

Return of Allotment of Shares

Please complete in typescript, or in bold black capitals. CHWP000

1002207

Company Number	4992201		
Company name in full	GROUP 4 SECURICOR PLC		
Shares allotted (including bot	nus shares):		
	From To		
Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	Day Month Year Day Month Year 1 9 1 2 2 0 0 5		
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	1096		
Nominal value of each share	£0.25		
Amount (if any) paid or due on each share (including any share premium)	ch 104p		
List the names and addresses of the	he 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

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)

Shareholder details	Shares and share	Shares and share class allotted	
Name PERSHING KEEN NOMINEES LIMITED	Class of shares allotted	Number allotted	
Address PARTICIPANT ID 601 MEMBER ACCOUNT KKCLT	ORDINARY	1,096	
CAPSTAN HSE, ONE CLOVE CRESCENT, EAST INDIA DOCK, LO	NODNC	L	
UK Postcode E 1 4 2 B	Н		
Name	Class of shares allotted	Number allotted	
Address			
		L	
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
Address		L	
UK Postcode		L	
Name	Class of shares allotted	Number allotted	
Address			
		L	
UK Postcode		<u> </u>	
Name	Class of shares allotted	Number allotted	
Address			
		L	
UK Postcode			
Please enter the number of continuation sheets (if any) attached	I to this form		
igned A director / Segretary / administrator / administrative receiver // receiver mane	Date 21 - 12 - 05		
Please give the name, address,	riease	delete as appropriate	
elephone number and, if available, DX number and Exchange of the			
erson Companies House should ontact if there is any query.	Tel		
DX number	DX exchange		