

600

Notice of appointment of liquidator in a
members' or creditors' voluntary winding up



Companies House

TUESDAY



A26 *A70MXUUG* 27/02/2018 #94
COMPANIES HOUSE

1 Company details

Company number 0 2 9 4 6 4 9 9

Company name in full Banks Limited

→ Filling in this form
Please complete in typescript or in
bold black capitals.

2 Liquidator's name

Full forename(s) Peter John

Surname Godfrey-Evans

3 Liquidator's address

Building name/number Fleet Place House

Street 2 Fleet Place

Post town London

County/Region

Postcode E C 4 M 7 R F

Country

4 Liquidator's email address or telephone number ^①

Email address petergodfrey-evans@mercerohe.co.uk

Telephone number Tel: (020) 7236 2601

① You must give an email address or
telephone number. All information
on this form will appear on the
public record.

5 Insolvency practitioner number

Number 8 7 9 4

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| | | |
|------------------------|---|--|
| 6 | Liquidator's name^① | |
| Full forename(s) | Christopher | ① Other Liquidator's details Use this section to tell us about another liquidator |
| Surname | Laughton | |
| 7 | Liquidator's address^② | |
| Building name/number | Fleet Place House | ② Other Liquidator's details Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators. |
| Street | 2 Fleet Place | |
| Post town | London | |
| County/Region | | |
| Postcode | E C 4 M 7 R F | |
| Country | | |
| 8 | Liquidator's email address or telephone number^③ | |
| Email address | Chrislaughton@mercerhole.co.uk | ③ You must give an email address or telephone number. All information on this form will appear on the public record. |
| Telephone number | Tel: (020) 7236 2601 | |
| 9 | Insolvency practitioner number | |
| Number | 6 5 3 1 | |
| 10 | Statement of appointment | |
| | I confirm the appointment of the liquidator(s) on | |
| Date | d 2 0 m 0 2 y 2 0 1 8 | |
| 11 | Appointment details | |
| | The appointment was made by (Tick one) | |
| | <input checked="" type="checkbox"/> Company | |
| | <input type="checkbox"/> Creditors | |
| 12 | Type of liquidation | |
| | Tick to confirm the liquidation type | |
| | <input checked="" type="checkbox"/> Members | |
| | <input type="checkbox"/> Creditors | |
| 13 | Sign and date | |
| Liquidator's signature | Signature X  X | |
| Signature date | d 2 6 m 0 2 y 2 0 1 8 | |

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**Presenter information**

You do not have to give any contact information, but if you do it will help Companies House if there is a query on the form. The contact information you give will be visible to searchers of the public record.

| | |
|---------------|------------------------------------|
| Contact name | Taiwo Odulana |
| Company name | Mercer & Hole |
| Address | Fleet Place House 2 Fleet Place |
| Post town | London |
| County/Region | |
| Postcode | E C 4 M 7 R F |
| Country | |
| DX | |
| Telephone | Tel: (020) 7236 2601 |

**Checklist**

We may return forms completed incorrectly or with information missing.

Please make sure you have remembered the following:

- ☐ The company name and number match the information held on the public Register.
- ☐ You have signed and dated the form.

**Important information**

All information on this form will appear on the public record.

**Where to send**

You may return this form to any Companies House address, however for expediency we advise you to return it to the address below:

The Registrar of Companies, Companies House,
Crown Way, Cardiff, Wales, CF14 3UZ.
DX 33050 Cardiff.

**Further information**

For further information please see the guidance notes on the website at www.gov.uk/companieshouse or email enquiries@companieshouse.gov.uk

This form is available in an alternative format. Please visit the forms page on the website at www.gov.uk/companieshouse