Please complete in typescript, or in bold black capitals.		RESIGNATION of director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))	
Company Number		2928488	
Company Name in full		CAPITAL TELEVISION LIMITED	
* F 2 8 8 B	D 9 0 *		
Resignation form	Date of resignation	Day Month Year 2 7 97	
	Resignation as director	as secretary  X  Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.	
	NAME *Style / Title	Mr *Honours etc	
Please insert details as	Forename(s)	Peter Jonathan	
previously notified to Companies House.	Surname	HARRIS	
If cessat	†Date of Birth ion is other than on, please state reason	Day Month Year  12 03 62	
		A serving director, secretary etc must sign the form below.	

**Signed** 

Date

(by a serving director / secretary-/ ed

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

\*Voluntary details. †Directors only.



Form revised March 1995

Coopers & Lybr	and	
5 Town Quay, S	outhampton	
SO14 2HJ	Tel 01703 632772	
DX number	DX exchange	

When you have completed and signed the form please send it to the

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ

DX 33050 Cardiff

for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland

DX 235 Edinburgh