



Appointment of Director

Company Name: **KNOWLEDGE TRANSFER NETWORK LIMITED**

Company Number: **08705643**



Received for filing in Electronic Format on the: **06/05/2022**

XB3G6QSZ

New Appointment Details

Date of Appointment: **26/04/2022**

Name: **DR DAVID MICHAEL JOHN WILKES**

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

Service address recorded as Company's registered office

Country/State Usually Resident: **ENGLAND**

Date of Birth: ****/09/1969**

Nationality: **BRITISH**

Occupation: **CIVIL SERVANT**

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