



Claim Form (CPR Part 8)

In the	IN THE HIGH COURT OF JUSTICE BUSINESS AND PROPERTY COURTS IN LEEDS INSOLVENCY AND COMPANIES LIST (ChD)
Claim no.	
Fee Account no.	PBA0078329
Help with Fees - Ref no. (if appli- cable)	H W F - [] [] [] [] [] [] [] [] [] []

18 Nov 2022

THE BUSINESS AND PROPERTY COURTS IN LEEDS

IN THE MATTER OF THE GOOD BOX CO LABS LIMITED (IN ADMINISTRATION)
AND IN THE MATTER OF THE COMPANIES ACT 2006

CR-2022-LDS-000923

Claimant

NGI SYSTEMS & SOLUTIONS LIMITED

Registered Office:

Suite 114 372 Old Street, City Of London, London, EC1V 9LT



Defendant(s)

THE GOOD BOX CO LABS LTD (IN ADMINISTRATION)

Registered Office:

Unit 21 Greenway Business Centre, Harlow, England, CM19 5QE

Does your claim include any issues under the Human Rights Act 1998? ☐ Yes ☒ No

Details of claim (see also overleaf)

Please see attached Details of Claim.

Defendant's
name and
address

THE GOOD BOX CO LABS LIMITED
(IN ADMINISTRATION)

Registered Office:

Unit 21 Greenway Business Centre,
Harlow, England, CM19 5QE

£

Court fee	280.00
Legal representative's costs	
Issue date	

For further details of the courts www.gov.uk/find-court-tribunal.

When corresponding with the Court, please address forms or letters to the Manager and always quote the claim number.

Claim no.	
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Details of claim (continued)

FAO Gawain Moore
Walker Morris LLP
33 Wellington Street
Leeds
LS1 4DL

gawain.moore@walkermorris.co.uk

Claimant's or claimant's legal representative's address to which documents should be sent if different from overleaf. If you are prepared to accept service by DX, fax or e-mail, please add details.

Statement of Truth

I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

☐ I **believe** that the facts stated in these particulars of claim are true.

☒ **The Claimant believes** that the facts stated in these particulars of claim are true. **I am authorised** by the claimant to sign this statement.

Signature



☐ Claimant

☐ Litigation friend (where claimant is a child or a Protected Party)

☒ Claimant's legal representative (as defined by CPR 2.3(1))

Date

Day	Month	Year
18	11	2022

Full name

Gawain Moore

Name of claimant's legal representative's firm

Walker Morris LLP

If signing on behalf of firm or company give position or office held

Partner

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