

Please complete in typescript, or in bold black capitals

## 288b

DX 235 Edinburgh

## Resignation of director or secretary

	Comp	any Number	23953	376						
Company Name in full			ROYAL & SUN ALLIANCE INSURANCE FINANCE LIMITED							
* F288	BBD40 *									
Resignation form	1		Day	Month	n Year					
Date of resignation  Resignation as director			10	04	97					
			X as secretary				Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.			
Please insert details as previously notified to Companies Ho	NAME	*Style / Title					*Honours etc			
		Forename(s)								
	use.	Surname	NON-DESTRUCTIVE TESTERS LIMITED							
			Day	Montl	n Year			· · · · · · · · · · · · · · · · · · ·		
†Date of Birth										
lf ce resig		-		<u>-</u>						
* Voluntary detail † Directors only.	s.	Signed	<		vi			gn the for Date	m below. 15 · 4 · 19°	
Please give the name, address				CORPORATE SECRETARIAL DEPARTMENT, ROYAL & SUN ALLIANCE INSURANCE, 1 BARTHOLOMEW						
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.			LANE, LONDON, EC2N 2AB							
			Tel 0171-826 1618							
				DX number DX exchange						
A10 COMPA	*A40N8U NIES HOUS	WZ* 323 E 16/04/97	Regis Comp for co	trar of C panies H ompanies	Companie <b>ouse, Cro</b> s register	s at: own Way red in En	y <b>, Cardiff</b> , gland and	, CF4 3UZ I Wales	DX 33050 DX 235 Edin	Cardi

for companies registered in Scotland

Form revised March 1995