



*Companies House*  
— for the record —

**AP01** (ef)

**Appointment of Director**



X11A0CEW

*Company Name:* **THE NATIONAL INSTITUTE OF MEDICAL HERBALISTS**

*Company Number:* **00044483**

*Received for filing in Electronic Format on the:* **25/01/2012**

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*New Appointment Details*

*Date of Appointment:* **11/01/2012**

*Name:* **MRS KATHERINE ANNE BELLCHAMBERS-WILSON**

*Consented to Act:* **YES**

*Service Address recorded as Company's registered office*

*Country/State Usually Resident:* **UNITED KINGDOM**

*Date of Birth:* **01/10/1968**

*Nationality:* **BRITISH**

*Occupation:* **MEDICAL HERBALIST**

*Former Names:*

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## *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.