

Power of Attorney

The shareholder stated below hereby grants the proxy stated below the right to represent and vote for the shareholder's entire shareholding in Episurf Medical AB (publ), 556767-0541, at the annual general meeting in Episurf Medical AB (publ) to be held on 10 May 2021.

Attorney

Name of attorney:	Personal ID number:
Address:	
Zip code and city:	
Telephone number (incl. area code):	

Shareholder

Name of shareholder:	Personal/corporate ID number:
Telephone number (incl. area code):	
Place and date:	
Signature:	
Clarification of signature:	

If the power of attorney is issued by an entity, the power of attorney shall be signed by authorised signatories and a copy of a current certificate of registration or other document attesting the authority to sign for that entity must be enclosed.

Please note that the submission of the power of attorney is not a valid notification to attend the annual general meeting. A shareholder who wish to participate at the annual general meeting must submit a postal voting form in accordance with the instructions included in the notice to the annual general meeting.

A copy of the power of attorney together with the postal voting form as well as any certificate of registration or other document attesting the authority to sign must be received by the company no later than on Friday 7 May 2021.