

**Return of allotments of shares****88(2)****(REVISED 1988)****This form replaces forms  
PUC2, PUC3 and 88(2)**

Pursuant to section 88(2) of the Companies Act 1985 (the Act)

To the Registrar of Companies (**address overleaf**)  
(see note 1)

Company number

00933605

Please do not  
write in this  
marginPlease complete  
legibly, preferably  
in black type, or  
bold block lettering

## 1. Name of company

\* SUNRISE MEDICAL LIMITED

\* Insert full name  
of company

## 2. This section must be completed for all allotments

† Distinguish  
between  
ordinary,  
preference, etc.

Description of shares†	ORDINARY		
A Number allotted	9 142		
B Nominal value of each	£1	£	£
C Total amount (if any) paid or due and payable on each share (including premium if any)	£ 406.37	£	£

Date(s) on which the shares were allotted

(a) [on 19<sup>th</sup> July 19 <sup>95</sup>], or(b) [from 19 to 19]~~The names and addresses of the allottees and the number of shares allotted to each should be given overleaf~~§ Complete  
(a) or (b) as  
appropriate3. If the allotment is wholly or partly other than for cash the following information must be given  
(see notes 2 & 3)

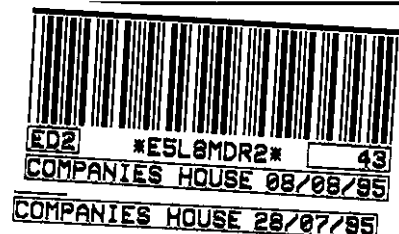
D Extent to which each share is to be treated as paid up. Please use percentage.	100%		
E Consideration for which the shares were allotted			
The shares were issued as part of the consideration for the whole of the			
issued share capital of Coopers Healthcare plc			

**Notes**

1. This form should be delivered to the Registrar of Companies within one month of the (first) date of allotment.
2. If the allotment is wholly or partly other than for cash, the company must deliver to the Registrar a return containing the information at D & E. The company may deliver this information by completing D & E and the delivery of the information must be accompanied by the duly stamped contract required by section 88(2)(b) of the Act or by the duly stamped prescribed particulars required by section 88(3) (Form No 88(3)).
3. Details of bonus issues should be included only in section 2.

Presentor's name, address,  
telephone number and reference  
(if any):PINSENT CURTIS  
3 COLMORE CIRCUS  
BIRMINGHAM  
B4 6BH  
REF SDG 76282 55 6  
TEL 0121 200 1050

For official use



4. Names and addresses of the allottees

Please do not  
write in the  
margin

Names and Addresses	Number of shares allotted		
	Ordinary	Preference	Other
DAVID FRANCIS THOMPSON	2 212		
Fenners Clenches			
Farm Road			
Sevenoaks			
Kent TN13 2LU			
BRIAN J BOWEN	442		
5 Compton Close			
Church Crookham			
Fleet			
Hampshire GU13 0JQ			
TONI A POTTERTON	442		
Vine Cottage			
Coxcombe Lane			
Chiddingfold			
Godalming			
Surrey GU8 4QF			
ADRIAN P STOCKMAN	442		
13 Fox Road			
Deepdene			
Haslemere			
Surrey GU27 1RG			
Total	3 538		

Please complete  
legibly, preferably  
in black type, or  
bold block  
lettering

Where the space given on this form is inadequate, continuation sheets should be used and the number of sheets attached should be indicated in the box opposite:

1

† Insert Director,  
Secretary,  
Administrator,  
Administrative  
Receiver, or  
Receiver  
(Scotland) as  
appropriate

Signed  Designation: Director & Secretary Date 19 July '95

Companies registered in England and Wales  
or Wales should deliver this form to:-

Companies registered in Scotland  
should deliver this form to:-

The Registrar of Companies  
Companies House  
Crown Way  
Maindy  
Cardiff  
CF4 3UZ

The Registrar of Companies  
Companies Registration Office  
102 George Street  
Edinburgh  
EH2 3DJ

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write in this  
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# THE COMPANIES ACT 1985

Continuation Sheet No. 1

## Return of allotments of shares issued

to Form No. G88(2) (Revised 1988)

Company number

00933605

Name of Company

SUNRISE MEDICAL LIMITED

### Names and addresses of the allottees (continued)

Names and Addresses	Number of shares allotted		
	Ordinary	Preference	Other
RICHARD J WARD	357		
9 Beaufield Gate			
Three Gates Lane			
Haslemere			
Surrey GU27 2LN			
ALLIED COMBINED TRUST LIMITED	5 247		
Bankcentre			
Ballsbridge			
Dublin 4			
Ireland			
Brought forward from previous sheet	3 538		
Total	9 142		

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write in this  
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**Please  
complete  
legibly,  
preferably in  
black type, or  
bold block  
lettering**

Names and Addresses	Number of shares allotted		
	Ordinary	Preference	Other
Brought forward from page 1			
Total			

\*Delete as appropriate

Signed

~~Director~~ [Secretary]\*

Date 19 July '95

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