

**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 DUPRE		First MARK		Middle SEAN	Suffix
Address 508 MAIN ST			City SIDNEY	State IA	Zip Code 51652
DL#	State IA	DL Class	DL Endorsements	DL Restrictions	
Date of Birth	Gender MALE	Race WHITE - W		Ethnicity NOT OF HISPANIC ORIGIN - N	
Height 5' 07"	Weight	Eye Color BROWN - BRO		Hair Color	

OFFENSE

State <input checked="" type="checkbox"/>	County <input type="checkbox"/>	Local <input type="checkbox"/>	Code Section 124.401(1)(B)(7)	Crime Description CONTROLLED SUBSTANCE VIOLATION		Speed	in	Zone
Class FELB			Serious P.I. <input type="checkbox"/>	Fatal Accident <input type="checkbox"/>	Civil Damage Assessment <input type="checkbox"/>	Other <input type="checkbox"/>		
Location Type 20 - RESIDENCE/HOME								
Literal Description MAIN ST								
Address 508 MAIN ST			City SIDNEY			State IA	Zip Code 51652	
Is Date and Time of Incident Known? YES		Incident Date or Low Range 04/17/2023		Upper Date Range	Incident Time or Low Range 11:30		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 unlawfully manufacture, deliver or possess with intent to manufacture or deliver a controlled substance to-wit: more than 5 grams but not more than 5 kilograms of a mixture or substance containing a detectable amount of Methamphetamine

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 posses, in a hi vis vest, inside his residence, more than 10 grams of a substance that field tested positive for methamphetamine, with the intent to deliver.



WAKE, ANDREW

36-3

Signature of Complainant or Officer, Officer Name & Number

GENERAL PROBABLE CAUSE

Defendant Implicated

01 - POSSESSED DRUGS/PARAPHERNALIA, 07 - IDENTIFIED BY WITNESSES, 08 - CRIME OBSERVED BY OFFICERS, 09 - NEAR SCENE OF CRIME, 10 - POSSESSION/DISPLAY/USE OF DANGEROUS WEAPONS, 11 - POSSESSION, 13 - CAUSED PERSONAL INJURY, 15 - ATTEMPTED TO INFLICT SERIOUS INJURY

Operating Motor Vehicle in County

Other Physical Evidence

Attempted To Inflict Injury

KNIFE

STATE OF IOWA,

FREMONT COUNTY



Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 04/17/2023

Notary Name **ASHTON LUKE**

Signature of Verifying Party

Commission Number

A rectangular stamp area containing a handwritten signature that appears to be "Ashton Luke #36-5". Below the signature, the text "SERGEANT ASHTON LUKE #36-5" is printed.

My Commission Expires



Peace Officer



Notary



Prosecuting Attorney