

for the record

## **Return of Allotment of Shares**

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

**Company Number** 

3811216

Company name in full

SECURICOR PLC		

Shares allotted (including bonus shares):			
	From	То	
Date or period during which shares were allotted	Day Month Year	Day Month Year	
(If shares were allotted on one date enter that date in the "from" box)	0 3 0 2 2 0 0 4		
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	5070		
Nominal value of each share	5 15/17p		
Amount (if any) paid or due on each share (including any share premium)	107p		
List the names and addresses of the allo	ttees and the number of shares allot	ted to each overleaf	
If the allotted shares are fully or pa	artly 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 he Registrar of Companies at:	signed the form send it to	



A20 COMPANIES HOUSE 10/02/04 ge

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

DX 235

Edinburgh

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

Names	and	addresses	of	the	allottees	(List joint share	allotments	consecutively)
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Shareholder details	Shares and share class allotted			
Name MR KENNETH FRANKCOM	Class of shares Number allotted allotted			
Address 27 BROADFIELD AVENUE,	ORDINARY	5,070		
KINGSWOOD, BRISTOL		L		
UK Postcode BS15151HX		L		
Name	Class of shares allotted	Number allotted		
Address	_	1		
LIIV Destroit		L		
UK Postcode				
Name	Class of shares allotted	Number allotted		
Address				
UK Postcode L L L L L	1	L		
Name	Class of shares allotted	Number allotted		
Address				
		L		
UK Postcode	L	L		
Name	Class of shares allotted	Number allotted		
Address				
1	-			
UK Postcode		L		
Please enter the number of continuation sheets (if any) attached to this	form			
igned Da	ate			
A director / secretary administration administrative register / receiver manager/pace	Please o	delete as appropriate		
lease give the name, address, 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