

9/1/2049 20 GD

REPORT OF DEATH TO CORONER

MOSMAN Police Station
20 November, 19 91

The Coroner,
GLEBE

SUBJECT: Death of DUTFIELD William James Age 41
 Marital state Single Address [redacted] Spit Rd Mosman 2088
 Time and date of death: Between 8pm 19/11/91 & 11am 20/11/91
 Place of death: [redacted] Spit Rd Mosman 2088
 By whom found: Arthur ASHWORTH Address: [redacted] Spit Rd Mosman 2088
 By whom reported to Police: Arthur ASHWORTH Address: [redacted] Spit Rd Mosman 2088
 By whom last seen alive: Arthur ASHWORTH Address: [redacted] Spit Rd Mosman 2088
 When last seen alive: 8pm Tuesday 19/11/91
 Deceased a native of (County and District): Unknown
 Occupation Invalid Pensioner
 (If pensioner state type and include whether appropriate authorities informed)

If Military or Invalid pensioner, state disability: Unknown
 Name, address and telephone no. of nearest relative and relationship: X

Name and address of identifying person: Arthur ASHWORTH [redacted] Spit Rd Mosman 2088

Police present when deceased identified: Csts Morters & Taylor

Did deceased leave a will? Unknown

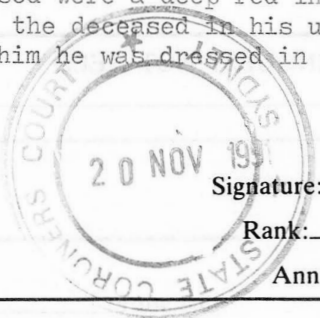
By whom burial or cremation is being arranged: Unknown

Property and clothing found on and with the deceased. (Attach inventory if space insufficient):
1 Blue T shirt, 1 blue shorts, 1 pair grey socks, 1 pair beige shoes, 1 wristwatch

Miscellaneous Property Book Reference: _____
 How property and clothing disposed of and on whose authority: _____

Circumstances under which death took place. (If any previous illness, and deceased seen by doctor, particulars should be given. Where treated by a doctor a note should be obtained giving particulars of treatment from such doctor):

At 11.10am this date Police were called to the deceaseds home address at [redacted] Spit Rd, Mosman. On arrival there Arthur ASHWORTH, a long time associate of the deceased was present and he indicated that he had arrived at the unit about 11am and discovered the deceased. The deceased was lying face down half on the floor with his head and shoulders on a lounge chair. The deceased appeared to have a large wound to the back of his head, there were what appeared to be large amounts of blood on the deceased's head and on the lounge chair. There was also what appeared to be blood splattered on the loungeroom wall floor and in the kitchen. A metal stickytape dispenser was located in the kitchen sink. It was seen to contain what appeared to be blood. The arms and legs of the deceased were a deep red in colour. It has been ascertained from Ashworth that he had left the deceased in his unit about 8pm the previous evening and that when he left him he was dressed in the same clothes as when found.



Signature: Dave [redacted]
 Rank: CONSTABLE
 Annual leave from 10/2/92 to 31/3/92

(Continued overleaf)

NOTE:
 (1) This form should be prepared in quadruplicate in all cases where a death is reported to the Coroner. The original and two copies should be forwarded to the Coroner. All statements in duplicate should be lodged with the Coroner at least 7 days before the date of the inquest.
 (2) The full name and address of all persons and the registered number of all motor vehicles concerned should be indicated.

POISONING—

- (a) Was death apparently from (i) poison, (ii) drug _____
- (b) Name poison or drug (if known) _____
- (c) Apparently administered by whom? Name: _____ Address: _____

- (d) Date and time ____/____/19____, at _____ a.m./p.m.
- (e) When symptoms first showed ____/____/19____, at _____ a.m./p.m.
- (f) Detail symptoms: _____
- (g) State recently prescribed medicine: _____
- (h) Prescribing Doctor: Name: _____ Address: _____
- (i) When prescribed? ____/____/19____. (j) Quantity prescribed: _____
- (k) How much remains now? _____ (l) Dispensing chemist: _____
- Name and address: _____

GAS POISONING—

- (a) Did gas come from coal-gas supply, brazier, or car? _____
- (b) Where in building was body found? _____
- (c) In what position was body found? _____
- (d) State appliance gas had escaped from: _____
- (e) Was gas still escaping? _____
- (f) If room sealed, how? _____
- (g) Was food being prepared? _____
- (h) Who in Gas Company notified? Name: _____

ELECTROCUTION—

- (a) What had caused shock? _____
- (b) Where in building was body found? _____ (c) Position? _____
- (d) State appliance "shock" received from: _____
- (e) Was appliance still "alive"? _____
- (f) Detail any burns: _____
- (g) Who in Electricity Commission of supplying Authority notified? _____

UNIDENTIFIED CASES (The following information should be furnished)—

Sex, Age, Height, Build, Complexion, Hair, Eyes, Nose, Face: _____

Peculiarities, marks, scars, tattoos, deformities, etc.: _____

What steps have been taken to establish identification (Reference to _____ Department file): _____

REPORT OF INQUEST
(or Magisterial Inquiry)

Date and place of Inquest: _____

Name of Coroner or Magistrate: _____

VERDICT: _____

INQUEST NOT HELD

Inquest disposed of on: _____

By whom: _____

Cause of death: _____

Signature: _____

Rank: _____ Reg'd No. _____

Date: _____

