

**For filings with the FSA include the annex  
For filings with issuer exclude the annex**

**TR-1: Notifications of Major Interests in Shares**

<b>1. Identity of the issuer or the underlying issuer of existing shares to which voting rights are attached:</b>		Western Selection P.L.C.	
<b>2. Reason for notification (yes/no)</b>			
An acquisition or disposal of voting rights			Yes
An acquisition or disposal of financial instruments which may result in the acquisition of shares already issued to which voting rights are attached			
An event changing the breakdown of voting rights			
Other (please specify): _____			
<b>3. Full name of person(s) subject to notification obligation:</b>		Mr. Peter S. Allen & Mrs Judith M. Allen	
<b>4. Full name of shareholder(s) (if different from 3):</b>		Peter S. Allen; Quilter Nominees Limited; R C Greig Nominees Limited	
<b>5. Date of transaction</b> (and date on which the threshold is crossed or reached if different):		21 December 2007	
<b>6. Date on which issuer notified:</b>		24 December 2007	
<b>7. Threshold(s) that is/are crossed or reached:</b>		5%	

**8: Notified Details**
**A: Voting rights attached to shares**

Class/type of shares If possible use ISIN code	Situation previous to the triggering transaction		Resulting situation after the triggering transaction				
	Number of shares	Number of voting rights	Number of shares	Number of voting rights		Percentage of voting rights	
				Direct	Indirect	Direct	Indirect
	395,000	395,000	1,039,292	1,039,292		5.79%	

**B: Financial Instruments**

Resulting situation after the triggering transaction

Type of financial instrument	Expiration date	Exercise/ conversion period/date	No. of voting rights that may be acquired (if the instrument exercised/converted)	Percentage of voting rights

**Total (A+B)**

Number of voting rights	Percentage of voting rights
<b>1,039,292</b>	<b>5.79%</b>

**9. Chain of controlled undertakings through which the voting rights and /or the financial instruments are effectively held, if applicable:****Proxy Voting:**

<b>10. Name of proxy holder:</b>	
<b>11. Number of voting rights proxy holder will cease to hold:</b>	
<b>12. Date on which proxy holder will cease to hold voting rights:</b>	

<b>13. Additional information:</b>	
<b>14 Contact name:</b>	<b>Mr. J.M. Hodgson</b>
<b>15. Contact telephone name:</b>	<b>020 7448 8959</b>

*For notes on how to complete form TR-1 please see the FSA website.*