

Please complete in typescript, or in bold black capitals.
CHWP001

## 88(2) Return of Allotment of Shares

CHWP001			
Company Number	SC 33276		
Company name in full	NOSS COUNTY FOOTOM CUO NO		
Shares allotted (including bonus	shares):		
	From	То	
Date or period during which	Day Month Year	Day Month Year	
shares were allotted (If shares were allotted on one date	[22] 22] 2 22/		
enter that date in the "from" box)	23 97 4994		
Class of shares (ordinary or preference etc)  Number allotted	5,000 E1.00 E1.00		
Nominal value of each share	£1.00		
Amount (if any) paid or due on each share (including any share premium)	£1.00		
List the names and addresses of the a	allottees and the number of shares allotted t	o each overleaf	
If the allotted shares are fully or pa	artly paid up otherwise than in cash ple	ase 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)

Shareholder details	Shares and share class allotted	
Name PETOL SWAD 500	Class of shares allotted	Number allotted
Address 42 OLD EDINOMAN ROPP,	- ORDINDRY	5,000
INCRMED	<u> </u>	
UK Postcode LL 2 L 3 LL	<u> </u>	
Nama	Class of shares allotted	Number allotted
Address		
	L L	· · · · · · · · · · · · · · · · · · ·
	L L	<u> </u>
UK Postcode L L L L L L	L L	
Name L	Class of shares allotted	Number allotted
Address		
	<u> </u>	<del></del>
UK Postcode L L L L L		
Name	Class of shares allotted	Number allotted
Address		
	L	
UK Postcode LLLLL		
Name	Class of shares allotted	Number aliotted
Address	1	
UK Postcode LLLLLL		
Please enter the number of continuation sheet(s) (if any) attached to this for		
Adirector / secretary / administrator / administrative receiver / receiver manager / receiver	· ————————————————————————————————————	te as appropriate
ease give the name, address, ephone number and, if available, DX number and Exchange of the	ROJCAD PRO SÍ 4 EMLIFED	er pom
rson Companies House should INVOX NOS ntact if there is any query.	· · · · · · · · · · · · · · · · · · ·	
DX number	DX exchange	