

EXHIBIT E

PLAINTIFF'S COMPLAINT AND DEMAND FOR JURY TRIAL

NOAH PETERSEN

v.

CITY OF NEWTON, IOWA, ET AL.,

JASPER 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: **22-29758**

Arrest Date: **10/03/2022**

THE STATE OF IOWA

VS.

OFFENDER

Last PETERSEN		First NOAH		Middle JAMES		Suffix	
Address [REDACTED]				City [REDACTED]		State IA	Zip Code [REDACTED]
DL# [REDACTED]		State IA	DL Class C	DL Endorsements		DL Restrictions B	
Date of Birth [REDACTED]		Gender MALE		Race WHITE - W		Ethnicity UNKNOWN - U	
Height 6' 00"		Weight 180 LBS		Eye Color BROWN - BRO		Hair Color	

OFFENSE

State <input checked="" type="checkbox"/>	County <input type="checkbox"/>	Local <input type="checkbox"/>	Code Section 723.4(1)(D)	Crime Description DISORDERLY CONDUCT - DISRUPT/DISTURB LAWFULLY ASSEM			Speed	in	Zone
Class SMMS			Serious P.I. <input type="checkbox"/>	Fatal Accident <input type="checkbox"/>	Civil Damage Assessment <input type="checkbox"/>		Other <input type="checkbox"/>		
Location Type 11 - GOVERNMENT/PUBLIC BUILDING									
Literal Description WEST 4TH ST SOUTH									
Address 101 W 4TH ST S				City NEWTON			State IA	Zip Code 50208	
Is Date and Time of Incident Known? YES		Incident Date or Low Range 10/03/2022		Upper Date Range		Incident Time or Low Range 18:45		Upper Time Range	

STATUS OF OFFENDER/JUVENILE

<input checked="" type="checkbox"/> TAKEN INTO CUSTODY	CUSTODY 1 - JAILED		<input type="checkbox"/> SUMMONS TO APPEAR (Citation Issued)	
<input 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 without lawful authority or color of authority, did disturb any lawful assembly or meeting of persons by conduct intended to disrupt the meeting or assembly

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

Last SOCIETY		First		Middle		Suffix	
Business/Organization/State/County/Municipality Name							
Address				City		State	Zip

AFFIDAVIT

STATE OF IOWA, JASPER 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 he defendant committed his crime

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

On 10/03/2022, the defendant attended a city hall assembly at 101 W 4th St S. The Mayor and Chief of Police advised the defendant was instructed to leave the assembly. The defendant refused to leave the assembly and the ground in which the assembly was occurring. The defendant interrupted the assembly after being advised to leave the assembly.

Kurtis Miller

MILLER, KURTIS

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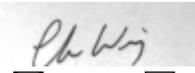
Signature of Complainant or Officer, Officer Name & Number

GENERAL PROBABLE CAUSE

Defendant Implicated 02 - CAUGHT IN ACT, 07 - IDENTIFIED BY WITNESSES, 08 - CRIME OBSERVED BY OFFICERS		
Operating Motor Vehicle in County	Other Physical Evidence	Attempted To Inflict Injury

STATE OF IOWA,

JASPER COUNTY

	Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 10/03/2022	
	Notary Name CHRISTOPHER GAIL WING	Signature of Verifying Party 
	Commission Number 794469	
	My Commission Expires 02/09/2025	<input type="checkbox"/> Peace Officer <input checked="" type="checkbox"/> Notary <input type="checkbox"/> Prosecuting Attorney