

## **Return of Allotment of Shares**

Please complete in typescript, or in bold black capitals. CHFP000

**Company Number** 

Company name in full	TLC PRIMARY HEALTHCARE			
	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  [1] 0 7 2003			
Class of shares (ordinary or preference etc)	ORDINARY			
Number allotted	99			
Nominal value of each share	£1			
Amount (if any) paid or due on eac share (including any share premium)	h <b>£1</b>			
List the names and addresses of th	e 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

DX 33050 Cardiff

For companies registered in England and Wales

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

Form revised January 2000

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Shareholder details		Shares and share class allotted	
Name MR STEPHEN CLIF	FORD	Class of shares allotted	Number allotted
SUMMER HOUSE, 560 CR. BEXHILL - ON -SEA, E		ORDINARY	79
UK Post	code IN393NN	·	<u> </u>
Name MRS TERESA LOUISE	CLIFFORD	Class of shares allotted	Number allotted
SUMMER HOUSE, SER C BEXHILL-ON-SEA,	KANSTON AVENUE, EAST SUSSEX.	ORDINARY	20
	code TN39 3NN	<u> </u>	
Name L		Class of shares allotted	Number allotted
Address		· .	
144.5			
	code		
Name		Class of shares allotted	Number allotted
Address			
UK Post	code <u> </u>		<u></u>
Name		Class of shares allotted	Number allotted
Address			
UK Post	code L L L L L L		
Please enter the number of continuation	on sheets (if any) attached to this f	orm O	
Signed A director Disecretary / administrator / admin		e	iete as appropriate
Please give the name, address, elephone number and, if available, a DX number and Exchange of the	McPherson & Partners Chartered Accountants		
berson Companies House should contact if there is any query.		23 St Leonards Road BEXHILL ON SEA Te East Sussex, TN40 1H	
	DX number	DX exchange Tel: 01424 730000 Fax	01424 730489