



## Appointment of Director

Company Name: **BRITISH ASSOCIATION OF HAND THERAPISTS LIMITED**

Company Number: **03191955**



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### **New Appointment Details**

Date of Appointment: **21/12/2019**

Name: **MISS MIRIAM RUTH PARKINSON**

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

Service Address: **112 WATERY LANE WATERY LANE  
DARWEN  
ENGLAND  
BB3 2EB**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/07/1974**

Nationality: **BRITISH**

Occupation: **OCCUPATIONAL THERAPIST**

## **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**