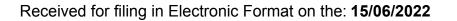




Confirmation Statement

Company Name:**1ST ALTERNATIVE MEDICAL STAFFING LTD**Company Number:06877986



Company Name: **1ST ALTERNATIVE MEDICAL STAFFING LTD**

Company Number: 06877986

Confirmation **15/05/2022**

Statement date:



XB67L381

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