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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | THE COMPANIES ACT  (CHAPTER 50)  Section 63 (1)  **RETURN OF ALLOTMENT OF SHARES** | | | | | |  | FORM **24** | |
|  | | | | | Folio No | | | | | | | | |
| Name of Company: | | | | | **${Company current name}** | | | | | | | | |
|  | | | | |  | | | | | | | | |
| Company No: | | | | | **${UEN}** | | | | | | | | |
|  | | | | |  | | | | | | | | |
|  | | | | |  | | | | | | | | |
|  | The issue of the shares referred to in this return was made pursuant to a resolution passed by the | | | | | | | | | | | | |
| members of the company on | | | | | |  | | | | | | | |
|  | The shares referred to in this return were allotted, or are deemed to have been allotted under section | | | | | | | | | | | | |
| 63 (6) of the Companies Act, to the allottees on the dates indicated. | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | |
| 1 Payable in cash | | | | | | | | | | | | | |
|  | | |  |  | | | | | | | | | |
| Class of Shares | | | | | | | | Ordinary | | Preference | | | Others |
| Number of Shares | | | | | | | | ${Allotment – number of shares all(ordinary)} | | ${Allotment – number of shares all(preference  )} | | | ${Allotment – number of shares all(others)} |
| Nominal amount of each share | | | | | | | | ${Allotment – amount of shares all with currency(ordinary)} | | ${Allotment – amount of shares all with currency(preference)} | | | ${Allotment – amount of shares all with currency(others)} |
| Amount paid or due and payable on each share | | | | | | | |  | |  | | |  |
| paid | | | | | | | | ${Allotment – currency(ordinary)}${Allotment - overall amount of share(ordinary)} | | ${Allotment – currency(preference)}${Allotment - overall amount of share(preference)} | | | ${Allotment – currency(others)}${Allotment - overall amount of share(others)} |
| due and payable | | | | | | | |  | |  | | |  |
|  | | | | | | | |  | |  | | |  |
| Amount of premium paid or payable on each | | | | | | | |  | |  | | |  |
| share | | | | | | | |  | |  | | |  |
|  | | |  |  | | | | | | | | | |
| 2 For a consideration other than cash (\*See Form 25/contract in writing) | | | | | | | | | | | | | |
|  | | |  |  | | | | |  | | | | |
| Class of shares | | | | | | | | Ordinary | | Preference | | | Others |
| Number of shares | | | | | | | |  | |  | | |  |
| Nominal amount of each share | | | | | | | |  | |  | | |  |
| Amount to be treated as paid on each share | | | | | | | |  | |  | | |  |
| The consideration for which the shares have been so allotted is as follows: | | | | | | | | | | | | | |
|  | | | | | | | |  | |  | | |  |
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|  | | | | | | | | | | | | | |
| **Lodged in the office of the Registrar of Companies & Businesses by** | | | | | | | | | | | | | |  |
| Name: | | ${firm\_name} | | | | | | | | | | | |  |
| Address: | | ${firm\_address} | | | | | | | | | | | |  |
|  | |  | | | | | | | | | | | |  |
|  | |  | | | | | | | | | | | |  |
|  | |  | | | | | Tel No. ${Firm Tel} | | | | | | |  |
| A/C No. | | - | | | | | Fax No.${Firm Fax} | | | | | | |  |
|  | |  | | | | | | | | | | | |  |

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| --- | --- | --- | --- | --- |
| *Form 24 Continuation Sheet 1* | | | | |
| (Please use continuation sheets if space provided is insufficient) | | | | FORM24 |
| Name of Company: | **${Company current name}** | | |
|  |  |  | |
| Company No: | **${UEN}** |  | |
|  |  | | |
|  |  |  | |
| 3 List of the allottees and an account of the shares allotted to them are as follows: | | | | |
|  | | |  | |
| (a) Name | | | (e) +No and class of shares | |
| (b) NRIC/Passport No/Registration No | | | Allotted and consideration | |
| (c) Address | | | Therefor | |
| (d) Nationality/Country of Incorporation | | | (f) Date of allotment | |
|  | | |  | |
| ${Allotment - members\_details} | | | ${Allotment - number of shares} ${Allotment - type of shares}  ${Members' Meeting Date} | |
|  | | |  | |
|  | | |  | |
|  | | |  | |
|  | | |  | |
|  | | |  | |
| \* Delete where inapplicable. | | | | |
| + Please specify if class of shares is other than Ordinary (i.e.Preference/Others) and if consideration is otherwise than in cash. Details of consideration need not be provided. | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
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| *Form 24 Continuation Sheet 2* | | | | | | | | | | | |
|  | | | | | | | | | | | FORM24 |
| Name of Company: | | | **${Company current name}** | | | | | | | |
|  | | |  | | | |  | | | |
| Company No: | | | **${UEN}** | | | |  | | | |
|  | | |  | | | | | | | |
|  | | |  | | | |  | | | |
| 4 Upon the abovementioned allotment of shares, the position of the Share Capital is as follows: | | | | | | | | | | | |
|  | | | | Ordinary | Preference | | | | | Others | |
| Authorised Share Capital | | | |  |  | | | | |  | |
| Issued Share Capital | | | | ${Amount of shares paid up - all} |  | | | | |  | |
| Paid-up Share Capital | | | | ${Amount of shares paid up - all} |  | | | | |  | |
| CERTIFICATE: | | | | | | | | | | | |
|  | I hereby certify, in relation to the abovenamed company, that ---- | | | | | | | | | | |
|  | (a) ~~the company has more than 500 members~~; | | | | | | | | | | |
|  | (b) the company keeps its principal shares register at (address) | | | | | | | |  | | |
|  | ${firm\_address} | | | | | | | | | | |
|  |  | | | | | | | | | | |
|  | (c) the company provides reasonable accommodation and facilities for persons to inspect and take | | | | | | | | | | |
|  | Copies of its list of members and its particulars of shares transferred; | | | | | | | | | | |
|  | (d) the shares referred to in this return were allotted for cash; | | | | | | | | | | |
|  | ~~(e) the shares referred to in this return were allotted for a consideration other than cash and the~~ | | | | | | | | | | |
|  | ~~Number of persons to whom the shares have been allotted exceeds 500.~~ | | | | | | | | | | |
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| Dated: | |  | | | | | | | | | |
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|  | | | | | | | |  | | | |
| Signature: | | | | | | | |  | | | |
|  | | | | | | | |  | | | |
|  | | | | | | | |  | | | |
| Name of \*Director/~~Secretary~~: | | | | | | | | ${Director Signature 1} | | | |
|  | | | | | | | |  | | | |
|  | | | | | | | |  | | | |
|  | | | | | | | | | | | |
| \* Delete where inapplicable. | | | | | |  | | | | | |
| + This Certificate is not to be completed if paragraph 3 of this Form is completed. | | | | | | | | | | | |