

**E-FILED 2021 AUG 27 12:15 PM LINN - CLERK OF DISTRICT COURT  
IN THE IOWA DISTRICT COURT IN AND FOR  
LINN 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 Case Number: **210827A**

Arrest Date: **08/27/2021**

**THE CITY OF CEDAR RAPIDS**

VS.

**OFFENDER**

|   |                          |                                |                 |  |                 |                    |                          |
|---|--------------------------|--------------------------------|-----------------|--|-----------------|--------------------|--------------------------|
| Last<br><b>VANORDEN</b>                   |                          | First<br><b>DERRICK</b>        |                 | Middle<br><b>FRANCIS</b>                       |                 | Suffix             |                          |
| Address<br><b>667 EAST BLACKHAWK AVE.</b> |                          |                                |                 | City<br><b>PRAIRIE DU CHEIN</b>                |                 | State<br><b>WI</b> | Zip Code<br><b>53821</b> |
| DL#<br><b>V563166933508</b>               | State<br><b>WI</b>       | DL Class<br><b>DM</b>          | DL Endorsements |  | DL Restrictions |                    |                          |
| Date of Birth<br><b>09/15/1969</b>        | Gender<br><b>MALE</b>    | Race<br><b>WHITE - W</b>       |                 | Ethnicity<br><b>NOT OF HISPANIC ORIGIN - N</b> |                 |                    |                          |
| Height<br><b>6' 00"</b>                   | Weight<br><b>200 LBS</b> | Eye Color<br><b>BLUE - BLU</b> |                 | Hair Color<br><b>BROWN - BRO</b>               |                 |                    |                          |

**OFFENSE**

|   |                                    |   |                                       |   |  |  |                          |                  |
|---|------------------------------------|---|---------------------------------------|---|--|--|--------------------------|------------------|
| State<br><input type="checkbox"/>                           | County<br><input type="checkbox"/> | Local<br><input checked="" type="checkbox"/>    | Code Section<br><b>CR/68.16</b>       | Crime Description<br><b>SCREENING CHECKPOINT RESTRICTIONS</b> |  | Speed                                      | in                       | Zone             |
| Class<br><b>SMMS</b>  |                                    |   | Serious P.I. <input type="checkbox"/> | Fatal Accident <input type="checkbox"/>                       | Civil Damage Assessment <input type="checkbox"/> | Other <input type="checkbox"/>             |                          |                  |
| Location Type<br><b>01 - AIR/BUS/TRAIN TERMINAL</b>         |                                    |   |                                       |   |  |  |                          |                  |
| Literal Description<br><b>OFF ROADWAY/ROADWAY NOT FOUND</b> |                                    |   |                                       |   |  |  |                          |                  |
| Address<br><b>2121 ARTHUR COLLINS PARKWAY</b>               |                                    |   |                                       | City<br><b>CEDAR RAPIDS</b>                                   |  | State<br><b>IA</b>                         | Zip Code<br><b>52404</b> |                  |
| Is Date and Time of Incident Known?<br><b>YES</b>           |                                    | Incident Date or Low Range<br><b>08/27/2021</b> |                                       | Upper Date Range  |  | Incident Time or Low Range<br><b>09:10</b> |                          | Upper Time Range |


**STATUS OF OFFENDER/JUVENILE**

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

**NARRATIVE**

Narrative of Offense Committed  
 On or about the above stated date and time, the Defendant did  
**CARRY FOR INSPECTION IN THEIR LUGGAGE A FIREARM AT THE PASSENGER SECURITY SCREENING CHECKPOINT**

**SUMMONS** I promise to appear in said court at said time and place.

|   |                              |
|---|------------------------------|
|  | Court Date <b>10/11/2021</b> |
| Signature of Defendant  | Court Time <b>8:30 AM</b>    |

In the Court At **LINN COUNTY COURTHOUSE THIRD AVENUE BRIDGE, CEDAR RAPIDS 52401**

AFFIDAVIT

**STATE OF IOWA, LINN 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

ON 08-27-21 AT APPROXIMATELY 0910 HOURS I WAS NOTIFIED BY DOUG SLAGLE TSA REGARDING A FIREARM THAT WAS FOUND IN A SCREENED CARRY-ON BAG AT CHECKPOINT BY MALIDA RILEY TSA. UPON MY ARRIVAL WAS SHOWN XRAY IMAGE OF WHAT APPEARED TO BE A FIREARM. BAG WAS OPENED AND I OBSERVED A LOADED SIGSAUER HANDGUN 9MM WITH ONE ROUND CHAMBERED AND FULL MAGAZINE. UNABLE TO TELL IF GUN WAS ON SAFE. MR. VANORDEN HE HAD FORGOT THAT HIS FIREARM WAS LOCATED IN HIS BAG.

*KR 792*

**BARNELL, KENNETH**

**A792**

Signature of Complainant or Officer, Officer Name & Number

**GENERAL PROBABLE CAUSE**

Defendant Implicated

**02 - CAUGHT IN ACT, 03 - ADMISSION/STATEMENTS**


Operating Motor Vehicle in County

Other Physical Evidence

Attempted To Inflict Injury

**STATE OF IOWA,**

**LINN COUNTY**

|  |   |  |
|--|---|--|
|    | Subscribed and sworn to before me by the person(s) signing the Complaint and Affidavit(s) on 08/27/2021                         |  |
|  | Notary Name <b>JONATHAN RON</b>   | Signature of Verifying Party<br><i>J Ron</i> |
|  | Commission Number <b>810757</b>   |  |
| My Commission Expires <b>05/24/2024</b>  | <input type="checkbox"/> Peace Officer <input checked="" type="checkbox"/> Notary <input type="checkbox"/> Prosecuting Attorney |  |
| Any person who fails to appear in court as specified by the citation may be guilty of a separate offense and the court may issue a warrant for their arrest. |   |  |