

PROXY FORM

in accordance with Chapter 7 Section 54 a § of the Swedish Companies Act

I hereby appoint the proxy stated below, or whomever he or she may appoint, to vote on my behalf for all my shares in Isofol Medical AB (publ), Reg. No. 556759-8064, at the annual general meeting of Isofol Medical AB (publ) on May 19, 2022.

Proxy

Name of the proxy	Personal identity number/Date of birth
Address	
Postal code and city	Telephone number

Signature by the shareholder

Name of the shareholder	Personal identity number/Date of birth/Registration number
Place and date	Telephone number
Signature*	

* If signing for a company, a clarification of signature shall be included above and an up to date certificate of incorporation (or the equivalent) shall be enclosed to the completed proxy form.

Please note that a shareholder shall give the company notice of attendance – as set out in the notice convening the meeting – even if the shareholder intends to exercise his or her voting rights through a proxy.

The completed proxy form (with any enclosures) should be sent by e-mail to arsstamma@isofolmedical.com or by mail to Isofol Medical AB (publ), “AGM 2022”, Att. Gustaf Albèrt, Arvid Wallgrens backe 20, SE-413 46 Gothenburg, Sweden no later than May 13, 2022. For the avoidance of doubt, if the shareholder does not intend to exercise his or her voting rights through a proxy, the proxy form does not have to be sent to the company.

The original power of attorney is brought to the annual general meeting in the event of physical participation.

Processing of personal data

For information on how your personal data is processed, see

<https://www.euroclear.com/dam/ESw/Legal/Privacy-notice-bolagsstammor-engelska.pdf>