

**Return of Allotment of Shares** 

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

**Company Number** 

2294625			
ANVIL	SOFTWARE	LIMITES	

Company name in full	ANVIL SOFTWARE LIMITE'S			
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	Day Mon	To th Year 2 0 0 3
Class of shares (ordinary or preference etc)	ORDINARY "B"			
Number allotted	10,000			
Nominal value of each share	2p			
Amount (if any) paid or due on each share (including any share premium)	2ρ			
List the names and addresses of the a				
If the allotted shares are fully or	partly paid up otherw	ise than i	n cash pleas	e 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 cor	npleted ar	nd signed the	form send it to

the Registrar of Companies at:

A08 COMPANIES HOUSE

Įе

07/10/03

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 details	Shares and share class allotted			
THE ANVIL SOFTWARE EMPLOYEE BENEFIT TRUST	Class of shares allotted	Number allotted		
robox 404, whiteley chambers, don st,	B	10,000		
ST HELIER, JERSEY JE4 9WG CHANNEL				
UK Postcode LLLLL	L			
lame	Class of shares allotted	Number allotted		
Address				
		L		
UK Postcode		. 1		
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode		_ L.		
Name	Class of shares allotted	Number allotted		
Address	_			
		_		
UK Postcode				
Name	Class of shares allotted	Number allotted		
Address				
i		<u></u> 1		
UK Postcode				
Please enter the number of continuation sheets (if any) attached to this	s form			
Signed	Date 26/9/03	J		
A director / segretary / administrator / administrative receiver / receiver manager / re		se delete as appropria		
Please give the name, address, telephone number and, if available,	JOE NICHOLSON, ANVIL SOCTWARG,			
a DX number and Exchange of the				
person Companies House should contact if there is any query.  CC2A 3QP		7749 790		

DX number

DX exchange