In accordance with section 109 of the Insolvency Act 1986

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

\*A7I4IHUØ\* 14 06/11/2018 COMPANIES HOUSE

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		COMPANIES HOUSE	
1	Company details	<del></del>	
Company number	0 6 5 3 6 8 1 9	→ Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	ADAMS & CO (ILKLEY) LIMITED		
2	Liquidator's name	·	
Full forename(s)	RAYMOND STUART		
Surname	CLAUGHTON		
3	Liquidator's address		
Building name/number	RUSHTONS INSOLVENCY LIMITED		
Street	3 MERCHANT'S QUAY		
	ASHLEY LANE		
Post town	SHIPLEY		
County/Region	WEST YORKSHIRE		
Postcode	B D 1 7 7 D B		
Country			
4	Liquidator's email address or telephone number •	● You must give an email address or	
Email address	sarobinson@rushtonsifs.co.uk	telephone number. All information on this form will appear on the public record.	
Telephone number	01274 598585		
5	Insolvency practitioner number		
Number	1726 419		

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6	Liquidator's name <sup>©</sup>	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
7	Liquidator's address	
Building name/number Street		Use this section to tell us about another liquidator. Use the continuation page to tell us about
		more than two liquidators.
Post town		
County/Region		
Postcode		
Country		
8	Liquidator's email address or telephone number ●	You must give an email address or
Email address		telephone number. All information on this form will appear on the
Telephone number		public record.
9	Insolvency practitioner number	
Number		
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	d 0 d 5 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1	
11	Appointment details	
	The appointment was made by (Tick one)  ☑ Company □ Creditors	
12	Type of liquidation	
	Tick to confirm the liquidation type  Members Creditors	
13	Sign and date	
Liquidator's signature	Signature X	×
Signature date	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	

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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	SIMON ROBINSON	
Company name	RUSHTONS INSOLVENCY LIMITED	
Address	3 MERCHANT'S QUAY	
ASHLEY LANE		
Post town	SHIPLEY	
County/Region	WEST YORKSHIRE	
Postcode	B D 1 7 7 D B	
Country		
DX		
Telephone	01274 598585	

#### ✓ 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