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



Companies House

For further information, please refer to  
our guidance at  
[www.gov.uk/companieshouse](http://www.gov.uk/companieshouse)

### 1 Company details

|                      |                                                  |   |   |   |   |   |   |   |
|----------------------|--------------------------------------------------|---|---|---|---|---|---|---|
| Company number       | 0                                                | 0 | 2 | 2 | 6 | 7 | 7 | 5 |
| Company name in full | THE WITNEY MATTRESS, DIVAN & QUILT CO. UNLIMITED |   |   |   |   |   |   |   |

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

### 2 Liquidator's name

|                  |        |
|------------------|--------|
| Full forename(s) | LAURA  |
| Surname          | WATERS |

### 3 Liquidator's address

|                      |                            |
|----------------------|----------------------------|
| Building name/number | PRICEWATERHOUSECOOPERS LLP |
| Street               | 7 MORE LONDON RIVERSIDE    |
| Post town            | LONDON                     |
| County/Region        |                            |
| Postcode             | S E 1 2 R T                |
| Country              |                            |

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

|                  |                        |
|------------------|------------------------|
| Email address    | laura.m.waters@pwc.com |
| Telephone number |                        |

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 | 0 | 9 | 4 | 7 | 7 |  |  |
|--------|---|---|---|---|---|--|--|

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|                        |                                                                                                                                                    |  |                                                                                                                                                                    |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6</b>               | <b>Liquidator's name <sup>①</sup></b>                                                                                                              |  |                                                                                                                                                                    |
| Full forename(s)       | EMMA                                                                                                                                               |  | <b>① Other Liquidator's details</b><br>Use this section to tell us about another liquidator.                                                                       |
| Surname                | CRAY                                                                                                                                               |  |                                                                                                                                                                    |
| <b>7</b>               | <b>Liquidator's address <sup>②</sup></b>                                                                                                           |  |                                                                                                                                                                    |
| Building name/number   | PRICEWATERHOUSECOOPERS LLP                                                                                                                         |  | <b>② Other Liquidator's details</b><br>Use this section to tell us about another liquidator. Use the continuation page to tell us about more than two liquidators. |
| Street                 | ONE CHAMBERLAIN SQUARE                                                                                                                             |  |                                                                                                                                                                    |
|                        |                                                                                                                                                    |  |                                                                                                                                                                    |
| Post town              | BIRMINGHAM                                                                                                                                         |  |                                                                                                                                                                    |
| County/Region          |                                                                                                                                                    |  |                                                                                                                                                                    |
| Postcode               | B 3 3 A X                                                                                                                                          |  |                                                                                                                                                                    |
| Country                |                                                                                                                                                    |  |                                                                                                                                                                    |
| <b>8</b>               | <b>Liquidator's email address or telephone number <sup>③</sup></b>                                                                                 |  |                                                                                                                                                                    |
| Email address          | emma.cray@pwc.com                                                                                                                                  |  | <b>③ You must give an email address or telephone number. All information on this form will appear on the public record.</b>                                        |
| Telephone number       |                                                                                                                                                    |  |                                                                                                                                                                    |
| <b>9</b>               | <b>Insolvency practitioner number</b>                                                                                                              |  |                                                                                                                                                                    |
| Number                 | 1 7 4 5 0                                                                                                                                          |  |                                                                                                                                                                    |
| <b>10</b>              | <b>Statement of appointment</b>                                                                                                                    |  |                                                                                                                                                                    |
|                        | I confirm the appointment of the liquidator(s) on                                                                                                  |  |                                                                                                                                                                    |
| Date                   | <div> <div>d 1 5</div> <div>m 1 2</div> <div>y 2 y 0 y 2 y 3</div> </div>                                                                          |  |                                                                                                                                                                    |
| <b>11</b>              | <b>Appointment details</b>                                                                                                                         |  |                                                                                                                                                                    |
|                        | The appointment was made by<br>(Tick one)<br><input checked="" type="checkbox"/> Company<br><input type="checkbox"/> Creditors                     |  |                                                                                                                                                                    |
| <b>12</b>              | <b>Type of liquidation</b>                                                                                                                         |  |                                                                                                                                                                    |
|                        | Tick to confirm the liquidation type<br><input checked="" type="checkbox"/> Members<br><input type="checkbox"/> Creditors                          |  |                                                                                                                                                                    |
| <b>13</b>              | <b>Sign and date</b>                                                                                                                               |  |                                                                                                                                                                    |
| Liquidator's signature | Signature<br><div> <div>X</div> <div></div> <div>X</div> </div> |  |                                                                                                                                                                    |
| Signature date         | <div> <div>d 1 9</div> <div>m 1 2</div> <div>y 2 y 0 y 2 y 3</div> </div>                                                                          |  |                                                                                                                                                                    |

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**Notice of appointment of liquidator in a members' or creditors' voluntary winding up****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  | SANDEEP KLAIR          |   |  |   |   |   |  |
| Company name  | PRICEWATERHOUSECOOPERS |   |  |   |   |   |  |
| LLP           |                        |   |  |   |   |   |  |
| Address       | ONE CHAMBERLAIN SQUARE |   |  |   |   |   |  |
|               |                        |   |  |   |   |   |  |
|               |                        |   |  |   |   |   |  |
| Post town     | BIRMINGHAM             |   |  |   |   |   |  |
| County/Region |                        |   |  |   |   |   |  |
| Postcode      | B                      | 3 |  | 3 | A | X |  |
| Country       |                        |   |  |   |   |   |  |
| DX            |                        |   |  |   |   |   |  |
| Telephone     |                        |   |  |   |   |   |  |

**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)**