

**DECLARATION OF CONFORMITY**

(check all additional conformity route(s) based on EU MDD Article 11 requirements for the device class and specifics)

Annex II (4)                       Annex V                       Annex III                       Annex VII   
 Annex II (3)                       Annex VI                       Annex IV

Technical File Number and Version: DU-VC-004 Version 07  
 Device Trade Name: DAILIES AquaComfort Plus (nelfilcon A) Soft Contact Lens  
 Supersedes (Date): 28-Oct-2020

Manufacturer: Alcon Laboratories, Inc.  
 Address: 6201 South Freeway,  
 Fort Worth, TX 76134-2099, USA

Authorized Representative in the European Community\*:  
 Alcon Laboratories Belgium  
 Address: Lichterveld 3, 2870 Puurs-Sint-Amans, Belgium

Manufacturing Site(s):  
 CIBA VISION GmbH  
 Industriering 1, 63868 Grosswallstadt, Germany

\*Previously Alcon Laboratories (UK) Ltd.  
 Frimley Business Park, Frimley, Camberley Surrey, GU16  
 7SR, United Kingdom

Alcon Research, LLC  
 11440 Johns Creek Parkway, Duluth, GA 30097, USA

Alcon Laboratories Belgium BVBA\*\*  
 Rijksweg 14, 2870 Puurs, Belgium

CIBA VISION Asian Manufacturing and Logistics Pte Ltd.  
 133 Tuas South Avenue 3, Singapore 637550, Singapore

Device (Trade Name)	GMDN Code & Term	Catalogue Number	Class
DAILIES AquaComfort Plus DAILIES AquaComfort Plus Toric DAILIES AquaComfort Plus Multifocal DAILIES AquaComfort Plus Asphere**	47841 Soft Corrective Contact Lens, Daily-disposable	N/A	IIa

The device(s) covered by this declaration are in conformity with the European Medical Devices Directive 93/42/EEC as well as other, relevant Union legislation that make provisions for the issuing of a declaration of conformity as listed.

Alcon Laboratories, Incorporated hereby declares under its sole responsibility that the listed device(s) and Quality Systems conform(s) to:

EU MDD 93/42/EEC as amended

This Declaration is applicable to all products listed and released after the Date of Issuance of this Declaration of Conformity, and until a revised Declaration of Conformity is issued.

Notified Body Information: Applicable  Not Applicable

Conformity Assessment Certificate Number(s): G1 020895 0393  
 Conformity Certificate Validity Period: 05-Feb-2021 to 26-May-2024

Notified Body: TÜV SÜD Product Service GmbH\*\*\*  
 \*\*\*Previously BSI, Kitemark Court, Davy Avenue, Knowhill, Milton Keynes MK5 8PP UK with identification number 0086.

Identification number: 0123

Address: Ridlerstraße 65, 80339 Munich, Germany

Regulations, Directives and Standards Applied: EN ISO 13485 as currently published

<p>Place of Issue: Alcon Laboratories, Incorporated, Fort Worth, TX, USA</p>	<p>Date of Issue: 03-Mar-2021</p>	<p><b>Lakota, Sherri</b></p> <p><small>Digitally signed by Lakota, Sherri DN: cn=Lakota, Sherri, ou=PDF Internal Signing, o=Alcon Vision, LLC Reason: I am approving this document Date: 2021.03.03 10:54:29 -06'00' Adobe Acrobat DC version: 2015.006.30503</small></p> <p>Name/Title/Function/Date: Sherri Lakota / VP GRA VC &amp; DEOH</p>
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