

**IN THE IOWA DISTRICT COURT IN AND FOR  
FREMONT COUNTY**

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: **23003556**

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

**THE STATE OF IOWA**

VS.

**OFFENDER**

Last <b>DUPRE</b>		First <b>MARK</b>		Middle <b>SEAN</b>		Suffix	
Address				City <b>SIDNEY</b>		State <b>IA</b>	Zip Code <b>51652</b>
DL#	State <b>IA</b>	DL Class <b>C</b>	DL Endorsements		DL Restrictions <b>F, B</b>		
Date of Birth	Gender <b>MALE</b>		Race <b>WHITE - W</b>		Ethnicity <b>NOT OF HISPANIC ORIGIN - N</b>		
Height <b>5' 07"</b>	Weight <b>130 LBS</b>		Eye Color <b>BROWN - BRO</b>		Hair Color <b>BROWN - BRO</b>		

**OFFENSE**

State <input checked="" type="checkbox"/>	County <input type="checkbox"/>	Local <input type="checkbox"/>	Code Section <b>708.8</b>	Crime Description <b>GOING ARMED WITH INTENT</b>			Speed	in	Zone
Class <b>FELD</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>MAIN ST</b>									
Address <b>508 MAIN ST</b>				City <b>SIDNEY</b>			State <b>IA</b>	Zip Code <b>51652</b>	
Is Date and Time of Incident Known? <b>YES</b>		Incident Date or Low Range <b>04/17/2023</b>		Upper Date Range		Incident Time or Low Range <b>11:45</b>		Upper Time Range	

**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 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 go armed with intent

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

Last <b>KYLE</b>		First <b>D'ANDRE</b>		Middle <b>DAVELL</b>		Suffix	
Business/Organization/State/County/Municipality Name							
Address				City		State	Zip

AFFIDAVIT

**STATE OF IOWA,                      FREMONT 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

Mark Dupre did go armed with a dangerous weapon, two knives with blades exceeding five inches with the intent to use without justification such weapon against the person of another, and stabbed Corey Tyrone Miller Jr. and D'Andre Kyle.



Wake, Andrew

36-3


Signature of Complainant or Officer, Officer Name & Number

**GENERAL PROBABLE CAUSE**

Defendant Implicated  
**02 - CAUGHT IN ACT, 03 - ADMISSION/STATEMENTS, 07 - IDENTIFIED BY WITNESSES, 09 - NEAR SCENE OF CRIME, 10 - POSSESSION/DISPLAY/USE OF DANGEROUS WEAPONS, 13 - CAUSED PERSONAL INJURY, 15 - ATTEMPTED TO INFLICT SERIOUS INJURY**

Operating Motor Vehicle in County	Other Physical Evidence	Attempted To Inflict Injury <b>KNIFE</b>
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**STATE OF IOWA, FREMONT COUNTY**

	Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 05/08/2023	
	Notary Name	<b>CONNIE ELLEN AISTROPE</b> Signature of Verifying Party
	Commission Number	<b>188825</b>
	My Commission Expires	<b>02/17/2024</b>
	<input type="checkbox"/> Peace Officer <input checked="" type="checkbox"/> Notary <input type="checkbox"/> Prosecuting Attorney	