## **POWER OF ATTORNEY**

As a shareholder of <b>Kapsch TrafficCom AG</b> , I hereby authorize
(Name of the authorized representative in CAPITAL LETTERS)  "Representative"
to represent me at the Annual General Meeting of Kapsch TrafficCom AG, FN 223805 a, on <b>Wednesday, September 7, 2022 at 10:00 a.m. (CEST)</b> , which is held at the conference center next to Kapsch TrafficCom AG, Am Europlatz 2, 1120 Vienna, Austria, and to exercise all rights which I am entitled to as a shareholder of Kapsch TrafficCom AG, in particular the voting right.
In particular, I authorize the Representative to exercise the voting right and make decisions to the agenda:
<ol> <li>Presentation of the annual financial statements including the management report, the consolidated financial statements including the management report for the group, the consolidated corporate governance report, the consolidated non-financial report, the proposal on the allocation of the balance sheet profit and the report of the Supervisory Board for the business year 2021/22</li> <li>Resolution on the allocation of the balance sheet profit</li> <li>Resolution on the formal approval of the actions of the members of the Executive Board for the business year 2021/22</li> <li>Resolution on the formal approval of the actions of the members of the Supervisory Board for the business year 2021/22</li> <li>Appointment of the auditor and the group auditor for the business year 2022/23</li> <li>Resolution on the remuneration report</li> <li>Election to the Supervisory Board</li> </ol>
The Representative is authorized to transfer this power of attorney to other persons.
(Name/company name and address of the shareholder in CAPITAL LETTERS)
(Date of birth/companies register number or other register number of a legal person)
(Phone number and/or e-mail in case of questions)
(Company of the credit institution that holds the custody account, deposit account number)
(Number of shares)

(Date, personal signature of the shareholder or reproduction of the signature)