

Please complete in typescript,

Return of Allotment of Shares

or in bold black capitals. CHFP001

Company Number	3234033	
Company name in full	CAMBRIDGE ANTIBODY CON CIROUP PIC	
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 I I 0 8 20015	
Class of shares (ordinary or preference etc)	ORDINARY	
Number allotted	1,250	
Nominal value of each share	10 PENCE	
Amount (if any) paid or due on each share (including any share premium)	E2.87	
List the names and addresses of the 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 DX 235 Edinburgh For companies registered in Scotland

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

Shareholder details	Shares and share class allotted
Name DR ROBERT DUNCAN CASSON	Class of shares Number allotted allotted
Address PADDOCK, PEDLARS LANG,	ORDINARY [11250
THERFIELD ROUSTON HERTS	
UK Postcode ISIGIBL 191	
Name	Class of shares Number allotted allotted
Address	
UK Postcode L L L L I	
Name I	Class of shares Number allotted allotted
Address	
UK Postcode L L L L I	
Name	Class of shares Number allotted allotted
Address L	
UK Postcode L L L L L	
Name	Ciass of shares Number allotted allotted
Address	
L	
UK Postcode L L L L L	
Please enter the number of continuation sheets (if any) attached	to this form
ignedA director / secretary / administrator / administrative receiver / receiver may	Date 19 Angus 3 2005 Manager / receiver Please delete as appropriate
llease give the name, address, elephone number and, if available,	
DX number and Exchange of the erson Companies House should	Tel
ontact if there is any query. DX number	DX exchange