**PROXY FORM**

The proxy stated below, or the person he or she appoints in his or her place, is hereby authorised to vote on behalf of all shares I, the undersigned, hold in Handicare Group AB (publ), 556982-7115, (“**Handicare**”) at the Annual General Meeting of Handicare on 8 May 2019.

**Proxy**

|  |  |
| --- | --- |
| Name of the proxy | Personal identity number/Date of birth |
| Address  |
| Postal code and city  | Phone number |

**Signature by the shareholder**

|  |  |
| --- | --- |
| Name of the shareholder  | Personal identity number/Date of birth/Registration number  |
| Place and date  | Phone number |
| Signature\* |

\* If signing for a company, a clarification of signature shall be included above and an up to date certificate of incorporation (or the equivalent) shall be enclosed to the completed proxy form.

|  |
| --- |
| Please note that a shareholder shall give the company notice of attendance as set out in the notice convening the Meeting even if the shareholder intends to exercise his or her voting rights through a proxy. The proxy form is not a substitute for notice of attendance.The completed proxy form (with any enclosures) should be sent to Handicare Group AB (publ), ”Årsstämman”, Ingmar Bergmans gata 4, 114 34 Stockholm, Sweden, together with the notice of attendance. For the avoidance of doubt, if the shareholder does not intend to exercise his or her voting rights through a proxy, the proxy form does not need to be sent to the company. |