IN THE CIRCUIT COURT OF THE SEVENTH JUDICIAL CIRCUIT, IN AND FOR VOLUSIA COUNTY, FLORIDA

VSO Case Number 21-15473

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent}

	AFFIDAVIT	
STATE OF FLORIDA COUNTY OF VOLUSIA		
	with the <i>{nam</i> , swear and affirm that the	, in my position as <i>{job</i> ne of law enforcement officer/agency} ne following facts are true and correct.
of causing personal injury to	ody or control or by purc The following specific	poses a significant danger by having a firearm or any hasing, possessing or receiving a statements, actions, or facts give rise the respondent:
On 08-19-2021 at approxim Deltona, in made contact with	reference to a suicidal p	berson. Upon arrival, Deputy Johnson the following information:
Additional pages	are attached.	
2. {Name of Witness} information based on his/he		provided the following
0 Additional pages	s are attached	

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent}

VSO Case Number	
21-15473	

AFFIDAVIT CONTINUATION

FROM SECTION 1
PAGE 2 OF 2
stated her mother (V1), made some concerning statements. According to
suffers from depression and has an 7 extensive list of medical ailments.
threatened to shoot herself, which she also mentioned she would shoot and their 8 dog.
informed Deputy Johnson that does not have any access to firearms, however there are firearms in
room, which are 9 secured. had no further information to provide in reference to this incident.
Deputy Johnson made contact with who denied making any suicidal statements.
to being depressed due to family issues. had no further information to provide.
to being depressed due to faithful issues.
While on scene, Deputy Johnson noticed appeared to be overwhelmed. Due to the aforementioned
information, Deputy Johnson
determined without further psychiatric evaluation, there is a substantial likelihood that will harm
herself or others. was placed into protective custody under the Baker Act Statue. It should be
noted, is on 24-hour oxygen, therefore she was transported to Fish Memorial Hospital in Orange
City by EVAC.
With the statements made by were involving a firearm and doing harm to herself and others, a
Risk Protection Order was completed.

	_ is _X_ is not aware of a under any applicable statu	nny existing protection order governing the
respondent	under any applicable statu	ic.
<u>0</u> K	Known protection orders are	e attached
4. The quanti	ties, types, and locations of	f all firearms and ammunition the petitioner
believes to	be in the respondent's curr	ent ownership, possession, custody or control are
as follows:		
Quantity	Type	Location
0	Additional pages are attach	ed.
		R PENALTY OF PERJURY THAT THE
STATEMENTS	AND FACTS IN THIS A	FFIDAVIT AND IN ANY ATTACHMENTS
ARE TRUE AND	D CORRECT TO THE B	EST OF MY KNOWLEDGE.
Dated: 08/20/202	1 Signature	of Affiant: Dep. Eveler
Dated. 08/20/202		Tritiani.
Sworn to (or affirm	ed) and subscribed before me	e by means of 🗵 physical presence or 🗌 online notarization,
this 20th day	of August ,	2021 , by Jonathan Eveler
		Affiant's name
7. Brown	7 8783	Trevor Brown
Signature of Attesting I		Print name of Attesting LEO Witness
		OR
Signature of Notary Pu	blic	
(Print, Type, or Stamp	Commissioned Name of Notary Pub	olic)
Personally known	or Produced Identification	
Annual contracts on		
(Type of Identification	Produced)	