

IN THE CIRCUIT COURT OF THE 7th JUDICIAL CIRCUIT,
IN AND FOR Volusia COUNTY, FLORIDA

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent} [REDACTED]

VCSD Case Number
190005768

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF Volusia

I, {full legal name} Brandon Tyler Loren Howard, in my position as {job title} Deputy Sheriff II with the {name of law enforcement officer/agency} Volusia County Sheriff's Office, swear and affirm that the following facts are true and correct.

1. {Name of Respondent} [REDACTED] poses a significant danger of causing personal injury to himself/herself or others by having a firearm or any ammunition in his/her custody or control or by purchasing, possessing or receiving a firearm or any ammunition. The following specific statements, actions, or facts give rise to a reasonable fear of significant dangerous acts by the respondent:

Due to the respondent passing out his living "will" to the neighbors and making the comment of "I will be gone tomorrow". The respondent abuses alcohol, very unstable mentally, and was observed walking around the park waving a firearm.

Additional pages are attached.

2. {Name of Witness} [REDACTED] provided the following information based on his/her personal knowledge:

[REDACTED] is the property manager of the Mobile Home Park and has had many incidents with [REDACTED] related to his alcohol abuse.

Additional pages are attached.

3. Affiant ___ is is not aware of any existing protection order governing the respondent under any applicable statute.

_____ Known protection orders are attached

4. The quantities, types, and locations of all firearms and ammunition the petitioner believes to be in the respondent's current ownership, possession, custody or control are as follows:

Quantity	<u>1</u>	Type	<u>Handgun</u>	Location	<u>VCSO Evidence</u>
Quantity	<u>10</u>	Type	<u>.40 cal rounds</u>	Location	<u>VCSO Evidence</u>
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____

_____ Additional pages are attached.

AFFIANT HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND FACTS IN THIS AFFIDAVIT AND IN ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Dated: 3-15-2019 Signature of Affiant: *BK* 8782

Sworn to or affirmed and signed before me on 3-15-2019 by Brandon Howard 8782 who is personally known to me or ___ presented _____, as identification.

A. W. D. R.
Notary Public, State of Florida
My commission expires: _____