

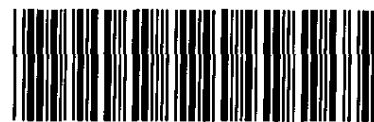
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Notice of appointment of liquidator in a  
members' or creditors' voluntary winding up



Companies House

TUESDAY



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A21

06/02/2018

#84

COMPANIES HOUSE

**1** Company details

Company number 04041431

Company name in full HEWLETT MEDIA LIMITED

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

**2** Liquidator's name

Full forename(s) GARETH

Surname BISHOP

**3** Liquidator's address

Building name/number 10

Street ST HELENS ROAD

Post town SWANSEA

County/Region

Postcode SA1 4AW

Country

**4** Liquidator's email address or telephone number <sup>①</sup>

Email address Gareth@newsterco.co.uk

Telephone number 03300 563600

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 17870

600

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

<b>6 Liquidator's name <sup>1</sup></b>		<b>1 Other Liquidator's details</b> Use this section to tell us about another liquidator.
Full forename(s)	HELEN	
Surname	WHITEHOUSE	
<b>7 Liquidator's address <sup>2</sup></b>		<b>2 Other Liquidator's details</b> Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators.
Building name/number	10	
Street	ST HELENS ROAD	
Post town	SWANSEA	
County/Region		
Postcode	SA1 4AW	
Country		
<b>8 Liquidator's email address or telephone number <sup>3</sup></b>		<b>3 You must give an email address or telephone number. All information on this form will appear on the public record</b>
Email address	helen@mcclister.co.uk	
Telephone number	03300 563600	
<b>9 Insolvency practitioner number</b>		
Number	9680	
<b>10 Statement of appointment</b>		
I confirm the appointment of the liquidator(s) on		
Date	29 01 2018	
<b>11 Appointment details</b>		
The appointment was made by (Tick one)		
<input type="checkbox"/> Company		
<input checked="" type="checkbox"/> Creditors		
<b>12 Type of liquidation</b>		
Tick to confirm the liquidation type		
<input type="checkbox"/> Members		
<input checked="" type="checkbox"/> Creditors		
<b>13 Sign and date</b>		
Liquidator's signature	Signature X G Bisco X	
Signature date	d d m m y y y y	

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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

HELEN WHITEHOUSE.

Company name

MCALISTER & CO

Address

10

ST HELENS ROAD

Post town

SWANSEA

Country/Region

Postcode

S A I H A W

Country

DX

Telephone

0 3300 563600



### 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](http://www.gov.uk/companieshouse) or email [enquiries@companieshouse.gov.uk](mailto: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](http://www.gov.uk/companieshouse)