

## 88(2) Return of Allotment of Shares

Please complete in typescript, or in bold black capitals.
CHFP000

**Company Number** 

Company name in full

3236320

T.E. PUTNEY AND GONS (PCASTERERS)

<u> </u>					
Shares allotted (including bonus shares):					
	From		То		
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 M	onth Year		
Class of shares (ordinary or preference etc)	B'SHARES	"CI SHARKS			
Number allotted	100	100			
Nominal value of each share	£1	ti			
Amount (if any) paid or due on each share (including any share premium)	+(	t(			
List the names and addresses of the allot	ttees and the number of	shares allotted to each o	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					
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 and signed the form send it to the Registrar of Companies at:

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

DX 33050 Cardiff

Samuarian Harras 97 Oceans Tarrasa Edinburgh EH1 2

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh

Shareholder details	Shares and share class allotted	
Name KUW VICTOR PUTNEY	Class of shares allotted	Number allotted
HAWHESBURY LLOSE CHIVE ( ISCOND KESSEX	B'SHARES	_100
UK Postcode & S.B. DEZ		
CARLA TANE PUTNEY	Class of shares allotted	Number allotted
Address  THAWTIESBURY CLOSE  CANVEY ISLAND ESSACT	L'SHARES	_100_
UK Postcode SSB OKZ	<u> </u>	L
Name	Class of shares allotted	Number allotted
Address		<u> </u>
UK Postcode	L	L
Name	Class of shares allotted	Number allotted
Address		•
		L
UK Postcode LLLLL		<b></b>
Name	Class of shares allotted	Number allotted
Address		
		L
UK Postcode LLLLL		L
Please enter the number of continuation sheets (if any) attached to this	form	
rigned Dar	te 31-01-09	
Adirector / speretary / administrator / administrative receiver / receiver manager / receiver		ete as appropriate
lease give the name, address, lephone number and, if available, DX number and Exchange of the groon Companies House should	ZOI HIGH ROD	1
ntact if there is any query.  Attywal books 167	Tel OZI & G DX exchange	1-525(