

**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
VP250001154

AFFIDAVIT

STATE OF FLORIDA
COUNTY OF VOLUSIA

I, *{full legal name}* _____ Zachary Daniel Button _____, 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}* _____ 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 attached page.

_____ 1 _____ Additional pages are attached.

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

See attached page.

_____ 1 _____ Additional pages are attached.

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	Type	Location
Quantity	Type	Location
Quantity	Type	Location
Quantity	Type	Location
Quantity	Type	Location
Quantity	Type	Location

1 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: 01/19/2025 Signature of Affiant: Zachary Button

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this 19 day of January, 2025, by Deputy Button
Affiant's name


Signature of Attesting LEO Witness

Avery Emanuel
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)

AFFIDAVIT CONTINUATION

FROM SECTION _____

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Narrative

*** BWC RECORDING ***

On 01/18/2025, at approximately 1722 hours, Deputy Haines responded to _____ Deltona in reference to a suicidal person.

Upon arrival, Deputies made contact with _____ (O1) who advised the following: _____ was at her friend's house when _____ (V1) called her phone telling her to come home. _____ stated he seemed off but left her friend's house and went home. _____ advised when she arrived home, _____ stated he was going to kill himself. _____ observed her firearm sitting next to _____ on the couch. _____ did not make any attempts to grab the firearm or threaten _____ with violence. _____ stated she immediately grabbed the firearm and ran outside to lock it in her vehicle, preventing _____ from obtaining it. _____ then contacted law enforcement for further assistance.

Deputies then contacted _____ who advised the following:

_____ was heavily intoxicated when speaking to deputies. _____ was verbally abusive to deputies and was not forthcoming with information. _____ did not deny any claims of wanting to kill himself when asked by deputies.

_____ completed a sworn written statement detailing the incident.

The firearm in question belonged to _____ son and was turned over to him. _____ does not have access to any other firearms.

After speaking with _____ Deputies determined without psychological evaluation and treatment _____ posed a significant danger to himself and others. _____ was placed under the protective custody of a Baker Act and later transported to SMA without further incident.

CASE STATUS: Closed.