

David C. Horsley LLB
Her Majesty's Coroner
for Portsmouth and
South East Hampshire



Coroner's Office
Room T20
The Guildhall
Guildhall Square
Portsmouth
PO1 2AJ

Fax: 023 9268 8331

Mrs Lesley O'BRIEN

Code A

07 November 2012

Dear Mrs O'Brien,

I am writing to confirm that the Inquest into the death of Mrs Gladys RICHARDS has been scheduled for:

Monday, 3rd December 2012 at 10.00 am in the Coroner's Court in The Guildhall, Guildhall Square, Portsmouth PO1 2AB.

It is anticipated that the Inquest will take 2 weeks.

The Coroner asks that you attend to give evidence on the first day of the Inquest as a family witness. At the Inquest, the Coroner will ask you to give some brief details about Mrs Richards' life and what you personally know of the circumstances leading up to her death. In doing so, the Coroner fully appreciates that an Inquest can often be painful for family and friends of the deceased, but your assistance will be vital to the Coroner's investigation of your mother's death. The Coroner will, of course, make every effort not to cause you any unnecessary distress.

The Coroner will also give you the opportunity to ask questions you may have about the evidence given at the Inquest concerning your mother's death. The Coroner hopes that you will make use of this opportunity if there is anything in that evidence that you do not understand or that you think requires more clarification.

Because the Coroner has asked you to be a witness at the Inquest, you are entitled to claim certain expenses for the day that you are required to attend. These are explained in the enclosed notes and expenses claim forms. Also to assist you, I enclose a map showing the location of the Guildhall.

So that I know that you have received this letter, I would be grateful if you would kindly sign the enclosed acknowledgment and return it to the Coroner's Office. A stamped addressed envelope is enclosed.

Yours sincerely,

Code A

Miss **Code A**
Coroner's Administrative Officer
Tel: **Code A**
Email: **Code A**

*Replied
acknowledgment
12.11.12.*

GUIDANCE ON YOUR CLAIM FOR WITNESS EXPENSES

As a Witness giving evidence in the Coroner's Court you are entitled to claim certain expenses by using the enclosed forms. Payment can only be made after the Inquest.

Completed forms should be either handed to the Coroner's Officer at the Inquest, or posted after the Inquest to the contact details given below. Please do not send completed forms before the Inquest date.

CERTIFICATE OF LOSS OF EARNINGS FORM

If your employer will not pay you during your absence from work to attend the Inquest as a witness, please ask your employer to complete the enclosed "Certificate of Loss of Earnings". The form provides necessary proof of your loss of earnings. Reimbursement will not be made unless your employer completes the form for the Coroner.

In all cases, reimbursement of your loss of earnings will not exceed the maximum amounts laid down by the Home Office. These amounts are shown on the Witness Expenses Claim Form.

WITNESS EXPENSES CLAIM FORM

Travel Allowance: Please enter your total public transport fares or vehicle mileage to and from the Coroner's Court. Please note that taxi and other private hire charges will not be reimbursed.

Loss of Earnings: See "Certificate of Loss of Earnings Form" above.

Daily Subsistence: You are entitled to claim for refreshments during the time you are away from your home or work as a witness, not exceeding the limits shown on the form.

Overnight Stay: If, because you live a considerable distance from the Coroner's Court, you consider that you need to make an overnight stay, you must seek the Coroner's prior agreement that an overnight stay is unavoidable. Contact details are given below.

If your overnight stay is agreed by the Coroner, reimbursement will be made up to the limit shown on the Witness Expenses Claim Form. Please note that you cannot claim the daily subsistence allowance in addition to the overnight subsistence allowance. Any claim must be fully supported by bills and receipts.

Any Other Expenses: If, due to exceptional circumstances, you think you may incur any other expenses not already covered above, or if you have any other queries concerning your attendance as a witness at Coroner's Court, please contact:

Miss Code A Coroner's Administrative Officer
The Guildhall, Guildhall Square, Portsmouth PO1 2AB

Tel: Code A - Fax: 02392 688331

Email: Code A

**CERTIFICATE OF LOSS OF EARNINGS
OR NATIONAL INSURANCE BENEFIT**

(If completed, this form must be returned with your Witness Expenses Claim Form)

WITNESS NAME: Mrs Lesley O'BRIEN

ADDRESS: Code A

TO THE EMPLOYER (OR LOCAL BENEFIT OFFICE) OF THE ABOVE-NAMED WITNESS

The Coroner needs your employee to give evidence at an Inquest which is estimated to take 2 weeks. However your employee is required to attend only on the first day. The Inquest has been scheduled as follows:

From Monday, 3rd December 2012 at 10.00 am in the Coroner's Court in The Guildhall, Guildhall Square, Portsmouth PO1 2AB to Friday, 14th December 2012.

In the event of a witness being required for any half-day only, the witness is expected to return to work if at all practicable.

I CERTIFY

1. That for each * (day) (half day) the above-named employee is required by the Coroner's Court, a deduction of:

£..... (and in words)

a * (day) (half day) will be made from his/her net earnings (* **Delete as necessary**).

2. That the above-named employee works **days a week. If less than 5 full days per week, please specify days worked and whether full or part days (** **Complete as necessary**).

.....

3. That the above-named employee * (will) (will not) be permitted to return to work on any half day that the employee is not required to attend court (* **Delete as necessary**).

Signature Date

Job Title.....

Name and Address of Employer (or Local Benefit Office):

.....
.....

Please put the firm's stamp on this certificate or give your employee a letter on the firm's headed paper to confirm that the information in this certificate is true.