PROXY

The undersigned shareholder of **CellaVision AB (publ)** hereby appoints an authorized proxy to exercise its rights at the Annual General Meeting of CellaVision AB (publ). If not otherwise stated below, the proxy is only valid at the Annual General Meeting on 6 May 2025.

\Box The proxy is valid up and until	
(specify date; at the most five years from	
the date when the proxy was signed):	

☐ the proxy is <u>not</u> valid for the total amount of the shareholders shares, but for the following numbers of shares: _____

Proxy

Name:	Personal identity number:
Address:	Telephone number:

Shareholder

Name:	Personal identification number/corporate registration number:	
Address:	Telephone number:	
Place and date:		
The shareholder/the shareholders authorized signature:		
Clarification of signature:		

Please observe that if the shareholder is a legal entity, the authorized signatory shall sign the proxy and authorization documents shall be enclosed.

The completed form (with attachments, if applicable) should preferably be sent to CellaVision AB (publ), c/o Fredersen Advokatbyrå, Neptunigatan 82, SE-211 18 Malmö, or by e-mail to cellavision@fredersen.se, no later than 29 April 2025.