

**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
VP240005695

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, {full legal name} SHAWN CRADDOCK, 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

1 Additional pages are attached.

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

SUBJECT MADE STATEMENTS TO HIS SPOUSE

0 Additional pages are attached.

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

VSO Case Number
VP240005695

AFFIDAVIT CONTINUATION

FROM SECTION 1
PAGE 1 OF 1

***BWC RECORDING ***

On 03/13/2024, at approximately 1410 hours, Deputy Craddock responded to [REDACTED]
[REDACTED] Debary in reference to a suicidal person.

Upon Arrival Deputies made contact with [REDACTED] (R1) who stated the following:

[REDACTED] explained he and [REDACTED] (V1) were sitting at home when [REDACTED] stated to [REDACTED] that he was in a lot of pain due to medical issues with this toe and ankle and wanted to end his life. [REDACTED] went on to state [REDACTED] then told him he would go down to a local gun store "Shwub tactical" and purchase a firearm since he did not own any and use it to kill himself.

After speaking with [REDACTED] who confirmed he made the statements, Deputy Craddock determined there is a substantial likelihood that without care or treatment the involved individual will cause serious bodily harm to himself.

[REDACTED] was taken into protective custody under the Baker Act and transported to Advent Health Fish Memorial via EVAC for his medical needs before being transported to a Backer Act receiving facility. Based on [REDACTED]'s statement of trying to purchase a firearm to end his life, Deputy Bernard completed and submitted a TRPO for review.

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>0</u>	Type	<u>0</u>	Location	<u>0</u>
Quantity		Type		Location	
Quantity		Type		Location	
Quantity		Type		Location	
Quantity		Type		Location	
Quantity		Type		Location	

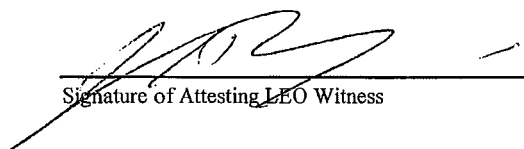
0 Additional pages are attached.

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: 03/13/2024

Signature of Affiant:  9537

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 13 day of March, 2024, by D/S S. CRADDOCK 9537
Affiant's name


Signature of Attesting LEO Witness

D/S J. BERNARD 8833
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)