

## Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise my/our rights at the annual general meeting in Ascelia Pharma AB, Reg. No. 556571-8797, on 6 May 2024.

Name of proxy:

---

Personal identity number:

---

Address:

---

Telephone number during office hours:

---

---

*Note that the Power of Attorney must be dated and signed.*

Name of the shareholder:

---

Personal identity number/Reg. No. of the shareholder:

---

Place and date:

---

Signature of the shareholder:

---

Clarification of signature:

---

For information on how your personal data is processed, see

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