**Thames Valley Police
Partnership Agency Intelligence Sharing Submission Form**

Please complete all 3 sections of this form and return to the relevant county e-mail address listed at the bottom of the form.

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| **Reporting Person Details** |
| Reporting Person Name |  |
| Reporting Person Job Title & Organisation |  |
| Reporting Person E-mail Address |  |
| Reporting Person Telephone |  |

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| **Source Details** |
| Does the information originate from the person above? |   |
| If no please provide the source details below. This will be held securely and not released. |
| Source Name and Date of Birth |  |
| Source Address |  |
| Source Telephone |  |
| Source E-mail |  |
| Do you believe the source is willing to be contacted by police? |   |



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| **Intelligence Report** |
| Date of Report  |  |
|  |
| **Additional Information**  |
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| **Once completed e-mail to the below email addresses:** |
| BerkshireEastCID72s@thamesvalley.pnn.police.uk  |
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