



Appointment of Director

Company Name: **THE AIR AMBULANCE SERVICE**

Company Number: **04845905**



Received for filing in Electronic Format on the: **24/01/2023**

XBVWE31N

New Appointment Details

Date of Appointment: **21/12/2022**

Name: **MS CHRISTINA SHEPPARD**

The company confirms that the person named has consented to act as a director.

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/04/1969**

Nationality: **BRITISH**

Occupation: **CHIEF SAFEGUARDING OFFICER**

Authorisation

Authenticated

This form was authorised by one of the following:

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