



Appointment of Director

Company Name: **THE NORTH YORK MOORS CHAMBER MUSIC FESTIVAL TRUST**

Company Number: **06878005**



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New Appointment Details

Date of Appointment: **25/01/2023**

Name: **DR CHRISTINE ANNE KIRK**

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

Service Address: **GOLSON'S COTTAGE OULSTON
YORK
ENGLAND
YO61 3RA**

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/01/1949**

Nationality: **BRITISH**

Occupation: **RETIRED**

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