

Return of Allotment of Shares

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

CHFP010

Company Number

154044

Company Name in full

NORWICH CITY FOOTBALL CLUB 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		
	0	9	0	2	2	0	0	4
Class of shares (ordinary or preference etc)	"B" PREFERENCE							
Number allotted	5							
Nominal value of each share	£1.00							
Amount (if any) paid or due on each share (including any share premium)	£100.00							

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)

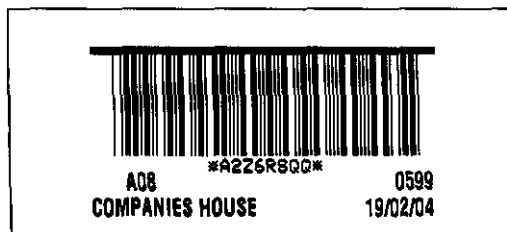
**When you have completed and signed the form send it to
the Registrar of Companies at:**

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



Names and addresses of the allottees

(List joint share allotments consecutively) Company No 154044

Shareholder details		Shares and share class allotted	
Name SAMUEL HOLLINGER		Class of shares allotted £1.00 "B" PREFERENCE	Number allotted 5
Address HOLLINGER PRINT, 12 BURNT ROAD, SWEET BRIAR ROAD IND EST, NORWICH			
UK postcode NR15 1NS			
Name 		Class of shares allotted	Number allotted
Address 			
UK postcode			
Name 		Class of shares allotted	Number allotted
Address 			
UK postcode			
Name 		Class of shares allotted	Number allotted
Address 			
UK postcode			

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

0

Signed

[Signature]

Date

16/2/04

~~A director / secretary / administrator / administrative receiver / receiver manager / receiver~~

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.

Tel	
DX number	DX exchange