

**Schedule 1: POWER OF ATTORNEY**

I,

Name \_\_\_\_\_

Address \_\_\_\_\_

Postal number and city \_\_\_\_\_

Country \_\_\_\_\_

hereby authorizes Gitte Henriksen, CS MEDICA A/S, with full right of substitution, to meet and vote for my / our shares at CS MEDICA A/S' Annual General Meeting on 29 February 2024 15:00 (CET) at Fruebjergvej 3, 2100 Copenhagen, Denmark. Below I / we have stated how the votes are to be given and hereby authorize and instruct Gitte Henriksen to vote accordingly. I / we agree that in the event of non-ticking, the power of attorney will be used to vote or to omit this at the discretion of the proxy.

Proposed agenda	For	Against
1. Election of chairman of the meeting.		
2. Presentation of the annual report with auditors' report for adoption.		
3. Resolution concerning the appropriation of losses as recorded in the adopted annual report.		
4. Election of members to the board of directors.		
5. Election of the Company's auditor.		
6. Any other business		

This power of attorney shall be sent to Gitte Henriksen, e-mail [glh@cs-medica.com](mailto:glh@cs-medica.com) , so that it has arrived no later than 20<sup>th</sup> of February, at 11.59 PM (CET).

Shareholder:

Date:

\_\_\_\_\_  
(Signature).