

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					
Day	Month	Year			
0	2	1	0	2	0

To					
Day	Month	Year			

Class of shares

(ordinary or preference etc)

ORDINARY		
4		
£1.00		
£25.00		

Number allotted

Nominal value of each share

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

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 28(2) if the contract is not in writing)



A10
COMPANIES HOUSE
Shaun O'Hara
Company Secretary
Norwich City Football Club plc
Carrow Road
Norwich NR1 1JE
01603 760760

0759
10/12/02

**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
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 PETER JAMES BAITEY		Class of shares allotted £1.00 ORDINARY	Number allotted 4
Address 557 SPROWSTON ROAD, NORWICH, NORFOLK			
UK postcode NR3 4AD			
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

19/10/02

~~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