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



TUESDAY



efer to

A18 22/05/2018

COMPANIES HOUSE

	Company details		
Company number	0 7 3 5 5 8 4 4	→ Filling in this form Please complete in typescript or in bold black capitals.	
Company name in full	ATHLON TRAVEL SERVICES LIMITED		
2.	Liquidator's name		
Full forename(s)	CHRISTOPHER DAVID		
Surname	HORNER		
3.	Liquidator's address		
Building name/number	ROBSON SCOTT ASSOCIATES		
Street	49 DUKE STREET		
Post town	DARLINGTON		
County/Region	CO. DURHAM		
Postcode	D L 3 7 S D		
Country			
4	Liquidator's email address or telephone number •	• You must give an email address or	
Email address	admin@robsonscott.co.uk	telephone number. All information on this form will appear on the public record.	
Telephone number	01325 365 950		
5	Insolvency practitioner number		
Number	1 6 1 5 0		

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6.2	Liquidator's name [©]	
Full forename(s)		Other Liquidator's details Use this section to tell us about
Surname		another liquidator.
Ž:	Liquidator's address [©]	
Building name/numbe	1	Other Liquidator's details
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 9	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 1 d 7 0 5 y 2 y 0 y 1 y 8	
	Appointment details	
	The appointment was made by	
	(Tick one) Company	
	☑ Creditors	
12	Type of liquidation	
	Tick to confirm the liquidation type	
	☐ Members	
	☑ Creditors	
	Sign and date	1
Liquidator's signature	Signature	
	X	X
Signature date	d 1 d 7 m 5 y 2 y 0 y 1 y 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 Daniel Harrison Company name Robson Scott Associates Address 49 Duke Street Post town Darlington County/Region Co. Durham

Checklist

Postcade

Country

Telephone

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.

D

01325 365 950

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