

88(2)

Please complete in typescript, or in bold black capitals.

CHWP000

**Company Number** 

Return of Allotment of Shares

Company name in full	SUPPORTCARE L'HITED					
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  Day Month Year  3   1   0   2   0   0   2	To  Day Month Year				
Class of shares (ordinary or preference etc)	8 ORGINARY MON. VOTING PREFERENCE SHARES					
Number allotted	150					
Nominal value of each share	61					
Amount (if any) paid or due on each share (including any share premium)	ch Ei					
List the names and addresses of the	ne allottees and the number of shares allotte	ed to each overleaf				
If the allotted shares are fully	or partly paid up otherwise than in o	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 the Registrar of Companies at:	signed the form send it to				

3265314



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

Shareholder details	Shares and share class allot	tted
Name HARTIN BODD  Address STUDFIELD COFFREE, 130 STUDFIELD HILL, LOXLEY SHEFFIELD	Class of shares Number allotted allotted allotted how with RP School Reference School Refer	
Name DOHINIC GAFFNEY  Address 283 DYKES LANE SHEFFIELD	Class of shares Number allotted allotted allotted box or in Reference 50	
Name CHRISTOPHER CARFAUEY  Address IIO AIREBALE ROAD SHEFFIELD	Class of shares Number allotted allotted allotted box voting PREFERQUCE 20	
Name Address	Class of shares Number allotted allotted	
UK Postcode L L L L L Name	Class of shares Number	
Address  UK Postcode	allotted allotted	<del>_</del>
A director / secretary / administrator / administrative receiver / receiver manager / r	Date 31 October 2e eceiver Please delete as approp	oriate
Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should  51 CLAPKE	ED ACCOUNTANTS  GROVE ROAD  SAN SNHTEI	