

**IN THE IOWA DISTRICT COURT IN AND FOR  
Marion - COUNTY**

This Complaint is to be:

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

Agency Case Number: DCI 2015-033621

**THE STATE OF IOWA**

VS.

**OFFENDER**

Last <b>CARTER</b>		First <b>JASON</b>		Middle <b>GENE</b>		Suffix	
Address <b>960 115<sup>th</sup> Place</b>				City <b>Knoxville</b>		State <b>IA</b>	Zip Code <b>50138</b>
Date of Birth [REDACTED]		Gender <b>M</b>	Race <b>W</b>		Ethnicity <b>Caucasin</b>		
State <b>IA</b>	Height <b>5'11"</b>	Weight <b>220</b>	Eye Color <b>Blue</b>		Hair Color <b>Brown</b>		

**OFFENSE**

State	Local	Code Section <b>707.2(1)(a)</b>	Crime Description <b>Homicide- 1<sup>st</sup> Degree</b>		Class <b>Class A Felony</b>		
Location Type <b>Residence</b>							
Literal Description <b>Billy &amp; Shirley Carter's residence</b>							
Address <b>132 Perry Street (Marion County)</b>				City <b>Lacona</b>		State <b>IA</b>	Zip Code <b>50139</b>
Is Date and Time of Incident Known? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		Incident Date or Low Range <b>June 19, 2015</b>		Upper Date Range <b>June 19, 2015</b>	Incident Time or Low Range <b>10:25AM</b>		Upper Time Range <b>11:25 AM</b>

**STATUS OF OFFENDER/JUVENILE**

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

**JUVENILE**

Parent/Guardian Name - Last		Parent/Guardian Name - First		Parent/Guardian Name - Middle	
Address		City	State	Zip Code	Phone Number
Juvenile's School			Release Date		Release Time

**COURT APPEARANCE**

Date	Time	Defendant's signature:
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**NARRATIVE**

**Having malice aforethought, willfully, deliberately and with premeditation killed S.D.C.**

AFFIDAVIT

STATE OF IOWA, Marion - COUNTY

I, the undersigned, being duly sworn, that all facts contained in this 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 June 19th, 2015, Mrs. SHIRLEY DENE CARTER was shot to death in her home in rural Marion County. At approximately 11:11 A.M., The Marion County Sheriff's Office received a 911 phone call from JASON CARTER. JASON CARTER was the individual whom discovered SHIRLEY CARTER deceased. JASON CARTER advised 1st arriving law enforcement that his mother SHIRLEY CARTER was shot and the residence was burglarized.

During the investigation it was discovered that JASON CARTER provided information to law enforcement incriminating himself. JASON CARTER gave multiple inconsistent statements regarding his involvement during the course of the investigation. Additionally evidence provides that: (1) there was a staged burglary at the home of the victim at the time of the murder (2) JASON CARTER testified under oath that he has never touched evidence at the crime scene and evidence later established that JASON CARTER's latent prints were found on the evidence (3) JASON CARTER had knowledge of the crime that no one other than a person present at the time of the crime could have known (4) JASON CARTER withheld vital information from initial interviews with law enforcement.

DCE SA [Signature], I-164

Signature of Complainant or Officer, Officer Name & Number

Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on: 12/16/2017 (DATE)

GENERAL PROBABLE CAUSE

Defendant Implicated
Admission/Statements made to law enforcement, cause property damage, identified by witnesses, caused death,
Operating Motor Vehicle in County
Other Physical Evidence
Attempted To Inflict Injury

Notary Name
Commission Number 801567
Signature of Verifying Party William Davis
My Commission Expires 2/3/2020
Peace Officer
Notary
Prosecuting Attorney

