

IN THE EAST MESA JP COURT  
STATE OF ARIZONA, COUNTY OF MARICOPA

\*\*\*\*FINAL\*\*\*\*

RELEASE QUESTIONNAIRE

Notice: Unless a specific Form IV is sealed or ordered redacted by the Court, all Form IVs are public records of the Court or Clerk at the time they are provided to the Court and will be released in their entirety upon request.

DEFENDANT'S NAME TRENT SANFORD WALKER DOB [REDACTED] BOOKING NO. T369367  
ALIAS(ES) \_\_\_\_\_ CASE NO. PF2017124778001

A. GENERAL INFORMATION

Charges  
13 Cts. 13-1204A2 AGG ASLT-DEADLY WPN/DANG INST F5  
5 Cts. 13-1602A CRIMINAL DAMAGE F6  
5 Cts. 28-662A2 FAIL TO STAY/ACCID/ATTEND VEH M2  
1 Cts. 28-1381A3 DUI/DRUGS/METABOLITE M1

Pursuant to A.R.S. §41-1750 ten-print fingerprints were taken of the arrested person?  Yes  No  
If yes, PCN = \_\_\_\_\_

Pursuant to A.R.S. §13-610 one or more of the above charges requires the arresting agency to secure a DNA sample from the arrested person?  Yes  No

If yes, does the defendant have a valid DNA sample on file with AZDPS?  Yes  No

If no, Arresting Agency has taken required sample?  Yes  No

Offense Location:  
Offense Date: 2017-05-29  
Arrest Location: 1900 N. HIGLEY RD GILBERT AZ 85234  
Date: 2017-05-29 Time: 23:55

B. PROBABLE CAUSE STATEMENT

1. Please summarize and include the facts which establish probable cause for the arrest:  
SUBJECT WAS DRIVING A VEHICLE WRONG WAY ON THE HIGHWAY. SUSPECT TRAVELED APPROXIMATELY 7 MILES THE WRONG WAY. HE DROVE DIRECTLY AT ONCOMING TRAFFIC DURING THAT TIME. A DPS TROOPER ATTEMPTED TO STOP HIM BY DRIVING HIS MARKED PATROL UNIT WITH EMERGENCY LIGHTS AND SIREN ACTIVATED. THE TROOPER CONDUCTED A TRAFFIC BREAK AND POSITIONED HIS VEHICLE IN THE ROADWAY DIRECTLY IN FRONT OF THE WRONG WAY VEHICLE. THE DRIVER OF THE WRONG WAY VEHICLE DROVE AROUND THE TROOPER AND CONTINUED DOWN THE SHOULDER UNTIL HE FINALLY CORRECTED HIMSELF. THE DRIVER WAS STOPPED AND ARRESTED AT THAT TIME.  
  
DRIVER ADMITTED TO CONSUMING 15 TO 20 GEL TABLETS OF COUGH MEDICINE AT ONE TIME. WARNING LABEL ADVISES NOT TO CONSUME MORE THAN 8 PILLS IN A 24 HR PERIOD. DEXTROMETHORPHAN IS THE INGREDIENT IN THE GEL TABLETS. LAB RESULTS OF DRIVER ARE PENDING.  
  
DURING INTERVIEW, DRIVER ADVISED HE KNEW HE WAS DRIVING THE WRONG DIRECTION AND THOUGHT HE STRUCK OTHER VEHICLES.  
  
WHILE DRIVING WRONG WAY, THE FOLLOWING OCCURRED: THE WRONG WAY DRIVER CAUSED 5 SEPERATE COLLISIONS. NONE OF THE COLLISIONS REPORTED ANY INJURIES HOWEVER ALL SUSTAINED DAMAGE. THE WRONG WAY DRIVER DID NOT STOP AT ANY OF THE COLLISIONS.  
  
THE WRONG WAY DRIVER DROVE DIRECTLY AT NUMEROUS VEHICLES, A TOTAL OF 13 VICTIMS REQUESTED VICTIMS RIGHTS. THE VICTIMS ALL REQUESTED VICTIMS RIGHTS DUE TO THE DRIVER USING HIS VEHICLE AS A DEADLY INSTRUMENT. DUE TO THE LARGE AMOUNT OF VICTIMS, NOT ALL OF THE INTERVIEWS HAVE BEEN COMPLETED AT THE TIME OF BOOKING.

C. OTHER INFORMATION (Check if applicable)

- 1.  Defendant is presently on probation, parole or any other form of release involving other charges or convictions: Explain:
- 2. List any prior: Arrests?  
Convictions?  
F.T.A.'s?
- 3. Is there any indication the defendant is:  
 An Alcoholic?  An Addict?  
 Mentally disturbed?  Physically Ill?
- 4.  Defendant is currently employed  
With whom  
How long:  
5. Where does the defendant currently reside? [REDACTED]  
With whom  
How long: \_\_\_\_\_ years \_\_\_\_\_ months \_\_\_\_\_ days
- 6. What facts indicate the defendant will flee if released? Explain:

7. What facts does the state have to oppose an unsecured release? Explain:

D. CIRCUMSTANCES OF THE OFFENSE(Check if applicable)

- 1.  Firearm or other weapon was used  
Type:  
 Someone was injured by the defendant  
 Medical attention was necessary  
Nature of injuries: SUSPECT WAS TRANSPORTED TO HOSPITAL FOR PRECAUTIONARY REASONS. SUBJECT WAS DISCHARGED FROM HOSPITAL.
- 2.  Someone was threatened by the defendant  
Nature and extent of threats:
- 3. Did the offense involve a child victim?  Yes  No  
If yes, was DCS notified?  Yes  No
- 4. If property offense, value of property taken or damaged:  
 Property was recovered
- 5. Name(s) of co-defendant(s):

E. CRIMES OF VIOLENCE

1. Relationship of defendant to victim:

Victim(s) and defendant reside together

2. How was the situation brought to the attention of the police?

Victim  Third Party  Officer observed

3.  There are previous incidents involving these same parties  
Explain:

4. Is defendant currently the subject of:

An order of protection  Any other court order

Injunction against harassment

Explain:

F. DOMESTIC VIOLENCE ISSUES (Check if applicable)

Defendant's actions

Threats of homicide/suicide/bodily harm

Control/ownership/jealousy issues  Crime occurs in public

Prior history of DV  Kidnapping

Frequency/intensity of DV increasing  Depression

Access to or use of weapons  Stalking behavior

Violence against children/animals

Multiple violations of court orders

G. CIRCUMSTANCES OF THE ARREST (Check if applicable)

1. Did the defendant attempt to:

Avoid arrest  Resist arrest  Self Surrender

Explain:

N/A

2.  Defendant was armed when arrested

Type:

3.  Evidence of the offense was found in the defendant's possession

Explain: SUBJECT WAS IN POSSESSION OF MULTIPLE EMPTY COUGH MEDICINE BOTTLES

4. Was the defendant under the influence of alcohol or drugs at the time of the offense?

Yes  No  Unk

H. DRUG OFFENSES

1. If the defendant is considered to be a drug dealer, please state the supporting facts:

2. What quantities and types of illegal drugs are directly involved in the offense?

Drug field test completed

Defendant admission of drug type

Approximate monetary value: \$

3. Was any money seized?

Yes  No

Amount: \$

I. ADDITIONAL INFORMATION

1. Military Service:

Has the defendant served in the military services of the United States?  Yes  No  Unknown

If yes, currently on active duty?  Yes  No

Branches Served In: \_\_\_\_\_

(AF - Air Force AR - Army CG - Coast Guard MC - Marine Corp MM - Merchant Marines NG - National Guard NV - Navy RS - Reserves)

2. Is the defendant homeless?

Yes  No  Unknown

3. Do you need the court to provide an interpreter to help communicate and to understand what is being said?

Yes  No

If so, what language:

\*\*If a fugitive arrest, a Form IVA must also be completed\*\*

I certify that the information presented is true to the best of my knowledge.

ARRESTING OFFICER/SERIAL NUMBER

ARREST AGENCY/DUTY PHONE NUMBER

2017-05-29  
DATE

2017027460/AZ0079900  
DEPARTMENTAL REPORT NO.

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