

STATE OF FLORIDA
DEPARTMENT OF CORRECTIONS

Docket #: _____
DC #: _____

AFFIDAVIT
VIOLATION OF DRUG OFFENDER PROBATION

Before me this day personally appeared _____ who, being first duly sworn says that _____, hereinafter referred to as the offender, was on the ____ day of _____, A.D. ____ placed on _____ for the offense of _____ in the ____ Court of _____ County, for a term of _____ in accordance with the provisions of Chapter 948, Florida Statutes.

Affiant states that the offender was instructed on the conditions of drug offender probation on _____ by Officer _____.

Affiant further states that the offender has not properly conducted himself, but has violated the conditions of his drug offender probation in a material respect by _____

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

Correctional Probation Officer

THIS AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO UNDER S. 117.10 OR 92.50, FLA. STAT.

Sworn to and subscribed before me this _____ (day) of _____ (month), _____ A.D. (year) by _____, who is _____ or has produced identification _____.

Signature of Attesting
Officer Under S. 117.10, F.S. _____ Title: _____

Notary Public _____
State of Florida at Large for _____ County

Approved by Supervisor: _____ Date _____

Officer Telephone/E-Mail Address
DC3-216 (Revised 11/21/17)

Distribution: Original: Court
Copy: Left Side-Offender File