop and bookstore is fairly similar. Most of what I do is try to keep up on the paperwork. I have to manage the schedules for all the baristas in the coffee shop and the clerks in the bookstore. I have to make sure to manage inventory for both. The coffee shop constantly needs new coffee and food every day, and we need to make sure we are keeping everything clean and getting rid of the old food. At least the inventory for the bookstore is not as immediate, but I still have to research the popular new topics, and look into the value of the occasional rare older book that comes in. On top of all that, we have to make sure all the books are balanced and everyone is going to get paid at the end of the month. I have an assistant manager for both businesses, but in order to make sure I'm taking home enough to pay the bills and student loans, I'm typically working about 70 hours a week between the two jobs.

About 9 years ago, I was working at the coffee shop, this was before we put in the bookstore, and I got involved with some of the local protestors. We were part of a local group for the Rally to Restore Sanity. During one of the protests, officers were going through and ticketing us for trespassing. I thought it would be funny to tell the officer my last name was Soyka. That got me charged with giving a false name to a police officer. Though I felt like it was a badge of honor at the time, I was convicted of a misdemeanor for providing a police officer with a false name and given a weekend of community service. Since then, I've stopped with the protests and started getting involved elsewhere.

I've been involved with the local Chamber of Commerce for the past 8 years. For the last five years I served the local Chamber of Commerce as a member of the Board of Directors. This is how I got to know Jane Margolin and Jesse White. They are both a little older than I, and I think they decided to take me under-wing as a mentee. In the first few months of knowing them, they had started regularly taking me out to lunch and talking business. They always had great insight for me, from managing staff, to general business management. Both of them were previous Board members and they nominated me to join the Board. Although they were no longer on the Board, they still came out to a lot of the events.

Shortly after meeting them at the Chamber of Commerce, Jane and Jesse would invite me to parties: they would call them "networking events," although there wasn't much networking being

done. It was a large group of people, but it was pretty rare to see a new face. The events would generally be attended by local business owners and professionals in the community. The events would normally take place at someone's house or cabin. Jesse would generally host an event at his/her/their house on the 4th of July. Jesse's events would generally start out pretty quiet and tame in the early afternoon, just barbecuing whatever people brought. The events at Jesse's place were always BYOB, and it was unusual for people to get heavily intoxicated, although it did happen. It would probably look like a large diverse family reunion from an outsider's perspective.

Later in the evening, most of the families would go home and it would be a smaller crowd. People would normally be hanging out in smaller groups of two and three, talking about how bad business is, or how their health is failing with their latest ache or pain, or the latest gossip or drama inside or outside the group. Jesse always had a large number of health-related issues to complain about. Sometimes it was cholesterol, or heart disease. Sometimes Jesse was waiting on a biopsy for yet another mole that might be skin cancer. But generally, there was a lot of pain. Jesse seemed to have some pretty severe back pain from when s/he/they served in the military. Jesse also had a really good doctor. Well, I guess it might not be a really good doctor, but a doctor that definitely prescribed a lot of pills. Jesse wasn't stingy with the pills either. I never saw Jesse take any, but I definitely would see Jesse share the pills when other friends would complain about aches or pains.

One year at Jesse's Fourth of July party, I was talking to another guest, and Jesse was listening. I mentioned that I had spent the previous day carrying boxes of books up and down the steps for the bookstore, and that morning I could barely get out of bed due to my back. Later that evening, before I headed home, Jesse pulled me aside and handed me a little baggie with about a dozen pills in it. Jesse told me to take one before I went to bed, and one in the morning after I get to work until the pain went away. Jesse told me not to drive for a few hours after taking them. I'll admit, I took them, and I did as Jesse suggested. The pain went away, but that didn't make it okay. I've always regretted taking them. Who knows what could have happened.

Since that time, I've seen Jesse handing out other baggies to guests at other events. I would normally see Jesse pull someone aside and hand something to the other person. I never said anything, and I never heard anyone else say anything about it. I mean, Jesse never asked for money. it wasn't like Jesse was selling drugs. I never heard anyone asking Jesse for drugs either - before July 4th, 2023, I mean. Jesse was just trying to help other people out. But I wish I had said something now.

I attended the party hosted by Jesse on July 4th, 2023. I arrived early and brought some whole bean coffee samples received at the store earlier in the week. I brought the coffee beans in baggies because I didn't have enough of any other type of container. I also brought a case of hard cider. When I arrived, I opened one of the cans of cider and sat down to talk to Jesse as they prepared the grill. I finished my first can about the same time that the first round of burgers was ready. So, I made some food and grabbed another can of cider and went and talked to a few of the other guests. There were a few families that I would see in the coffee shop a lot, so I sat with them while eating. We were catching up on life and just making small talk while enjoying the nice day.

A couple hours in, I had just opened my third can of hard cider. That was the first time I remember seeing Jane that day. I remember her having a drink, but I'm not sure what it was. She appeared to have jumped into a conversation and was starting to take over the discussion. It was clear to everyone but Jane herself that the interjection was unwelcome. People started to disengage in the

84 conversation and drift to other groups. Looking back on the interaction, I'm not sure what was up
85 with her, but at the time I had thought that she was probably drunk.

86 A few hours later, I think I was on my fourth drink, and Jane came over and joined in the
87 conversation I was having with a few other guests. A few of the guests had kids looking at college
88 applications and considering retaking the SATs and ACTs. I don't have any kids, so I wasn't really
89 listening to the conversation. When Jane showed up, I got the feeling that she had already jumped
90 into other conversations with the other guests, because the other guests peeled off pretty quick to
91 join other conversations. This left me alone talking to her. She was complaining about her latest
92 ache or pain. I can't remember specifically what it was. I tried to change the subject a few times,
93 but she was focused on how much she hurt, and how much the doctors cost, and the problems with
94 the healthcare system. Eventually, I told her that my drink was gone and I needed to go get another
95 as a way of escaping the conversation. I liked Jane, she was a good friend. Looking back on that
96 day, I regret ignoring her and pushing her away. I just thought she was drunk. I didn't know that
97 was the last time I was going to talk to her.

98 I did see Jane later that night talking to Jesse. This was after most of the families had left and it
99 was getting pretty quiet. I had my back to them initially, but I could hear Jane going on very loudly
100 about her pain and suffering. I heard her saying, "I know you have something, you always have
101 something. Is it about the money? I can pay." At that point I turned around and saw that she was
102 talking to Jesse. Jesse seemed to be slowly shaking his/her/their head; I wasn't sure what part of
103 the conversation Jesse was responding to. I remember Jesse saying something like "Are you sure?
104 Are you sure you think that's the best idea?" Then Jesse broke away to say goodbye to some other
105 guests.

106 A friend had agreed to give me a ride home, and I left about half an hour after that conversation. I
107 was going to say goodbye to Jesse but noticed that Jane and Jesse were together. It looked like
108 Jesse handed something small to Jane, who then gave Jesse a hug, and it looked like they had
109 worked out whatever their issue was. I couldn't tell exactly what Jesse handed to Jane, but it looked
110 like a baggie. That said, I couldn't tell if it was a baggie that had some of the coffee beans I'd
111 brought or if it contained something else. That was the last time I saw Jane alive. I was too buzzed
112 to drive home legally by that point, so I took a ride share home, and I stopped by early the next
113 morning to pick up my car, but I didn't see Jesse. That was the last time I was at Jesse's place.

114 A few days later I learned of Jane's death from some other guests who stopped into the coffee
115 shop. There was a funeral a few days later. I attended, as did Jesse, but we didn't talk. Nobody
116 really talked at the funeral. There were rumors that Jesse had given Jane some pills that she had
117 taken and overdosed.

118 Alex Otona
119 Signature

October 17, 2023
DATE

Statement of Morgan Haozous

My name is Morgan Haozous. I am 50 years old, and I live in Lincoln County, New Mexico. I work at Lincoln County Medical Center as an addiction medicine physician. The type of work I do has never received as much attention as it has since the opioid epidemic began to get serious media attention.

I attended the University of Arizona, where I received a Bachelor of Science Degree, summa cum laude, in Biology in 1995. I attended medical school at the University of New Mexico and graduated with honors in 1999.

While I was in medical school, I started to realize the importance of treating addiction as an illness rather than a character flaw. I thought about my mother's behavior as I grew up. She was an alcoholic, and the negative effects of her addiction on my family became even more obvious to me. And during my second year of medical school, just before our final exams for the spring semester, my brother passed away from an overdose of a variety of opiates. My brother was two years younger than me. Even though I continued to see him fairly often, I had no idea he was suffering from addiction. Outwardly, he was just as friendly and outgoing as he'd always been.

After he passed away, I learned his story from friends who had used to be with him. The guilt they felt – and their seeming inability to get away from their own addictions despite my brother's death – gave me a new mission in life.

After I graduated from medical school, I completed a one-year internship in internal medicine/neurology/psychiatry at the UNM Center for Health Sciences. My residency was at the UNM Teaching Hospital for Neuroscience & Human Behavior, where I learned from some of the most renowned addiction specialists in the nation. My residency was successfully completed in 2004. My residency was an amazing experience. I learned that people who suffer from addiction come from every race, gender, socioeconomic status, and religion. After completing my residency, I became board certified in addiction medicine, and I was hired at Lincoln County Medical Center. I've worked there ever since. I've also done some consulting work at a local residential chemical dependency treatment facility.

Because of the experience I had with my brother's overdose death, I've done a lot of studying - and even some publishing – on determining the cause and manner of death in opioid overdose cases. As this case exemplifies, determining which specific drug actually caused a person's death is often not nearly as clear as one might think.

About three years ago, a personal-injury attorney who is a good friend of mine asked me to review some documents on behalf of her client. I agreed to look at the documents and found some serious issues with how her client had been treated at a New Mexico hospital. That experience made me realize that I enjoyed acting as an expert in court cases. It's really interesting, and of course, there's a little money to be made. Before this case, I've been retained in five other cases. All five were civil cases where I was retained by the plaintiff. This is the first time I've been retained in a criminal case.

Jesse White's attorneys approached me and asked me to take a look at the case. I've reviewed the affidavit of Kelly Fagin, Dr. Fagin's autopsy report, and the affidavit of Pat Sanchez. I'm charging my standard rate of \$500 an hour for my time. Before coming to trial to testify, I've spent 30 hours researching, reviewing documents, writing this affidavit, and preparing for testimony.

One of the many sad realities of opioid addiction is that addicts often take more than one drug and get their drugs from more than one source, whether legitimate or illegitimate. That appears to be the case with Jane Margolin.

According to the documents I reviewed, when Ms. Margolin was found deceased, a baggie containing pills was found on the coffee table in front of her. Lab tests confirmed that the pills remaining in the baggie were indeed oxycodone. I've reviewed documentation of the testing of the pills, and I have no reason to doubt the results.

Ms. Margolin may indeed have ingested one or more of the oxycodone pills from the baggie found on the coffee table. But when you're trying to determine the cause of death in an apparent overdose, you have to examine all possibilities. Despite how it might look at first glance, it's far from clear that the oxycodone in the baggie found in front of Ms. Margolin actually caused her death. There are complicating factors.

The first complicating factor is the fact that Ms. Margolin had been consuming alcohol. The first police officer at the scene smelled alcohol about her person, and the toxicology results showed that her blood-alcohol concentration was 0.09. Blood-alcohol testing is very reliable, so I have little doubt that Ms. Margolin's blood-alcohol concentration was 0.09 at the time of her death.

The amount of alcohol found in Ms. Margolin's blood typically isn't enough to cause death, particularly in an adult. But alcohol is a depressant. And many studies have shown that alcohol can have an additive effect when taken with oxycodone. That means that the effects of alcohol and oxycodone, when taken together, can essentially amplify each other. Indeed, drinking even a moderate amount of alcohol and taking one oxycodone pill could cause a condition called respiratory depression. A person suffering from respiratory depression experiences shallow breathing or stops breathing altogether.

It's entirely possible that if Ms. Margolin hadn't been drinking, the oxycodone in her system would not have been fatal. I can't say for sure one way or the other whether her alcohol consumption contributed to her death, but it's a strong possibility.

In my opinion, however, there's an even more important question about the cause of Ms. Margolin's death that the Medical Investigator left unsolved. Preliminary testing showed the results of trace amounts of acetaminophen in Ms. Margolin's system. This might not seem like a big deal. Acetaminophen, by itself, is commonly known by the brand name Tylenol. It's an over-the-counter painkiller. But the presence of both oxycodone and acetaminophen is very important.

Percocet is the brand name of a painkiller that contains both oxycodone and acetaminophen. The oxycontin pills found near Jane Margolin were not Percocet pills - that is, they did not contain acetaminophen in addition to oxycontin. But Deputy Sheriff Pat Sanchez's affidavit notes that another prescription pill bottle was found in Ms. Margolin's medicine cabinet. That bottle was unlabelled, but the pills inside tested positive for both oxycodone and acetaminophen - that is,

80 Percocet. It's entirely possible Ms. Margolin took a substantial amount of that Percocet, and that
81 Percocet caused her death.

82 The Medical Investigator could have determined whether Jane Margolin's possible Percocet use
83 caused her death. Pursuant to standard forensic practice, Dr. Fagin asked the DPS Forensics
84 Laboratory to quantitate the amount of oxycodone in Ms. Margolin's system. Quantitation is the
85 process by which a lab determines the amount of a substance in a person's system.

86 Dr. Fagin did not ask the lab to quantitate the acetaminophen. This was a huge misstep. Knowing
87 how much acetaminophen was present could have provided at least a rough estimate of how much
88 Percocet, if any, Jane Margolin consumed before her death.

89 Dr. Fagin's affidavit states that the Medical Investigator did not order quantitation of the
90 acetaminophen because preliminary testing showed only a "trace amount." A trace amount is a
91 very small amount, below some arbitrarily defined threshold. But preliminary tests are preliminary
92 for a reason. They aren't nearly as reliable as the more refined testing that's available in the lab.

93 Preliminary tests are helpful to rule out the presence of a certain drug. If something isn't present
94 at all, there's no point in trying to do additional testing for it. But if a drug is in a person's system,
95 and there's any chance that it's significant to determining the cause of death, a medical investigator
96 should order quantitation.

97 Dr. Fagin didn't order quantitation of the acetaminophen, so we'll never know whether Percocet
98 could have played a role in Jane Margolin's death. Now it's too late. When I asked Dr. Fagin's
99 office about obtaining a sample for additional testing, I was told that there were no samples
100 available.

101 I agree with Dr. Fagin's opinion that the manner of death was an accidental overdose. There is no
102 evidence that Margolin died by the intentional act of another, by suicide, or of natural causes. I
103 also agree with Dr. Fagin that the cause of death was consumption of oxycodone, with the
104 consumption of alcohol being a contributing factor.

105 Unfortunately, Dr. Fagin doesn't really grapple with the question we can't answer – which
106 oxycodone caused Ms. Margolin's death. I cannot state to a reasonable degree of medical certainty
107 whether she died as a result of consuming the oxycodone in the baggie near her, the Percocet found
108 in her medicine cabinet, or some combination of the two. The evidence simply doesn't tell us that,
109 and I'm afraid we will never know. I just hope Jesse White doesn't suffer as a result.

110 Morgan Haozous, M.D.

111 Signature

October 24, 2023

DATE

Statement of Jesse White

My Name is Jesse White. I am forty-eight years old. I am an accountant at Louis and Tully. I am a Certified Public Accountant and have a Degree from the New Mexico Highlands University, where I graduated in 2002. I guess I have always worked with money. I joined the Army right out of high school and somehow ended up working in the finance office of the base. While I was in the Army, I got hurt pretty bad in a car crash. One of my friends was driving under the influence and we both got banged up pretty bad. We both had been drinking all night, but I thought he was safe to drive. I knew I wasn't in any shape to drive. He ended up going to jail for a while for the accident. I have been on pretty significant pain medication and muscle relaxers for my back since that injury. The doctors say I have a thoracic spine injury and it's not going to get better.

I was a few years older than most of the other students at college, since I had spent four years in the Army. College is where I met Jane Margolin. Jane was always good at making friends. Before long, I was hanging out with her and a pretty big group of students on a regular basis. Since Jane and I were already twenty-two when we started college, her friends usually asked us to buy alcohol for them. I know it was illegal, but I liked being part of her circle of friends and it's not like I was selling drugs or anything. If I didn't buy it, someone would use a fake ID or have their older sibling do it. Plus, when I bought the alcohol, I made everyone at the party give me their car keys. I also cut people off if they looked too drunk. We probably had the safest parties at college, because of me. I can't drink alcohol because of the pain medication I take, so I usually drove people home from parties.

I stayed close with Jane throughout college. We both took the same business and accounting courses and graduated together. We both studied for the CPA exam together and passed on the first try. Of course, by that time most of Jane's friends were over twenty-one and I didn't have to buy alcohol for them anymore. I still made them give me their car keys when we went partying though.

Jane and I both got internships at Louis and Tully right out of college. It was nice to start a career with a friend. We worked together for almost twenty years before she died. Unfortunately, she developed a little bit of a drug problem early in her career. She always liked to party, and accounting is a pretty stressful business. Sometimes, she would ask to "borrow" a muscle relaxer or painkiller after a long day at the office. Once or twice, years ago, I let her have a pill or two, but I always made her promise that she wouldn't drink or drive after she took it. Like I said, accounting is stressful, and Jane deserved to unwind. I found out later that she was doing more than taking an occasional pill. Maybe six years ago, she completed the Wayfarer rehabilitation program for opioid addiction.

Jane and I really worked to grow the business together. That meant a lot of social gatherings with clients and potential clients. Along with the usual types of events—concerts, ball games, dinners, that kind of thing—I started hosting an annual Fourth of July party. It started as a social gathering with friends, but after a few years I started inviting clients too. Jane usually came to the party. It was like old times in college. She and I would make sure there was plenty of food and booze, most of which I was able to put on my expense report for work since it was a networking event.

42 Of course, I couldn't ask clients to give me their car keys, so I am pretty sure some people drove
43 home when they shouldn't have. I sort of just stopped keeping track of how much people were
44 drinking. I mean, at some point, we just have to trust adults to be adults, right?

45 After a few years, my Fourth of July parties became the centerpiece of my marketing efforts and
46 the highlight of my summer. Jane and I recruited a lot of clients at those parties. Many of our
47 clients came back year after year. They weren't all business though. At times the Fourth of July
48 party was more of a social event with a little marketing mixed in; it all depended on who made it
49 out to the house on any given night. Some of my fondest memories are from those parties and a
50 lot of those clients have since become good friends.

51 Over years of talking, I learned that a few of the clients who came to my Fourth of July parties had
52 chronic pain like mine. We compared notes on doctors, treatments, and medications. We talked
53 about our medications outside the Fourth of July parties too. I gave some of these people a couple
54 of my pills sometimes, just to try. These were responsible adults—some of whom I had known
55 for years—so there wasn't any harm with giving a few pills, just to try. They gave me a couple of
56 their pills to try too. It's not like we were trading drugs though. We were all responsible adults
57 with serious pain conditions who were trying to help each other. When we got something new that
58 worked for us, we gave it to our friends to see if it would help them manage their pain. Nothing
59 really helped me though. I also made sure I was safe before taking anything I got from anyone
60 who wasn't my doctor. I Googled drug interactions, overdose risks, and other safety risks before
61 trying any pills that my friends gave me. I assume they did the same; it is the responsible thing to
62 do before trying new drugs.

63 My back started to hurt more over the years too. I also developed a couple of other medical
64 conditions as I got older. With all the different medications I was taking, I started keeping pills in
65 numbered plastic baggies. It was just easier to organize the pills that way than try to keep the
66 bottles straight. I put each bottle's pills in a different baggie to conserve space. To prove they were
67 my pills, I kept the stamp of the bottle in marker on the baggie, just in case I was accused of
68 hoarding pills that aren't mine. I thought that pharmacies would record the specific manufacturing
69 stamp on every bottle, but I guess they don't. And I threw out the bottles long ago, I can't show
70 anyone that they came from my bottles of prescription medication. I kept the pill baggies in the
71 medicine cabinet in my master bathroom.

72 Jane always seemed interested in my conversations with our friends (and clients) about pain
73 medication. Like I said, Jane went through rehab for opioid addiction years ago. She probably got
74 a few pills from people she met at my Fourth of July parties over the years, but I never actually
75 saw anything like that. After Jane went through rehab, she still hung around when we were talking
76 about pain and pain management but was more reserved and never asked anyone for pills.

77 I hosted my usual party on July 4, 2023. Jane and her family came to the party. I guess that shows
78 you how times have changed. When I first started hosting this party, no one had any kids and now
79 most of the people who come bring their children for at least part of the day. As usual, some of
80 my guests and I started talking about our chronic pain and the latest and greatest strategies for
81 living with it. Jane was really weird about that conversation that night. What I mean is, she said
82 that she had been in pain since she pulled her back doing yard work a few weeks prior. I don't
83 remember Jane saying anything about her back hurting before July 4, 2023, but I do remember her

84 complaining about an oxycodone prescription she got in 2021 for a torn ligament. She was in a
85 lot of pain but was worried that she'd get addicted again. She only complained about that the one
86 time and I don't think that she had to take the oxycodone for very long that year.

87 Anyway, on July 4, 2023, Jane was talking a lot about oxycodone. I heard her ask a few of my
88 guests if they had ever taken oxycodone, if they liked how it affected them, and if they ever had
89 any side effects with oxycodone. I had to tell Jane to knock it off at one point, after one of the
90 guests complained. After all, we were all there to have fun and it was still, at least in part, a
91 marketing event. I couldn't have her making anyone uncomfortable. She was drinking pretty hard
92 that night too. I remember it was a pretty hot day and most of my guests were drinking water
93 instead of alcohol; not Jane though. She made at least three gin and tonics that day. I wouldn't
94 say she was drunk. She was just having a good time. Her spouse Walter was driving home, so I
95 wasn't too worried about her health or safety that night.

96 At some point on July 4, Jane stopped me and asked me if I had any oxycodone. This struck me
97 as really weird. She knew I took oxycodone for my back. She also had been so careful around
98 that kind of medication since getting out of rehab. I reminded her about all her hard work in getting
99 clean and how much she worried about the oxycodone prescription in 2021. She eventually
100 stopped asking, but told me that she had been under a lot of pressure lately at work and was looking
101 for anything to take the edge off, if just for one night. I think I might have told her to have another
102 drink or something, but I don't remember that. I remember being worried that she might be falling
103 back into bad habits.

104 The party wrapped up around 11:00 that night. That is pretty common with my Fourth of July
105 parties. We watch the fireworks around 10:00 and people start leaving shortly afterwards. Jane
106 was one of the last people to leave that night. That is pretty normal too. She liked to make sure
107 she saw all of her clients at some point during the party. Her spouse Walter drove them both home.
108 The last time I saw Jane alive was standing on my front porch as I said goodnight to her and Walter.
109 I had a scheduled vacation the next three days (Wednesday, Thursday and Friday) and did not go
110 back into the office that week at all.

111 Jane's spouse, Walter, called me the next day to tell me that Jane had died. I was devastated. I
112 knew her for over twenty years. We were close friends almost our entire adult lives. Then, I found
113 out on the news that she had died of a drug overdose of some kind. It made me think about all
114 those comments she made at the July 4 party about oxycodone. So, I Googled oxycodone overdose
115 and some other things related to that. I don't remember exactly what I looked up, probably some
116 stuff about drug interactions, since I take oxycodone and other medicines and I was worried that I
117 might be in danger too.

118 I went to Jane's funeral, but I don't think her family was too happy to see me. I sent flowers and
119 signed the card we passed around the office. I even made the firm hold Jane's office open for a
120 month before giving it out to some new junior partner, which was a pretty big deal where we work.
121 Of course, I made sure that her clients were taken care of too. The work has to go on.

122 I know some people are saying that Jane might have gotten the oxycodone from me. If she did,
123 they had to have been stolen from me. I didn't give her any pills on July 4. I never would've
124 given her any kind of addictive medication after everything she's been through. I never would've

125 done anything to hurt Jane. I was thrilled when she completed rehab, and I was completely
126 supportive of her new, healthier, lifestyle.

127 I honestly have no idea where Jane got the pills that she overdosed on. Maybe she was connected
128 with one of the other guests at my party and convinced that person to give her some pills. Maybe
129 she still had some pills leftover from her 2021 prescription and decided to take those. Maybe some
130 of her friends from their “party days” had some. I don’t want to believe it, but I suppose Jane
131 could have taken pills from my bathroom too. She had been in my house several times and knew
132 I had all kinds of pills for my back. She also went into my bathroom a few times on July 4. Like
133 I said, she had several drinks that night. If she really put her mind to it, I suppose she could’ve
134 stolen some pills from me. I just know I didn’t give Jane any pills.

135 I can’t verify that though. I actually don’t know how many oxycodone pills I had on July 4. I
136 don’t wait until the end of a prescription to fill the next one, because my back pain is extreme when
137 I don’t have any painkillers. I know that I had all of my baggies filled when the police came to
138 my house, but I also had a bottle of oxycodone with some pills leftover from a previous prescription
139 in it. Jane easily could have taken – stolen – some of those pills when they were in the bathroom.

140 In fact, I was worried that, if she stole pills out of my bathroom, other people could have taken
141 some too. After I learned that she died, I went to the hardware store, bought a small lockbox, and
142 moved my pills to that box. I paid cash for the lockbox because credit cards are just a scam and I
143 don’t ever use my bank card because criminals might steal my account information. I keep the
144 key to my new lockbox in my wallet, which is always on me. Like I said, I don’t know if Jane
145 stole oxycodone from me. If she did, however, I bought that lockbox to make sure that no one else
146 ever does it again.

147 I feel really bad about Jane. We were friends for a long time. I didn’t have anything to do with
148 her death.

149 Wherever she got those pills from, it wasn’t me.

150 Jesse White
151 Signature

October 24, 2023
DATE

Statement of Taylor Jenkins

My name is Taylor Jenkins. I'm 44 years old. I've known Jane Margolin for ages. We first met when I was in college, and we've been friends ever since. I was in school at UCLA, and Jane and I met at a party when she came out to L.A. to visit some relatives out there. We both grew up around here, and I always looked forward to seeing her when I came home for summer, even though she had a way better tan than I did. We drank beer together on occasion and smoked the occasional joint (which is totally legal now, go figure), but I don't remember Jane engaging in any real drug use. Jane's dad worked at the local airport directing air traffic or something like that, and had hammered into Jane that anything that impaired somebody's ability to operate a vehicle or stay on top of things was something to be avoided. It didn't seem to affect Jane's interest in drinking or smoking pot, but I had the sense it kept her from indulging in anything more serious than that. I ended up dropping out of school to pursue my passion for the outdoors. I moved to Colorado and worked ski patrol in the winter and waited tables in a restaurant the rest of the year. Let me tell you, those are two environments where there are lots of drugs around.

After a while living the life of a ski bum, I went back to school at UCLA and went into accounting, too, joining a CPA firm in Southern California. I heard Jane was doing the same thing back in New Mexico. I made a boatload of money, but I'm not exaggerating when I say that accounting is the most stressful thing I've ever done. Some nights I'd just stay awake worrying about work, even though I knew that not getting sleep would just make me less productive at work. Around tax time I'd be working 16–18-hour days, ordering food to the office, stress eating cookies. My colleagues called me the cookie monster. Come May, I'd have to exercise off 15 pounds. Some of my coworkers decided driving home wasn't worth it and slept under their desks. Others burned out and went back to doing whatever they did before. Others self-medicated.

On top of that, I had a family at home. It's hard balancing work and spending time with kids. I feel like I'm constantly disappointing everyone, never able to give anybody the time and attention I think they deserve. It can really take a toll, and some nights I just unwind on the couch with a nice Japanese whisky.

A couple of years ago I moved back to New Mexico. While I was excited about moving back and being closer to my parents, I was also really excited to spend time with Jane again. So when we got back, I gave her a call and set up some time to get together; we decided on having some drinks at a bar and then going to a concert. When the day finally came, she was late, which was peculiar. As we sat down, I noticed that she wasn't really herself, or at least not the Jane I thought I knew. She slammed back beer after beer at the bar, and it made me uneasy. I got really uneasy when she said, "You ain't seen nothing yet! Just wait 'til tonight!"

Despite the fact that Jane drove to the bar, I decided it was probably better if she left her car so I could drive to the concert. She sobered up in the car a little bit, but once we got there, she quickly started mingling, moving from one person to the next. I didn't really know what was going on, but when she came back it all made sense. She said she'd scored some drugs and really wanted me to do them with her. I reminded her who drove and said it might not be a great idea, but she popped

41 some pills and enjoyed the concert. She was definitely a little out of it, but never to the point where
42 I was concerned.

43 Shortly before the Fourth of July this year, Jane invited me to the last party I'd ever go to with her.
44 It was at her friend Jesse White's house. Well, Jane called it a house. I'd call it more of a mansion.
45 Gorgeous place, lots of patios. Infinity pool. Jesse was an accountant too. I think Jesse had some
46 success with finding really big-name clients and was doing very well financially. At this point,
47 Jesse was really working for fun. At least that's what it seemed like to me.

48 At the party, Jane started hitting the booze, as usual. I had a few beers and maybe a shot or two.
49 Jane's very social, and that night she was all over the place, happy as a clam. She was enjoying
50 the shrimp cocktail and made a joke about some sauce that spilled on her shirt. I wish I had that
51 kind of confidence. While I was talking to another guest, I saw Jane approach Jesse, and she started
52 hitting Jesse up for drugs. Jesse said s/he/they had some, but tried to talk Jane out of it; said it
53 wasn't a good idea, she was already kinda drunk, had sauce on her shirt, and maybe leave it alone.
54 Jesse walked away and Jane continued mingling, maybe asking for drugs, maybe not. She talked
55 to a few more guests and after talking to a guy who seemed to know Jesse well, made a beeline
56 for the bathroom. I figured Jane was going to clean her shirt, but when she came out, she still had
57 that stain. I guess I'm not really sure what she did in there.

58 Later that evening I went to the same bathroom Jane visited. I had to wash my hands and looked
59 around for some Tylenol to ease a headache I'd had. I didn't really find any, but I did see some
60 random pills scattered about on the counter. Almost every day since, I've wondered if those pills
61 killed my friend Jane. That was the last time I saw her. A couple days later I heard she was gone.
62 I miss her and I hope that one day I'll find out what happened.

63 Taylor Jenkins
64 Signature

October 24, 2023
DATE

Exhibit List

- Exhibit 1:** Lincoln County Sheriff Dept. Crime Scene Investigation Report
- Exhibit 2:** Wayfarer Recovery Residence Exit Form
- Exhibit 3:** Wayfarer Recovery Residence Critical Incident Form
- Exhibit 4:** Morgan Haozous Curriculum Vitae
- Exhibit 5:** Archived Facebook Wall of Jesse White
- Exhibit 5A:** Archived Facebook Wall of Jesse White - redacted
- Exhibit 6:** Medical Investigator Autopsy Report
- Exhibit 7:** Photo - victim's coffee table in living room
- Exhibit 8:** Photo - victim's bathroom cabinet
- Exhibit 9:** Photo - Defendant's lockbox with baggie
- Exhibit 10:** Photo - evidence table with all three substance containers

Exhibit 1**Crime Scene Investigation Report**


	<p>Investigator's Name: Officer Pat Sanchez</p> <p>Case No: 2023-0705</p> <p>Crime Scene Location: 22 Baker St. Lincoln, NM</p>
<p>Describe death scene. Did death take place where the body was discovered or was it moved?</p>	
<p>Arrived at scene at 12:15 p.m., July 5, 2023. Shown into Dec's living room. Dec lying on couch, face up, dressed in jeans, T-shirt, sock on left foot. Dec's face gray; white, foamy spittle around, over Dec mouth and nose. Approaching Dec, smell of alcohol around Dec; Dec cold to touch. Observed 5 beer bottles around the room, baggie containing suspected narcotics pills on coffee table in front of Dec. Baggie, contents collected in evidence. Baggie had numbers written on it. Preliminary search did not reveal illegal street narcotics. After the ambulance crew showed up, I observed paper under one of the beer bottles – Exit Form for Dec from Wayfarer Recovery, Incident Report from same place; collected as evidence.</p>	
<p>Describe secondary search site(s).</p>	
<p>Investigated Dec bedroom, bathroom for additional clues, to determine what suspects were involved. Bathroom revealed unlabeled prescription bottle; bottle and pills bagged, marked EB #2.</p>	
<p>Was there any attempt to alter the scene?</p>	
<p>Entry to crime scene provided by Dec spouse Walter Margolin. There did not appear to be any attempts to move the Dec or otherwise alter the crime scene prior to CSI Photogs.</p>	
<p>Is the case of death clearly apparent?</p>	
<p>Cause of apparent opioid drug overdose or combo of opioid drug overdose exacerbated by alcohol consumption. Baggie containing pills and unlabeled prescription bottles makes this a suspicious death; further investigation required to determine who supplied drugs.</p>	
<p>Results of Forensic Testing</p>	
<ul style="list-style-type: none"> -Evidence Bag #1: pills inside of plastic sandwich baggie field-tested positive for oxycodone -Evidence Bag #2: pills inside unlabeled pill bottle field-tested positive as oxycodone and acetaminophen -Evidence Bag #3: confirmed beer bottles contained beer -Evidence Bag #4: paper document from Wayfarer Recovery Residence 	
<p><u>/s/ Deputy Sheriff Pat Sanchez, Badge: 91202</u> Report finalized on August 3, 2023</p>	

Exhibit 2

**Wayfarer Recovery Residence****www.baddrugs.com****(575) 123-4567 office****Exit Form**

RESIDENT: Jane Margolin

DATE: August 15, 2017

LENGTH OF PARTICIPATION: 6 WEEKS

DATE STARTED: May 14, 2017

DATE COMPLETED: June 25, 2017

PARTICIPATION: None LOW MODERATE HIGH

REASON FOR TRANSITION:

- ☐ TRANSITIONED AS PLANNED
☐ STANDARD/RULE VIOLATION
☐ INCARCERATION

☐
☐
☐

AGAINST STAFF ADVICE
EARLY TRANSITION
OTHER: _____

SUMMARY OF PROGRESS: While Resident Jane Margolin states willingness and desire to get clean and reduce addiction to painkillers, Resident chooses to leave program early, stating need to get back to work. Resident is suspected to have continued opioid and alcohol use, though it has been difficult to assess due to Resident's low participation in activities and group therapy sessions.

We recommend that Resident continues in some type of therapy program, either at Wayfarer or some program that may be closer to Resident's home or place of work. Frankly, this counselor is not convinced of the Resident's sincerity to quit or reduce chemical use and expects that Resident will return to Rehab.

RESIDENT STATEMENT ABOUT PARTICIPATION IN RECOVERY RESIDENCE PROGRAM: I feel this program has really, really helped me and I don't think I will need additional rehab or therapy, but I'll find a program that fits my lifestyle once I'm out if you think I really should. But I'm really, really happy with my progress.

ONGOING RECOVERY PLAN: Resident has stated that she will seek out an outpatient program once released from the Wayfarer program. This Counselor recommends at least an additional year of outpatient therapeutic treatment.

COLLATERAL RESOURCE CONTACT INFORMATION: Wayfarer Outpatient Placement Services, 575-765-4321.

FORWARDING PHYSICAL AND EMAIL ADDRESS: [Redacted for data privacy reasons]

STAFF SIGNATURE:

/s/ James Morrison, Senior Rehab Counselor

RESIDENT SIGNATURE:

/s/ Jane Margolin

Exhibit 3

**Wayfarer Recovery Residence****www.baddrugs.com****(575) 123-4567 office****Critical Incident Form****Staff on Duty** James Morrison, Senior Rehab Counselor**Resident(s) Involved** Jane Margolin, Brandon Mayhew**Incident** Date June 7, 2017 Time: 8:37 p.m.
Location: sitting area outside of Crafts Building**Description of incident**

Residents Margolin, Mayhew, and visitor identified as Jesse White were reported to be drinking outside Crafts Building this evening. Residents, Guest had slight odor of alcohol about them, speech not clearly impeded. Resident JM responded in smart-alecky way and denied alcohol use. Other chemicals involved?

Resident explanation

JM stated that she had a bad summer cold and was taking Extra-Strength Cough Syrup that she purchased the day before. Said she knew cough syrup was a no-no, but she was really, really sick. Then coughed twice.

Witnesses

Residents CC and JJ, who were in Crafts Building, finishing a project.

Action to be taken

☒ Verbal warning
☐ Written warning

☐ Discharge
☐ Other _____

Evidence is not clear that Margolin, Mayhew and Guest using. Unable to access drug/alcohol testing equipment so unable to confirm at this time. Both residents warned about use and normal procedures when chem use suspected.

By signing this document, you acknowledge that you have read and understood the information contained herein.

STAFF SIGNATURE:

/s/ James Morrison, Senior Rehab Counselor

RESIDENT SIGNATURE:

/s/ Jane Margolin

Exhibit 4

**Curriculum Vitae
Morgan Haozous****Medical Physician
Board Certified Addiction Medicine Physician**

Business Address:
Lincoln County Medical Center
491 NM-165, Carrizozo, NM 87043
575-842-5662

EDUCATION:

Undergraduate: University of Arizona; B.S. (Biology), summa cum laude 1995
Medical School: University of New Mexico, School of Medicine, M.D., cum laude 1999
Medical Internship: Internal Medicine/Psychiatry, UNM Center for Health Science 2000
Residency: Addiction - UNM Teaching Hospital for Neuroscience & Human Behavior 2004

LICENSURE: State of New Mexico

BOARD CERTIFICATION: Addiction: American Board of Addiction Medicine

PROFESSIONAL EXPERIENCE:

06/2003-Present

Lincoln County Medical Center

SENIOR ATTENDING PHYSICIAN, OUTPATIENT ADDICTION MEDICINE CLINIC
ATTENDING ADDICTION SPECIALIST (with Privileges)

Treatment provider for patients seen at Lincoln County Medical Center who are plagued with chemical (alcohol, heroin, meth, cocaine, prescriptions) addictions as well as mood/anxiety disorders, ADHD, OCD, eating disorders, chronic pain, sleep disorders, physical/mental trauma and mind-body changes.

06/2011 – 06/2020

WAYFARER RESIDENTIAL TREATMENT CENTER

MEDICAL CONSULTANT & ADVISOR

Addiction Specialist and Co-Occurring Disorder specialty advisor at the Wayfarer Residential Treatment Center. Duties include detoxification, acute crisis stabilization, medication management, psychiatric diagnostic classification, addiction treatment, mental health treatment advisor and lecturing on cutting edge treatments in medicine.

PROFESSIONAL ACTIVITIES:

Chemical Health America (National Press Club - DC) - Speaker & Host

National Council on Opioid Addiction - Member

Drug Addiction Is a Real Problem Coalition - Medical Consultant & Advisor

Pfizer Pharmaceuticals - Speakers Bureau (Oxycontin)

American Society of Addiction Medicine – Member

HONORS AND SPECIAL AWARDS:

THOMAS CLARENCE ADDICTION MANUSCRIPT AWARD (2007)
For best manuscript on addiction and public policy

ALPHA ALPHA ALPHA NATIONAL HONORARY (1999)
Academic/Leadership-top 15% Medical School

JOURNAL ARTICLES & RESEARCH:

Holloway, M., et. al, Opioid Addictions: An Overview. *Journal of Narcotics and Drugs*, 24: 51-72, 2022

Kirk, R., Expert, R., Spock, McCoy; Exploring Facets of Personality & Escapism in Drug Addicts. *Journal of Social Work Practice in the Addictions* (2020)

Crosby, R., Stills, D., Nash, R., Young, J., Expert, R. Reliability, Validity, and Psychometric Development of Opioid Addicts. *Journal of Opioid Addiction*. 37: 1-27, 2016

EXPERT WITNESS CONSULTATION:

New Mexico District Court, 12th Judicial District; Opioid Addiction, Mental Health issues. Assessments; Research, Document Evaluation, Comprehensive Evaluation, Court Expert Witness Testifying, Evaluation of medical and psychological records.

New Mexico District Court, 2nd Judicial District: Mental Health Court. Case evaluations, research, reports, testifying on Psychotic Disorders, Substance Induced Psychosis, Malingering, PTSD, Chemical Dependency.

Exhibit 5

Archived Facebook Wall of Jesse White



Jane Margolin → Jesse White

July 5, 2023, 02:46 a.m.

Awesome patty tonight! Jesse its always a pleasure hanging with our residence chiropractor. Thanks a million for a wonderful night. And for parting gift! (Which I am happy to report works fantastic 😂😂) also sorry for the fight. Amends have surely been made!!



Like



Comment



Share



Write a comment...



Most relevant ▾

Exhibit 5A

Archived Facebook Wall of Jesse White

Post removed by Jesse White on July 5, 2023 02:49 a.m.

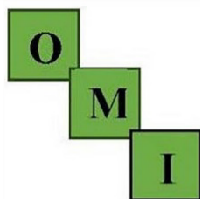


Jane Margolin → Jesse White

July 5, 2023, 02:46 a.m.

Awesome patty tonight! Jesse its always a pleasure hanging with our residence chiropractor. Thanks a million for a wonderful night. [REDACTED]



Exhibit 6**OFFICE OF THE MEDICAL INVESTIGATOR
AUTOPSY REPORT****ME NO: 2023-0705****CASE TITLE: MIXED ALCOHOL AND OXYCODONE TOXICITY****DECEASED:** Jane Margolin **SEX:** F **AGE:** 48**DATE AND HOUR OF DEATH:** Found 07-05-2023; 11:51 a.m.**DATE AND HOUR OF AUTOPSY:** 07-06-2023; 8:30 a.m.**PATHOLOGIST:** Kelly Fagin, M.D.**FINAL DIAGNOSES:**

48-year-old female with reported history of opioid use found unresponsive in the living room of her residence; pronounced dead at the scene by responding emergency medical services.

- I. Mixed alcohol and oxycodone toxicity (see also 'Toxicology,' below)
 - A. Oronasal foam cone
 - B. Pulmonary edema
 - C. Cerebral edema
 - D. Urinary retention
- II. No significant injuries identified
- III. No significant natural diseases identified
- IV. Toxicology
 - A. Blood (femoral) volatiles: ethanol 0.09 g/dL
 - B. Preliminary Blood (femoral) Screen: immunoassay positive for acetaminophen and oxycodone; mass spectrometry positive for oxycodone
 - C. Blood (femoral) opiate quantitation: oxycodone 0.40 mg/L; other opiates not detected

7/06/2023

Kelly Fagin, M.D.
Deputy Medical Investigator
/s/ Kelly Fagin, MD

Jane Margolin
2023-0705 Page 2

EXTERNAL EXAMINATION:

The body is that of a normally developed, mildly overweight, 5 foot 5-inch long, 170-pound female whose appearance is consistent with the reported age of 48 years. Lividity is posterior, dependent, and fixed in place. Rigor mortis is present in the extremities, relenting with moderate pressure. The temperature is that of the refrigeration unit.

The scalp is covered with medium length, brown hair in a normal distribution. The irides are brown, and the pupils are round and equal in diameter. There are no bulbar or palpebral conjunctival petechiae. The external auditory canals are free of blood. The ears are unremarkable. The nares are patent, and the lips are atraumatic. The nose, maxillae, and mandible are palpably stable. The teeth appear native and in good repair. Frothy white fluid emanates from the mouth and nares.

The neck is straight, and the trachea is midline. The chest is symmetric. The abdomen is flat. The genitalia are those of a normal adult female. Pubic hair is present in a normal distribution. The back, buttocks, and anus are unremarkable.

The upper and lower extremities are symmetric and free of clubbing, edema, or absence of digits. The nails of the hands are short and neatly trimmed. The nails of the toes are dirty.

CLOTHING AND PERSONAL EFFECTS:

The following clothing items are examined separate from the body at the start of postmortem examination:

- Size medium black and gray plaid pattern women's underwear
- Black denim jeans
- A blue cloth belt with white trim and a silver color buckle, threaded through the loops of the jeans
- A size large dark gray T-shirt
- A single ankle length black sock

MEDICAL INTERVENTION:

- Nasal trumpet, right nostril
- Pacer/defibrillator patches, right upper and left lateral chest

INTERNAL EXAMINATION:

HEAD: The soft tissues of the scalp are free of injury. The calvarium is intact, as is the dura mater beneath it. Clear cerebrospinal fluid surrounds the 1660 g brain, which has slightly widened and flattened gyri and narrowed sulci. Coronal sections demonstrate sharp demarcation between white

and gray matter, without hemorrhage or contusive injury. The ventricles are of normal size. The basal ganglia, brainstem, cerebellum, and arterial systems are free of injury or other abnormalities. There are no skull fractures. The atlanto-occipital joint is stable.

NECK: The anterior strap muscles of the neck are homogeneous and red brown, without hemorrhage. The thyroid cartilage and hyoid are intact. The larynx is lined by intact white mucosa. The thyroid is symmetric and red brown, without cystic or nodular change. The tongue is free of bite marks, hemorrhage, or other injuries.

BODY CAVITIES: The ribs, sternum, and vertebral bodies are visibly and palpably intact. No excess fluid is in the pleural, pericardial, or peritoneal cavities. The organs occupy their usual anatomic positions.

RESPIRATORY SYSTEM: The right and left lungs weigh 1040 and 950 g, respectively. The external surfaces are smooth and deep red- purple. The pulmonary parenchyma is diffusely congested and edematous. No mass lesions or areas of consolidation are present. The pulmonary vascular tree is free of thromboemboli. The tracheobronchial tree is filled with foamy edema fluid.

CARDIOVASCULAR SYSTEM: The 520 g heart is contained in an intact pericardial sac. The epicardial surface is smooth, with minimal fat investment. The coronary arteries are present in a normal distribution, with a left-dominant pattern. Cross sections of the vessels show no atherosclerotic stenoses and no occlusions. The myocardium is homogeneous, red-brown, and firm. The valve leaflets are thin and mobile. The walls of the left and right ventricles are 1.7 and 0.5 cm thick, respectively. The endocardium is smooth and glistening. The aorta gives rise to three intact and patent arch vessels. The renal and mesenteric vessels are unremarkable.

LIVER AND BILIARY SYSTEM: The 1495g liver has an intact, smooth capsule and a sharp anterior border. The parenchyma is tan- brown and congested, with the usual lobular architecture. No mass lesions or other abnormalities are seen. The gallbladder contains a minute amount of green-black bile and no stones. The mucosal surface is green and velvety. The extrahepatic biliary tree is patent.

SPLEEN: The 285 g spleen has a smooth, intact, red-purple capsule. The parenchyma is maroon and congested.

PANCREAS: The pancreas is firm and yellow tan, with the usual lobular architecture. No mass lesions or other abnormalities are seen.

ADRENALS: The right and left adrenal glands are symmetric, with bright yellow cortices and gray medullae. No masses or areas of hemorrhage are identified.

GENITOURINARY SYSTEM: The right and left kidneys weigh 165g and 150 g, respectively. The external surfaces are intact but slightly granular in texture. The cut surfaces are red-tan and congested, with uniformly thick cortices and sharp corticomedullary junctions. The pelves are unremarkable and the ureters are normal in course and caliber. White bladder mucosa overlies an intact bladder wall. The bladder contains approximately 250 cc of yellow urine.

GASTROINTESTINAL TRACT: The esophagus is intact and lined by smooth, gray-white mucosa. The stomach contains approximately 200 cc of light tan fluid with no apparent food-like

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or other foreign particulate matter. The gastric wall is intact. The duodenum, loops of small bowel, and colon are unremarkable. The appendix is present.

ADDITIONAL PROCEDURES:

- Documentary photographs are taken.
- Specimens retained for toxicologic testing: vitreous fluid, femoral blood, liver, urine, and gastric contents.
- Representative tissue biopsies are retained in formalin for block only preparation.
- The dissected organs are returned to the body.

MICROSCOPIC EXAMINATION:

Tissues are submitted for block processing only. No microscopic slides are requested.

Exhibit 7

Close-up picture containing oxycodone; found on victim's coffee table in living room.



Exhibit 8

Victim's bathroom cabinet, where bottle of Percocet was found.



Exhibit 9

Defendant's Lockbox with baggie of more oxycodone inside.

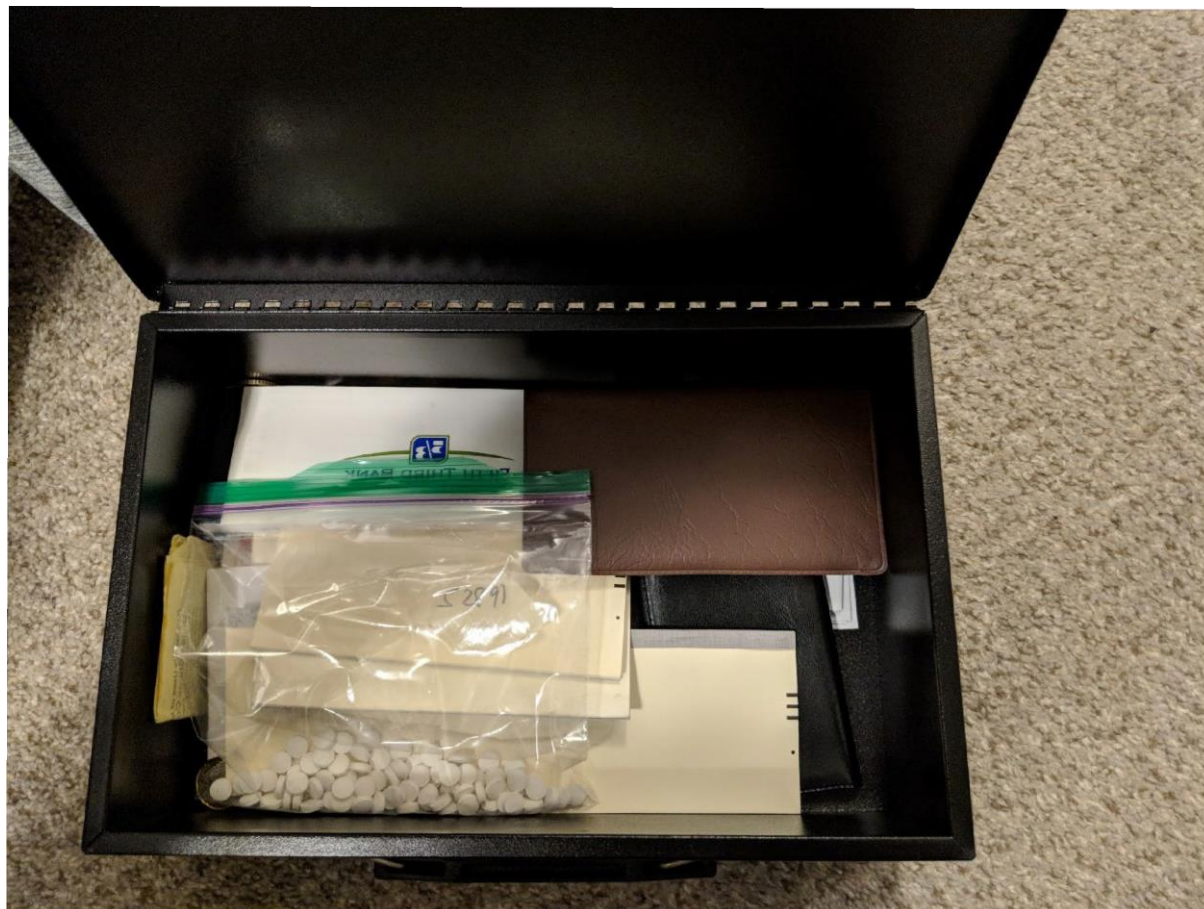


Exhibit 10

Evidence table with all three substance containers depicted.

