MR GRAEME HUGHES.



WITNESS/ JUROR EXPENSE FORM

Name(s) of Deceased	
Date/s Attended	
Name of witness/ juror	
Address (inc. postcode)	
Telephone Number	
F-Mail Address	

Please note that failure to provide the details above will result in a delay in payment

Daily Travel Expenses

For the journey from your place of residence to the Coroner's Court, you are entitled to receive:

- a) Return standard class rail or bus fare (please attach tickets/ receipts with claim); or
- b) If you travel by car/ motorcycle, an allowance of **45p** per mile, or by bicycle, **20p** per mile

You are also entitled to reimbursement for car parking charges (please attach tickets/ receipts with claim)

Please state daily travel expenses or number of miles (indicating car or bicycle)

Juror Daily Subsistence Allowance

You are entitled to a maximum allowance of **£5.71 per day**

OR

Witness Daily Subsistence Allowance

You are entitled to **£2.25** for attendance up to 5 hours You are entitled to **£4.50** for attendance up to 10 hours

(Please attach receipts for items purchased to this claim)

Daily Loss of Earnings/ Benefit

If you have incurred a loss of earnings/ benefit, you are entitled to receive the actual amount of the loss, but not more than **£32.47** per day if you have been away 4 hours or less, or **£64.95** per day if you have been away for more than 4 hours.

Please complete separate loss of earnings/ benefits form.

<u>Jurors only</u>: If your service lasts longer than 10 working days, a higher rate is payable on each day. Please ask Coroner's Service Manager for details. (contact details overleaf).

If you wish to apply for the reimbursement of any other additional expenses, please detail below and attach supporting documentation (only paid at Senior Coroner's discretion) In order for your claim to be processed promptly, please provide your bank account details and complete the expenses

section overleaf.

Acting Senior Coroner for South Wales Central Uwch Grwner Dros Dro Ei Mawrhydi



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All expenses will be paid directly into your bank account by BACS transfer by Rhondda Cynon Taf County Borough Council (you will receive a remittance advice via e-mail). Please provide the required details below.

Account Name:

Account Number:

Sort Code:

Summary of Expenses Claimed:

Travel Expenses (mileage and total cost)

Parking/ train/ bus cost Please ensure that your ticket covers the length of time that you are in Court each day. The Local Authority will not be responsible for any parking fines that you may incur.

Loss of Earnings cost

Subsistence cost (max £5.71 per day)

Total cost of claim

Signed: Date:

Please return expenses forms to/ or hand in at Court - for the attention of:-

Louise Roberts, Coroner's Service Manager The Coroner's Office, The Old Courthouse, Courthouse Street, Pontypridd, CF37 1JW Telephone 01443 281100 Fax: 01443 485862 email: sarah.l.roberts@rhondda-cynon-taff.gov.uk MR GRAEME HUGHES.

MR ANDREW BARKLEY



CLAIM FOR FINANCIAL LOSS (Please refer to guidance overleaf)

EMPLOYER'S CERTIFICATE

I certify that for each day that ______ (employee's name)

Was required for jury service/ to give oral evidence by the Coroner's Court, their net loss of earnings/ benefit was:

_____(total amount)

I certify that the employee works ______ days per week.

I certify that the employee will/ will not (delete as appropriate) be permitted to return to work on any full day that they are not required to attend court.

Name: _____

Position (in company/ benefit office): _____

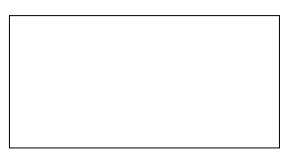
Name and Address of company/ benefit office: ______

Telephone Number:

Signed:

Dated:

Company's Official Stamp (If no stamp available, please attach Compliment Slip or other official proof)



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Louise Roberts, Coroner's Service Manager The Coroner's Office, The Old Courthouse, Courthouse Street, Pontypridd, CF37 1JW Telephone 01443 281100 Fax: 01443 485862

Notes for the Employer/ Benefit Office

If you do not pay your employee while he/ she attends the Coroner's Court, your employee may claim an allowance towards their loss of earnings. YOU SHOULD BE AWARE THAT THERE IS A MAXIMUM LIMIT ON THE FIGURE THAT MAY BE PAID. If you do not pay your employee whilst they attend Court, please complete this certificate and return it to your employee, who will forward it on to the Coroner's Service Manager.

Under the rules which cover the payment of the allowance, the court uses the "net loss of earnings" to decide the amount to pay. The net loss of earnings is the amount remaining after you have subtracted income tax and national insurance contributions from the earnings which you will NOT pay your employee. To help the Court decide your employee's claim, please give a net loss of earnings per day.

If your employee works less than 5 full days per week, please indicate which days are worked and whether they are full or part days. Your employee is required to attend court every day during the period of Jury Service, but it may be possible to release him/ her during that period of service. If this happens, your employee must return to work if at all practical.

Before you return this form to your employee, please:

- Stamp it with the official business or local benefit stamp; or
- Attach an original compliments slip or sheet of headed notepaper which shows the name and address of your business; or
- Provide some other evidence of the business that the Court may keep