

THE PEOPLE OF THE STATE OF MICHIGAN

V

STEPHEN DENNIS TURNER 41 93 157194 02

DOB: 12-20-62

Defendant

Charge(s)
CHILD ENTICEMENT-DEF 1
CSC 1ST (U13)-2 COURTS
CSC 2-DEF 2; SUPP 3-DEF 1

OFFENSE INFORMATION

Date 07/07/93 Police agency report no. GRP09361803

City/Twp./Village and County in Michigan
4130 OAK PARK SE-APT 204, GRAND RAPIDS

Complaining witness CHRISTINE KARPOWICZ

Victim(s) or Complainant(s)
LAKEYSHA CAGE
LAKEYSHA CAGE
LAKEYSHA CAGE

FCB
93-63014-~~111~~

CHRISTINE KARPOWICZ

DEBORA VAZQUEZ

PAM CARRIER

EXAMINATION WAIVED

Wolendo

- I, the Defendant, understand:
 - I have a right to employ an attorney.
 - I may request a court appointed attorney if I am financially unable to employ one.
 - I have a right to a preliminary examination where it must be proven that a crime was committed and probable cause exists to charge me with the crime.
- I voluntarily waive my right to a preliminary examination and understand that I will be bound over to Circuit Court on the charges in the complaint and warrant (or as amended).

Attorney for Defendant Bar no. Defendant

- Examination having been waived, the Defendant is bound over to the Circuit Court for further proceedings.

EXAMINATION HELD

- Upon examination of the matter I find that an offense not cognizable by a District Judge has been committed and there is probable cause for charging the Defendant with the crime. I bind the Defendant over to the Circuit Court for further proceedings.

5. Date arraigned: 7/9/93 Defense Attorney: Tanya Krause

6. Examination held on: 7/20/93 Date

7. Witnesses called: L. Cage

BIND OVER

REC'D & FILED
KENT COUNTY
CIRCUIT COURT
93 AUG -2 AM 10:53
Now
JTB

8. Bound to Circuit Court to appear on 7/30/93 Date at 9:00 Time m., Courtroom no.

9. Bond set in the amount of \$ Type of bond: w/o bond

JAIL

10. Statute: MCL MSA

11. Charge: As charged

Date 7/20/93

District Judge [Signature]

THE PEOPLE OF THE STATE OF MICHIGAN

V

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Complaining witness CHRISTINE KARPOWICZ

Victim(s) or Complainant(s)
LAKEYSHA CAGE
LAKEYSHA CAGE
LAKEYSHA CAGE

Witnesses CHRISTINE KARPOWICZ MIKE BAAR KAREN CURTISS SW-MILWAUKEE CO CIR CT CLK (WI) LAKEYSHA CAGE LESLIE VANDENHOUT R.H. AGENT/METROPOLITAN HOSPITAL Judy Dixon	DEBORA VAZQUEZ PAUL MESMAN BRIAN REED CYNTHIA MARBLE LAURA LEE VANGENDEREN LAB AGENT SALLY POSADA Jeana Scott	PAM CARRIER JOE SIRARD SW-JEFFERSON CO CIR CT CLK (WI) LARRY MARBLE DR. PERRY JOEL EDWARD KUSMIERZ Carmen Garcia India Harris Mrs. Harris
---	--	--

STATE OF MICHIGAN, COUNTY OF KENT.

The complaining witness says that on the date and at the location stated above, the Defendant(s), contrary to law,

CT. 1. DANIEL ARTHUR TURNER did maliciously, forcibly and fraudulently lead, take or" carry away, or decoy or entice away LAKEYSHA CAGE; DOB: 3-16-83, a child under the age" of 14, with the intent to detain or conceal such child from ITS PARENTS OR GUARDIANS;" contrary to MCL 750.350; MSA 28.582." FELONY: LIFE OR ANY TERM OF YEARS [750.350]."

CT. 2. DANIEL ARTHUR TURNER AND STEPHEN DENNIS TURNER did engage in sexual penetration with another person, to-wit: LAKEYSHA CAGE, said person being under 13 years of age; contrary to MCL 750.520b(1)(a); MSA 28.788(2)(1)(a). FELONY: Life or any term of years; mandatory AIDS testing [750.520B1A]

CT. 3. DANIEL ARTHUR TURNER did engage in sexual penetration with another person, to-wit: LAKEYSHA CAGE, said person being under 13 years of age; contrary to MCL 750.520b(1)(a); MSA 28.788(2)(1)(a). FELONY: Life or any term of years; mandatory AIDS testing [750.520B1A]

CT. 4. STEPHEN DENNIS TURNER did engage in sexual contact with another person, to-wit: LAKEYSHA CAGE, said person being under 13 years of age; contrary to MCL 750.520c(1)(a); MSA 28.788(3)(1)(a). FELONY: 15 Years; mandatory AIDS testing [750.520C1A]

DANIEL ARTHUR TURNER has on a previous occasion been convicted of a felony or an attempt to commit a felony in that on 9-28-87, in the CIRCUIT, Court for COUNTY OF JEFFERSON, in the state of STATE OF WISCONSIN, he/she was convicted of the offense of BURGLARY, file number 87-CR-109, And has on previous occasion been convicted of a felony or an attempt to commit a felony in that on 10-1-79, in the CIRCUIT, Court for COUNTY OF MILWAUKEE, in the state of STATE OF WISCONSIN, he/she was convicted of the offense of BURGLARY, file number J6275, Therefore, defendant is subject to the penalties provided by MCL 769.11; MSA 28.1083. LIFE [769.11]

9 AM 10:47

The complaining witness asks that Defendant(s) be apprehended and dealt with according to law.

Christine Karpowicz
Complaining witness signature

Warrant/authorized on 7/9/93 by:
Date
Sharon Griner
Prosecuting official

Subscribed and sworn to before me on 7-9-93
Date
Sharon Griner
Magistrate signature

COURT COPY

THE PEOPLE OF THE STATE OF MICHIGAN

V

STEPHEN DENNIS TURNER 41 93 157194 02

DOB: 12-20-62

Defendant

Charge(s)
CHILD ENTICEMENT-DEF 1
CSC 1ST (WIS)-2 COUNTS
CSC 2-DEF 2; SUPP 3-DEF 1

OFFENSE INFORMATION

Date 07/07/93 Police agency report no. GRP09361803

City/Twp./Village and County in Michigan
4130 OAK PARK SE-APT 204, GRAND RAPIDS

Complaining witness CHRISTINE KARPOWICZ

Victim(s) or Complainant(s)
LAKEYSHA CAGE
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Witnesses CHRISTINE KARPOWICZ MIKE BAAR KAREN CURTISS MILWAUKEE CO CIR CT CLK (WI) LAKEYSHA CAGE LESLIE VANDENHOUT R.N. AGENT/METROPOLITAN HOSPITAL Judy Dixon	DEBORA VAZQUEZ PAUL MESMAN BRIAN REED CYNTHIA MARBLE LAURA LEE VANGENDEREN LAB AGENT SALLY POSADA Jeana Scott	PAM CARRIER JOE SIRARD SW-JEFFERSON CO CIR CT CLK (WI) LARRY HARBLE DR. PERRY JOEL EDWARD KUSHIERZ Carmen Garcia India Harris Mrs. Harris
--	--	--

STATE OF MICHIGAN, COUNTY OF KENT.

To any Peace Officer or Court Officer authorized to make arrest: The complaining witness has filed a sworn complaint in this court stating that on the date and the location stated above, the Defendant(s), contrary to law,

CT. 1. DANIEL ARTHUR TURNER did maliciously, forcibly and fraudulently lead, take or carry away, or decoy or entice away LAKEYSHA CAGE; DOB: 3-16-83, a child under the age of 14, with the intent to detain or conceal such child from ITS PARENTS OR GUARDIANS; contrary to MCL 750.350; MSA 28.582. FELONY: LIFE OR ANY TERM OF YEARS [750.350].

CT. 2. DANIEL ARTHUR TURNER AND STEPHEN DENNIS TURNER did engage in sexual penetration with another person, to-wit: LAKEYSHA CAGE, said person being under 13 years of age; contrary to MCL 750.520b(1)(a); MSA 28.788(2)(1)(a). FELONY: Life or any term of years; mandatory AIDS testing [750.520B1A]

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DANIEL ARTHUR TURNER has on a previous occasion been convicted of a felony or an attempt to commit a felony in that on 9-28-87, in the CIRCUIT, Court for COUNTY OF JEFFERSON, in the state of STATE OF WISCONSIN, he/she was convicted of the offense of BURGLARY, file number 87-CR-109, And has on previous occasion been convicted of a felony or an attempt to commit a felony in that on 10-1-79, in the CIRCUIT, Court for COUNTY OF MILWAUKEE, in the state of STATE

Upon examination of the Complaining Witness, there is probable cause to believe that the offense charged was committed and that Defendant committed the offense. THEREFORE, IN THE NAME OF THE PEOPLE OF THE STATE OF MICHIGAN, I command you to arrest and bring Defendant before the court immediately.

7-9-93

(SEAL)

Date

District Judge/Magistrate

RETURN

By virtue of this warrant the Defendant has been taken into custody as commanded.

Date

Peace Officer

COURT COPY

DEFENDANT'S NAME Stephen Turner
CHARGE(S) 1. 1 ct. CSC 1st / 2. 1 ct CSC 2nd

INCIDENT NUMBER(S) GRPD 93-61803

DETECTIVE'S NAME CHRISTINE KARPOWICZ *CK* PHONE 771-6404

BOND RECOMMENDATION:

() NO RECOMMENDATION
() P R BOND - REASON FOR RECOMMENDATION _____

() CASH BOND - REASON FOR RECOMMENDATION _____

***HELD WITHOUT BOND

ON 7-7-93, DANIEL TURNER GRABBED THE VICTIM OFF HER PORCH/STAIRS
AREA, DRAGGING HER INTO HIS AND HIS BROTHER, STEPHEN APT., WHERE
SHE WAS SEXUALLY ASSAULTED BY DANIEL, WHICH INCLUDED ORAL PENETRITION,
AND HELD DOWN BY STEPHEN.

DUE TO THE FACTS IN THIS CASE, IT IS BELIEVED THIS ISN'T THE FIRST
TIME THE TURNER BROTHERS HAVE COMMITTED THESE CRIMES.

THEY BOTH SHOULD BE CONSIDERED EXTREMELY DANGEROUS TO THE CHILDREN
IN OUR COMMUNITY. ADDITIONAL NOTE: THE VICTIM WAS THREATENED
IF SHE TOLD SHE WOULD BE KILLED.

() REQUEST FOR SPECIAL BOND CONDITIONS - (INCLUDE CONDITIONS
AND REASONS) _____

PCN:

PLEASE COMPLETE SECTIONS D thru F WITH TYPEWRITER ONLY

D	15. NAME AT ARREST (LAST, FIRST, MIDDLE)					16. DATE OF BIRTH		50. SID NO.			
	TURNER, STEPHEN DENNIS					122062					
	17. RACE	18. SEX	19. HT.	20. WT.	21. HAIR	22. EYES	23. DRIVERS LIC. NO. (STATE)		24. SOCIAL SECURITY NUMBER*		
W	M	510	155	BRO	BRO			399766155			
25. STATE OF BIRTH			26. MARKS, SCARS, AMPS, TATTOOS, ETC			27. ADDITIONAL NAMES (LAST, FIRST, MIDDLE)					
WI			NONE NONE								
E	28. MOST SERIOUS CHARGE (DESCRIPTION)		29. MODIFIED UCR	30. F/M/O	31. INCIDENT NUMBER	32. MOST SERIOUS PACC CHARGE CODE		33. CRIMINAL TRACKING NO.			
	CSC 1ST		1100	{ F }	93-61803						
				{ }				34.	35.	36.	37.
								CHARGED	RELEASED	DIVERSION	JUVENILE
	28. MOST SERIOUS CHARGE (DESCRIPTION)		29. MODIFIED UCR	30. F/M/O	31. INCIDENT NUMBER	32. MOST SERIOUS PACC CHARGE CODE		33. CRIMINAL TRACKING NO.			
				{ }							
28. MOST SERIOUS CHARGE (DESCRIPTION)		29. MODIFIED UCR	30. F/M/O	31. INCIDENT NUMBER	32. MOST SERIOUS PACC CHARGE CODE		33. CRIMINAL TRACKING NO.				
			{ }								
F	38. WARRANT HOLDING AGENCY			39. DATE OF ARREST	40. PROSECUTING AGENCY		41. COURT OF JURISDICTION / ARRAIGNMENT				
	GRAND RAPIDS POLICE DEPT.				KENT COUNTY PROSECUTOR		61ST. DIST. CT.				
	42. WARRANT HOLDING AGENCY ORI			070793	43. PROSECUTING AGENCY ORI		44. COURT JURISDICTION / ARRAIGNMENT ORI				
	MI 4143600				MI410013A		MI 410035J				

G	MSP USE ONLY	
	1. CODE	_____
	2. SEARCH	_____
	3. CHR ENTRY	_____
	4. CHR VERIFY	_____

RI-7 (1/92)
IMPORTANT
 This card starts State of Michigan procedures for Criminal Records Reporting (CRR). For proper tracking of defendant and to allow proper disposition reporting, prepare both sides of this form carefully and submit according to CRR guidelines

Michigan Department of State Police
 CENTRAL RECORDS DIVISION
 7150 Harris Drive - Secondary Complex
 Lansing, Michigan 48913

ARREST

AUTHORITY: MCL 28.246, 1986 PA 231
 COMPLIANCE: Required
 PENALTY: \$100/60 days/remove from office

* This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

1. NAME AT ARREST (LAST, FIRST, MIDDLE)

TURNER, STEPHEN DENNIS

MSP USE ONLY

A

2. DATE OF BIRTH

122062

3. RACE

W

4. SEX

M

Kent Co. Prosecutor

Blocked _____
Demos _____
IVIP _____

Register _____
Verify _____
Verify _____

B

1. RT. THUMB



2. RT. FOREFINGER



3. RT. MIDDLE FINGER



4. RT. RING FINGER



5. RT. LITTLE FINGER



6. LT. THUMB



7. LT. FOREFINGER



8. LT. MIDDLE FINGER



9. LT. RING FINGER



10. LT. LITTLE FINGER



LEFT FOURFINGERS TAKEN SIMULTANEOUSLY

LT. THUMB

RT. THUMB

RIGHT FOURFINGERS TAKEN SIMULTANEOUSLY

LS Identix model TP-920G/#302/202003

HP LJIIID/#3221J26037/202626-070793



C

5. IMPRESSIONS TAKEN BY
549 - PICKETT *SP*

6. BADGE NO.
549

7. DATE PRINTED
070793

10. SIGNATURE OF PERSON PRINTED (IN OWN WRITING)
x Stephen Turner

8. REVIEWED BY
[Signature] #601

9. AGENCY
KENT COUNTY SO

11. ADDRESS
4130 OAKPARK DR APT 204

12. CITY
GRAND RAPIDS

13. STATE
MI

14. ZIP CODE
49508

STATE OF MICHIGAN 61st JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO.
---	--	----------

Court address 333 Monroe Ave., NW, Grand Rapids, MI 49503 Court telephone no. 616-456-3370

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney
 Kent Co. Prosecutor's Office
 416 Hall of Justice
 333 Monroe Ave., NW
 Grand Rapids, MI 49503
 616-774-3577

Defendant(s)/Respondent(s)
 Daniel Turner,
 Stephen Turner

Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney

v

Civil Criminal Probate In the estate/matter of CSC 1° arraignments of child

REQUEST

I request permission to record broadcast courtroom proceedings in this case using video audio

photographic media, scheduled at 1:30 p m. on 7-9-93
 Date Time Date

Date Tina Woo Yen
 Signature

TINA WOO YEN
 Name (type or print)

WWMT-NEWS 3, 616-235-0640 Telephone no.
 Firm name
233 E. FULTON, #114
GRAND RAPIDS, MI 49503

NOTICE TO PARTIES/ATTORNEYS

A request to allow film or electronic media coverage of the above proceeding has been filed. Supreme Court Administrative Order 1989-1 requires that the request be honored unless the trial judge exercises discretion to terminate, suspend, limit, or exclude the coverage.

I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above
 personally. by ordinary mail. by telephone.

 Date Court clerk/Register

STATE OF MICHIGAN 61st JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO.
---	---	-----------------

Court address 333 Monroe Ave., NW, Grand Rapids, MI 49503, Court telephone no. 616-456-3370

Plaintiff(s)/Petitioner(s)

People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney

Kent Co. Prosecutor's Office
 416 Hall of Justice
 333 Monroe Ave., NW
 Grand Rapids, MI 49503
 616-774-3577

Defendant(s)/Respondent(s)

v
 Robert Lee Beverly

Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney

Civil Criminal Probate In the estate/matter of Inv. Manslaughter arraign of J.C. Carter

REQUEST

I request permission to record broadcast courtroom proceedings in this case using video audio

photographic media, scheduled at 1:30 p m. on 7-9-93

Time Date

Date 7-9-93

Signature *Tina Woo Yen*

Name (type or print) TINA WOO YEN

Firm name WMT-NEWS 3, 616-235-0640 Telephone no.

233 E. FULTON, #114
GRAND RAPIDS, MI 49503

NOTICE TO PARTIES/ATTORNEYS

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I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above

personally. by ordinary mail. by telephone.

 Date Court clerk/Register

STATE OF MICHIGAN
~~61st~~ JUDICIAL DISTRICT
JUDICIAL CIRCUIT

BOND

CASE NO.

93 FY 1713

ORI MI- 410105J Court address HALL OF JUSTICE, 233 MONROE AVE. N.W., GRAND RAPIDS, MICHIGAN 49503 Court telephone no. (616) 454-3370

THE PEOPLE OF The State of Michigan The City of Grand Rapids v Defendant's/Juvenile's name, address, and telephone no. STEPHEN TURNER 4130 OAKPARK DR APT. 204 GRAND RAPIDS MI 49508 Date of birth 12-20-62 Social security no.

Date of arrest 07-07-93 Type of offense Misdemeanor Felony Arresting agency GRPD Agency file no.

Offense(s) CSC 2 Statute/ordinance citation(s)

Purpose of first appearance PRELIMINARY EXAM Time of appearance Date of appearance

Place of appearance At the court address above Other: Bond denied

TYPE OF BOND: Personal recognizance Conditional Cash 10% Cash Surety Real property* Amount/value of bond \$ No Bond Bond set by Judge/Magistrate M. CHRISTENSEN

See terms and conditions on other side of this form TERMS AND CONDITIONS

I have read and agree to the terms and conditions as specified on the other side of this bond and as follows: I will abide by the other conditions specified in items: List, by number, all items which were specified in the Pretrial Release Order which are listed on the back of this bond. I understand if I fail to perform all the terms and conditions of this bond, my release may be revoked, the full amount of the bond forfeited, and judgment entered for the entire amount of the bond. If I deposited a 10% cash bond, 10% will be retained by the court and the remaining 90% applied to costs and the balance of the judgment. If all the terms and conditions of this bond are met, the bond will be applied to the amount of any fine, costs, or statutory assessments imposed and any balance returned to me unless I deposited a 10% cash bond. If I deposited a 10% cash bond, the court will retain 10%, apply the remaining 90% to fine, costs, or statutory assessments imposed, and then return any remaining balance to me.

Date Defendant's signature Defendant depositor

I understand and agree if all the terms and conditions on the face and on the back of this bond are not met, the full amount of the bond may be forfeited and a judgment entered for the entire amount of the bond. If I deposited a 10% cash bond, 10% will be retained by the court and the remaining 90% will be applied to costs and the balance of the judgment. If all the terms and conditions of this bond are met, the full amount of the bond will be returned to me unless I deposited a 10% cash bond. If I deposited a 10% cash bond, the court will return only 90% of it to me. Third party depositor Surety agent

Date Signature of depositor/surety agent and identification (DLN, SS no., etc.) Name of depositor/surety agent Address City, state, zip

The bond is approved. 7/9/93 Date COURT COPY Judge/Magistrate Bar no. MC 240-6 (6/92) ORDER FOR PRETRIAL RELEASE/CUSTODY/BOND MCR 6.102(D), (F), MCR 6.106, MCR 6.610

STATE OF MICHIGAN
61ST DISTRICT COURT

VIDEO ARRAIGNMENT
NOTICE

CASE NUMBER

93-FY-1713

Hall of Justice, 333 Monroe N.W., Grand Rapids, MI 49503

(616) 456-3370

Defendant: Stephen Turner

Date: 7-9-93

FAILURE TO REPORT FOR ANY APPOINTMENT
COULD RESULT IN ISSUANCE OF A BENCH WARRANT

- You are required to report for HIV testing (Public Act 471 of 1988). Unless you make arrangements with a private physician or laboratory, you must report to the Sexually Transmitted Disease Clinic, Kent County Health Department, 700 Fuller N.E., (616) 774-3014 (Monday thru Friday 9:00 to 11:00 a.m. (except Thursday) or 2:00 to 4:00 p.m.). You must bring proof of the testing to Room 105, Hall of Justice, within one week of today.

Pre-Trial/Jury Pick Notice To Appear

You must report on the date indicated. No case can be adjourned except by the Judge. If you intend to employ a lawyer, she/he should be notified of this date at once. You should bring with you all written evidence relating to your case.

- Your pre-trial conference is scheduled with the City Attorney's Office, Room 102, Hall of Justice on _____, 19____ at _____ a.m./p.m.
- Your pre-trial conference is scheduled with the Kent County Prosecutor's Office, Room 416, Hall of Justice on _____, 19____ at _____ a.m./p.m.
- Your jury pick will be held on _____, 19____ at _____ a.m./p.m. Report to Courtroom F, 2nd Floor, Hall of Justice.
- Your preliminary examination will be held on Tuesday, July 20, 1993 at 1:30 ~~a.m.~~/p.m. in Courtroom D before Judge Hobbs.
- You are ordered to report to the Court Services Department, Room 302, Hall of Justice within 24 hours of your release and to keep appointments with them as required.
- You are to report for a presentence investigation to Room 101, Hall of Justice at 8:00 a.m. on _____, _____, 19____.
- You are to report between 9:00 a.m. and 11:00 a.m. on _____ for an interview for work crew/community service/work program. If you are unable to report, you must call 456-3819 prior to your appointment to reschedule.
- The Judge has authorized your consideration for work release. In order to be eligible you must be actively employed and you must contact the Work Release Office at 774-3155 within two (2) business days of your sentencing. If you fail to make the appointment within the allotted time, you WILL NOT be eligible for work release.
- Other: _____

NAME: Stephen Turner

EMPLOYMENT/SUPPORT:

DEFENDANT IS CURRENTLY:

DATE LAST WORKED:

MEANS OF SUPPORT:

EMPLOYER: CASCADE ENGINEERING

LENGTH OF EMPLOYMENT: 8 YRS.

EMPLOYMENT STATUS: FT

SALARY: \$300 WK.

EMPLOYMENT VERIFIED BY: Sophia Turner

PHYSICAL/HEALTH:

PHYSICAL PROBLEMS/DISABILITIES: J

SUBSTANCE ABUSE: J

DRUG USE:

RECEIVING TREATMENT?:

TREATMENT LOCATION:

DATE LAST USED:

DEPENDANCY:

DRUGS USED:

ALCOHOL USE?: J

RECEIVING TREATMENT?:

PHYSICAL/HEALTH VERIFIED BY: Sophia Turner

CRIMINAL HISTORY:

NIL LEIN/NCIC

IS THERE ANY CURRENT INVOLVEMENT WITH THE CRIMINAL JUSTICE SYSTEM?: J
IF SO, EXPLAIN:

ARRESTING OFFICER'S COMMENTS:

INCIDENT INVOLVES A 10 YR GIRL WHO WAS BEAT UNCONCIOUS.
REMARKS: DEF IS A LONG TIME RESIDENT WITH NO PRIOR RECORD.

PRETRIAL SERVICES RECOMMENDATIONS/RATIONALE:

O.P.S RECOMMENDS A C/S BOND. DUE THE NATURE OF THIS INCIDENT, I AGREE WITH A C/S BOND.

PRETRIAL SERVICES INVESTIGATOR:

LEAH STEBBINS

KENT COUNTY COURT SERVICES
PRETRIAL BAIL REPORT

Name: STEPHAN DENNIS TURNER PTS CASE #: 399-76-6155
ID:

Date of Birth: 12-20-62 Place of Birth: MIL, WISC.
Age: 30 Sex: M

Aliases: STEPH

Charges: _____ BOND(IF PREVIOUSLY SET): _____

CSC 121

Family Data:
=====

Marital status: SEP
Number of Dependant Children: 3

MOTHER

FATHER

NAME: SOPHIA TURNER
ADDR: WISC.

GLEN TURNER
WISC.

OTHER RELATIVES RESIDING IN METRO AREA: YES

REMARKS:

VERIFIED BY: SOPHIA TURNER

LAST SCHOOL ATTENDED: GRJC
CITY/STATE OF SCHOOL: GR

YRS COMPLETED: 14

ADDRESS:
=====

CURRENT ADDRESS: 4130 OAKPARK #204 CITY/STATE: GR
LENGTH OF RESIDENCE: 6 mos.
LIVES WITH:

LENGTH OF TIME IN KENT COUNTY: 12 YR.

PREVIOUS RESIDENCES: WISCONSIN STATE: 18 YR LENGTH:
=====

VERIFIED BY: SOPHIA TURNER

STATE OF MICHIGAN 61st JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO. 93-FY-1713, 93-FY-1714
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Court address The Honorable Judge Joel Hoekstra, 333 Monroe Ave., NW, Grand Rapids, MI 49503, 616-456-3370 Court telephone no. _____

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney
 Kent Co. Prosecutor's Office
 416 Hall of Justice
 333 Monroe Ave., NW
 Grand Rapids, MI 49503
 616-774-3577

Defendant(s)/Respondent(s)
 v Daniel Turner,
 Stephen Turner

Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney
 Public Defender's Officer
 920 McKay Tower
 Grand Rapids, MI 49503
 616-774-8181

Civil Criminal Probate In the estate/matter of Prelim. in CSC 1° of child

REQUEST

I request permission to record broadcast courtroom proceedings in this case using video audio
 photographic media, scheduled at 1:30 p.m. on 7-20-93
7-9-93

Date Tina Woo Yen
 Signature
TINA WOO YEN
 Name (type or print)
WWMT-NEWS 3, 616-235-0640
 Firm name Telephone no.
233 E. FULTON, #114
GRAND RAPIDS, MI 49503

NOTICE TO PARTIES/ATTORNEYS

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I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above
 personally. by ordinary mail. by telephone.

 Date Court clerk/Register

STATE OF MICHIGAN
61st JUDICIAL DISTRICT
JUDICIAL CIRCUIT
COUNTY PROBATE

REQUEST AND NOTICE FOR
FILM AND ELECTRONIC MEDIA COVERAGE
OF COURT PROCEEDINGS

CASE NO.
93-FY-1713,
93-FY-1714

Court address The Honorable Judge Joel Hoekstra, 333 Monroe Ave., NW,
Grand Rapids, MI 49503, 616-456-3370 Court telephone no.

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Defendant(s)/Respondent(s)
v Daniel Turner,
Stephen Turner

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner
address and telephone no. if not represented by an attorney
Kent Co. Prosecutor's Office
416 Hall of Justice
333 Monroe Ave., NW
Grand Rapids, MI 49503
616-774-3577

Attorney name, bar no., address, and telephone no. or defendant/
respondent address and telephone no. if not represented by an attorney
Public Defender's Officer
920 McKay Tower
Grand Rapids, MI 49503
616-774-8181

Civil Criminal Probate In the estate/matter of Prelim. in CSC 1° of child

REQUEST

I request permission to record broadcast courtroom proceedings in this case using video audio

photographic media, scheduled at 1:30 p.m. on 7-20-93
Time Date

7-9-93
Date

Tina Woo Yen
Signature

TINA WOO YEN
Name (type or print)

WWMT-NEWS 3, 616-235-0640
Firm name Telephone no.

233 E. FULTON, #114
GRAND RAPIDS, MI 49503

NOTICE TO PARTIES/ATTORNEYS

A request to allow film or electronic media coverage of the above proceeding has been filed. Supreme Court Administrative Order 1989-1 requires that the request be honored unless the trial judge exercises discretion to terminate, suspend, limit, or exclude the coverage.

I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above
 personally. by ordinary mail. by telephone.

Date

Court clerk/Register

STATE OF MICHIGAN 61st JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO. 93-FY-1713, 93-FY-1714
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Court address The Honorable Judge Joel Hoekstra, 333 Monroe Ave., NW, Grand Rapids, MI 49503, 616-456-3370 Court telephone no. _____

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney
 Kent Co. Prosecutor's Office
 416 Hall of Justice
 333 Monroe Ave., NW
 Grand Rapids, MI 49503
 616-774-3577

Defendant(s)/Respondent(s)
 v Daniel Turner,
 Stephen Turner

Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney
 Public Defender's Officer
 920 McKay Tower
 Grand Rapids, MI 49503
 616-774-8181

Civil Criminal Probate In the estate/matter of Prelim. in CSC 1° of child

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 Date Court clerk/Register

STATE OF MICHIGAN
61st JUDICIAL DISTRICT
JUDICIAL CIRCUIT
COUNTY PROBATE

REQUEST AND NOTICE FOR
FILM AND ELECTRONIC MEDIA COVERAGE
OF COURT PROCEEDINGS

CASE NO.
93-FY-1713,
93-FY-1714

Court address The Honorable Judge Joel Hoekstra, 333 Monroe Ave., NW, Grand Rapids, MI 49503, 616-456-3370
Court telephone no.

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney
Kent Co. Prosecutor's Office
416 Hall of Justice
333 Monroe Ave., NW
Grand Rapids, MI 49503
616-774-3577

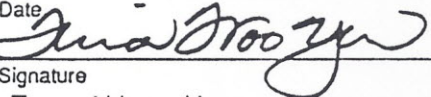
Defendant(s)/Respondent(s)
v Daniel Turner,
Stephen Turner
Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney
Public Defender's Officer
920 McKay Tower
Grand Rapids, MI 49503
616-774-8181

Civil Criminal Probate In the estate/matter of Prelim. in CSC 1° of child

REQUEST

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photographic media, scheduled at 1:30 p.m. on 7-20-93
Time Date

7-9-93
Date


Signature
TINA WOO YEN

Name (type or print)
WWMT-NEWS 3, 616-235-0640
Firm name Telephone no.

233 E. FULTON, #114
GRAND RAPIDS, MI 49503

NOTICE TO PARTIES/ATTORNEYS

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 personally. by ordinary mail. by telephone.

_____ Date

_____ Court clerk/Register

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO. 93 FY 1713 93 FY 1714
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Court address: 61st District Court 333 Monroe Ave NW Grand Rapids Court telephone no.: 456-3886

Plaintiff(s)/Petitioner(s)
 People of the State of Michigan

Attorney name, bar no., address, and telephone no. or plaintiff/petitioner address and telephone no. if not represented by an attorney

Defendant(s)/Respondent(s)
 v Daniel Turner
 Steven Turner

Attorney name, bar no., address, and telephone no. or defendant/respondent address and telephone no. if not represented by an attorney

Civil Criminal Probate In the estate/matter of Prelim. - Judge Hoekstra
Courtroom D

REQUEST

I request permission to record broadcast courtroom proceedings in this case using video audio

photographic media, scheduled at 1:30 m. on 7-20-93
 Time Date

7-13-93
 to Carew A Willie
 Signature
Carew A Willie
 Name (type or print)
WOOD TUG 459-2522
 Firm name Telephone no.

NOTICE TO PARTIES/ATTORNEYS

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 personally. by ordinary mail. by telephone.

 Date Court clerk/Register

STATE OF MICHIGAN 61 JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	REQUEST AND NOTICE FOR FILM AND ELECTRONIC MEDIA COVERAGE OF COURT PROCEEDINGS	CASE NO. 93-FY-1713
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Court address 333 Monroe Ave, NW Grand Rapids, MI, 49503 Court telephone no. 456-3278

Plaintiff(s) / Petitioner(s)
 (x) People of the State of Michigan
 () _____

Attorney name, bar no., address, and telephone no. of plaintiff / petitioner
 address and telephone no. if not represented by an attorney
 Kent County Prosecutor's Office
 416 Hall of Justice
 Grand Rapids, MI. 49503 774-3577

Defendant(s) / Respondent(s)
 v Daniel A. Turner
 Stephen D. Turner

Attorney name, bar no., address, and telephone no. of defendant /
 respondent address and telephone no. if not represented by an attorney
 Kent County Defender's Office
 920 McKay Tower
 Grand Rapids, MI. 49503 774-8181

() Civil (x) Criminal () Probate In the estate/matter of preliminary examination

REQUEST

I request permission to () record () broadcast courtroom proceedings in this case using () video () audio
 (x) photographic media, scheduled at 1:30 pm on July 20, 1993
July 12, 1993

Date _____
 Signature [Signature]
 Name (type or print) John Hogan
 Firm name The Grand Rapids Press Telephone no. 459-1455

NOTICE TO PARTIES/ATTORNEYS

A request to allow film or electronic media coverage of the above proceeding has been filed. Supreme Court Administrative Order 1989-1 requires that the request be honored unless the trial judge exercises discretion to terminate, suspend, limit, or exclude the coverage.

I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above
 () personally. () by ordinary mail. () by telephone.

Date _____ Court clerk/Registrar _____

STATE OF MICHIGAN
61 JUDICIAL DISTRICT
JUDICIAL CIRCUIT
COUNTY PROBATE

REQUEST AND NOTICE FOR
FILM AND ELECTRONIC MEDIA COVERAGE
OF COURT PROCEEDINGS

CASE NO.
93-FY-1713

Court address

Court telephone no.

333 Monroe Ave. NW Grand Rapids, MI. 49503

456-3278

Plaintiff(s) Address(es)

People of the State of Michigan

Defendant(s)/Respondent(s)

Daniel A. Turner
Stephen D. Turner

Attorney name, bar no., address, and telephone no. of plaintiff/petitioner
address and telephone no. if not represented by an attorney

Kent County Prosecutor's Office
416 Hall of Justice
Grand Rapids, MI. 49503 774-3577

Attorney name, bar no., address, and telephone no. of defendant/
respondent address and telephone no. if not represented by an attorney

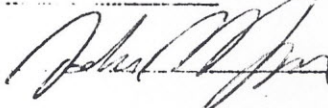
Kent County Defender's Office
920 McKay Tower
Grand Rapids, MI. 49503 774-8181

Civil Criminal Probate In the estate/matter of preliminary examination

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July 12, 1993

Date
Signature 

John Hogan
Name (type or print)
The Grand Rapids Press 459-1455
Firm name Telephone no.

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I certify that on this date, I provided notice of this request to the parties or their attorneys indicated above
 personally by ordinary mail by telephone.

Court clerk/Registrar

Defendant Name: STEPHEN TURNER
Case No.: 93 FY 1713

O R D E R

Charge(s): 93-63014-F-103
CSC 2ND

1. L. Phelan, ET AL 200 N. Division Grnad Rapids, MI 49503 456-7831

Attorney Name Address Phone
has been appointed to represent you. You should contact them immediately to discuss your case. As allowed by statute, you may be ordered to reimburse the court for your attorney fees. The total amount of your attorney fees may not be determined until disposition of your case.

A. **MISDEMEANOR CASES ONLY**

1. The Court has ordered that you make payments toward your attorney fees, in the amount of \$_____ per _____ starting on _____. Fees are to be paid in the 61st District Court Criminal Clerk's Office, Room 105J.
2. Attorney fee payment will be reviewed at the time of plea/sentence or dismissal.
3. No attorney fees will be assessed at this time to the defendant because: _____, attorney fees could be assessed at a later date or upon conclusion of this case.

B. **FELONY CASES ONLY**

Date: 7/9/93 1.
Date: _____ 2.

Attorney fee payment will be reviewed at the time of your preliminary examination.
FELONY CASES REDUCED TO MISDEMEANOR:

- a. The Court has ordered that you make payments toward your attorney fees, in the amount of \$_____ per _____ starting on _____. Fees are to be paid at the Criminal Clerk's Office, Room 105J.
- b. Attorney fee payment will be reviewed at the time of plea/sentence or dismissal.
- c. No attorney fees will be assessed at this time to the defendant because: _____, attorney fees could be assessed at a later date or upon conclusion of this case.

Date: 7/20/93 3.

FELONY CASES BOUND OVER TO CIRCUIT COURT:

- a. The Court has ordered that you make payments toward your attorney fees, in the amount of \$_____ per _____ starting on _____. Fees are to be paid at the Kent County Friend of the Court Office, 50 Monroe Place.
- b. Attorney fee payment will be reviewed at the time of plea/sentence or dismissal.

2. Your petition for a court appointed attorney is denied because: _____

Date: 7/9/93 Arraignment Judge: [Signature] Date: 7/20/93 Prelim Judge: [Signature]
Preliminary Exam Date: Wed 7-20-93 Time: @ 1:30p.M.
Bond: \$ No Bond Posted: _____ Not Posted: _____

Mailed/Delivered by: D.W.I. Date: 7-9-93

Court 61st

2307-198

PRE-BOND REPORT

Interview Date 7/7/93
Arrest Date 7/7/93
Interviewer LS

Bond _____

NAME: Stephen Dennis Turner DOB: 12/20/62 AGE: 30 SEX: m RACE: W

AKA: _____ SOCIAL SECURITY NO. 399-76-6155

CHARGE(S) CSC 1st CO-DEFENDANTS Daniel A. Turner

RESIDENCE: 4130 Oak Park DR Apt 204 CITY: GR 49508 LENGTH: 6 mos.

LIVES WITH: Brother PHONE: 455-2752 TIME IN KENT CO.: 12 yrs.

MARITAL STATUS: SGL MAR DIV SEP WID OTH STUDENT: YES NO HIGHEST GRADE 14

EMPLOYMENT: EMPLOYER Cascade Engineering LENGTH 8 yrs. F/T P/T
EMPLOYER'S ADDRESS _____

IF NOT EMPLOYED, MEANS OF SUPPORT _____

THIS INDIVIDUAL WAS WAS NOT INTERVIEWED BY COURT SERVICES:

PRIOR ARRESTS AND/OR CONVICTIONS: FELONIES MISDEMEANORS B/W'S

PETITION FOR COURT APPOINTED ATTORNEY

PRELIMINARY EXAM DATE _____ TIME _____

DO YOU INTEND TO HIRE YOUR OWN ATTORNEY? YES OR NO IF SO, WHOM? _____
ARE THEY PLANNING TO ATTEND YOUR ARRAIGNMENT? _____

INCOME: NET EMPLOYMENT EARNINGS \$ 300 PAID: WEEKLY BIWEEKLY MONTHLY

SPOUSE OR OTHER SOURCE OF INCOME _____ AMOUNT: _____

ASSETS: CHECKING/SAVINGS ACCOUNT: YES OR NO AMOUNT: _____

CAR/HOUSE/OTHER 87 Mazda VALUE: _____

OBLIGATIONS: RENT/MORTGAGE PAYMENTS \$ 335 - \$380-wife CHILD SUPPORT \$ _____
INSTALLMENT PAYMENTS: _____

CASH AT TIME OF ARREST \$3

DO YOU CURRENTLY HAVE/OR HAVE YOU EVER APPLIED FOR A COURT APPOINTED ATTORNEY: YES _____ NO IF SO, WHOM _____
FOR WHAT CHARGE? _____

I declare under penalty of contempt of court that the above information is true to the best of my information, knowledge and belief and that I may be ordered to reimburse the court for all or part of my attorney and defense costs.

DATE: 7/7/93 SIGNATURE: [Signature]