



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

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: _____ 17/09/2020 _____