



Termination of a Director Appointment

Company Name: **HALE HEALTH ACTION LOCAL ENGAGEMENT**

Company Number: **06443243**



Received for filing in Electronic Format on the: **26/07/2017**

X6BHHTP6

Termination Details

Date of termination: **17/07/2017**

Name: **MS CLAIRE FIONA WHITE**

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.

