Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to, by advance voting, exercise my/our rights at the annual shareholders' meeting in Polygiene AB, Reg. No. 556692-4287, on 19 May 2021.

Name of proxy:	
Personal identity number of proxy:	
Address of proxy:	
The proxy's telephone number dur- ing office hours:	
Note that the Power of Attorney mus	t 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:	
	rcise his/her voting right at the annual shareholders' meeting by proxy, the

proxy must be attached to the advance voting form available on the company's website (ir.polygiene.com) and sent to the company in accordance with the instructions in the form. If the shareholder is a legal entity, a certified copy of the current certificate of registration or equivalent authorization documents for the legal entity must also be attached. Power of Attorney forms that have been sent to the company without an advance voting form <u>do not</u> count as notification to the annual shareholders' meeting.