

Power of attorney

I/We hereby authorize

.....
(Name of proxy)

.....
(Proxy personal identity number)

.....
(Proxy delivery address)

.....
(Daytime telephone number)

.....
(Proxy postal code)

.....
(Proxy postal address)

to represent me/us and vote on my/our behalf for all my/our shares at the Annual General Meeting of Oasmia Pharmaceutical AB, on 26 September 2019.

.....
(Place)

.....
(Date)

.....
(Name of shareholder)

.....
(Signature)

.....
(Name in block letters)

.....
(Personal identification / Company Reg. No.)

.....
(Daytime telephone number)

The power of attorney and, if the power of attorney is issued by a legal entity, a certificate of incorporation, must be sent well in advance of the Annual General Meeting to: Oasmia Pharmaceutical AB, Vallongatan 1, 752 28 Uppsala, Sweden.