

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

VSO Case Number  
230003062

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

**AFFIDAVIT**

STATE OF FLORIDA  
COUNTY OF VOLUSIA

I, *{full legal name}* TYLER KING, in my position as *{job title}* DEPUTY with the *{name of law enforcement officer/agency}* VOLUSIA SHERIFFS 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 02/16/2023 at approximately 0537 hours Deputy Rodriguez responded to \_\_\_\_\_ Deltona in reference to a 911 Check.  
  
Upon arrival Deputy Rodriguez made contact with \_\_\_\_\_ (V1), who appeared to be under the influence of alcohol. Deputy Rodriguez observed two loaded AR magazines in \_\_\_\_\_'s left pocket.

\_\_\_\_\_ Additional pages are attached.

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

\_\_\_\_\_ Additional pages are attached.

**AFFIDAVIT CONTINUATION**

FROM SECTION \_\_\_\_\_  
PAGE 2 OF 2

Deputy Rodriguez asked [REDACTED] if he was ok and needed any law enforcement or medical assistance. [REDACTED] then became irate and asked why Deputy Rodriguez was on his property. Deputy Rodriguez informed [REDACTED] he was called for a 911 check at the address. [REDACTED] stated he did not believe Deputy Rodriguez and removed a loaded AR magazine from his right pocket. Deputy Rodriguez then ordered [REDACTED] to not reach into any of his pockets or towards his waistline. [REDACTED] continued to yell at Deputy Rodriguez and began to walk back towards his garage. [REDACTED] then grabbed the other two loaded magazines and threw them on the hood of his vehicle. Deputy Davis then arrived on scene. [REDACTED] then informed Deputies [REDACTED] was on his property and would shoot both Deputies. Deputies then secured [REDACTED]

Deputies observed dried blood on [REDACTED]'s right hand and right knee cap. Due to the circumstances Deputies completed a sweep of the home to make sure there were no other injured parties. Deputies were unable to locate any other parties and secured the home.

[REDACTED] was taken into involuntary custody under the Baker Act due to his threats to shoot and kill law enforcement. While in custody [REDACTED] continued to inform Deputy Rodriguez when [REDACTED] was released he would kill Deputies and blow their heads off.

A Risk Protection Order was completed on [REDACTED] and the three loaded magazines were entered into evidence by Deputy T. King.

[REDACTED] was transported to Halifax Hospital.

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	<u>Unknown</u>	Type	<u>Ammunition</u>	Location	<u>[REDACTED]</u>	Dlt
Quantity	<u>Unknown</u>	Type	<u>Handgun</u>	Location	<u>[REDACTED]</u>	Dlt
Quantity	<u>Unknown</u>	Type	<u>Rifle</u>	Location	<u>[REDACTED]</u>	Dlt
Quantity	<u>Unknown</u>	Type	<u>Shotgun</u>	Location	<u>[REDACTED]</u>	Dlt
Quantity	<u>3</u>	Type	<u>PMAG AR</u>	Location	<u>Evidence</u>	
Quantity	<u>89</u>	Type	<u>223 ammunition</u>	Location	<u>Evidence</u>	

\_\_\_\_\_ 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: 02/16/2023 Signature of Affiant: [Signature]

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this 16 day of February, 2023, by D/S T. King  
Affiant's name

[Signature]  
Signature of Attesting LEO Witness

Dep T Keagle  
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 Court's Number

**RISK PROTECTION ORDER / BAKER ACT FIREARMS AND AMMUNITION RECEIPT**

Page 1 of 1 Pages

Report Date 02/16/23	Report Time 0850	Orig. Reported Date 02/16/23	Nature of Call (for Incident) BAKER	Agency Report Number 230003062	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 # 2	Status 23	Category Y	Quantity 3	Description AR15 FMAGS		
If Gun	Make	Model	Caliber	Type / Cat	Action	Finish	Serial Number
Leave Blank:	Item # 3	Status 23	Category Y	Quantity 89	Description 223 AMMUNITION		
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
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 \_\_\_\_\_, at \_\_\_\_\_

**SIGNATURES**

Respondent \_\_\_\_\_ Date 2/24/23

Deputy \_\_\_\_\_

CUSTODY	Item # 1-2	Date: 02/16/23	Time: 0650	Released by (Printed): D/S T. KING	Released by (Signature):	Received by (Printed): D4 EVIDENCE	Received by (Signature):	
	Leave Blank				Reason for Change: RPO			
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 T. KING			Officer Reporting - Signature 		ID Number 9239	Unit 1A42	Date 02/16/23
	Officer Reviewing - Printed (if Applicable)			Officer Reviewing - Signature (if Applicable)		ID Number	Unit	Date