

Please complete in typescript, or in bold black capitals **CHFP029**

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88(2)

Return of Allotment of Shares

Company Number	3782379		
Company name in full	CARILLION PLC		
<u> </u>			
Shares allotted (including bonus shares):			
	From To		
Date or period during which shares were allotted	Day Month Year Day Month Year		
(If shares were allotted on one date enter that date in the "from" box)	05012005		
Class of shares			
(ordinary or preference etc)	ORDINARY		
Number allotted	28,165		
Nominal value of each share	50 P		
Amount (if any) paid or due on each share (including any share premium)	186.4P		
List the names and addresses of the a	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			
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 DX 33050 Cardiff For companies registered in England and Wales

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

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

contact if there is any query.

Shareholder details	Shares and share class allotted	
Name CAZENOVE NOMINEES LIMITED	Class of shares allotted	Number allotted
Address CAZENOVE & G. LID 20 MooRGATE	ORDINARY	28,165
LONDON ECOR GDA		
UK Postcode ECLEBDA		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode		
Name	Class of shares allotted	Number allotted
Address .		
UK Postcode LLLLL		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode LLLLL		
Name	Class of shares allotted	Number allotted
Address		
UK Postcode LLLLL		
Please enter the number of continuation sheets (if any) attached to this	form	7
Tim George Deputy Company Secretary	< 1. L	2. ~
A director secretary administrator / administrative receiver / receiver manager / receiver	er Please de	lete as appropriate
Please give the name, address,		
elephone number and, if available, a DX number and Exchange of the	OIRCH STREET	
person Companies House should WOLVERHAM FON WI	11 4HY Tel 01902	. 318137

DX number

DX exchange