

Please complete in typescript, or in bold black capitals.
CHWP000

## 288a

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

|  |   |  |   |      | -          |         | •            |                 |       |                             |      |                          |
|--|---|--|---|------|------------|---------|--------------|-----------------|-------|-----------------------------|------|--------------------------|
|  | 02166933                                      |  |   |      |            |         |              |                 |       |                             |      |                          |
| Co   | The Institute of Translation and Interpreting |  |   |      |            |         |              |                 |       |                             |      |                          |
|  |   |  |   |      | ·          |         |              | <del>-</del>    |       |                             |      |                          |
|  | Data of                                       | Day  | Month   | Year |            | ±D-4    |              | Day             | Month |                             | Year |                          |
| Appointment form  Notes on completion appear on reverse.   |   | Date of<br>appointment   | 0 4   | 0 5  | 1,9,5      | 9 6     | †Dat<br>Birt | ( *             | 2 4   | 0 6                         | 1    | 91310                    |
|  | Appointm                                      | nent as director   | <b>/</b>  |      | as sec     | cretary |              |                 |       | ppropriate i<br>secretary m |      | appointment<br>th boxes. |
|  | NAME  | *Style / Title   | Baro  | net  |            | ,       | *Hono        | urs etc         |       |                             |      |                          |
|  |   | Forename(s)  | Township Committee one  |      |            |         |              |                 |       |                             |      |                          |
|  |   | Surname  |   |      |            |         |              |                 |       |                             |      |                          |
|  |   | Previous Forename(s)   | Previous Sumame(s)  |      |            |         |              |                 |       |                             |      |                          |
|  | Usual re                                      | al residential<br>address  | Sutton House, Chiswick Mall   |      |            |         |              |                 |       |                             |      |                          |
| Post town  County / Region  †Nationality   |   |  | LONDON  |      |            |         |              | Postcode W4 2PR |       |                             |      |                          |
|  |   |  |   |      |            |         |              | Country England |       |                             |      |                          |
|  |   |  | British †Business occupation Banker   |      |            |         |              |                 |       |                             |      |                          |
| †Other directorships (additional space overleaf)  Consent signature  * Voluntary details.  |   |  | Fraud Management Ltd  |      |            |         |              |                 |       |                             |      |                          |
|  |   |  | I consent to act as ** director / secretary of the above named company  |      |            |         |              |                 |       |                             |      |                          |
|  |   |  | Ro  | ntar | w <u>w</u> | hite 1  | hon          | Date            | 1     | 2 M                         | ay   | 01                       |
| † Directors only. **Delete as appropriate  Signed  |   |  | A director, secretary etc must sign the form below.   |      |            |         |              |                 |       |                             |      |                          |
|  |   | RMERocky   |   |      |            | Date    | /:           | Ma              | ש פ   | 5 (                         |      |                          |
|  |   | (**a director / secretary / administrator / administrative receiver / receiver manager / receiver) |   |      |            |         |              |                 |       |                             |      |                          |
| Please give the name, address,   |   | Institute of Translation & Interpreting  |   |      |            |         |              |                 |       |                             |      |                          |
| telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query. |   |  | 377 City Road, LONDON   |      |            |         |              |                 |       |                             |      |                          |
|  |   |  | EC1V 1ND Tel 020 7278 5504  |      |            |         |              |                 |       |                             |      |                          |
|  |   |  | DX number DX exchange   |      |            |         |              |                 |       |                             |      |                          |
|  |   |  | When you have completed and signed the form please send it to the Registrar of Companies at:  Companies House, Crown Way, Cardiff, CF14 3UZ  DX 33050 Cardiff |      |            |         |              |                 |       |                             |      |                          |

for companies registered in England and Wales

for companies registered in Scotland

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

DX 235 Edinburgh

0674 17/05/01

A45 COMPANIES HOUSE

|                   | Company Number       | 02166933 |          |     |   |    |      |          |  |
|-------------------|----------------------|----------|----------|-----|---|----|------|----------|--|
| † Directors only. | †Other directorships |          | ZE       | NIV | м | して | ાલ્લ | 3872 305 |  |
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|                   |                      |          |          |     |   |    |      |          |  |
|                   |                      |          |          |     |   |    |      | •        |  |
|                   |                      |          | <u>-</u> |     |   |    | _    |          |  |

## **NOTES**

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on sumame 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,