

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

VSO Case Number 23-139

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

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, *{full legal name}* _____ D/S BERARD 9417 _____, 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:

SEE CONTINUATION PAGE.

_____ 1 Additional pages are attached.

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

SEE SECTION 1.

_____ Additional pages are attached.

AFFIDAVIT CONTINUATIONFROM SECTION 1 PAGE OF

BWC

On 01/03/2023 at 1210 hours, Deputy Dolan responded to _____ Ormond Beach, in reference to a suicidal person.

Due to individuals in this report having a last name in common, first names will be used after they have been initially identified.

Upon arrival, Deputy Dolan made contact with _____ (V1) who advised she had a mental health crisis resulting in her attempting suicide by means of shooting herself with her spouses firearm. _____ stated she suffers from Bipolar depression, of which she takes medicine for. _____ stated she needs to remove herself from the family because she believes she may hurt herself or her family members.

Deputies also made contact with _____s spouse, _____ (R1), who stated _____s mental health has deteriorated over the past 2 years since they had a child, _____ (O1). It should be noted _____ was present during the incident. _____ advised _____ has become overly obsessed with religion and radical ideologies and she believes she is an angel, and he must follow her path if he wants to go to heaven. _____ stated _____ has manic like episodes and has attempted this type of thing in the past. He believes she may have additional undiagnosed mental health issues and need her medications re-evaluated.

After speaking with all parties on scene, Deputy Dolan determined without further evaluation and treatment _____ posed a significant danger to herself and/or others. _____ was placed under the protective custody of a Baker Act and later transported to Halifax Health 704.

A Risk Protection Order was completed for _____ and submitted to the District 3 North reports box and submitted to records.

This report was also faxed to DCF and forwarded to Director Quann.

Case Status: Closed

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 _____	Type _____	Location _____
Quantity _____	Type _____	Location _____
Quantity _____	Type _____	Location _____
Quantity _____	Type _____	Location _____
Quantity _____	Type _____	Location _____
Quantity _____	Type _____	Location _____

_____ Additional pages are attached.

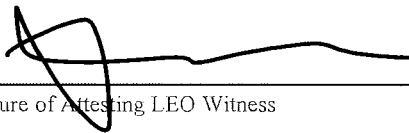
AFFIANT HEREBY CERTIFIES UNDER PENALTY OF PERJURY THAT THE STATEMENTS AND FACTS IN THIS AFFIDAVIT AND IN ANY ATTACHMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Dated: 01/03/2023

Signature of Affiant: 

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

this 03 day of January, 2023, by D/S BERARD
Affiant's name


Signature of Attesting LEO Witness

D/S MELE
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)