

Please complete in typescript, or in bold black capitals CHFP029

88(2)

Return of Allotment of Shares

Company Number	3782379			
Company name in full	CARILLION PLC			
Shares allotted (including bon	us 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 9 0 6 2 0 0 6	To Day Month Year		
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	138,500			
Nominal value of each share	SO PENCÉ			
Amount (if any) paid or due on each share (including any share premium)	296.25 PENCÉ			
List the names and addresses of the	allottees and the number of shares allotte	ed 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)				



A52 COMPANIES HOUSE 366 21/06/2006 When you have completed and signed the form send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff CF14 3UZ DX 33050 Cardiff For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EBDX 235
For companies registered in Scotland
Edinburgh

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

Shareholder details		Shares and share class allotted	
Name CARILLION QUEST TRUS	TEE LIMITED	Class of shares , allotted	Number allotted
Address 24 BIRCH STREET W	OLVERHAMPTON	ORDINALY	138,500
UK Pos	tcode (#\V_L		_
Name		Class of shares	Number
Address		allotted	allotted
L			
UK Pos	tcode LLLLLL	-	
Name		Class of shares allotted	Number allotted
Address			
<u></u>			
UK Pos	tcode L L L L L L L		<u>- L</u>
Name		Class of shares allotted	Number allotted
Address			
L			_
	tcode LLLLLL		
Name		Class of shares allotted	Number allotted
Address			
LIV Pos	tcode		
Please enter the number of continuati	-	form	
igned Cari	<u>f</u>	ate 20 Jule &	2006
A director / secretary / administrator / administr	ative receiver / receiver manager / receive	r Please de	lete as appropriate
lease give the name, address, elephone number and, if available,			_ -
DX number and Exchange of the			
erson Companies House should ontact if there is any query.	DV	Tel	
, , ,	DX number	DX exchange	