

Lethality Assessment Questions SB1224 Section 59

1.	Did the aggressor ever use a weapon against you or threaten you with a weapon?
2.	Did the aggressor ever threaten to kill you or your children?
3.	Do you believe the aggressor will try to kill you?
4.	Has the aggressor ever choked you or attempted to choke you?
5.	Does the aggressor have a gun or could the aggressor easily obtain a gun?
6.	Is the aggressor violently or constantly jealous, or does the aggressor control most of your daily activities?
7.	Did you leave or separate from the aggressor after you were living together or married?
8.	Is the aggressor unemployed?
9.	To the best of your knowledge, has the aggressor ever attempted suicide?
10.	Do you have a child whom the aggressor believes is not the aggressor's biological child?
11.	Has the aggressor ever followed, spied on, or left threatening messages for you?
12.	Is there anything else that worries you about your safety and, if so, what worries you?