

Please complete in typescript, or in bold black capitals.
CHEP000

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COMPANIES HOUSE

Form revised July 1998

0126

18/07/00

288a

DX 33050 Cardiff

DX 235 Edinburgh

APPOINTMENT of director or secretary (NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

CHFP000		of particulars (use Form 288c))	
	Company Number	491580	
Company Name in full		RELIANCE MUTUAL INSURANCE	SOCIETY LIMITED
Appointment form Notes on completion appear on reverse.	Date of appointment Appointment as director NAME *Style / Title Forename(s)		Day Month Year 1 8 0 2 1 9 3 9 Park the appropriate box. If appointment is ctor and secretary mark both boxes.
	Surname	CAIN	
	Previous Forename(s) Usual residential address	Previous Surname(s) 30 GEOLGE LANE, HAYES	
	Post town	BROMLEY	de BR27LQ
County / Region †Nationality		KENT Coun	try UK
		BRITISH †Business occupation CHARTERED ACCOUNTANT	
†Other directorships (additional space overleaf) Consent signature * Voluntary details.		CHESTER STREET INSURANCE HOLDINGS LIMITED I consent to act as ** director / secretary of the above named company	
		W. J. Can Date	13/7/2000
† Directors only. **Delete as appropriate	Signed	A director, secretary etc must sign the form below. Date 12 12 7 20 (**a director / secretary / administrator / administrative receiver / receiver manages / 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.		A. PRIOR, RELIANCE HOUSE, MOUNT EPHRAIM, TUNBRIDGE WELLS, KENT THA 8BL Tel 01892 510033 DX number DX exchange	
When you have completed and signed the form please send it to the			n please send it to the

Companies House, Crown Way, Cardiff, CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in England and Wales

for companies registered in Scotland

Company Number

491580

† Directors only.

[†]Other directorships

CHESTER STREET EMPLOYERS ASSOCIATION LIMITED

IRON TRADES EMPLOYERS INSURANCE STAFF FUND LIMITED

IRON TRADES INSURANCE CO. LIMITED CRUCIBLE INSURANCE

CO. LIMITED BS PENSION FUND TRUSTER LIMITED

BRITISH STEEL INDUSTRY LIMITED / VACMETAL UKLIMITED

PENSION SERVICES LIMITED

NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.