



## Appointment of Director

Company Name: **IMMACULATE CONCEPTION ACADEMY TRUST**

Company Number: **09269589**



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### **New Appointment Details**

Date of Appointment: **30/07/2020**

Name: **MRS SARAH CONNOR**

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

Service Address: **26 NETHERTHORPE  
STAVELEY  
CHESTERFIELD  
ENGLAND  
S43 3PU**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/08/1961**

Nationality: **BRITISH**

Occupation: **RETIRED**

## **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**