

lodging party or agent name _____
address _____
_____ state _____
telephone _____
facsimile _____
DX number _____ suburb/city _____

Registry of Co-operatives & Associations

Form 8

**Notification of
appointment or cessation as an
external administrator**

**(Clause 52(2) and (3))
Co-operatives Act 1992
(Sch. 4, clause 12(4) and (6)(a))**

Co-operative name _____
A.R.B.N. (if applicable) _____

Details of person(s) appointed

name (surname & given names) _____
at the office of _____
office, floor, building name _____
street number and name _____
suburb/city _____ state _____ postcode _____
country (if not Australia) _____
type of appointment appointed singly appointed jointly appointed jointly and severally

name (surname & given names) _____
at the office of _____
office, floor, building name _____
street number and name _____
suburb/city _____ state _____ postcode _____
country (if not Australia) _____
type of appointment appointed singly appointed jointly appointed jointly and severally

Appointment

type of administrator
(tick one box) administrator of a compromise or arrangement
 receiver of the property described in the schedule of property to this form
 receiver & manager of the property described in the schedule of property to this form
 managing controller (other than a receiver & manager) of the property described in the schedule of property to this form
 controller (other than a receiver or managing controller) of the property described in the schedule of property to this form
 administrator of a co-operative under administration
 administrator of a deed of company arrangement
 liquidator in a winding up by Court liquidator in a voluntary winding up by members
 liquidator in a voluntary winding up by creditors provisional liquidator

method of appointment
 appointment by court order Federal Court of Australia (give State or Territory registry) _____
 Family Court of Australia (give State or Territory registry) _____
 Supreme Court of (give State or Territory registry) _____
 Other (specify) _____

date of obtaining order (d/m/y) ____ / ____ / ____ proceeding matter number _____ year _____

appointment by or under instrument
date of appointment (d/m/y) ____ / ____ / ____ date of instrument (d/m/y) ____ / ____ / ____

description of instrument _____
(tick one of the following boxes)

instrument is registered in Register of co-operative charges _____ registered charge number _____
 Australian register of company charges _____ registered charge number _____
 register of company charges of State or Territory (give State or Territory) _____
_____ registered charge number _____

instrument not registered name of appointer _____
 by company by writing under its common seal
 by liquidator or provisional liquidator

Cessation, resignation or removal

(If a controller, show details of method of appointment above)

- | | |
|--|------------------|
| <input type="radio"/> cessation of administrator of compromise or arrangement | date (d/m/y) / / |
| <input type="radio"/> cessation of receiver | date (d/m/y) / / |
| <input type="radio"/> cessation of receiver & manager | date (d/m/y) / / |
| <input type="radio"/> cessation of managing controller
(other than receiver & manager) | date (d/m/y) / / |
| <input type="radio"/> cessation of controller
(other than receiver or managing controller) | date (d/m/y) / / |
| <input type="radio"/> cessation, resignation or removal of administrator
of a co-operative under administration | date (d/m/y) / / |
| <input type="radio"/> cessation, resignation or removal of administrator
of deed of company arrangement | date (d/m/y) / / |
| <input type="radio"/> resignation or removal of liquidator | date (d/m/y) / / |
| <input type="radio"/> resignation or removal of provisional liquidator | date (d/m/y) / / |

Signature

This form must be signed by the external administrator

print name _____

sign here _____ date / / _____

Schedule of property

(if insufficient space) Further details are enclosed in annexure marked () of () pages.

Additional information requirements

If this notice is lodged to notify the cessation, resignation, removal of an external administrator or where an administrator has been appointed to replace a currently appointed person or persons, please show below the details of the person or persons who have resigned etc. If joint administrators, show only the names of the person or persons who have resigned etc.

name _____
name _____
name _____

If one of the following administrators, please tick appropriate box and complete date of appointment of the person(s) who have ceased etc.

<input type="checkbox"/> receiver	_____	appointment date (d/m/y) / /
<input type="checkbox"/> receiver and manager	_____	appointment date (d/m/y) / /
<input type="checkbox"/> managing controller (other than a receiver & manager)	_____	appointment date (d/m/y) / /
<input type="checkbox"/> controller (other than a receiver or managing controller)	_____	appointment date (d/m/y) / /

Please note that failure to supply this information may result in the rejection of this document.

Send to

Registry of Co-operatives
& Associations
PO Box 22
BATHURST 2795

or
DX 3123
BATHURST

Annexures

To make any annexure you must

1. use A4 size paper of white or light pastel colour
2. provide a margin of at least 10mm on all sides
3. number the pages consecutively
4. print or type in dark blue or black ink, so that the document is clearly legible when photocopied

5. identify the annexure with a mark such as A, B, C etc.
6. endorse the annexure with the words This annexure (mark) of (number) pages referred to in Form (form number and title)
7. sign and date the form This annexure must be signed by same person(s) who signed the form.

