

**ATTORNEY GENERAL'S REPORT REGARDING THE FEBRUARY 24, 2007,
MURDER OF CARRIE HICKS IN ACWORTH, NEW HAMPSHIRE**

I. INTRODUCTION

On the morning of Saturday, February 24, 2007, the New Hampshire State Police were dispatched to a small, rural home at 146 Beryl Mountain Road in Acworth, New Hampshire. The call originated from John Smeltzer, a friend of the home's resident, Wayne Ring, age 51. Mr. Smeltzer had arrived at the home to find a scene of violence. Carrie Hicks, age 25, was deceased on a sofa in the living room, having sustained two gunshot wounds to her head. On another sofa, in the same room, lay Mr. Ring, who was alive but critically injured from a single gunshot wound to his head. Following a renewed investigation by the New Hampshire Cold Case Unit, the perpetrator of the death of Ms. Hicks has been identified as Wayne Ring.

The purpose of this report is to summarize the Attorney General's factual findings and legal conclusions regarding the culpability of Mr. Ring in the murder of Ms. Hicks. Mr. Ring died on May 26, 2012, at the age of 57. Therefore, even though the Attorney General has concluded that there would have been sufficient evidence to prosecute Mr. Ring for first degree murder in the death of Ms. Hicks, criminal charges cannot be brought. The findings and conclusions in this report are based upon various types of information gathered during the investigation, including police reports, photographs of the crime scene, a comprehensive autopsy, detailed forensic analysis of all physical evidence, numerous interviews with the friends, family, and acquaintances of both Ms. Hicks and Mr. Ring, and, most recently, a 2026 review of Ms. Hicks' autopsy report by Chief Medical Examiner Dr. Jennie Duval.

Based on a thorough review of all the facts and circumstances, this report concludes that the manner of death for Ms. Hicks was homicide. The evidence demonstrates that Mr. Ring shot

and killed Ms. Hicks before turning the gun on himself in an attempted suicide. Mr. Ring survived his initial injury but passed away in May of 2012. As the sole individual responsible for the homicide of Ms. Hicks is now deceased, the investigation is officially closed and this case is identified as “solved.”

II. SUMMARY OF THE FACTS

At approximately 10:30 a.m. on February 24, 2007, a 911 dispatcher received a call from a distressed John Smeltzer. Mr. Smeltzer reported that he had gone to his friend Mr. Ring’s house and found “a dead person and one that’s about to be dead.” He identified the individuals as Wayne Ring and Carrie Hicks.

New Hampshire State Troopers Danielle Cole and Sean Harrington were the first to arrive on the scene. They were met outside by Mr. Smeltzer, who was agitated and repeatedly urged them to go inside and help his friend. The troopers entered the residence where they immediately noted the smell of a dead body.

Upon entering the small, single-story residence, troopers were immediately in the main living area, which was cluttered and disheveled, with numerous empty beer cans strewn about the room. They observed a deceased female, later identified as Carrie Hicks, lying on her right side on a sofa to the left of the door. She was covered with a quilt from the neck down, with her head resting on a pillow. There was a significant amount of blood and bodily fluid around her head, which had saturated the pillow and the sofa cushions beneath it. On a separate sofa across the room, they observed a male, later identified as Wayne Ring, also covered by a blanket. His eyes were blackened and swollen shut, but he was breathing.

After clearing the remainder of the house, the troopers made contact with Mr. Ring. When asked what happened, Mr. Ring stated he didn’t remember but that he and Ms. Hicks had

been drinking the previous night and talking about suicide by shooting themselves. It wasn't until he was being escorted out that troopers observed what appeared to be a single gunshot wound to his right temple. Mr. Ring was subsequently escorted from the residence and transported to the Cheshire Medical Center where he received treatment for his injuries.

III. BACKGROUND

a) Carrie Hicks

Carrie Ann Hicks was born on February 1, 1982. By all accounts, she was a kind and caring person who struggled with mental illness.



Figure 1 - Enhanced photograph of Carrie Hicks

Friends and medical records indicate that she was diagnosed with bipolar disorder and manic depression, for which she had been prescribed medication. At the time of her death, Ms.

Hicks was reportedly living with her friend Brenda Lawrence but also occasionally staying in Mr. Ring's home at 146 Beryl Mountain Road in Acworth.¹

Her personal journal, recovered from the scene, provided a raw and unfiltered account of her battle with severe depression and her persistent suicidal ideation. In her journal entries dated from December 2006 to January 2007, she wrote about being in a "real bad depression" [sic] and stated that if she had a pistol, there was "no doubt in [her] mind" that she would have killed herself. She repeatedly expressed feelings of being a "burden to [her] friends and family." Her writings detail her plan to purchase a .22 pistol, which she ultimately did purchase from the Alstead Gun Shop and put on layaway in November 2006. On January 22, 2007, she wrote that she "put a 22 pistol on layaway and it's up on Feb 1st. I'm debating on getting it, because I've heard that a .22 won't kill you." This fear that a small-caliber weapon would not be lethal was a recurring theme in her writings.

On January 28, 2007, just three days after purchasing the gun, she wrote about a suicide attempt on the preceding Thursday night, January 25, 2007, stating that "I really felt like that was it. I felt so ready... Didn't care if it was a .22 or not at that point. Just want[ed] [it] done. I think it might work through the mouth. Don't Know cuz the fucker wouldn't chamber." This entry reveals not only a prior attempt but also her frustration and lack of familiarity with the weapon's operation.

b) Wayne Ring

Wayne Ring, born on May 16, 1955, was described by friends and family as a man plagued by alcoholism and depression.

¹ The relationship between Ms. Hicks and Mr. Ring was consistently described as a non-romantic, co-dependent one.

In the months leading up to the shooting, Mr. Ring was in a state of significant personal and financial distress. He had been fired from his job on the Langdon Town Crew for showing up to work intoxicated. He was facing foreclosure on his home at 146 Beryl Mountain Road in Acworth, and a plan for his son, Stephen Ring, to purchase the property to save it had recently fallen apart. His cousin, Matt Balla, recalled that during this time, Mr. Ring was acting strangely, trying to borrow large sums of money, and had repeatedly asked to borrow his firearms, making comments about how he was “not going to be here long.” Stephen recalled Mr. Ring making suicidal statements, including Mr. Ring telling him a month or so before the incident that he was going to “go away.” Stephen stated that his father’s alcoholism was the primary reason for his two divorces. Mr. Ring’s first ex-wife, R.J.², provided a detailed account of his violent and jealous behavior during their marriage, stating that he had choked her and was physically abusive. She stated that she believed he “ha[d] it in him to kill someone.” Additionally, Mr. Ring’s other son, William Ring, recalled Mr. Ring making suicidal comments over the years and stating that if he was going to kill himself, he would shoot himself in the head.

IV. THE INVESTIGATION

The New Hampshire State Police Major Crime Unit (“MCU”) began their investigation into Ms. Hicks’ homicide on the morning of February 24, 2007. Investigators examined the scene, collected and reviewed physical evidence, reviewed reports and records, consulted forensic experts, and spoke with witnesses, including witnesses who knew both Ms. Hicks and Mr. Ring. Pertinent information and evidence gathered during the investigation is summarized below:

²R.J.’s full name is withheld from this report in the interests of privacy due to the intimate nature of this discussion.

a) **The Scene**

Crime scene investigators from the New Hampshire State Police's Major Crime Unit processed the residence pursuant to a search warrant on February 24 and February 25, 2007. A significant amount of physical evidence was collected including the firearm believed to be used in the shootings, a Sig Sauer Mosquito .22 caliber semi-automatic pistol, which was found on the floor between the coffee table and the sofa where Mr. Ring was located. Three spent .22 caliber cartridge casings were recovered from various locations in the living room, along with the pistol's magazine which contained seven live rounds, and a full box of Winchester .22 caliber ammunition.



Figure 2 - Sig Sauer Mosquito .22 caliber semi-automatic pistol recovered from the scene

Biological evidence was extensive and included the heavily blood-saturated pillow from underneath Ms. Hicks' head, the bloodstained quilt that covered her body, and a bloodstained

washcloth found on a bureau near the bathroom. Investigators also took multiple swabs of bloodstains from the sofas, walls, a phone book, and the bathroom door. A Gunshot Residue (“GSR”) kit was used on both of Ms. Hicks’ hands, and the bloodstained clothing from both Ms. Hicks and Mr. Ring was collected. Other items seized included numerous empty beer cans from the living room, personal journals and writings belonging to Ms. Hicks, the blood-spattered phone book, and a brown jacket with blood spatter that had been draped over the back of the couch where Ms. Hicks was found.

b) Witness Statements

i. Wayne Ring

On the night of the shooting, Mr. Ring called John Smeltzer around 8:30 p.m. and asked him to come over early the next morning because he “wanted to talk[,]” which Mr. Smeltzer found highly unusual. This appears to be Mr. Ring arranging for the discovery of the scene. After the event, his story changed depending on who he was talking to. Mr. Ring's first words to John Smeltzer on February 24, 2007, after being found were that “me and Carrie were talking about committing suicide last night.” However, he told his daughter Jennifer Ring that “Carrie shot him, then shot herself,” and told others he had no memory at all. This inconsistency undermines his credibility.³

While observing his medical treatment, Trooper Anger heard Mr. Ring make several statements. When asked if he lived alone, Mr. Ring replied, “I do now!” When asked what he meant, he stated, “Carrie killed herself!” Mr. Ring also reported that he had been drinking the previous evening and was having thoughts of suicide. When told by medical staff that he had a

³ In fact, Mr. Ring’s behavior after the shooting highlights his selective memory, or selective amnesia. His daughter-in-law, Donalin Ring, found it odd that at the hospital, Mr. Ring could not recall the shooting itself, but could recall other specific details from that day, such as how Ms. Hicks’ car was parked and that he had washed his face after being shot. This supports the theory that his memory loss was self-serving.

bullet lodged in his head, Mr. Ring seemed surprised and asked, “I got a bullet in my head? Where did it go in?”

With respect to his suicidal ideation, friends and family confirmed that Mr. Ring often spoke of suicide. His son, Stephen Ring, stated it was “not unusual for his father to sound suicidal” and that these comments were often attempts, in his opinion, to gain sympathy. Mr. Ring’s daughter, Holly Gragen, stated her father would make suicidal comments when drunk, to the effect that he had “no one to love him and nothing to live for.” His friend John Smeltzer told police that Mr. Ring had been talking about killing himself “for the last year.” Mr. Ring himself told Trooper Anger at the hospital that on the night of the incident, he was “having thoughts of suicide.”

ii. Carrie Hicks

In an interview on February 25, 2007, Amy Westney told investigators that Ms. Hicks had spoken to her about an arrangement with Mr. Ring where “he could shoot her first and then he could shoot himself and so it would be a double suicide.” On February 24, 2007, Brenda Lawrence told police that Ms. Hicks “had also talked about having Mr. Ring shoot her and then he would shoot himself as he is bipolar and suicidal as well.” Ms. Lawrence also told investigators that Ms. Hicks had specifically instructed Mr. Ring to “make sure he shot her twice, not just once, because Hicks didn’t want to be left alive and shot in the head.”

c) Autopsy Results

On February 26, 2007, Chief Medical Examiner Dr. Thomas A. Andrew performed an autopsy on Ms. Hicks. The external examination noted that Ms. Hicks was a well-developed, 25-year-old female, 69 inches in length and weighing 166 pounds. Her body was received clad in a blood-soaked gray hooded sweatshirt, a green T-shirt, blue jeans, and grey socks. Toxicology

results showed a blood alcohol concentration of 33 mg/dL, equivalent to .033% BAC, well below the legal limit to operate a motor vehicle lawfully in New Hampshire, and not indicative of impairment by alcohol. Dr. Andrew determined the cause of death to be “two gunshot wounds to the head with perforation of the skull and brain.” His final report, dated December 31, 2007, ruled the manner of death as Homicide.⁴

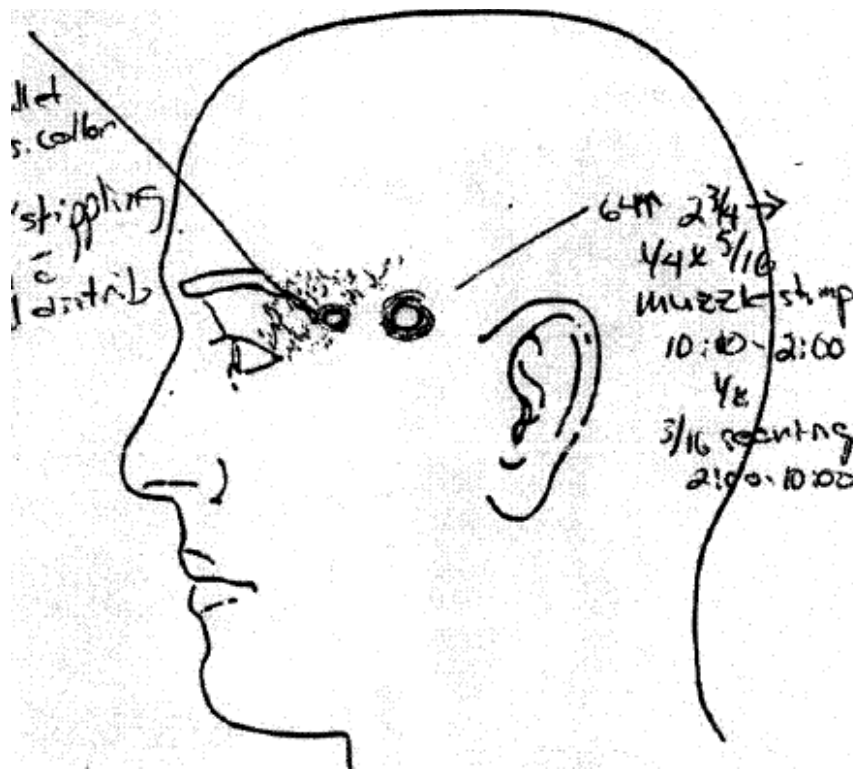


Figure 3 - Carrie Hicks, Autopsy Diagram showing gun shot entry wounds

The examination detailed two distinct entrance wounds to Ms. Hicks’ left temple area. One was described as a contact entrance wound, with an apparent muzzle stamp and searing on

⁴ Dr. Thomas Andrew determined that Ms. Hicks’ cause of death was the combination of both shots. He did not distinguish between the two wounds to say that one was fatal and the other was not. His official cause of death is listed as: “[t]wo gunshot wounds to the head with perforation of the skull and brain.” This indicates that Dr. Andrew considered the totality of the two severe, wounds as the cause of death. The 2026 review by Chief Medical Examiner Dr. Jennie Duval supports this, as she noted that “[e]ither shot could have been fatal,” which reinforces the idea that both were so life threatening that distinguishing a single “fatal” shot from the other is a moot point; both were likely unsurvivable injuries and their combined effect caused Ms. Hicks’ death.

the skin.⁵ The bullet traveled in the general direction of left to right. The bullet from this wound perforated Ms. Hicks' left eye's globe, entered her cranium through the roof of her left orbit, perforated the inferior frontal lobes and right temporal lobe of her brain, struck the right side of her skull, and ricocheted back into her right temporal lobe where it was recovered. The other wound, located just in front of the first (i.e., closer to Ms. Hicks' eye), was an intermediate-range entrance wound, surrounded by fine stippling, or gunpowder tattooing, consistent with a muzzle-to-target distance of between six (6) and fifteen (15) inches. This bullet also perforated her left eye's globe, entered her cranium through the roof of her left orbit, perforated the brain and exited the right side of her skull coming to rest in the subcutaneous tissues above her right ear.

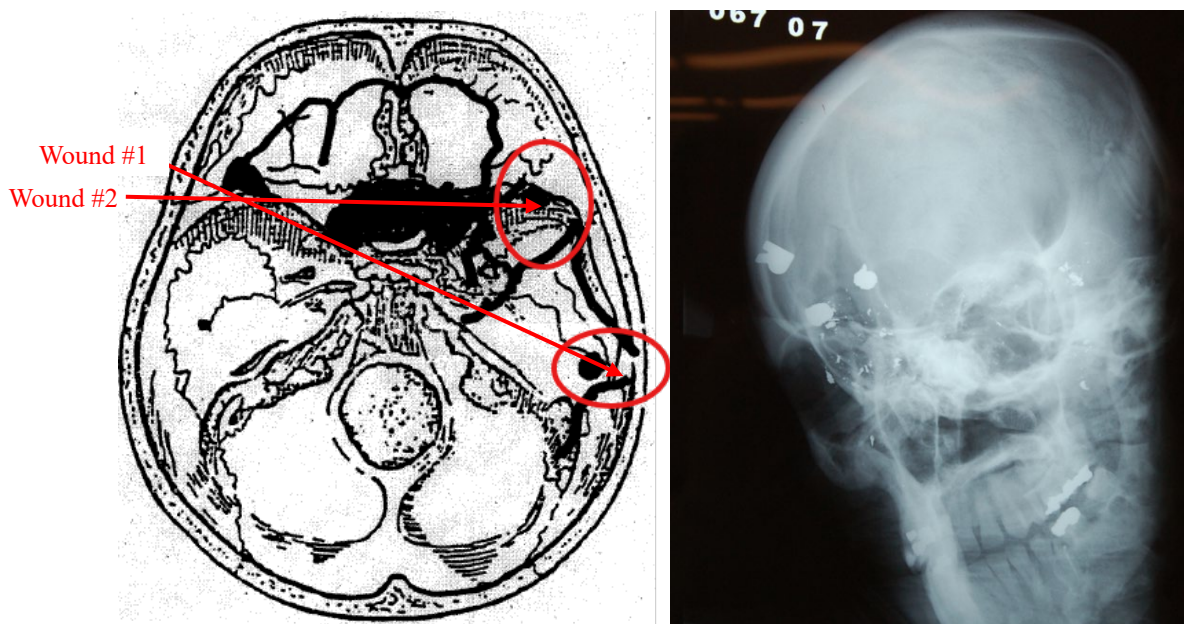


Figure 4 - Carrie Hicks (Right) Autopsy x-ray image; (Left) Autopsy Diagram depicting bullet location – both bullets perforated Ms. Hicks' brain: one bullet traveled through her brain and exited her cranium and was recovered from the subcutaneous tissues just above her right ear another bullet traveled through her brain from left to right and was recovered from the right temporal lobe of her brain.

⁵ Dr. Andrew did not opine on which gunshot wound occurred first. The descriptors “first wound” and “second wound” are used in this section to distinguish between the two wounds. As discussed *infra*, shooting reconstruction expert, Alexander Jason, conducted a comprehensive review of bloodstain patterns and crime scene evidence, and concluded that the contact wound occurred first.

d) Injuries to Wayne Ring

Mr. Ring was transported to Cheshire Medical Center for treatment. At the hospital, Trooper Michael Anger observed the gunshot wound to Mr. Ring's right temple, which appeared cauterized and was not bleeding.

It was determined that Mr. Ring sustained a single contact gunshot wound to his right temple. The bullet entered his skull near his right temple, traveled a short distance through his brain and lodged behind his right eye. His injury was not immediately fatal, as he was found alive, breathing, and able to speak.

e) Differences Between the Wounds Suffered by Carrie Hicks and Wayne Ring

The wounds sustained by Ms. Hicks and Mr. Ring were fundamentally different in number, type, and severity. Ms. Hicks sustained two separate gunshot wounds, both to her left temple. The first was a contact wound⁶, and the second was an intermediate-range wound fired from a distance of six to fifteen inches.⁷ Both bullets entered her skull, traversed her brain from left to right, and caused incapacitating, and ultimately fatal injuries. By contrast, Mr. Ring suffered from a single, penetrating wound. The bullet that caused that wound was recovered from behind Mr. Ring's eye, indicating that it did not pass through his brain and cause the type of damage to his brain that Ms. Hicks suffered.

⁶ The first gunshot wound (contact): This entered through the left temple where "[t]he bullet perforated the left eye's globe, entered the cranium through the roof of the left orbit, and traveled from left to right with minimal front to back or vertical deviation. A moderately deformed, small-caliber bullet was recovered from the right temporal lobe." In layman's terms, the first bullet was fired with the muzzle touching her left temple. It went through her left eyeball, entered her skull through the bone at the top of her eye socket, and traveled in a mostly straight line across the inside of her head to the right side. The bullet struck the right side of her skull then ricocheted backward and was recovered from the right temporal lobe. The bullet was found lodged in the part of her brain located on the right side, near her right temple.

⁷ The second gunshot wound (the intermediate range wound): This entered through her left temple also "perforated the left eye's globe, entered and exited the brain and cranium, and was recovered from the subcutaneous tissues above the right ear. Its path was directed from left to right and front to back with minimal vertical deviation." In layman's terms, the second bullet was fired from a distance of 6 to 15 inches from her left temple. It also went through her left eyeball and traversed her skull and brain. It traveled in a straight line across the inside of her head to the right side, stopping just under the skin above her right ear.

f) Forensic Evidence

i. Cartridge Casings

Forensic analysis of the collected evidence provided a cohesive picture of the events. A firearms examination report dated June 27, 2007, confirmed that the three spent cartridge casings found at the scene were fired from the Sig Sauer pistol recovered from the floor. One of the bullets recovered from Ms. Hicks' head was positively identified as having been fired from the same pistol, while the other bullet from Ms. Hicks and the bullet from Mr. Ring lacked sufficient individual characteristics for a positive match, but were consistent with having been fired from that pistol. Records from the Alstead Gun Shop confirmed that Ms. Hicks had purchased this specific pistol on January 25, 2007.

ii. Gunshot Residue

Gunshot residue ("GSR") primarily consists of particles expelled from the bullet, primer, and firearm's internal components during discharge. These particles, which may be transferred to objects located in close proximity to the discharge, typically include lead, barium, and antimony. An analysis of the GSR kit used on Ms. Hicks' hands on February 24, 2007, found no particles "characteristic" of GSR on her left hand.

However, numerous particles "consistent" with GSR were found, with the highest concentration on Ms. Hicks' right hand.⁸ A follow-up analysis revealed that the Winchester .22 caliber ammunition used in the incident did not contain antimony, which explained the absence of the characteristic three-component particles. The presence of numerous two-component lead-barium particles on Ms. Hicks' hands is therefore strong evidence that her hands were in close proximity to the firearm when it was discharged.

⁸ Characteristic particles of GSR are lead, barium, and antimony. When multiple components of GSR are present, the findings are more characteristic for GSR; when one or two are present, the findings are consistent with GSR.

g) Shooting Sequence Reconstruction

An independent analysis by Certified Senior Crime Scene Analyst Alexander Jason (“Mr. Jason”) provided a detailed reconstruction of the shooting sequence. His role was to interpret the bloodstains, ballistics, and positioning. Mr. Jason noted in his report that a self-inflicted shot to the left temple by a right-handed person⁹ would be “difficult and awkward, but not impossible.”

In reviewing the bloodstains, ballistics, and positioning, Mr. Jason concluded that the evidence was consistent with a two-stage event. He first found that the extensive saturation and transfer bloodstains on the pillow located on the couch where Ms. Hicks was found indicated that it was being held up against Ms. Hicks’ face when the first shot was fired. Based on his review of these transfer bloodstains and blood spatter from the crime scene, Mr. Jason concluded that this first shot would have been the contact wound that Ms. Hicks suffered.

⁹ Carrie Hicks is believed to be right-handed. Both her supervisor, George Ellis, and her boyfriend, Patrick Dupell, stated they believed she was right-handed.



Figure 5- Blood-saturated pillow recovered from the scene

The evidence then showed that the pillow was in a flat, non-elevated position when the second shot was fired from a distance of six to fifteen inches, as a raised pillow would have blocked the fine blood spatter that was projected from Ms. Hicks' wounds onto her own left sleeve. The analysis also identified several pieces of evidence indicating movement between the two shots, including a "void" in a saturation stain on her sweatshirt and inconsistent transfer stains on a quilt covering her.

As discussed supra, forensic analysis revealed a high concentration of GSR on Ms. Hicks' right hand. In isolation, this finding would strongly suggest her right hand was either holding the weapon or was positioned very near it when it was fired. However, a conflicting and crucial piece of evidence was noted by Mr. Jason. His report pointed to a complete lack of blood spatter on that same right hand. He stated, "...the lack of any blood spatter on her right hand is not consistent with that hand being near the entry wounds when one or two shots were fired into

her head.” The key to resolving this contradiction lay with a third piece of evidence: a blood-saturated pillow was found at the scene. Mr. Jason’s reconstruction concluded that the extensive saturation and transfer stains indicated the pillow was being held directly against Ms. Hicks’ face when the first contact shot was fired.

These facts, when viewed together, pointed to a single conclusion that reconciled all the evidence. The investigation determined that Ms. Hicks had raised her right hand, holding the pillow against the right side of her head. This action perfectly explained both the presence of GSR, as particles from the muzzle blast passed through the pillow and onto her hand, and the complete absence of blood, as the pillow absorbed the back-spatter.



Figure 6 - Photograph demonstration of the position the pillow was in at the time of the first shot based on the forensic evidence.

The final conclusion of homicide is reached by synthesizing Mr. Jason's expert's findings with all the other evidence that falls outside his specific purview. Here Mr. Jason, a crime scene reconstructionist, did not factor in witness statements. The multiple, consistent accounts of a murder-suicide pact and Ms. Hick's "shoot me twice" comment provide the context that the physical evidence alone cannot. Mr. Jason stated that the physical scene evidence, in isolation, could not definitively prove who pulled the trigger. However, when his analysis, which casts serious doubt on Ms. Hicks' having committed suicide, is combined with the testimonial evidence and the conclusions reached by Chief Medical Examiner Dr. Jennie Duval in her 2026 review of Ms. Hicks' autopsy report (see Section V infra), the conclusion of homicide is reached beyond a reasonable doubt.

V. 2026 Cold Case Review

In early 2026, Chief Medical Examiner Dr. Jennie Duval reviewed Ms. Hicks' autopsy report. Dr. Duval's assessment was based solely on the original autopsy file and did not include a review of the 2010 shooting incident reconstruction report, nor the extensive witness testimony gathered by police.

From her review of the pathological evidence alone, Dr. Duval concluded that she could not determine the order of the shots based on the descriptions of the wounds. Without a definitive shot sequence, Dr. Duval stated that she could not disprove several plausible alternative scenarios; however, based on her review she supported Dr. Andrew's finding of homicide as the manner of Ms. Hicks' death.

As discussed supra, that opinion is strengthened by Mr. Jason's 2010 report, which was based on a comprehensive review of bloodstain patterns and crime scene evidence, which

concluded that the contact wound was fired first, while the pillow was held against Ms. Hicks' face, and the intermediate range shot was fired second.

When Dr. Duval's medical opinion is synthesized with the reconstruction expert's timeline and the extensive testimonial evidence, the conclusion of the investigation is ascertainable.

The key to understanding why Carrie Hicks could not have fired both shots lay in Dr. Duval's interpretation of the first (contact) shot.

Dr. Duval explained that in the specific case of a contact gunshot wound to the head, the injury is typically more catastrophic than intermediate or distant range wounds, all other factors being equal. The muzzle of the gun, pressed against the skull, injects a high-pressure blast of hot, expanding gases directly into the cranial vault. This creates a force that can damage brain tissue far beyond the bullet track and is therefore more likely to cause immediate incapacitation.

Dr. Duval's medical opinion provided the "why," but it was the work of shooting reconstruction expert Alexander Jason that provided the "when." After his analysis of the bloodstain evidence, Mr. Jason established the sequence of the shots.

According to Dr. Duval, the contact wound would likely have caused immediate incapacitation. Therefore, it would have been medically and physically impossible for Ms. Hicks to have retained the consciousness or motor control needed to reposition the weapon and fire the second, more distant shot.

Dr. Duval's medical expertise, combined with the forensic reconstruction, provided the final piece of the puzzle. It confirmed that the first (contact) shot was so neurologically devastating that no subsequent voluntary action could have occurred, cementing the conclusion that the second shot must have been fired by someone else.

The blood spatter analysis and scene reconstruction show that Ms. Hicks could not have fired the first shot. The position of blood spatter on the couch where Ms. Hicks was found and her clothing indicated she was lying down with her arms in the position they were in when she was found by the police. Only Ms. Hicks' left arm was exposed and in a position which potentially could have fired the gun as her right arm was underneath her body. The gunshots were on the left side of her head. Therefore, Ms. Hicks would have had to have used her left hand to inflict the gunshots. However, the voids in the blood spatter on her sweatshirt are consistent with the position of Ms. Hicks' left arm at the time she was found dead, which indicates that her left arm was not raised to fire a shot.

VI. APPLICABLE LAW AND LEGAL STANDARDS

A. Relevant Statutes

In 2007, New Hampshire's homicide laws were set forth in RSA Chapter 630 as they are today. At that time, "First Degree Murder" provided, in relevant part, that:

"I. A person is guilty of murder in the first degree if he:

(a) Purposely causes the death of another;"

II. For the purpose of RSA 630:1-a, I(a), "purposely" shall mean that the actor's conscious object is the death of another, and that his act or acts in furtherance of that object were deliberate and premeditated.

RSA 630:1-a

In 2007, New Hampshire homicide laws also included "Causing or Aiding Suicide" which provided, in relevant part, that:

"I. A person is guilty of causing or aiding suicide if he purposely aids or solicits another to commit suicide.

II. Causing or aiding suicide is a class B felony if the actor's conduct causes such suicide or an attempted suicide. Otherwise, it is a misdemeanor."

RSA 630:4

B. Analysis

The investigation considered all possible manners of death. However, the evidence allowed investigators to systematically rule out all scenarios other than a homicide-suicide perpetrated by Mr. Ring.

i. Suicide by Carrie Hicks

The theory of suicide was the initial consideration, given Ms. Hicks' documented history of depression, her journal entries, and the fact that she had purchased the weapon used in her death. However, this theory was definitively refuted by physical and circumstantial evidence. The most conclusive piece of evidence is the nature of the two gunshot wounds. The autopsy confirmed two separate, penetrating gunshot wounds to Ms. Hicks' head, both of which traversed the brain. While there are documented, albeit extremely rare, cases of suicide involving two gunshots to the head,¹⁰ the conclusion in this case is based on the specific nature of the wounds Ms. Hicks sustained. Specifically, the first (contact) wound entered her left temple, ruptured her left eye, perforated both cerebral hemispheres, ricocheted off the right side of her skull, and came to rest in her right temporal lobe. As discussed supra, Dr. Duval noted that a contact wound to the head, such as the one Ms. Hicks suffered from, would create an explosive pressure wave causing widespread, devastating trauma, and leading to immediate incapacitation.

It is extremely unlikely, both medically and practically, for an individual to sustain such a devastating first wound and then retain the consciousness, physical coordination, and purposeful will required to reposition the firearm and fire a second, equally devastating shot into their own head almost directly in line with the first shot, but at distance away from the head.

¹⁰ See, e.g., Töro, et al., *Am J Forensic Med Pathol*, 2019)

This conclusion is strengthened by the fact that the two wounds were not inflicted in the same manner or at the same time. The autopsy determined one was a contact wound, and the other was an intermediate-range wound fired from a distance of six to fifteen inches. The shooting incident reconstruction expert determined that the contact shot occurred first, while the pillow was held against Ms. Hicks' face, and the intermediate range shot occurred second, after the pillow was no longer in a raised position. For Ms. Hicks to have shot herself twice, she would have had to fire the first catastrophic contact wound, then move the pistol several inches away from her head while critically incapacitated, re-aim, and pull the trigger again. This sequence of complex, voluntary actions, while possible, is medically implausible after the first (contact) wound.

Furthermore, the Sig Sauer pistol was not found in a location consistent with Ms. Hicks having used it on herself. It was located on the floor between the coffee table and the couch where Mr. Ring was found. It is highly improbable that the weapon would have landed in this location had it been dropped by Ms. Hicks from the couch where her body was found. Its position is far more consistent with it being dropped by Mr. Ring after he shot himself.

Finally, as discussed supra, the blood spatter analysis and scene reconstruction show that Ms. Hicks could not have fired the first shot based on the voids in the blood spatter on her sweatshirt.

ii. Third-Party Intruder

The theory of a third party being responsible for the shootings was also considered and dismissed. There were no signs of forced entry into the residence. Nothing of value appeared to have been taken, ruling out a robbery motive. Most significantly, the presence of Mr. Ring at the

scene with a self-inflicted gunshot wound, and his various statements that followed, makes the involvement of an unknown third party highly improbable.

iii. Homicide by Wayne Ring

While suicide can be ruled out, a strong affirmative case for homicide by Mr. Ring is apparent from the cumulative evidence. Witnesses didn't just report a vague agreement to die together; the plan, as described by Ms. Hicks to her friends, was explicitly a murder-suicide. Amy Westney stated that Ms. Hicks told her the plan was that "he could shoot her first and then he could shoot himself." Brenda Lawrence reported the same, stating Ms. Hicks had "talked about having Wayne shoot her and then he would shoot himself." Crucially, Brenda Lawrence also told police that Ms. Hicks had specifically told Mr. Ring to make sure he shot her twice, not just once, because she did not want to be left alive.

This is an important distinction as the "suicide pact" was not a plan for two people to kill themselves; it was an agreement for one person to kill the other before the person themselves committed suicide. This provides a direct framework for Mr. Ring being the shooter in a scenario they had both discussed, and explains the presence of two gunshot wounds, which is what witnesses said Ms. Hicks discussed with Mr. Ring.

The physical evidence also points to Mr. Ring as the shooter. The evidence supports that Mr. Ring approached Ms. Hicks with a loaded pistol, pressed the muzzle against her left temple while she raised the pillow she was using, and he fired the first shot, which was immediately incapacitating. He then moved some distance away and fired a second shot at Ms. Hicks' left temple while the muzzle of the pistol was six to fifteen inches from Ms. Hicks' left temple.

The question of whether Ms. Hicks could have shot herself with her right hand was a key forensic consideration. The shooting reconstruction expert concluded that while it would have

been “difficult and awkward,” it could not be ruled out as completely impossible. However, the shooting reconstruction expert also concluded that the contact wound to Ms. Hicks occurred first. This conclusion, coupled with Dr. Duval’s 2026 conclusion that the contact wound would have caused widespread brain injury leading to immediate incapacitation, conclusively establishes that Mr. Ring was the shooter. This conclusion is further supported by the location of the weapon, which was found near Wayne Ring, not Carrie Hicks.

These actions by Mr. Ring demonstrate a clear conscious objective to cause Ms. Hicks’ death. Furthermore, the “murder-suicide pact” itself, along with Ms. Hicks’ instruction to “shoot [her] twice,” and Mr. Ring’s unusual phone call arranging for the discovery of the scene all indicate a pre-existing, deliberate plan. The act of firing a second shot after the first further underscores his deliberate intent to ensure Ms. Hicks’ death, fulfilling the prior instruction. Mr. Ring’s premeditation is evident from the planning and the execution of the shooting and his steps to arrange the discovery.

Additionally, while Causing or Aiding in Suicide, RSA 630:4, has been referenced here, based on the evidence and all reasonable inferences from the evidence, it is not an appropriate charge for Mr. Ring. A person is guilty of Causing or Aiding in Suicide if they “purposely aid[] or solicit[] another to commit suicide.” As referenced supra, the testimonial evidence reflects that, prior to her death, Ms. Hicks suffered from depression and documented her thoughts of suicide. Witnesses reported that Ms. Hicks and Mr. Ring openly discussed suicide and a “pact” they formed. Even assuming arguendo, that Ms. Hicks’ consent was unwavering, where she actively desired and participated in her shooting, New Hampshire draws a clear distinction between providing means for self-harm or aiding suicide, and directly causing another's death, or murder.

Because Mr. Ring fired the fatal shots, even with unwavering consent, he moved beyond merely aiding. While the “pact” and Ms. Hicks’ instruction to “shoot [her] twice” could be presented as solicitation and aid, Mr. Ring’s direct act of shooting Ms. Hicks is murder under New Hampshire law, as direct causation of death is distinguished from merely aiding suicide. Wayne Ring’s actions towards Carrie Hicks constitute First Degree Murder under RSA 630:1-a. The evidence demonstrates beyond a reasonable doubt that Mr. Ring “purposely caused the death of another” and that his actions were “deliberate and premeditated.” The planning, such as the pre-arranged phone call to John Smeltzer and the adherence to the “shoot me twice” instruction underscore the calculated nature of his actions.

The forensic reports and witness statements conclude that Carrie Hicks was murdered by Wayne Ring, not that she committed suicide. This is consistent with all of the forensic evidence. Under New Hampshire law consent is not a valid defense when serious bodily harm, such as death, results.¹¹

¹¹ Consent as a defense in criminal law is outlined in RSA 626:6. Generally, the consent of the victim can serve as a defense if it “negatives an element of the offense or precludes the harm sought to be prevented by the law defining the offense.” This principle applies when a specific crime requires a lack of consent as an element (*e.g.*, sexual assault) or when the law aims to prevent a harm that the victim willingly accepts in a lawful context. However, there are significant limitations to the application of consent as a defense, particularly in cases involving bodily harm. Death, by its very nature, is the most serious form of bodily harm. Therefore, direct consent to be killed cannot be a valid defense against a murder charge in New Hampshire. This statutory provision establishes that one cannot legally consent to one’s own murder, regardless of any prior agreement or pact. Because Mr. Ring directly caused Carrie Hicks’ death by shooting her, his actions fall squarely into the category of homicide, irrespective of any prior consent. Ms. Hicks’ struggle with severe depression and suicidal ideation, coupled with Mr. Ring’s own suicidal state and history of domestic violence, introduces a critical dimension to the assessment of her capacity to consent. While RSA 626:6 III lists specific conditions like “insanity, intoxication or use of drugs” that invalidate consent, it also includes individuals who are ‘unable . . . to exercise a reasonable judgment as to the harm involved’ and where this inability is “known by the actor.” Given Ms. Hicks’ severe depression and her level of intoxication prior to her murder, her capacity to provide “reasonable judgment” regarding the “harm involved” of being shot twice was compromised. This is particularly relevant because Mr. Ring was aware of her psychological vulnerabilities. This perspective suggests that the “suicide pact” itself may not represent truly free and informed consent.

VII. CONCLUSION

The evidence derived from this investigation, and all of the reasonable inferences that can be taken from that evidence, establishes beyond a reasonable doubt that Wayne Ring shot Carrie Hicks. While Ms. Hicks was deeply troubled and suicidal, the physical evidence makes it impossible for her to have inflicted the two gunshot wounds to her head. The combination of the nature of these wounds, the location of the weapon, and the extensive witness testimony about a “murder-suicide pact” points conclusively to Mr. Ring as the individual who shot and killed her before attempting to take his own life.

Because Mr. Ring is deceased, this case cannot be resolved with criminal charges. Therefore, the Attorney General has concluded, based upon the evidence, that the case will be closed and identified as solved.