

This Complaint and Affidavit is to be:

- Filed with Court Clerk (cc: CA)
- Submitted to County Attorney
- Filed with JCO - Defendant is a Juvenile

Agency Form Number: **21-005383**

Arrest Date: \_\_\_\_\_

**THE STATE OF IOWA**

VS.

**OFFENDER**

Last <b>WIECHMANN</b>		First <b>DANIEL</b>		Middle <b>FREDERICK</b>		Suffix	
Address <b>207 2ND AVE NE</b>				City <b>HAMPTON</b>		State <b>IA</b>	Zip Code <b>50441</b>
DL# [REDACTED]	State <b>IA</b>	DL Class <b>C</b>	DL Endorsements		DL Restrictions		
Date of Birth [REDACTED]	Gender <b>MALE</b>	Race <b>WHITE - W</b>		Ethnicity <b>NOT OF HISPANIC ORIGIN - N</b>			
Height <b>5' 11"</b>	Weight <b>230 LBS</b>	Eye Color <b>HAZEL - HAZ</b>		Hair Color <b>GRAY OR PARTIALLY GRAY - GRY</b>			

**OFFENSE**

State <input checked="" type="checkbox"/>	County <input type="checkbox"/>	Local <input type="checkbox"/>	Code Section <b>709.12(1)(B)</b>	Crime Description <b>INDECENT CONTACT WITH A CHILD</b>			Speed	In	Zone	
Class <b>AGMS</b>			Serious P.I. <input type="checkbox"/>	Fatal Accident <input type="checkbox"/>	Civil Damage Assessment <input type="checkbox"/>	Other <input type="checkbox"/>				
Location Type <b>20 - RESIDENCE/HOME</b>										
Literal Description <b>605 SE SHARON DR</b>										
Address <b>605 SE SHARON DR</b>				City <b>ANKENY</b>			State <b>IA</b>	Zip Code <b>50021</b>		
Is Date and Time of Incident Known? <b>NO</b>		Incident Date or Low Range <b>01/01/2015</b>		Upper Date Range <b>12/31/2018</b>		Incident Time or Low Range <b>00:01</b>		Upper Time Range <b>23:59</b>		

**STATUS OF OFFENDER/JUVENILE**

<input type="checkbox"/> TAKEN INTO CUSTODY	CUSTODY	<input type="checkbox"/> SUMMONS TO APPEAR (Citation Issued)
<input checked="" type="checkbox"/> WARRANT REQUESTED	<input checked="" type="checkbox"/> NO CONTACT ORDER REQUESTED	<input type="checkbox"/> RELEASED TO PARENT/GUARDIAN

**NARRATIVE**

Narrative of Offense Committed

On or about the above stated date and time, the Defendant did touch the clothing covering the immediate area of the inner thigh, groin, buttock, anus, or breast of D [REDACTED] D [REDACTED] a child, for the purpose of arousing or satisfying the sexual desires of either of them

**VICTIM INFORMATION (Optionally displayed, especially if NCO is requested)**

Last <b>D [REDACTED]</b>		First <b>D [REDACTED]</b>		Middle		Suffix	
Business/Organization/State/County/Municipality Name							
Address [REDACTED]				City [REDACTED]		State	Zip [REDACTED]

AFFIDAVIT

STATE OF IOWA, POLK 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

Between the dates listed above, the Defendant did knowingly and unlawfully commit indecent contact with a minor by touching and pinching the buttocks of juvenile victim DD between the time he was 6-9 years old. The Defendant would do this when hugging the victim, or would come up behind him and do it. The Defendant is the victim's step-grandfather.

The Defendant would talk to the victim about puberty, his masturbation frequency, and asked to see the victim's groin protection. The Defendant would do this with several other male relatives. This behavior is known as grooming.

The Defendant is also being charged with other sex offenses related to case 21-005382 which involves DD's stepbrother as the victim.

This charge was approved by PCA Meggan Guns.

*Kris Lindell #113*

LINDELL, KRIS

113

Signature of Complainant or Officer, Officer Name & Number

**GENERAL PROBABLE CAUSE**

Defendant Implicated

**03 - ADMISSION/STATEMENTS, 07 - IDENTIFIED BY WITNESSES**



Operating Motor Vehicle in County

Other Physical Evidence

Attempted To Inflict Injury

STATE OF IOWA,

POLK COUNTY

	Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 10/12/2022		Signature of Verifying Party 
	Notary Name	<b>BRIAN KROSKA</b>	
	Commission Number	<b>766828</b>	<input type="checkbox"/> Peace Officer <input checked="" type="checkbox"/> Notary <input type="checkbox"/> Prosecuting Attorney
	My Commission Expires	<b>03/23/2023</b>	