IN THE CIRCUIT COURT OF THE Seventh IN AND FOR Volusia

JUDICIAL CIRCUIT, Y, FLORIDA

N AND FOR	Volusia	COUNTY, FLORID

VSO Case Number 210012563

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent}

STATE OF FLORIDA		
COUNTY OF Volusia		
I, {full legal name} Deput	y Timothy Maxwell	, in my position as {job
itle} Deputy II	with the {no	ame of law enforcement officer/agency}
Volusia Sheriff's Office	, swear and affirm that	t the following facts are true and correct
1. {Name of Respondent}		poses a significant danger
of causing personal inju	ury to himself/herself or ot	hers by having a firearm or any
ammunition in his/her of	custody or control or by pu	irchasing, possessing or receiving a
firearm or any ammunit	tion. The following specifi	ic statements, actions, or facts give rise
	significant dangerous acts	
	oximately 1305 hours, Dep	<u> </u>
		suicidal person. Upon arrival, Deputy
Maxwell made contact v		(R1), who was parked on the side of
the roadway near the re-		she was the attending nurse for
ille loudytay liest are let		as on Hospice care due to him having
	(/ 2), //	
	ages are attached.	
1 Additional pa		
1 Additional pa		
1 Additional pa		
Additional page 2. {Name of Witness}		provided the following
2. {Name of Witness}	is/her personal knowledge:	
2. {Name of Witness} information based on hi	is/her personal knowledge:	 ;
2. {Name of Witness} information based on him advised also s	is/her personal knowledge: stated "I'm done, I want to	die in peace." stated told her
2. {Name of Witness} information based on him advised also s	is/her personal knowledge:	die in peace." stated told her
2. {Name of Witness} information based on him advised also s	is/her personal knowledge: stated "I'm done, I want to	die in peace." stated told her

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent}

AFFIDAVIT CONTINUATION

FROM SECTION 1
PAGE 2 OF 2
oral cancer. stated she met with and his wife, (O1), to discuss
hospice services. explained expressed to her he was in excruciating pain and advised he was
severely depressed. informed has been depressed over the past eight months due to the
disfigurement of his face and the pain from treatment. informed Deputy Maxwell she had to take
firearms and hide them from him because he stated he was going to shoot himself. advised
also stated "I'm done, I want to die in peace." stated told her he would buy another firearm and
hid the others.
Deputy Maxwell made contact with who expressed he was depressed and has been having a hard time
dealing with the pain, but advised his pain treatment has gotten better.
suicidal statements but advised he did not have the guts to do it.
At the completion of his investigation, Deputy Maxwell determined there is a substantial likelihood that
without care of treatment would be a risk to harm himself. Therefore, Deputy Maxwell placed
into protective custody under the Baker Act. was transported to Halifax Health, Daytona
Beach, where he received further psychiatric evaluation.
It was determined a Risk Protection Order would be completed. surrendered firearms which she hid in the closet of the master bedroom. The firearms are a Colt Huntsman .22 LR (S/N: 145230) and
a Ruger Model RG23 .22 LR (S/N: T820008) which were ran via FCIC/NCIC and were negative.
does not have a Concealed Weapon Permit.
The firearms were collected by Deputy Castro and submitted to the District Three North evidence locker
for safe keeping. Deputy Castro provided with a notice of RPO and a RPO receipt.
with a house of it o and a receipt.
A copy of the RPO was forwarded to the VSO Legal Advisor.

		VSO Case Number 210012563
3. Affiant is	X is not aware of any exis	ting protection order governing the
	any applicable statute.	ting protoction order go . onling in
7		
Known	protection orders are attache	ed
4. The quantities, ty	pes, and locations of all fire	arms and ammunition the petitioner
	he respondent's current own	ership, possession, custody or control are
as follows:		
Quantity 1	Type Colt .22LR	Location VSO Evidence
Quantity 1	Type Ruger .22LR	Location VSO Evidence
Quantity		Location
Quantity	Type	Location
Quantity	Туре	Location
Quantity	Type	Location
	FACTS IN THIS AFFIDA RECT TO THE BEST OF	VIT AND IN ANY ATTACHMENTS F MY KNOWLEDGE.
Dated: 07/07/2021	Signature of Affiar	nt: 15 Martin
Sworn to (or affirmed) and	subscribed before me by mean	ns of 🗵 physical presence or 🗌 online notarization,
this 7th day of July	, 2021 ,	by Deputy Timothy Maxwell
$\frac{1}{1}$		Affiant's name
Got MI		Deputy Lococo #8229
Signature of Attesting LEO Witn	ess	Print name of Attesting LEO Witness
_	OR	
Signature of Notary Public		-
(Print Type or Stamp Commissi	oned Name of Notary Public)	•

(Type of Identification Produced)

Produced Identification

Personally known

or