



Appointment of Director

Company Name: **INSTITUTE OF BRITISH SIGN LANGUAGE**

Company Number: **06201561**



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New Appointment Details

Date of Appointment: **22/10/2019**

Name: **MR CRAIG ALAN JONES**

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

Service Address: **C/O BRITISH DEAF HISTORY SOCIETY
EMPIRE COURT 2ND FLR 30-40
MUSEUM STREET
WARRINGTON
ENGLAND
WA1 1HU**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/08/1969**

Nationality: **BRITISH**

Occupation: **BSL INTERPRETER**

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