			IN	THE IOW		CT COURT I		FOR					
This Complaint and Affidavi	t is to be:				C	ASSCOUNT	T						
Filed with Court Clerk (cc: CA)					Agency Form Number: 21-013723								
Submitted to County Attorney					Arrest Date: 12/06/2021								
Filed with JCO - Defe	ndant is a Juv	venile											
				-	UE OTA	TE OF IOM							
				'	HE SIA	TE OF IOW	/A						
						VS.							
OFFENDER													
Last							liddle			Suffix			
DOSS				RICHAI	RICHARD J						JR State Zin Code		
Address 1300 E 10TH STREET	ΛDT 1//Λ				City ATLANTIC						State I A	Zip Code 50022	
DL#	1	State	DL Class	DI Endo					DL Restrictions		<u> </u>	30022	
IL			DL Class	DE LIIdo	DL Endorsements				DE Réstrictions				
		Gender	1-	Race		Fr			Ethnicity				
06/07/1987 MALE					K - B			NOT OF HISPANIC ORIGIN - N					
Height				Eye Color			Hair Color						
5' 05" 150 LBS		150 LBS		BROWN -	BRO		BLACK - BL	BLACK - BLK					
VEHICLE													
Year	Make				Model				Color				
1999	MERCURY	Y - MERC	:		GRAND MARQUIS			WHI					
VIN			CDL Re	q?	? Pass End Req?			at End Req?	Style				
2MEFM75W7XX667100 NO								4 DOOR					
Plate/Registration #					State Year			US DOT Numb			er ICC/MC #		
KYA140					IA		2022						
OFFENSE	- d - O t'	1.	O-i D										
State County Local Code Section Crime Descri			cription . INJURY - CAUSING SERIOUS INJURY					5	Speed in Zone				
Class	70.4(1)		WILLI OL		OACOIN	J OLINIOUS I		•					
FELC		Serio	us P.I.	∐ F	atal Accide	ent	Civ	/il Damage Asses	sment		Other		
Location Type		1											
20 - RESIDENCE/HOM	E												
Literal Description													
10TH ST													
Address					City					Sta		Code	
EAST 10TH STREET					ATLANTIC					IA	500		
Is Date and Time of Incident Known? Incident Date or Low F			/ Range					ident Time or Low Range			Upper Time Range		
NO STATUS OF OFFENDE	-D/ II IV/FAIII	12/05/2	021		12/05	/2021	2	23:15			23:51		
STATUS OF OFFENDE		LE	CI	JSTODY				<u> </u>	CLIMMONI	e to	ADDEAD		
IXI				JAILED	AILED				SUMMONS TO APPEAR (Citation Issued)				
WARRANT REQUESTED				1	NO CONTACT ORDER REQUESTED				RELEASED TO PARENT/GUARDIAN				
NARRATIVE								•					
Narrative of Offense Comm	nitted												
On or about the above state													
commit an act which was not justified against another, with the intent to cause serious injury, resulting in serious injury													

<u>AFFIDAVIT</u>

STATE OF IOWA, CASS COUNTY

I, the undersigned, being duly sworn, state that all facts contained in this Complaint and Affidavit, known by me or told to me by other reliable persons form the basis for my belief that the defendant committed this crime

State all facts and persons relied upon supporting elements of alleged crime

On 12/05/2021 at approximately 2351 hours, Officers were dispatched to the Cass County Hospital for a male subject that was stabbed. The victim said that he was at his residence located at Walnut Hills Terrace 1300 East 10th Street Apt. 26B when the incident happened. A physical altercation occurred in the apartment between the suspect and the victim.

Through the course of the investigation, it was learned that the victim was stabbed in the abdomen with a knife. This caused a serious injury that required him to be flown to a trauma center.

Through interviews and evidence obtained at and near the crime scene, a suspect was identified as Richard J Doss JR. Mr. Doss admitted to being in possession of a knife and being involved in an incident with the victim.

Mr. Doss is charged with willful Injury for stabbing the victim, an intentional act that would reasonably cause death, without justification. The act resulted in the victim suffering serious injuries and being transferred to a trauma center.

			4 Pews	WOOD, PAUL	45.00						
					15-23						
			Signature of Com	plainant or Officer, Office	r Name & Number						
GENERAL PR	OBABLE CAUSE										
Defendant Implica											
03 - ADMISSIC	ON/STATEMENTS, 07 - II	DENTIFIED BY WITNESSES									
Operating Motor	Vehicle in County	Other Physical Evidence	,	Attempted To Inflict Injury							
	STATE OF IOWA,	CASS COUNTY	_								
014/	Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 12/06/2021										
ARIAX SEAL	Notary Name	CHRISTY L DVORAK	Signature of	Signature of Verifying Party							
	Commission Number	156054		() sell							
AWOI	My Commission Expires	05/10/2023	Peace		Prosecuting Attorney						