**Homicide Information**

**Utah Violent Death Reporting System**

**Utah Office of the Medical Examiner**

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**Was the homicide related to…**
- Another crime (describe)?
- Gang activity/conflict?
- Selling, using, possessing drugs?
- A hate crime?
- Arguments over money or property?
- Jealousy over a current/former intimate partner?
- Mutual physical fight among at least three people?
- Conflict between former/current intimate partners?
- Some other argument?

**Was the victim…**
- A bystander?
- Using a weapon?
- Acting in self-defense?
- Intervening to assist a crime victim?

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In general, what events led up to the suspect(s) killing the victim(s)?

What is the relationship between the suspect(s) and victim(s)?

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For violent death data contact:

Violence and Injury Prevention Program
288 North 1460 West
Salt Lake City, UT 84114-2106
801-538-6141
vipp@utah.gov

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Call medical examiner if death is a…
- Suicide
- Homicide
- Accident
- Sudden unexpected death in a healthy person
- Infant or child death
- Death involving a vehicle
- Welfare or judicial in-custody death
- Job-related death (industrial)
- Overdose, firearm, or violent death

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Please provide the victim’s…
- Age
- Sex
- Race
- Residential and injury address
- Health history
- Primary care physician name and number
- Psychological provider name and number
# Important Information to Document

## For all persons involved in the incident
- Name, sex, age, race, ethnicity
- Address and ZIP code of residence

## Event information
- Time and date of injury
- Address and ZIP code of injury
- Type of location where injury occurred (e.g., apartment, parking lot, car)

## Suicide Information

### Did the victim...
- Try to commit suicide in the past?
- Leave a suicide note (what did it say)?
- Tell someone about a plan to commit suicide?

### What did friends/family give as the reason(s) the victim committed suicide?

## Firearm Information

### What is the firearm...
- Type (revolver, pistol, shotgun, etc.)?
- Make/model/caliber?
- Ammunition caliber?

### Did the victim have problems with...
- A crisis in the past two weeks (describe)?
- Impending crisis (court/visitation) within 2 weeks (describe)?
- Physical health (describe)?
- Drugs or alcohol?
- An intimate partner?
- A non-intimate relationship?
- Work?
- School?
- Finances?
- Criminal/non-criminal charges (past, present, pending)?

### Was the bullet or casing recovered?
- Who is the owner of the firearm?
- Was the firearm stored?
- If so, was it stored locked or loaded?

## Poison Information

### Was the poison a...
- Street/recreational drug?
- Alcohol?
- Prescription drug?
- Other poison?

### If a prescription drug, please provide...
- Patient name
- Fill date
- # prescribed
- # remaining