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Please complete in typescript, or in bold black capitals.

CHFP000

Company Number

O	O(4)
Return of Allot	ment of	Shares

Company name in full	CUNTHORPE UNITED FOOTBALL CLUB				
,					
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)	From Day Month Year 1 2 1 22002	To Day Month Year			
Class of shares (ordinary or preference etc)	ORDINARY				
Number allotted	100				
Nominal value of each share	50 _e	~			
Amount (if any) paid or due on each share (including any share premium)	50,				
List the names and addresses of the	allottees and the number of shares a	llotted to each overleaf			
If the allotted shares are fully o	or partly paid up otherwise than	in cash please state:			
% that each share is to be treated as paid 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)					
	When you have completed a	and signed the form send it to at:			

123622

Companies This form

COMPANIES HOUSE Form revise

panies House, Crown Way, Cardiff CF14 3UZ ompanies registered in England and Wales

DX 33050 Cardiff

13/12/02 mpanies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh

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

Shareholder details	Shares and share class allotted	
Name Mr G. N. Curtis	Class of shares allotted	Number allotted
Glanford House, Mankon Lane,	Ordinary	100
Hipaldstow, BRIGG		
UK Postcode PN209PX		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address		
	-	
UK Postcode		
Name	Class of shares allotted	Number allotted
Address	_	
L		
UK Postcode		L
Name	Class of shares allotted	Number allotted
Address	_	,
1	_	L
UK Postcode		
Please enter the number of continuation sheets (if any) attached to this	s form	
(La Devid	12 /2 5	ອ ງ .
A director / secretary / administrator / administrative receiver / receiver manager / receiver	ate	delete 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.	Tel	