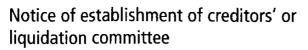
In accordance with Rule 17 5 of the Insorvèncy (England & Wales) Rules 2016

COM₁





THURSDAY



A17

09/01/2020 COMPANIES HOUSE

#60

Part A Company and office holder's details

A1	Company details	
Company number	0 8 1 2 0 2 0 0	→ Filling in this form Please complete in typescript or in
Company name in full	FUNDINGSECURE LTD	bold black capitals.
A2	Office holder's name	
Full forename(s)	Edward	
Surname	Avery-Gee	
A3	Office holder's address	
Building name/number	Cg & Co Gregs Building	
Street	1 Booth Street	
Post town	Manchester	
County/Region		
Postcode	M 2 4 D U	
Country	United Kingdom	
A4	Office holder's position	
	Please tick as applicable:	
	☐ Liquidator	
	✓ Administrator	
	Administrative receiver	
ı		

COM1

Notice of establishment of creditors' or liquidation committees

A2	Office holder's name ®		
Full forename(s)	Daniel	Other office holder Use this section to tell us about	
Surname	Richardson	another office holder	
A3	Office holder's address @		
Building name/number	Cg & Co Gregs Building	Other office holder Use this section to tell us about	
Street	1 Booth Street	another office holder.	
Post town	Manchester		
County/Region			
Postcode	M 2 4 D U		
Country			
A4	Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's position Office holder's pos		
	Please tick as applicable:	Other office holder Use this section to tell us about	
	Liquidator	another office holder.	
	✓ Administrator		
	Administrative receiver		
Part B Individual mem	Show the details of committee members who are individuals		
B1	Member name		
Full forename(s)	Marc		
Surname	Mason		
B2	Member address		
Building name/number	C/O Cg & Co Gregs Building		
Street	1 Booth Street		
Post town	Manchester		
County/Region			
Postcode	M 2 4 D U		
Country	United Kingdom		

_	_	`	R	А	4
\mathcal{C}	ı	- 1	11	Λ	
1	1		11	71	

Notice of establishment of creditors' or liquidation committees

B1	Member name
Full forename(s)	Paul
Surname	Mundy
B2	Member address
Building name/number	C/O Cg & Co Gregs Building
Street	1 Booth Street
Post town	Manchester
County/Region	
Postcode	M 2 4 D U
Country	United Kingdom
Individual mem	ber
B1	Member name
Full forename(s)	Spencer
Surname	Tarring
B2	Member address
Building name/number	C/O Cg & Co Gregs Building
Street	1 Booth Street
Post town	Manchester
County/Region	
B / I	M 2 4 D U
Postcode	

COM 1
Notice of establishment of creditors' or liquidation committees

B1	Member name
Full forename(s)	Craig
Surname	Goodfellow
B2	Member address
Building name/number	C/O Cg & Co Gregs Building
Street	1 Booth Street
Post town	Manchester
County/Region	
Postcode	M 2 4 D U
Country Individual mem	United Kingdom ber
Individual mem	ber
Individual mem B1	ber Member name
Individual mem B1 Full forename(s)	Member name Alan David
Individual mem B1 Full forename(s) Surname	Member name Alan David Jones
Individual mem B1 Full forename(s) Surname B2	Member name Alan David Jones Member address
Individual mem B1 Full forename(s) Surname B2	Member name Alan David Jones
Individual mem B1 Full forename(s) Surname B2	Member name Alan David Jones Member address
Individual mem B1 Full forename(s) Surname B2 Building name/number Street	Member name Alan David Jones Member address C/O Cg & Co Gregs Building 1 Booth Street
Individual mem B1 Full forename(s) Surname B2 Building name/number Street	Member name Alan David Jones Member address C/O Cg & Co Gregs Building
Individual mem B1 Full forename(s) Surname B2 Building name/number Street Post town County/Region	Member name Alan David Jones Member address C/O Cg & Co Gregs Building 1 Booth Street Manchester
Individual mem B1 Full forename(s) Surname B2 Building name/number Street	Member name Alan David Jones Member address C/O Cg & Co Gregs Building 1 Booth Street

COM₁ Notice of establishment of creditors' or liquidation committees В3 **Corporate members** Show the details of corporate committee members. Corporate member details Registered number Registered name in full Corporate member details Registered number Registered name in full Corporate member details Registered number Registered name in full Corporate member details Registered number Registered name in full Corporate member details Registered number Registered name in full

	,
	COM1 Notice of establishment of creditors' or liquidation committees
В4	Constitution of committee
	☐ The committee has been duly constituted.
Part C	Signature
C1	Sign and date
Office holder's signature	Signature X
Signature date	d d y 2 y 0 y 1 y 9

COM₁

Notice of establishment of creditors' or liquidation committees

you do it will on the form.	lave to give any contact information, but if I help Companies House if there is a query The contact information you give will be archers of the public record.
Contact name A	my Crighton
Company name C	G & Co
Address Greg	s Building
1 Booth St	reet
Post town Ma	nchester
County/Region	
Postcode	M 2 4 D U
Country Ur	ited Kingdom
DX	
Telephone	
✓ Check	list
	urn forms completed incorrectly or

Please make sure you have remembered the

 The company name and number match the information held on the public Register.

☐ You have signed the form.

following:

Presenter information

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.

Turther 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

Continuation page Name and address of insolvency practitioner

✓ What this form is for
Use this continuation page to
tell us about another insolvency
practitioner where more than
2 are already jointly appointed.
Attach this to the relevant form.
Use extra copies to tell us of
additional insolvency practitioners.

What this form is NOT for You can't use this continuation page to tell us about an appointment, resignation, removal or vacation of office. → Filling in this form
Please complete in typescript or in bold black capitals.

All fields are mandatory unless specified or indicated by *

1	Appointment type	
	Tick to show the nature of the appointment: ☐ Administrator ☐ Administrative receiver ☐ Receiver ☐ Manager ☐ Nominee ☐ Supervisor ☐ Liquidator ☐ Provisional liquidator	● You can use this continuation page with the following forms: VAM1, VAM2, VAM3, VAM4, VAM6, VAM7 CVA1, CVA3, CVA4 AM02, AM03, AM04, AM05, AM06, AM07, AM08, AM09, AM10, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25 REC1, REC2, REC3 LIQ02, LIQ03, LIQ05, LIQ13, LIQ14, WU07, WU15 COM1, COM2, COM3, COM4 NDISC
2	Insolvency practitioner's name	
Full forename(s)	Jonathan Elman	
Surname	Avery Gee	
3	Insolvency practitioner's address	
Building name/number	Cg & Co Gregs Building	
Street	1 Booth Street	
Post town	Manchester	
County/Region		
Postcode	M 2 4 D U	
Country	United Kingdom	