



**Coroner AR Barkley  
Senior Coroner  
for South Wales Central**

Your Full Name:.....

Address: .....

Contact Number .....  
(this will only be used to contact you with queries relating to this form)

Name of Deceased: .....

Coroner's Reference No: ..... Date of Attendance: .....

Amount payable (please tick one):

0 – 2 hours (£83.50): .....

2- 4 hours (£117.00):.....

4 – 6 hours (£174.00):.....

Over 6 hours (£234.00):.....

Travel expenses (45p per mile plus parking or train/ bus fare) .....  
(please attach receipts)

**Your Bank Details:** Payment will be made by BACS from Rhondda Cynon Taf Council

Name on Account:.....

Account Number:.....

Sort Code:.....

Signed:.....

Date:.....