

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

VSO Case Number
21-16403

IN RE: PETITION FOR RISK PROTECTION ORDER
AGAINST {Name of Respondent} ██████████

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF Volusia

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

1. {Name of Respondent} ██████████ 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:

On 09-01-21 at 1954 Hrs., Deputies Strickland and Rutledge responded to ██████████ in reference to a disturbance. Upon arrival, Deputy Strickland met with ██████████, (V1) who stated his neighbor, ██████████ (D1), jumped over his fence while armed with a pistol which he had in his front waist band of his pants. ██████████ stated they had been in a verbal argument over nothing in particular when ██████████ raised

1 Additional pages are attached.

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

██████████ witnessed ██████████ jump over his fence while armed with a handgun in his waistband and attempt to approach him in an attacking manner. ██████████ attempted to shoot ██████████ in self defense but his own handgun malfunctioned.

0 Additional pages are attached.

3. Affiant ___ is X 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>Hi Point 9mm</u>	Location	<u>Sheriff's Evidence</u>
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____

0 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: 09-02-2021

Signature of Affiant: _____
[Handwritten Signature]

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization,

this 02 day of September, 2021, by Deputy Christopher Strickland
Affiant's name

[Handwritten Signature] 8689
Signature of Attesting LEO Witness

D/S Rutledge
Print name of Attesting LEO Witness

OR

Signature of Notary Public

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally known or Produced Identification

(Type of Identification Produced)