

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

VSO Case Number 230015533

IN RE: PETITION FOR RISK PROTECTION ORDER
AGAINST *{Name of Respondent}* [REDACTED]

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, *{full legal name}* CODY JOSEPH FORSTER, in my position as *{job title}* 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}* [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:

See continuation page.

1 Additional pages are attached.

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

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1 Additional pages are attached.

AFFIDAVIT CONTINUATION

FROM SECTION 1
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BWC

On 08-14-2023, at approximately 0901 hours, Deputy Forster responded to _____ Seville in reference to a suicidal person. Upon arrival, Deputy Forster made contact with _____ (VI) who explained the following:

_____ stated he was drunk and drove through the night ending at _____ Seville. _____ explained he rented a silver Honda Civic bearing Florida tag _____ off an app called Turo. _____ advised there was a firearm in the vehicle which he unloaded and put in the trunk. _____ advised he owns the handgun in the vehicle and a _____ rifle at his residence. _____ explained while he was drunk, he had thoughts of shooting himself with the firearm, however he never put the firearm to his head. _____ advised he is struggling with his mental state because he recently lost his service dog.

Based on the totality of circumstances, Deputy Forster placed _____ in protective custody under the baker act due to the substantial likelihood that without care or treatment _____ will cause serious bodily harm to himself or others.

Deputy Forster later completed a Risk Protection Order on _____

Deputy Forster completed a criminal history check on _____ which yielded negative results for any prior felony convictions.

Deputy Forster located a black Glock 17 _____ with an extended mag and five rounds of _____ ammunition in the trunk of _____'s vehicle.

Deputy Forster completed a FCIC/NCIC check on the firearm which yielded negative results.

Deputies conducted an inventory of the Honda Civic which yielded negative results for anything of value. The Honda Civic was later towed by Pratts Towing and added to the tow file.

_____ was later transported to Halifax Hospital, Daytona Beach without incident.

Case Status: Closed

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

0 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>Glock 17</u>	Location	<u>In custody of VSO</u>
Quantity	<u>1</u>	Type	<u>Daemel Defense .300</u>	Location	<u>[REDACTED]</u>
Quantity	<u>1</u>	Type	<u>magazine</u>	Location	<u>VSO Evidence</u>
Quantity	<u>5</u>	Type	<u>luger rounds</u>	Location	<u>VSO Evidence</u>
Quantity	_____	Type	_____	Location	_____
Quantity	_____	Type	_____	Location	_____

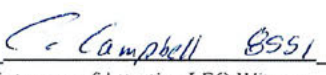
0 Additional pages are attached.

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: 08/14/2023 Signature of Affiant: 

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 14 day of August, 2023, by D/S Cody Forster
Affiant's name


Signature of Attesting LEO Witness


Print name of Attesting LEO Witness

OR

Signature of Notary Public

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

Personally known • Produced Identification

(Type of Identification Produced)