



Proxy Form

I hereby authorize the proxy named below to exercise my rights at the Extraordinary General Meeting of Genovis AB (publ) at 12:30 p.m. on Friday, December 20, 2019 in Genovis premises at Scheeletorget 1 (The Spark) Medicin Village, Lund.

Proxy

Name of proxy:

Personal ID number:

Mailing address:

Postal code and city:

Telephone, day:

Signature of shareholder:

Please note that the proxy must be dated and signed

Date:

Shareholder's signature

(If signing for a company, an up-to-date registration certificate must be attached)

Name printed

Please note that shareholders must notify the Company of their intention to participate at the Extraordinary General Meeting, even if the shareholder wishes to vote through a proxy.