



Confirmation Statement

Company Name:Insurance Fraud BureauCompany Number:08203205

Received for filing in Electronic Format on the: **15/09/2023**



XCC3U38Q

Company Name: Insurance Fraud Bureau

Company Number: 08203205

Confirmation **15/09/2023**

Statement date:

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

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