Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise my/our rights at the extraordinary general meeting in Ascelia Pharma AB, Reg. No. 556571-8797, on 14 August 2024.

Name of proxy:	
Personal identity number:	
Address:	
Telephone number during office hours:	
Note that the Power of Attorne	y 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 <u>https://www.euroclear.com/dam/ESw/Legal/Privacy-notice-bolagsstammor-engelska.pdf</u>.