GENERAL ASSEMBLY OF CROATIAN TELECOM Inc., ZAGREB Application for Participation

| 1. | 1. Name and family name, or company name of the shareholder/proxy | |
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| 2. | 2. Residence or seat of the shareholder/proxy | |
| 3. | 3. Address of the shareholder/proxy | |
| 4. | 4. Personal Identification Number (OIB) of the shareholder/proxy if they are legal persons | |
| 5. | 5. Total number of shares of the shareholder/of all shareholders represented by the proxy | |
| 6. | 6. List of all shareholders represented by the proxy* | |
| 7. | 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 20** July 2020, starting at 10:00 hours, in the Company headquarters in Zagreb, Radnička cesta 21.

Signature of the shareholder/proxy_____

Date: _____