In accordance with Rule 3.38 of the Insolvency (England & Wales) Rules 2016	AM06 Notice of approval of administrator's proposals	Companies House
		For further information, please refer to our guidance at www.gov.uk/companieshouse
1	Company details	
Company number Company name in full		→ Filling in this form Please complete in typescript or in bold black capitals.
2	Court details	1
Court name		
Court case number		
3	Administrator's name	
Full forename(s)		
Surname		
4	Administrator's address	1
Building name/numbe	r	
Street		
Post town		
County/Region		
Postcode		
Country		

Full forename(s)    Surname    6 Administrator's address e   Building name/number   Street   Post town   County/Region   Post town   County/Region   Post cove   Image: Image	5	Adn	ninis	trat	tor's	nar	ne o								
Surname another administrator.   6 Administrator's address ø   Building name/number Image: Street   Street Image: Street   Post town Image: Street   Post town Image: Street   Country/Region Image: Street   Postcode Image: Street   Country Image: Street   7 Date administrator(s) appointed   Date Image: Image: Street   8 Date statement of proposals delivered to creditors   Date Image: Image: Image: Street   9 Date proposals were deemed to be approved   Date Image: Image	Full forename(s)														
Building name/number Street	Surname														
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7       Date administrator(s) appointed         Date       d       m       m       y       y       y       y         8       Date statement of proposals delivered to creditors         Date       d       d       m       m       y       y       y       y         9       Date proposals were deemed to be approved       Date       d       d       m       m       y       y       y       y         9       Date proposals were deemed to be approved       Date       d       d       m       m       y <t< td=""><td>Postcode</td><td>- </td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	Postcode	- 													
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Bate   B   Date statement of proposals delivered to creditors   Date   d	7	Dat	e ad	min	istra	ator	(s) ap	opoi	inte	k					
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9 Date proposals were deemed to be approved   Date d   d d   m m   y y     10   Sign and date     Administrator's signature     Signature     X     Image: Contract of the second secon	8	Dat	e sta	aten	nent	of	prop	osa	s d	live	red to	credit	tors		
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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.
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.
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.
Crown Way, Cardiff, Wales, CF14 3UZ.
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

	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.	ation Please complete in typescript or in bold black capitals. All fields are mandatory unless
1	Appointment type	
	Tick to show the nature of the appointment:         Administrator         Administrative receiver         Receiver         Manager         Nominee         Supervisor         Liquidator         Provisional liquidator	<ul> <li>You can use this continuation pag with the following forms:</li> <li>VAM1, VAM2, VAM3, VAM4, VAM6, VAM7</li> <li>CVA1, CVA3, CVA4</li> <li>AM02, AM03, AM04, AM05, AM06, AM07, AM08, AM09, AM10, AM12, AM13, AM14, AM19, AM20, AM21, AM22, AM23, AM24, AM25</li> <li>REC1, REC2, REC3</li> <li>LIQ02, LIQ03, LIQ05, LIQ13, LIQ14,</li> <li>WU07, WU15</li> <li>COM1, COM2, COM3, COM4</li> <li>NDISC</li> </ul>
2	Insolvency practitioner's name	
Full forename(s)		
Surname		
3	Insolvency practitioner's address	
Building name/number		
Street		
Post town		
County/Region		
Postcode		
Country		