

88(2)
Return of Allotment of Shares

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

Company Number

Company name in full

4992207	
GROUP 4 SECURICOR PLC	

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Shares allotted (including bor	nus 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 2 1 0 9 2 0 0 4	To Day Month Year	
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	859		
Nominal value of each share	£0.25p		
Amount (if any) paid or due on eac share (including any share premium)	ch 64p		
List the names and addresses of th	e allottees and the number of shares allot	ted 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:

AX./ZSYLE

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COMPANIES HOUSE

0284 28/09/04 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 allotte
Name MR KEITH EDGE		Class of shares allotted	Number allotted
Address 23 ROCKALL DRIVE, HAILSHAM,		ordinary	859
EAST SUSSEX			
UK F	Postcode BN273BG		
Name		Class of shares allotted	Number allotted
Address		_	
		_	L
UK P	Postcode	L	
Name		Class of shares allotted	Number allotted
Address		_	
		_	L
UK P	ostcode		
Name		Class of shares allotted	Number allotted
Address		;	
			(
UK P	Postcode		
Name		Class of shares allotted	Number allotted
Address			
			<u> </u>
UKF	Postcode		Ł
Please enter the nymber of continu	uation sheets (if any) attached to this	s form	
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~ X(1	Iministrative resciver / rec siver mana ger / re		delete as appropriat
Please give the name, address, elephone number and, if available,			
DX number and Exchange of the	100		
erson Companies House should ontact if there is any query.		Tel	
	DX number	DX exchange	