

## Proxy to a person of your choice

Place

Date

Number AGM ticket:				Nam	ne / Cor	npany	:								
Number of shares:  Phone number:*  * voluntary information			First name:  E-mail address:*												
To be returned to:															
Encavis AG c/o Better Orange IR & HV AG Haidelweg 48 81241 Munich Germany				E-mail: encavis@linkmarketservices.eu											
Note: Please explicitly		•	·						disclo	sure of	persoi	nal da	ata.		
I/We herewith authorize	e, if applicable	under rev	oking a f	ormer au	thoriza	ion of	a prox	у,							
First name of prox	:y*						1					1	1	1	
Last name or Com	npany of proxy	/* 				$\neg \vdash$						7	7	1	
											_  _				
Street of proxy							1				No	1	7	1	
Country	ce of resi	dence (	of prox	y*					,	,					
E-mail of proxy							1					1	1	1	
* Mandatory fields															
to represent me/us with authorization to another						ncavis	AG or	n 5 Ju	ne 202	24 with	the p	ower	to c	lelega	te the
** Recommended data to the password-protect of the proxy are comple protected internet service	ted internet se te. If the addr	ervice will ess detail	be create s of the p	ed for the roxy are	proxy. incomp	These lete, th	will be e indiv	e sent e vidual a	directly access	/ to the data o	proxy f the p	if the	e add	dress d	details

Signature(s) or Person making the declaration (legible)