

Power of Attorney

For
(Name of proxy) (Proxy's national identification number)
.....
(Proxy's address) (Proxy's phone number daytime)
.....
(Proxy's postal code) (Proxy's postal address)

to represent all shares that I/we hold in the company, at the annual general meeting of Oasmia Pharmaceutical AB on 25 September, 2017.

.....
(Place) (Date)

.....
(Shareholder's name)

.....
(Signature) (Clarification of signature)

.....
(Shareholder's national identification number or registration number) (Shareholder's phone number daytime)

*Please send the power of attorney and, if the power of attorney is issued by a legal person, a certificate of registration well before the AGM to:
Oasmia Pharmaceutical AB, Vallongatan 1, 752 28 Uppsala, Sweden.*