

Application notice

For help in completing this form please read the notes for guidance form N244Notes.

In the High Court Kings Bench Division	
Claim no.	
Fee Account no.	
Warrant no. (if applicable)	
Claimant's name (including ref.)	Equity Lawyer Mr Edward William Ellis
Defendant's name (including ref.)	UK Cabinet
Date	

1. What is your name or, if you are a legal representative, the name of your firm?

Equity Lawyer Mr Edward William Ellis

2. Are you a Claimant Defendant Legal Representative
 Other (please specify)

If you are a legal representative whom do you represent?

3. What order are you asking the court to make and why?

See the Interim Remedy Draft Order dated 24th April 2026 + Claim Form + Claim Form Content and Particulars

4. Have you attached a draft of the order you are applying for? Yes No

5. How do you want to have this application dealt with? at a hearing without a hearing
 at a telephone hearing

6. How long do you think the hearing will last? Hours Minutes
 Is this time estimate agreed by all parties? Yes No

7. Give details of any fixed trial date or period

None yet

8. What level of Judge does your hearing need?

High Court Justice

9. Who should be served with this application?

Defendant

9a. Please give the service address, (other than details of the claimant or defendant) of any party named in question 9.

The UK Cabinet and Attorney General were given Email Notice on 24th April 2026 of the Governance Fraud Claim and Interim Remedy Application



10. What information will you be relying on, in support of your application?

- the attached witness statement
- the statement of case
- the evidence set out in the box below

If necessary, please continue on a separate sheet.

See the Interim Remedy Draft Order dated 24th April 2026 + Claim Form + Claim Form Content and Particulars

Statement of Truth

(I believe) (The applicant believes) that the facts stated in this section (and any continuation sheets) are true.

Signed _____ Dated 24th April 2026
Applicant('s legal representative)('s litigation friend)

Full name signed in typed characters Mr Edward William Ellis

Name of applicant's legal representative's firm Citizen + Equity Lawyer

Position or office held _____
(if signing on behalf of firm or company)

11. Signature and address details

Signed _____ Dated _____
Applicant('s legal representative)('s litigation friend)

Position or office held _____
(if signing on behalf of firm or company)

Applicant's address to which documents about this application should be sent

Equity Lawyer Mr Edward William Ellis
15 Portreath Place,
Broomfield, Chelmsford CM1 4DB

Postcode

C	M	1	4	D	L
---	---	---	---	---	---

If applicable	
Phone no.	07788371717
Fax no.	
DX no.	
Ref no.	

E-mail address Equity Lawyer Mr Ellis <edward.w.ellis@gmail.com>