

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

VSO Case Number  
VP250022989

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

AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF VOLUSIA

I, *{full legal name}* Sean Patrick Carroll, 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 pages.

1 Additional pages are attached.

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

See attached pages.

1 Additional pages are attached.

**AFFIDAVIT CONTINUATION**

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---BWC RECORDING---

On 11/09/2025 at approximately 0640 hours, Deputy Carroll responded to \_\_\_\_\_, Deltona, in reference to a suicidal person. Upon arrival, Deputy Carroll made contact with \_\_\_\_\_ (W1), who advised her boyfriend, identified as \_\_\_\_\_ (V1), had been in a depressive state for the past few days.

\_\_\_\_\_ stated to deputies that \_\_\_\_\_ has made several statements to her over the past few days about wanting to end his life. She stated that last night, she took a knife from \_\_\_\_\_ to prevent him from using it on himself. \_\_\_\_\_ advised that \_\_\_\_\_ had not used the knife on himself or anyone else. She observed \_\_\_\_\_ sitting on their bed, holding a pistol, appearing in deep thought as if contemplating using the firearm. She took the knife and the firearms inside the residence and secured them away from \_\_\_\_\_. \_\_\_\_\_ advised that after she had taken the weapons from \_\_\_\_\_, he began curling into the fetal position and started saying, he doesn't wanna do it anymore and to just let him go. \_\_\_\_\_ completed a sworn written statement and was provided with a VSO business card with the case number for this incident.

Deputy Carroll spoke with \_\_\_\_\_ who admitted to having the firearm with him on Friday night but stated that he had disassembled it to prevent himself from using it. \_\_\_\_\_ stated to deputies he was ok but would be willing to go the next time. \_\_\_\_\_ was secured in handcuffs and placed in the rear of the patrol vehicle. Deputy Carroll did not observe any visible injuries to \_\_\_\_\_'s person at the time of this incident.

\_\_\_\_\_ gave consent for Deputy Audrey to collect the firearm and ammunition for safekeeping; a Springfield Armory XD-9, 9mm (SNN: \_\_\_\_\_), and 16, 9mm rounds were collected and later submitted to the District 4 evidence lockers.

It was determined that without proper treatment, \_\_\_\_\_ would be a danger to himself. \_\_\_\_\_ was detained by deputies under the Baker Act and later transported to SMA, Daytona Beach, for further treatment.

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>16</u>	Type	<u>9 mm rounds</u>	Location	<u>VSO EVIDENCE</u>
Quantity	<u>1</u>	Type	<u>9 mm firearm</u>	Location	<u>VSO EVVIDENCE</u>
Quantity	<u>          </u>	Type	<u>          </u>	Location	<u>          </u>
Quantity	<u>          </u>	Type	<u>          </u>	Location	<u>          </u>
Quantity	<u>          </u>	Type	<u>          </u>	Location	<u>          </u>
Quantity	<u>          </u>	Type	<u>          </u>	Location	<u>          </u>

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: 11/09/2025 Signature of Affiant: SEAN CARROLL

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this 9th day of November, 2025, by Deputy Sean Carroll  
Affiant's name

Brian Santiago  
Signature of Attesting LEO Witness

Deputy Brian Santiago  
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)