

APPOINTMENT of director or secretary

| Please complete in typescript, or in bold black capitals. | | | of particulars (use Form 288c)) | | | | | | | |
|--|---|----------------------------|--|-----------------|-------------|----------------|------------------|--------------|------------------------------|-------------------------------|
| CHWP000 | Comp | any Number | 2676180 | | | | | | | |
| Company Name in full | | | International Associaition of Hydrological Sciences Ltd. | | | | | | | |
| | | Date of appointment | | Month 0 4 2 | Year | : I | ate of / | Day N | Month | Year 9 4 2 |
| form | Appointment as director | | / | | as secreta | ary | | | ropriate box. retary mark | If appointment is both boxes. |
| | NAME | *Style / Title | Dr | | | *Hon | ours etc | | | |
| | | Forename(s) | Arthur John | | | | | | | |
| | | Surname | Askew | | | | | | | |
| | | Previous Forename(s) | | / | | I | evious ame(s) | | | |
| †† Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985 | ^{††} Us | ual residential address | 4A Avenue de la Foretaille, 1292 Chambésy | | | | | | | |
| | | Post town | Geneva Posto | | | | | e | | |
| | С | ounty / Region | | | | | Countr | y Swit | zerland | |
| | †Nationality | | British/A | ustralian | ₫B | usiness | occupation | Retired | 3 | |
| la | †Other directorships dditional space overleaf) | | NONE | | | | | | | |
| Consent signature | | | I consen | t to act as | director | e <u>ecrot</u> | of the a | [| | ` |
| * Voluntary details. † Directors only. | | _ | A direct | or, secre | tary etc mu | z ust sign | Date the form i | 22 pelow. | Apri | (2005 |
| **Delete as appropriate | | Signed | FA | XFarc | where | - | Date | [| APZIL | 2005 |
| You do not have to give any contact information in the box opposite but if you | | | (**a director./ secretary receiver-/ administrative receiver-/ receiver manager Areceiver) | | | | | | | |
| | | | F.A.K. Farquharson | | | | | | | |
| do, it will help C contact you if the | IAHS Ltd., c/o CEH, Maclean Building, Wallingford, OX10 8BB | | | | | | | | | |
| form. The contact information that you give will be visible to searchers of the public record | | | Tel | | | | | | | |
| | | | DX number 01491 69242 DX exchange 01491 838800 | | | | | | | |
| Companies House receipt data to | | | When you have completed and signed the form please send it to the | | | | | | | |

0277 A11 COMPANIES HOUSE 05/05/05

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh or LP - 4 Edinburgh 2

| | Company Number | |
|-------------------|----------------------------------|--|
| † Directors only. | [†] Other directorships | |
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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

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