

for the record

Shares allotted (including bonus shares):

88(2)
Return of Allotment of Shares

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

**Company Number** 

Company name in full

26077	
DELTA PLC	
	· •

•	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)	1/017/2101013	

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Of that and above in to be

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

ORD	ORD	ORD	ORD
884	388	692	910
Sp	25p	25p	25p
91p	720	82p	990

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:

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
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



Form Revised January 2000

## Names and addresses of the allottees (List joint share allotments consecutively)

Shareholder details	Shares and share class allotted		
Name Soroh Hexandra Jepson	Class of shares allotted	Number allotted	
Address 5, Parc Telin Dwr Holyhead, Gwynedd UK Postcode L.L. b S.L.L.2	ORD 25p	884	
Name Johne Roberts  Address	Class of shares allotted	Number allotted	
Holyhood, Gulgnodd UK Postcode LL 65 L HIA	_ OK) 25p	470	
Name Address	Class of shares allotted	Number allotted	
UK Postcode			
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode	<u> </u>		
Name	Class of shares allotted	Number allotted	
Address			
UK Postcode L L L L L	L		
Please enter the number of continuation sheets (if any) attached to this form the signed	te /4.07.03	te as appropriate	
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.	HL DEPT, DEC WDW, WCDB (	14 FIC	

DX number

DX exchange