

Proxy Form

The following proxy holder are hereby authorised to exercise the below shareholder's rights at the Annual General Meeting of Elos Medtech AB (publ). Unless otherwise stated below, the proxy form only applies to the 2021 Annual General Meeting.

The proxy form shall apply up until
(please enter date; no more than five years from
issuance of the proxy): _____

The proxy form shall not apply to all
the shareholder's shares but for the
following number: _____

Proxy Holder

Name:	SSN/Personal id.no:
Address:	Phone number (daytime):

Shareholder

Name:	Personal id. no or organisation id. no:
Address:	Phone number (daytime):
Place and date:	
Shareholder's signature or, if a legal person, authorised signatory:	
Printed name:	

Please note that if the shareholder is a legal person the proxy must be signed by authorised signatory for the legal entity along with authorisation documents to be attached.

The completed proxy form (with any attachments) in original should be sent to Elos Medtech AB (publ), Annual General Meeting 2021, c/o Advokatfirman Vinge KB, Box 11 025, 404 21 Göteborg well in time before the Annual General Meeting.