

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  
VP250015842

**AFFIDAVIT**

STATE OF FLORIDA  
COUNTY OF VOLUSIA

I, {full legal name} DEPUTY TAYLOR M WHITE, in my position as {job title} DEPUTY SHERIFF 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:

\*\*\*BWC RECORDING\*\*\*

On July 31 2025, at approximately 2215 hours, Deputy White responded to \_\_\_\_\_ DeLand in reference to a suicidal person. Upon arrival, Deputy White made contact with \_\_\_\_\_ (R1) who advised while she was at the residence with her husband, \_\_\_\_\_ (V1) he had ben consuming alcohol and became irate due to

1 Additional pages are attached.

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

           Additional pages are attached.

IN RE: PETITION FOR RISK PROTECTION ORDER

AGAINST {Name of Respondent} [REDACTED]

VSO Case Number

VP250015842

**AFFIDAVIT CONTINUATION**

FROM SECTION 1

PAGE 2 OF 2

her not wanting to consume alcohol with him. [REDACTED] further advised during the incident, [REDACTED] mentioned he would just, "blow his head off" due to being irate. [REDACTED] provided a sworn oral statement which was captured on Sergeant Medina's body worn camera. Once contact was made with [REDACTED] he denied ever making any statements like that and was only celebrating by drinking alcohol due to his birthday being the following day. [REDACTED] provided no further information in reference to the incident. It should be noted, [REDACTED] did exhibit behavior of an intoxicated person and Deputy White could smell the alcohol emitting from his breath. Based on the information, Deputy White determined that without proper care or treatment, [REDACTED] could be a harm to himself and others. Deputy White acted in good faith and took [REDACTED] into protective custody under the Baker Act Statue. [REDACTED] was later transported to the Stewart Marchman Facility, located in Daytona Beach for further assistance. Also, [REDACTED] and [REDACTED] mentioned there were no firearms in the residence, nor does [REDACTED] possess any firearms. Due to the fact [REDACTED] made a comment he would "blow his head off". Deputy White completed a Risk Protection Order. Deputy White took no further action in reference to the incident.

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 |

         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: 08/01/2025

Signature of Affiant:

Taylor White #9087

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization,

this 1 day of August, 2025, by D/S TAYLOR M WHITE #9087

Affiant's name

AJ Aberle #9691

Signature of Attesting LEO Witness

D/S AJ ABERLE #9691

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)

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

VOLUSIA SHERIFF'S OFFICE,  
Petitioner

v.

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

|                                |
|--------------------------------|
| VSO Case Number<br>VP250015842 |
|--------------------------------|

\_\_\_\_\_,  
Respondent

**PETITION FOR TEMPORARY EX PARTE RISK PROTECTION ORDER  
AND RISK PROTECTION ORDER**

**SECTION I. PETITIONER**

1. Petitioner's full legal name or name of petitioning agency: VOLUSIA SHERIFFS OFFICE
2. Petitioner's law enforcement office/agency is located at *{street address, city, state, and zip code}*:  
123 WEST INDIANA AVE DELAND FL 32724

**SECTION II. RESPONDENT**

1. Respondent's full legal name: \_\_\_\_\_
2. Respondent's current address: *{street address, city, state, and zip code}*:  
\_\_\_\_\_ DELAND FL 32720
3. Physical description of Respondent:  
Race: W Sex: Male ☒ Female ☐ Date of Birth: \_\_\_\_\_  
Height: 5'09 Weight: UNK Eye Color: UNK Hair Color: BLACK
4. Distinguishing marks or scars: \_\_\_\_\_
5. Vehicle *{make/model}*: \_\_\_\_\_ Color: \_\_\_\_\_ Tag Number: \_\_\_\_\_
6. Other names Respondent goes by *{aliases or nicknames}*: \_\_\_\_\_
7. Respondent's email address *{if known}*: \_\_\_\_\_
8. Respondent's Driver's License number *{if known}*: \_\_\_\_\_
9. Respondent's attorney's name, address, and telephone number *{if known}*: \_\_\_\_\_

### SECTION III. BASIS FOR PETITION

VSO Case Number  
VP250015842

In support of this Petition the undersigned Law Enforcement Officer/Agency alleges:

1. 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.
2. A sworn affidavit alleging specific statements, actions, or facts based on personal knowledge that give rise to a reasonable fear of significant dangerous acts by the Respondent is attached to this petition and incorporated by reference.
3. The attached sworn affidavit includes a list of the quantities, types, and locations of all firearms and ammunition believed to be in the Respondent's ownership, possession, custody, or control.
4. Respondent poses a significant danger of injury to himself/herself or others by having in his/her control, or by purchasing, possessing, or receiving, a firearm or ammunition.

☒ **[Required for Temporary Ex Parte Risk Protection Order]** Respondent poses this significant risk of injury in the near future.

5. Relevant evidence for the Court's consideration is detailed in the attached affidavit and shows that the Respondent:

- ☐ was involved in a recent act or threat of violence against himself/herself or others;
- ☐ engaged in an act or threat of violence; including but not limited to acts or threats of violence against himself/herself; within the past 12 months;
- ☐ is seriously mentally ill or has recurring mental health issues;
- ☐ has violated a risk protection order or no contact order issued under sections 741.30, 784.046, or 784.0485, Fla. Stat.;
- ☐ is the subject of a previous or existing risk protection order;
- ☐ has violated a previous or existing risk protection order;
- ☐ has been convicted of, had adjudication withheld on, or pled *nolo contendere* in Florida or in any other state to a crime that constitutes domestic violence as defined in s. 741.28, Fla. Stat.;
- ☒ has used, or threatened to use, against himself/herself or others, any weapons;
- ☐ has unlawfully or recklessly used, displayed or brandished a firearm;
- ☐ has used or threatened to use on a recurring basis physical force against another person or has stalked another person;
- ☐ has been arrested for, convicted of, had adjudication withheld, or pled *nolo contendere* to a crime involving violence or a threat of violence in Florida or in any other state;
- ☐ has abused or is abusing controlled substances or alcohol;
- ☐ has recently acquired firearms or ammunition;
- ☐ other (Additional relevant information may be attached).

#### SECTION IV. NOTICE

|                                |
|--------------------------------|
| VSO Case Number<br>VP250015842 |
|--------------------------------|

\_\_\_\_ Petitioner has made a good faith effort to provide notice to a family or household member of the Respondent and to any known third party who may be at risk of violence in compliance with s. 790.401(2)(f), Fla.Stat.

\_\_\_\_ Petitioner will take the following steps to provide notice as required by s. 790.401(2)(f), Fla.Stat.

---

#### SECTION V. RISK PROTECTION ORDERS

For the foregoing reasons, petitioner requests the Court to enter:

X A **TEMPORARY EX PARTE RISK PROTECTION ORDER** in this matter requiring Respondent to:

1. Immediately surrender all firearms and ammunition in his or her custody, control, or possession and any license to carry a concealed weapon or firearm to the *{name of law enforcement agency}*; VOLUSIA SHERIFFS OFFICE
2. Not have in his/her custody, control, or possession any firearm or ammunition while this order is in effect;
3. Not purchase, possess, receive, or attempt to purchase or receive, a firearm or ammunition while this order is in effect; and
4. Abide by any other lawful relief the Court may order.

Petitioner further requests this Court to schedule a Hearing for a Risk Protection Order to be held within 14 days.

\_\_\_\_ A **RISK PROTECTION ORDER** in this matter requiring Respondent to:

1. Immediately surrender all firearms and ammunition in his or her custody, control, or possession and any license to carry a concealed weapon or firearm to the *{name of law enforcement agency}*; \_\_\_\_\_
2. Not have in his/her custody, control, or possession any firearm or ammunition while this order is in effect;
3. Not purchase, possess, receive, or attempt to purchase or receive, a firearm or ammunition while this order is in effect; and
4. Abide by any other lawful relief the Court may order.

Petitioner requests the Risk Protection Order to remain in effect for a period the Court deems appropriate, up to and including but not exceeding 12 months.

Respectfully submitted this 1 day of AUGUST, 2025.

Jayln White #9087

Signature of Petitioner

VOLUSIA SHERIFFS OFFICE

Law Enforcement Agency

123 WEST INDIANA AVE DELAND FL 32720

Service Address