88(2)

Please complete in typescript, or in bold black capitals.		Return of Allotment of Shares	
CHWP007			
Company Number	6842801		
Company name in full	WALLACE SUPPORT SE	RVICES LIMITED	
Shares allotted (including bo	nus shares):		
, ,	From	То	
Date or period during which	Day Month Ye	ear Day Month Year	
shares were allotted (if shares were allotted on one date enter that date in the "from" box).		0 9	
Class of shares (ordinary or preference etc)	ORDINARY		
Number allotted	1		
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 th	e allottees and the number of sh	nares allotted to each overleaf	
if the aliotted shares are fully or	partly paid up otherwise than	n in cash please state:	
% that each share is to be treated as paid up	100		
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)			

14/03/2009 **COMPANIES HOUSE**

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

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

DX 235 Edinburgh

DX 33050 Cardiff

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

Shareholder details	Shares and share class allotted	
Name DAVID EDWARD BLACK	Class of shares allotted	Number allotted
Address		
12 NORTH AVENUE, GLASGOW	ORDINARY	_ 1
LANARKSHIRE	L	<u></u>
UK Postcode G 7 2 E 8 A T	<u> </u>	
Name	Class of shares allotted	Number allotted
Address		
· · · · · · · · · · · · · · · · · · ·		
UK Postcode	L	
Name .	Class of shares allotted	Number allotted
Address		
UK Postcode ;	L	L
Name	Class of shares allotted	Number allotted
Address		
L		
UK Postcode L L L L		<u> </u>
Name	Class of shares allotted	Number allotted
Address		
		<u>. </u>
UK Postcode	L	<u> </u>
Please enter the number of continuation sheets (if any) attached to this	form	
Signed Da	te 13 MARCH 2009	
A director (MONING / MONING / MONING X ON ONE / YEAR NO X ON ONE / MONING X ON ONE / MONING X ON		delete as appropria

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.

SJF, WITHY KING SOLICITORS JAMES STREET WEST, GREEN PARK				
DX number 8014	DX exchange	BATH 1		