

Checklist for Domestic-Violence Related Report

- ✓ Background Information
 - Time of incident
 - Time of dispatch
 - Time of arrival
 - Time of first contact with victim

- ✓ Statements/Witnesses
 - Emotional state of victim(s)
 - Emotional state of suspect(s)
 - Statements about incident by victim(s)
 - Description of visible injuries/physical impairment
 - Statements about incident by suspect(s)
 - Statements about incident by other witnesses (including children)

- ✓ Crime Scene
 - Pictures taken/evidence gathered (injuries; weapon; scene; evidence, e.g., bloody clothing)

- ✓ Children Present
 - Names/ages
 - Whereabouts
 - Were children directly involved in incident?

- ✓ Medical Treatment
 - At scene, at hospital

- ✓ Dangerous Suspect Assessment
 - Record any indications that
 - Suspect owns or has access to guns.
 - Suspect is likely to use weapon against a family member or others.
 - The violence is getting more severe or more frequent. How?
 - Suspect has threatened to kill victim or others. Who?
 - Victim believes suspect may seriously injure or kill her/him.
 - Suspect seems obsessed or it stalking victim.
 - There has been recent separation, OFP or divorce in past 6 months.
 - Suspect appears to be reacting to the OFP or divorce in a dangerous way.

- ✓ Contact Information
 - Address/phone/workplace of victim and other witnesses
 - Address/phone/workplace of person able to reach victim

- ✓ Victim Notification