

for the recent

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.

CHWP000

Company Number

Company	name	in	full
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26047	
DELTA PLC	•
	<del></del>

## Shares allotted (including bonus shares):

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

Month Year

From

Year

To

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

OPDINARY	
1107	
2Sp	
$9/\rho$ .	

List the names and addresses of the allottees and the number of shares allotted to each overleaf

If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that	each	n share	e is	to	be
treated	as p	oaid up	)		

Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)

	<del></del>	 			
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When you have completed and signed the form send it to the Registrar of Companies at:



COMPANIES HOUSE

06/04/02

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB

Companies House, Crown Way, Cardiff CF14 3UZ

For companies registered in England and Wales

Edinburgh

For companies registered in Scotland

DX 33050 Cardiff

**DX 235** 

## Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share c	lass allotted		
Name MRS LINDA EMILY ANDORSON	Class of shares allotted	Number allotted		
Address  14 ARGYLE STREET, DUNDEE	25p 0e0	1107		
UK Postcode DD4 1AL				
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode				
Name	Class of shares allotted	Number allotted		
Address				
1				
UK Postcode レニーレー	<u> </u>			
Name L	Class of shares allotted	Number allotted		
Address				
<u> </u>	L			
UK Postcode	ļ			
Name	Class of shares allotted	Number allotted		
Address				
<u> </u>				
UK Postcode L L L L L	L			
Please enter the number of continuation sheets (if any) attached to this formal signed				
A director / secretary / administrator / administrative receiver / receiver manager / receiver		e as appropriate		
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.  COMPAN SECKETARIAL DEPT DELTA PLC  1 KINGSWAY LONDON WCB 6NP  Tel 00A 8363 C25				
DX number	DX exchange	CCCCUCC		