



88(2)

Return of Allotment of Shares

Please complete in typescript, or
in bold black capitals.

CHWP000

Company Number

02828746

Company name in full

RAILWAY PENSIONS LIMITED

Shares allotted (including bonus shares):

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)	From			To		
	Day	Month	Year	Day	Month	Year
	28	07	2003			

Class of shares
(ordinary or preference etc)

ORDINARY

Number allotted

ONE

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 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
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 allotted	
Name <u>RAILWAYS PENSION TRUSTEE COMPANY LTD</u> Address <u>6TH FLOOR, BROAD STREET HOUSE, 55 OLD</u> <u>BROAD STREET, LONDON</u> UK Postcode <u>EC2M 1LT</u>	Class of shares allotted <u>ORDINARY</u>	Number allotted <u>1</u>
Name _____ Address _____ _____ UK Postcode <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	Class of shares allotted _____	Number allotted _____
Name _____ Address _____ _____ UK Postcode <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u> <u> </u>	Class of shares allotted _____	Number allotted _____
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Please enter the number of continuation sheets (if any) attached to this form

Signed

[Signature]

Date

6/8/03

A director / secretary / administrator / administrative receiver / receiver manager / receiver

Please delete 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.

<u>PAULA YOUNG, 6TH FLOOR, BROAD STREET</u>	
<u>HOUSE, 55 OLD BROAD STREET, LONDON</u>	
<u>EC2M 1LT</u>	Tel <u>020 7786 7206</u>
DX number	DX exchange