

for the record

88(2)
Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

Company Number

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COUNTRYWIDE ASSURED GROUP PLC	

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

Day	Month Year	Day Month Year
2 3	1 0 2 0 0 3	

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

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

ORDINARY				
20,000		, ,		 · · · · ·
£0.05				
112.5p				

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 share is to be treated as paid up

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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)

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

*APIJURPRY** 0424

COMPANIES HOUSE

0424 04/11/03 *1e*

Companies House, Crown Way, Cardiff CF14 3UZ For companies registered in England and Wales

DX 33050 Cardiff

Companies 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 det	ails	Shares and share	class allotted
Name MR GRAHAM WALTON	A	Class of shares allotted	Number allotted
Address 43 ALL SAINTS ROAD,		ORDINARY	20,000
ST ANNES ON SEA, LYTHAM ST ANNES			
UK Posto	ode FY8, 1PL		
Name		Class of shares allotted	Number allotted
Address			
UK Posto		L	
Name		Class of shares allotted	Number allotted
Address			
		_ \	
UK Posto	ode		<u> </u>
Name		Class of shares allotted	Number allotted
Address			c s
UK Posto	ode		L
Name		Class of shares allotted	Number allotted
Address			
UK Postc	ode		<u> </u>
Please enter the number of continuation	n sheets (if any) attached to th	is form	
)		Date3.11.2003	
A d irect or / secretary / administrator / adminis		eceiver Please	delete as appropriate
Please give the name, address, elephone number and, if available, a DX number and Exchange of the	COUNTRYWEE ASSURED GAC COUNTRYWIDE HOUSE 1A DEEDDY WAY	W ph	
person Companies House should contact if there is any query.	1A PERRY WAY WITHAM ESSEX CM8 36X	Tel 0/37/	\$33700

DX number

DX exchange