**Application for Participation**

GENERAL ASSEMBLY OF CROATIAN TELECOM Inc., ZAGREB

Application for Participation

|  |  |  |
| --- | --- | --- |
| 1. | Name and family name, or company name of the shareholder/proxy |  |
| 2. | Residence or seat of the shareholder/proxy |  |
| 3. | Address of the shareholder/proxy |  |
| 4. | Personal Identification Number (OIB) of the shareholder/proxy if they are legal persons |  |
| 5. | Total number of shares of the shareholder/of all shareholders represented by the proxy |  |
| 6. | List of all shareholders represented by the proxy\* |  |
| 7. | Account number with the SKDD of the shareholder/of each of the shareholders represented by the proxy\* |  |

*\*(To be filled in and signed by the shareholder personally or by the shareholder's proxy;*

*Please attach all powers of authority if one proxy represents more than one shareholder)*

I herewith apply for participation in the General Assembly of Croatian Telecom Inc., Zagreb, Radnička cesta 21, **convoked for 8 May 2024, starting at 10:00 hours, in the Company headquarters in Zagreb, Radnička cesta 21.**

Signature of the shareholder/proxy\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_