



*Companies House*  
— for the record —

**AP01** (ef)

**Appointment of Director**



X17G0VJ7

*Company Name:* **ASSOCIATION FOR SPINAL INJURY RESEARCH REHABILITATION  
AND REINTEGRATION**

*Company Number:* **03744357**

*Received for filing in Electronic Format on the:* **23/04/2012**

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*New Appointment Details*

*Date of Appointment:* **21/09/2011**

*Name:* **MRS EMILY CAMPBELL**

*Consented to Act:* **YES**

*Service Address:* **ASPIRE NATIONAL TRAINING CENTRE WOOD LANE  
STANMORE  
MIDDLESEX  
UNITED KINGDOM  
HA7 4AP**

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

*Date of Birth:* **13/01/1966**

*Nationality:* **BRITISH**

*Occupation:* **DIRECTOR**

*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.