

PROXY

The below proxy, or any person appointed by him or her, is hereby appointed to represent all shares that I/we hold in Affibody Medical AB (publ), reg. no. 556714-5601, at general meeting of shareholders in Affibody Medical AB (publ).

PROXY

Name of proxy:	Personal identity number:
Address:	
Postal code and postal address:	
Daytime telephone number (including area code):	

SIGNATURE BY SHAREHOLDER

Name of shareholder:	Personal identity number/Reg. no.:
Daytime telephone number (including area code):	
Place and date:	
Shareholder's signature:	
Clarification of signature (only applicable when signing for a legal person):	

This proxy is valid:

for the general meeting on 16 December 2021. 1 year 5 years

Authorization documents (registration certificate or equivalent evidence of signatory's authority) must be attached to a proxy issued by a legal person.

A proxy may be valid for up to five years from issuance and must be dated and signed in order to be valid.

Please note that the shareholder's notification of attendance to the general meeting must be made in accordance with the instructions given in the notice, even if the shareholder wishes to exercise his or her rights at the general meeting through a proxy.

This proxy form in original (along with any authorization documents), should be sent to the company together with the advance voting form.