



**Companies House**  
for the record

# 88(2)

## Return of Allotment of Shares

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

CHWP000

Company Number

3899738

Company name in full

its4me plc

### 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			To		
Day	Month	Year	Day	Month	Year
2	1	09	2	0	01

Class of shares  
*(ordinary or preference etc)*

Cumulative Preference

Number allotted

150000

Nominal value of each share

£1

Amount (if any) paid or due on each  
share *(including any share premium)*

£1

**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)*


**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**

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

**DX 235  
Edinburgh**



A37  
COMPANIES HOUSE

0629  
09/10/01

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

Shareholder details		Shares and share class allotted	
Name MMA Insurance plc Address Norman Place, Reading UK Postcode RG1 8DA		Class of shares allotted CUMULATIVE PREF	Number allotted 150000
Name Address UK Postcode		Class of shares allotted	Number allotted
Name Address UK Postcode		Class of shares allotted	Number allotted
Name Address UK Postcode		Class of shares allotted	Number allotted
Name Address UK Postcode		Class of shares allotted	Number allotted

Please enter the number of continuation sheets (if any) attached to this form

Signed

*Richard Savelli*

Date

5/10/2001

Director / secretary / administrator / administrative receiver / receiver-manager / receiver

Please delete as appropriate

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

Richard Savelli, 115 Queens Road, Norwich	
NR1 3PL	
Tel 01603 221013	
DX number	DX exchange