

Please complete in typescript, or in bold black capitals

Form revised March 1995

288a

DX 235 Edinburgh

Appointment of director or secretary

	1										
	22674	2		<u></u>							
Co	General Accident Life Assurance Limited										
SCT *SAG	Day Month Year Day Month Year										
COMPANIES HOUSE 27/09/96			ate of 25 09 96 -			†Date	†Date of Birth		03	44	
Appointment orm	Appointment as director	X as secretary Please mark the appropriate box. If applications as a director and secretary mark both b									
	AME *Style / Title	MR *Honoul					onours etc	C BSC MBA FIA FIAA AAII			
lotes on completion ppear on reverse.	Forename(s)	PHILIP JOHNSON									
	Surname	ne TWYMAN									
Previous Forename(s)			Previous Surname(s)								
	Usual residential address	FLAT 7	7, 40 TAY	STREET							
Post town County / Region †Nationality †Other directorships (additional space overleaf) Consent signature			PERTH				Postcode	PH1 5TR			
								Country			
			AUSTRALIAN †Business or					cupation ACTUARY/FINANCE DIRECTOR			
			consent to act as ** director / secretary o				Date	named company			
Voluntary details. Directors only.	Signed	A dire	ctor, se	ecretary	etc mus	st sign the	form below Date	v. 25/	9/96	· •	
* Please delete as appro	opriate.	(** a dire	ctor/secr	etary / adm in	istrator / ad	ministrative red	ceiver / receiver ı	nanager/	receiver)		
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.			P M WHITE, GENERAL ACCIDENT PLC, PITHEAVLIS, PERTH, PH2 0NH								
			Tel 01738 895328								
		DX number DX exchange									
		Regis Comp for co	trar of 0 panies ompanie	Companie H <mark>ouse,</mark> C s register	s at: rown W ed in En	/ay, Cardif gland and \	form please f, CF4 3UZ Wales	DX or	33050 Ca	rdiff	

for companies registered in Scotland

	Company Number	226742						
Directors only.	Other directorships	General	Accident	Fire	and	Life	Assurance	Corporation p.l.c.
NOTES								
or corretary is a corpor	es, NOT INITIALS. If the director ation or Scottish firm, show the and registered or principal office I line.							
Give previous forename - for a married woman, known before marriag	es or surname(s) except: the name by which she was se need not be given.							
least 20 years	ince the age of 18 or for at							
instead of or in addition	own by a title may state the title in to the forenames and surname name by which that person was e adopted the title or preceded							
Other director	rships.		 					
Pritain of which the ne	or company incorporated in Great reson concerned is a director or any time in the past five years.					<u>.</u>		
You may exclude a cor times during the past f concerned was a direct	npany which either is, or at all ive years when the person tor, was							
- dormant							<u> </u>	
- a parent company wh making the return, or	nich wholly owned the company			<u> </u>		<u></u>		
- another wholly owner company.	d subsidary of the same parent		<u></u>		_			
			.					
			 	<u> </u>				
			· · · · · · · · · · · · · · · · · · ·					
			<u> </u>			 .		
								<u> </u>