In accordance with Rule 3.41 of the Insolvency (England & Wales) Rules 2016.

AM07

Notice of creditor's decision on administrator's proposals



For further information, please refer to our guidance at www.gov.uk/companieshouse

1	Company details	
Company number	1 0 1 9 6 3 3 6	→ Filling in this form
Company name in full	The Derby County FC Academy Limited	Please complete in typescript or in bold black capitals.
2	Administrator's name	'
Full forename(s)	Andrew	
Surname	Hosking	
3	Administrator's address	
Building name/number	High Holborn House	
Street	52-54 High Holborn	
Post town	London	
County/Region		
Postcode	WCIV6RL	
Country		
4	Administrator's name •	
Full forename(s)	Carl	Other administrator Use this section to tell us about
Surname	Jackson	another administrator.
5	Administrator's address 🏻	
Building name/number	High Holborn House	Other administrator
Street	52-54 High Holborn	Use this section to tell us about another administrator.
Post town	London	
County/Region		
Postcode	WCIV6RL	
Country		

Purpose of procedure or meeting 1. That the Joint Administrators' Proposals be approved 2. That a Creditors' Committee will not be established 3. That the Joint Administrators be discharged from liability in respect of any action undertaken by them pursuant to Paragraph 98 of Schedule B1 of the Act, such discharge to take effect when the appointment of Joint Administrators ceases to have effect, as defined by the Act, unless the court specifies a Description of procedure or meeting 9 3 Whether it was a virtual or physical **Deemed Consent** meeting, some other decision procedure (please describe), or deemed consent. Address of meeting If a meeting was held at a physical location, give the address below. Building name/number Street Post town County/Region Postcode Country

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9	Other platform for decision procedure or meeting •		
	Other placions for decision procedure of meeting	● If a meeting was not held at (or the decision procedure was not undertaken at) a physical location, tell us what means were used—for example email, videolink	
10	Meeting		
_	If a meeting was held was the required quorum met? Solution Yes No		
11	Details of creditors' decisions	<u>'</u>	
	Details of decisions including any modifications to the proposals approved by the creditors are as follows:		
12	Details of any resolutions passed		
	Give details of any resolutions which were passed.		

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13	Date and time of decision made or resolution passed
Date	To To To To To To To To
Time	<u> </u>
14	Sign and date
Administrator's signature	Signature X
Signature date	

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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	Neil Allen	
Company name	Quantuma Advisory Limited	
Address	Office D	
	Beresford House	
Post town	Town Quay	
County/Region	Southampton	
Postcode	S O 1 4 2 A Q	
Country		
DX	info@quantuma.com	
Telephone	02380336464	

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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 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.

i 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

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

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, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25 - REC1, REC2, REC3 - LIQ2, LIQ3, LIQ05, LIQ13, LIQ14, WU07, WU15 - COM1, COM2, COM3, COM4 - NDISC
2	Insolvency practitioner's name	<u>'</u>
Full forename(s)	Andrew	
Surname	Andronikou	
3	Insolvency practitioner's address	
Building name/number	Office D	
Street	Beresford House	_
Post town	Town Quay	_
County/Region	Southampton	
Postcode	S O 1 4 2 A Q	_
Country		