

Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise all my/our rights at the annual shareholders' meeting in BONESUPPORT HOLDING AB, Reg. No. 556802-2171, on 20 May 2021.

Name of proxy:

Personal identity number:

Address:

Phone No. (daytime)

Please note that the Power of Attorney has to be dated and signed.

Name of the individual/entity
granting the Power of Attorney:

Personal identity number/Reg.
No. of the individual/entity
granting the Power of Attorney:

Phone No. (daytime)

Place and date:

Signature of the person granting
the Power of Attorney:

Clarification of signature:

Please note that if the shareholder wishes to exercise their voting right at the general meeting by proxy, the proxy must be attached to the postal voting form available on the company's website, www.bonesupport.com, and submitted in accordance with the instructions in the form.

If the shareholder is a legal person, a certified copy of the current certificate of registration or equivalent authorization documents for the legal person must also be attached. Proxy forms that have been submitted without a postal voting are not valid as notification to the general meeting.