

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

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

VSO Case Number 22-17590

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, *{full legal name}* _____ Sheriff's Deputy Estrella, in my position as *{job title}* _____ Sheriff's Deputy _____ 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 09/12/2022, at approximately 1825, Deputy Estrella responded to _____ in reference to a mentally ill person. Upon arrival, Deputy Estrella made contact with _____ stated she arrived home to her son, _____ on the phone upset and yelling profanities. _____ stated to _____ he believed people were out to get him and that the government was working with them. _____ stated to _____ repeatedly, earlier that day and days before, that he was going

_____ 1 _____ Additional pages are attached.

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

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_____ Additional pages are attached.

AFFIDAVIT CONTINUATION

FROM SECTION 1
PAGE 2 OF 2

shoot up the UHAUL location in Sanford, killing the female employee who he believed overcharged him. [REDACTED] was unsure the UHAUL location in Sanford and also advised [REDACTED] has firearms and keeps it on his person. [REDACTED] stated she was not sure if an incident happened at the UHAUL but [REDACTED] left her house upset and was not sure where he went. [REDACTED] stated [REDACTED] just moved from Tennessee and has been acting erratically and agitated since moving back. [REDACTED] advised [REDACTED] suffers from bipolar and schizophrenia and she is very concerned about [REDACTED]s well-being. [REDACTED] provided a description of [REDACTED]s vehicle and tag number, [REDACTED] on a Dark Grey [REDACTED] and possible phone numbers for [REDACTED]. Due to [REDACTED]s statements of [REDACTED]s recent state of mind, the situation has become volatile. Deputy Estrella contacted Volusia Crime Center where they assisted in searching for [REDACTED]s social media and license plate reader results. Dispatch advised one of [REDACTED]s phone numbers was [REDACTED] in the DeBary area. Deputies conducted a BOLO and located [REDACTED]s vehicle with [REDACTED] in it in the DeBary Neighborhood Walmart parking lot. [REDACTED] advised he had two firearms in his vehicle. Both firearms were recovered and submitted into evidence. [REDACTED] was taken into protective custody under the provision of the Baker Act and transported to Stewart Marchman. An inventory of [REDACTED]s personal belongings completed and placed in a bag and given to the staff at Stewart Marchman. Under protective custody, [REDACTED] did not make any statements nor talk to Deputies.

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:

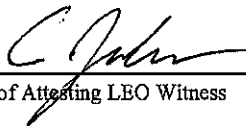
Quantity	_____	1	Type	<u>Semi auto pistol</u>	Location	<u>Evidence</u>
Quantity	_____	1	Type	<u>Semi auto pistol</u>	Location	<u>Evidence</u>
Quantity	_____		Type	_____	Location	_____
Quantity	_____		Type	_____	Location	_____
Quantity	_____		Type	_____	Location	_____
Quantity	_____		Type	_____	Location	_____

_____ 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: 09/22/2022 Signature of Affiant: 

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 22 day of September, 2022, by Sheriff's Deputy Estrella
Affiant's name


Signature of Attesting LEO Witness

D/S Johnson #8743
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)

VOLUSIA SHERIFF'S OFFICE

Clerk of Courts Number

RISK PROTECTION ORDER / BAKER ACT FIREARMS AND AMMUNITION RECEIPT

Page 1 of 1 Pages

Report Date 09/12/2022	Report Time 2200	Orig. Reported Date 09/12/2022	Nature of Call (for Incident) Baker Act	Agency Report Number 22-17590	1. Original 2. Supplement 1
Status Code: 1. Evidence 6. Recovered		7. Recovered (Outside Agency Recovered)		13. Disposal 17. Baker Act	
22. RPO (Voluntary Surrender)		23. RPO (Seized)		Category Code: J. Special Documents Y. All Other Items (Guns and Ammunition)	
Leave Blank:	Item #	Status	Category	Quantity	Description
	1	17	Y	1	Pistol with magazine
If Gun	Make Bursa	Model Firestorm	Caliber .380	Type / Cat Pistol	Action Semi-automatic
				Finish Black	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
	2	17	Y	1	Pistol with magazine
If Gun	Make Kimber	Model	Caliber 9mm	Type / Cat Pistol	Action Semi-automatic
				Finish Black	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
	3	17	Y	7	Bullets
If Gun	Make	Model	Caliber 9mm	Type / Cat	Action
				Finish	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
	4	17	Y	7	Bullets
If Gun	Make	Model	Caliber .380	Type / Cat	Action
				Finish	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
If Gun	Make	Model	Caliber	Type / Cat	Action
				Finish	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
If Gun	Make	Model	Caliber	Type / Cat	Action
				Finish	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
If Gun	Make	Model	Caliber	Type / Cat	Action
				Finish	Serial Number
Leave Blank:	Item #	Status	Category	Quantity	Description
If Gun	Make	Model	Caliber	Type / Cat	Action
				Finish	Serial Number

INITIALS
 Pursuant to 790.401(7)(c), Florida Statutes, the firearm(s) and/or ammunition and/or license to carry a concealed weapon were surrendered by Respondent or seized by a Deputy of the Volusia Sheriff's Office on _____
 Respondent _____
 I am the owner of the firearm(s), ammunition, or license to carry a concealed weapon or firearm and I hereby knowingly and voluntarily consent to the surrender of the items listed in this report to the Volusia Sheriff's Office.
 Respondent _____
 I am the owner of the firearm(s) and/or ammunition listed in this report. I hereby request the firearms and/or ammunition be turned over to:
 (Name) _____
 (Address) _____
 (Telephone Number) _____
 Respondent _____
 I, Deputy or Evidence Employee of the Volusia Sheriff's Office, acknowledge receipt of the above listed items which were either surrendered or seized on September 12, 2022, at 185 N Charles R Beall Blvd, DeBary, FL 32713

SIGNATURES
 Unable to Sign _____ 09/12/22 _____
 Respondent Date Deputy

CUSTODY	Item # 1-4	Date: 09/22/22	Time: 0200	Released by (Printed): D/S Johnson	Released by (Signature): <i>C Johnson</i>	Received by (Printed): D6 Evidence Locker	Received by (Signature):	
	Leave Blank			Reason for Change: Evidence				
CUSTODY	Item #	Date:	Time:	Released by (Printed):	Released by (Signature):	Received by (Printed):	Received by (Signature):	
	Leave Blank			Reason for Change:				
ADMIN.	Officer Reporting - Printed D/S Johnson			Officer Reporting - Signature <i>C Johnson</i>		ID Number 8743	Unit 1061	Date 09/13/22
	Officer Reviewing - Printed (if Applicable)			Officer Reviewing - Signature (if Applicable)		ID Number	Unit	Date