

ABN 68 100 287 385

3 April 2009

Company Announcements Office Australian Securities Exchange Limited 20 Bridge Street SYDNEY NSW 2000

Dear Sir/Madam

# **Compulsory Acquisition of Outstanding Fusion Resources Limited Shares**

Earlier this week Paladin Energy Limited completed the process for compulsorily acquiring the outstanding Fusion Resources Limited shares.

Attached is a copy of the letters being dispatched to the former Fusion shareholders whose Fusion shares were acquired under that process.

Yours faithfully Fusion Resources Limited

JOANNE MCDONALD Company Secretary

Enc.

124398



ABN 68 100 287 385

3 April 2009

[Insert shareholder name] [Insert shareholder address line 1] [Insert shareholder address line 2]

Dear Sir/Madam

# **Compulsory Acquisition of Outstanding Fusion Resources Limited Shares**

As you may be aware, as a result of the recent takeover bid by Paladin Energy Limited (**Paladin**) for Fusion Resources Limited (**Fusion**), Paladin acquired over 97% of the Fusion shares. Consequently, Paladin became entitled to, and has proceeded to, compulsorily acquire the remaining Fusion shares which it did not already own under the statutory regime contained in Part 6A.1 Division 1 of the Corporations Act.

Paladin has now completed the compulsory acquisition.

According to our records, you were one of the Fusion shareholders from whom Paladin compulsorily acquired Fusion shares. As a result of this acquisition, you are no longer a Fusion shareholder.

Paladin has provided the consideration due to you for your Fusion shares to Fusion. Accordingly, Fusion gives notice that it is currently holding that consideration on trust for you pending your instructions. The consideration to which you are entitled is set out in the enclosed Claim Form.

We cannot transfer the consideration to you without your formal instructions. Accordingly, would you please complete the enclosed Claim Form and return it in accordance with the instructions shown on the form. This will let us know that you would like the consideration to be transferred to you at the address specified at the top of the Claim form.

If you have any queries in relation to this process, please contact Computershare Investor Services Pty Limited on 1300 557 010 (overseas residents: +61 3 9415 4000).

Yours faithfully Fusion Resources Limited

JOANNE MCDONALD Company Secretary Enc.

124399

# Fusion Resources Limited ABN 68 100 287 385 Compulsory Acquisition Share Consideration Claim Form

To: Company Secretary
Fusion Resources Limited

Name & Address Name & Address Name & Address Name & Address Name & Address

Individual or Shareholder 1



All correspondence to:

Computershare Investor Services Pty Limited GPO Box D182 Perth Western Australia 6840 Australia Enquiries (within Australia) 1300 557 010 (outside Australia) 61 3 9415 4000 Facsimile 61 8 9323 2033 web.queries@computershare.com.au

I/We, the person(s) named above, being the former holder(s) of the number of Fusion Resources Limited **(FSN)** Shares shown, hereby claim the share consideration for those FSN Shares and instruct FSN to transfer the share consideration resulting from the compulsory acquisition of my/our FSN Shares by Paladin Energy Ltd and being held by FSN on my/our behalf to me/us.

Number of FSN Shares formerly held

Share Consideration
1 PDN Share per 6 FSN Shares

Shareholder 3

I/We agree that this will be a complete release and discharge of

all your obligations to me/us in respect of the consideration for the acquisition of my/our FSN Shares and that you will not be responsible for any loss of documents in the ordinary course of the post.

I/We authorise and give consent for FSN and/or its registry to do all things necessary to arrange and complete this Share Consideration Claim process, including (without limitation) authorising officers of FSN and/or Computershare to release my information and sign any documents on my/our behalf to facilitate the process.

Please refer to the instructions on the reverse for completion of this form and then sign and date here.

Shareholder 2

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|--|----------|----------------------------|---------------|-------|---|------|--|
|  |          |                            |               |       |   |      |  |
| Sole Director and Sole Company Secretary   | Director | Director/Company Secretary |               |       |   |      |  |
|  |          | Day                        | /             | Month | / | Year |  |
|  |          |                            |               |       |   |      |  |
| Please provide your contact details so we can contact you if necessary:  |          |                            |               |       |   |      |  |
| Contact name:  |          |                            |               |       |   |      |  |
| Business hours telephone number:   |          | (                          | )             |       |   |      |  |
|  |          |                            |               |       |   |      |  |

### **Instructions for Completion**

- 1. Please check that your address details are correct. If the details are incorrect, please alter the details by hand and initial the changes.
- 2. Please sign and date this form in the spaces provided.

#### (a) **Joint holding**

Where the holding is in more than one name, all of the securityholders must sign.

# (b) Companies

This form must be signed by a Director, a Company Secretary or Sole Director and Company secretary. Please indicate the office held by signing in the appropriate space or affix the Company Seal.

#### (c) Power of Attorney and Deceased Estates

If this form is signed under power of attorney, or by the executors or administrators of a deceased estate, the relevant power of attorney, probate or letters of administration, together with any other documents required by law, (or certified copies of those documents) must be attached.

If this form is signed under power of attorney, the attorney declares that they have no notice of revocation of that power.

This Claim Form may not be valid unless it is properly completed, signed and dated in accordance with the procedures set out above.

If this Claim Form is not properly completed and/or dated, FSN may, in its sole discretion, deem your Claim Form to be properly completed and/or dated.

Please RETURN this form (properly completed, signed and dated) and any other relevant documents as soon as possible to:

Fusion Resources Limited C/- Computershare Investor Services Pty Limited GPO Box D182 PERTH WA 6840

Facsimile: 61 8 9323 2033