

## 88(2) Return of Allotment of Shares

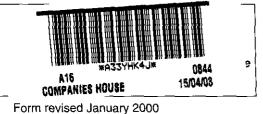
Please complete in typescript, or in bold black capitals.
CHFP000

**Company Number** 

Company name in full

4659356				
GASCOIGNES	HOLDINGS	LIMITED		

Shares allotted (including bonus shares):						
	From		То			
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)	1  0   0   2   2   6	0  0 β				
Class of shares (ordinary or preference etc)	ORDINARY					
Number allotted	1					
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						
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

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

Shareholder details		Shares and share class allotted		
Name	ANDREW RUSSELL	Class of shares allotted	Number allotted	
Address	14 ROSSITER LODGE, ROSE'CREES	ORDINARY	1	
	GUILDFORD, SURREY	_ \	\	
	UK Postcode _G _U _1 _ 2 H_ U_	L		
Name		Class of shares allotted	Number allotted	
Address				
<u></u>			<u> </u>	
	UK Postcode டடடடட		L	
Name		Class of shares allotted	Number allotted	
Address				
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:	UK Postcode			
Name		Class of shares allotted	Number allotted	
Address				
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Name		Class of shares allotted	Number allotted	
Address				
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	UK Postcode	_	L	
Please enter	the number of continuation sheets (if any) attached to this	s form		
gned X	Mary ×	Date 9-April	2000	
_	eerotary / administrator / administrative receiver / receiver manager / rec	77-	lelete 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.

ROFFE SWAYNE	ASHEONBE COURT
· · · · · · · · · · · · · · · · · · ·	GOODLMING SURREY
GU7 169	Tel 01483 416232
DX number	DX exchange