



## DIRECTOR'S DECLARATION OF INTERESTS FORMS

Name: \_\_\_\_\_ David Lewis \_\_\_\_\_

Identity Number: \_\_\_\_\_ [REDACTED] \_\_\_\_\_

### Directorship, Shareholdings and Paid Remunerations:

COMPANY	DATE OF APPOINTMENT	DATE CEASED


### Any other Actual or Potential Conflicts of Interest:

None

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I, the undersigned, hereby declare that the information furnished above is true, complete and accurate to the best of my knowledge, information and belief.

Signed: \_\_\_\_\_  \_\_\_\_\_

Date: \_\_\_\_\_ 20/09/2019 \_\_\_\_\_