



Appointment of Director



X5LUN3HE

Company Name: **INSTITUTE OF ALCOHOL STUDIES**

Company Number: **05661538**

Received for filing in Electronic Format on the: **14/12/2016**

New Appointment Details

Date of Appointment: **14/12/2016**

Name: **DR PETER MARTIN RICE**

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

Service Address: **5/3, 82 TEMPLETON STREET, GLASGOW 5/3TEMPLETON STREET
GLASGOW
UNITED KINGDOM
G40 1EE**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: ****/03/1958**

Nationality: **UK**

Occupation: **MEDICAL PRACTITIONER**

Former Names:

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.