



## Termination of a Director Appointment

Company Name: **CHESTERFIELD CARE GROUP**

Company Number: **03137489**



Received for filing in Electronic Format on the: **01/09/2023**

XCB51X1M

### Termination Details

Date of termination: **30/08/2023**

Name: **MISS ALLISON GALLAGHER**

### Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Liquidator, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.