Power of Attorney

(Name of proxy)	(Proxy's national identification number)
(Proxy's address)	(Proxy's phone number daytime)
(Proxy's postal code)	(Proxy's postal address)
to represent all shares that I/we hold in the Meeting of Gränges AB on Th	
(Place)	(Date)
(Shareholder's name)	
(Signature)	(Clarification of signature)

Please send the original power of attorney and, if the power of attorney is issued by a legal person, a certified copy of a certificate of registration well before the Annual General Meeting to: Gränges AB, "Årsstämma", c/o Euroclear Sweden AB, Box 191, 101 23 Stockholm, Sweden.