IN THE CIRCUIT COURT OF THE 18th JUDICIAL CIRCUIT, IN AND FOR SEMINOLE COUNTY, FLORIDA

IN RE: PETITION FOR RISK PROTECTIC AGAINST {Name of Respondent}	ON ORDER
<u>A</u> F	FFIDAVIT .
STATE OF FLORIDA	
COUNTY OF SEMINOLE	
I, {full legal name}	, in my position as {job title}
	with the {name of law enforcement agency}
	, swear and affirm that the following facts are true
and correct.	
1. {Name of Respondent}	poses a significant danger
of causing personal injury to himse	elf or herself or others by having a firearm or any
ammunition in his or her custody or	control or by purchasing, possessing or receiving a
firearm or any ammunition. The following	lowing specific statements, actions, or facts give rise
to a reasonable fear of	significant dangerous acts by Respondent:
	Additional pages are attached.

{Name of witness}	provided the following	
information based on their personal knowledge:		
Additional pages are a		
Affiant is	is not aware of any existing protection order governing	
Respondent under any applica	ble statute.	
Respondent under any applica Known protection ord		
Known protection ord		
Known protection ord	lers are attached.	
The quantities, types, and locato be in Respondent's current	ders are attached. It is a set of all firearms and ammunition the petitioner believes	
Known protection ord The quantities, types, and loca to be in Respondent's current Quantity Type	ders are attached. Attions of all firearms and ammunition the petitioner believes ownership, possession, custody or control are as follows:	
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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:	Signature of Affiant:	
Sworn to or affirmed and signed before me o	n	_by
who is personally known to me or	presented	,
as identification.		
	Notary Publ	ic, State of Florida
		sion expires: