

Other Document Form

Number

1303

Title **FAX FROM** **Code A** **TO CLEO EVANS**

(Include source and any document number if relevant)

Receivers instructions urgent action Yes/ **No**

Document registered / indexed as indicated

No(s) of actions raised

Statement readers instructions

Indexed as indicated

No(s) of actions raised

Examined - further action to be taken

Further actions no(s)

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| Code A | |
| O/M | SIO |
| | |
| Indexer | |

When satisfied all action raised Office Manager to endorse other Document Master Number Form.



FAX

CONFIDENTIAL

TO FROM

OF OF

TEL FAX DATE

Pages (inc) Acknowledgement required? TEL FAX

Cleo

As previously discussed

Thanks

Code A

CONFIDENTIAL



HAMPSHIRE CONSTABULARY

Declaration Form for Data User RESTRICTED

PLEASE TREAT THIS ENQUIRY AS CONFIDENTIAL

To **Code A**

DATA PROTECTION ACT, 1998, SECTION 29(3)

I am making enquiries which are concerned with:

** One of these must be selected*

The prevention and detection of crime, or the apprehension or prosecution of offenders *

National Security *

DATA PROTECTION ACT, 1998, PRINCIPLE 1, SCHEDULE 2/3

The vital interests of the data subject *

Information Required

Current address of Christine EVANS date of birth **Code A**

Nature of enquiry

An allegation has been made that over a number of years elderly patients at Gosport War Memorial Hospital have been administered inappropriate pain relief leading to premature death. Mrs Evans was anurse at the hospital at the time and is a witness to events there.

The information sought is needed to

Evidence patient care and treatment

I confirm that the personal data requested is required for that/those purpose(s) and failure to provide the information will, in my view, be likely to prejudice that/those purpose(s).

Signed

Code A

Name

Code A

Rank

Code A

Date

17/01/05

Police Station

Op Rochester, Fareham Police Station.

Countersigned (where necessary)

RESTRICTED