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



Companies House

THURSDAY



A04 *A7L6M402* 20/12/2018 #477
COMPANIES HOUSE

1 Company details

Company number 0 7 8 0 8 1 6 9

Company name in full Chase (Bucks) Limited

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

2 Liquidator's name

Full forename(s) Georgina Marie

Surname Eason

3 Liquidator's address

Building name/number New Bridge Street House

Street 30 - 34 New Bridge Street

Post town London

County/Region

Postcode E C 4 V 6 B J

Country

4 Liquidator's email address or telephone number ^①

Email address Georgina.eason@mhlp.co.uk

Telephone number 0207 429 4100


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 9 6 8 8

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6	Liquidator's name ^①	
Full forename(s)	Michael Colin John	
Surname	Sanders	
	① Other Liquidator's details Use this section to tell us about another liquidator.	
7	Liquidator's address ^②	
Building name/number	New Bridge Street House	
Street	30 - 34 New Bridge Street	
Post town	London	
County/Region		
Postcode	E C 4 V 6 B J	
Country		
	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.	
8	Liquidator's email address or telephone number ^③	
Email address	mick.sanders@mhllp.co.uk	
Telephone number	0207 429 4100	
	③ You must give an email address or telephone number. All information on this form will appear on the public record.	
9	Insolvency practitioner number	
Number	8 6 9 8	
10	Statement of appointment	
	I confirm the appointment of the liquidator(s) on	
Date	d 1 7 m 1 2 y 2 0 y 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 1 7 m 1 2 y 2 0 y 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	Georgina Marie Eason				
Company name	Macintyre Hudson LLP				
Address	New Bridge Street House				
	30 - 34 New Bridge Street				
Post town	London				
County/Region					
Postcode	E	C	4	V	6 B J
Country					
DX					
Telephone	0207 429 4100				



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