

600

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



Companies House

WEDNESDAY



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A31

20/11/2019

#250

COMPANIES HOUSE

**1** Company details

Company number 0 0 1 9 4 5 0 2

Company name in full Western Morning News & Media Limited

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

**2** Liquidator's name

Full forename(s) Irvin

Surname Cohen

**3** Liquidator's address

Building name/number 31st Floor

Street 40 Bank Street

Post town London

County/Region

Postcode E 1 4 5 N R

Country

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

Email address Irvin.Cohen@begbies-traynor.com

Telephone number 020 7516 1500

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 1 8 4 1 2

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<b>6</b>	<b>Liquidator's name <sup>①</sup></b>	
Full forename(s)	Gary Paul	
Surname	Shankland	
	<b>① Other Liquidator's details</b> Use this section to tell us about another liquidator.	
<b>7</b>	<b>Liquidator's address <sup>②</sup></b>	
Building name/number	31st Floor	
Street	40 Bank Street	
Post town	London	
County/Region		
Postcode	E 1 4 5 N R	
Country		
	<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.	
<b>8</b>	<b>Liquidator's email address or telephone number <sup>③</sup></b>	
Email address	Gary.Shankland@begbies-traynor.com	
Telephone number	020 7516 1500	
	<b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>	
<b>9</b>	<b>Insolvency practitioner number</b>	
Number	0 0 9 5 8 7	
<b>10</b>	<b>Statement of appointment</b>	
	I confirm the appointment of the liquidator(s) on	
Date	3 0 1 0 2 0 1 9	
<b>11</b>	<b>Appointment details</b>	
	The appointment was made by (Tick one) <input checked="" type="checkbox"/> Company <input type="checkbox"/> Creditors	
<b>12</b>	<b>Type of liquidation</b>	
	Tick to confirm the liquidation type <input checked="" type="checkbox"/> Members <input type="checkbox"/> Creditors	
<b>13</b>	<b>Sign and date</b>	
Liquidator's signature	Signature X  X	
Signature date	1 5 1 1 2 0 1 9	

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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	Georgia Provan
Company name	Begbies Traynor (London) LLP
Address	31st Floor 40 Bank Street
Post town	London
County/Region	
Postcode	E 1 4 5 N R
Country	
DX	
Telephone	020 7516 1500



## 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)