

SCHEDULE 3 - PROXY/ ABSENTEE VOTE FORM

for the extraordinary general meeting in Better Collective A/S (CVR no 27 65 29 13) (the "Company") to be held on Tuesday 8 August 2023.

If you do not wish to or are unable to attend the general meeting, you may grant proxy to another person to represent you at the general meeting or vote by post.

PLEASE TICK ONLY ONE BOX:

☐ I hereby grant proxy to the chair of the board of directors of the Company with right of substitution to represent me and to vote on my behalf at the general meeting in line with the board recommendations set out in the table below.

I hereby grant proxy to the following:

Name and address

to represent me and vote on my behalf at the general meeting.

Vote by post. I have below ticked off how I want to vote at the general meeting (please note that a vote by post cannot be withdrawn).

(Sho	Agenda for the extraordinary general meeting on 8 August 2023: (Shortened; the complete agenda appears from the notice conven-				Board recommen- dation
ing the annual general meeting)		FOR	AGAINST	ABSTAIN	
1)	Appointment of chair of the general meeting				
2)	Proposals from the board of directors on election of a new mem-				
	ber of the board of directors				
	Britt Boeskov				For
	René Rechtman				For
3)	Proposal on authorisation to the chair of the meeting				For

Please note that the Company cannot be held responsible for any delay in submitting the material. This form must be received by the Company no later than <u>Friday 4 August 2023 at 11.59 pm</u> by returning the form by email (scanned copy) to <u>agm@bettercollective.com or by regular mail to Better Collective A/S</u>, Sankt Annæ Plads 28, 1250 Copenhagen C, Denmark.



If the form is only dated and signed but not completed, the form will be regarded as a proxy to the chair of the board of directors to vote in accordance with the recommendations of the board of directors in the table above. If the form is only partially completed, votes will be cast in accordance with the recommendations of the board of directors with respect to the non-ticked off boxes.

Place/Date

Name of shareholder (CAPITALS)

Address of shareholder

Signature

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