

ASIC registered agent number 296  
**lodging party or agent name** McCullough Robertson  
 office, level, building name or PO Box no Level 11, Central Plaza Two  
 street number and name 66 Eagle Street  
 suburb/city Brisbane state/territory Qld postcode 4000  
 telephone (07) 3233 8888  
 facsimile (07) 3229 9949  
 DX number DX 158 suburb/city Brisbane  
 Ref SRM:RWW:149155-00008

	ASS. <input type="checkbox"/> REQ-A <input type="checkbox"/> CASH. <input type="checkbox"/> REQ-P <input type="checkbox"/> PROC <input type="checkbox"/>
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Australian Securities & Investments Commission

form **1003**

## Disclosure notice for unlisted disclosing entity

ASCOT 7053

(to be lodged as soon as practicable after the disclosing entity becomes aware of the information)

Corporations Act 2001  
1001B(1)

### Disclosing entity

Please complete A, B or C.

**A a company**

name Provet Holdings Limited  
 A.C.N. 092 593 774

**B a body (other than a company)**

name \_\_\_\_\_  
 A.R.B.N. \_\_\_\_\_

**C a prescribed interest undertaking**

name \_\_\_\_\_  
 ASIC prescribed interest number \_\_\_\_\_

### Details of information

date that the disclosing entity became aware of the information 11/09/2008

**full information** (if insufficient space please use an annexure)

The Board has declared a final 2008 financial year dividend of 21 cents (fully franked) per ordinary share held by each shareholder, registered as such on the record date determined to be 10<sup>th</sup> September 2008. The final dividend is expected to be paid on the 10<sup>th</sup> October 2008.

### Declaration

- I verify that the attached document marked ( ) is the original document.  
 I certify that the attached document marked ( ) is a true copy of the original document.

### Signature

This form is to be signed by:

if a company or a body a director or secretary or the equivalent  
 if a prescribed interest undertaking a director or secretary of the management company or trustee company acting in that capacity

name of management \_\_\_\_\_  
 or trustee company \_\_\_\_\_  
 ACN or ARBN \_\_\_\_\_

name of person signing (print) Chris Lowndes.

sign here

capacity Company Secretary  
 date 11/09/08

Small Business (less than 20 employees), please provide an estimate of the time taken to complete this form

**Include**

- The time actually spent reading the instructions, working on the question and obtaining the information
- The time spent by all employees in collecting and providing this information

hrs mins

**DISCLOSURE NOTICE**