057	MXP	59477062	59477062	057/59477062

Shipper's Name and Address | Shipper's Account Number: TAX ID IT04473160168

RONDI IFF SRL
VIA G. DONIZETTI, 40
24040 CHIGNOLO D'ISOLA BG - IT 0353235144

Not Negotiable

Air Waybill issued by AIR FRANCE COMPAGNIE NATIONALE S.A.
45 RUE DE PARIS-ROISSY CDG FRANCE VIA SARDEGNA 4
00187 ROMA RM

Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity

Consignee's Name and Address | Consignee's Account Number

TERTIARY SISTERS OF ST. FRANCIS - ST.ELIZABETH CATHOLIC HOSPITAL - NEW CARDIAC CENTRE POB 8 KUMBO NSO BUI DIV. - KUMBO NSO BUI DIV. NWP - CM TE 237/676499460

It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVE HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a ghigher value for carriage and paying a supplemental charge if required.

Issuing Carrier's Name and City
RONDI INT.FREIGHT FORW. SRL
VIA G.DONIZETTI, 40
24040 - CHIGNOLO D'ISOLA (BG)

Accounting Information
NON VALE FATTURA AI FINI IVA
NOT CEE TRAFFIC STATUS DOG X
sp-207428-72511116

Agent's IATA Code	Account No.
38471310010	

Airport of Departure (Addr. Of First Carrier) and Requested Routing: MALPENSA MILAN AIRPORT,ITALY

Codice Fiscale/Partita Iva del mittente | Imprenditore: X | Non Imprenditore | PF | SD: X

To	By First Carrier	Routing and destination	to	by	to	by	Currency	CHGS Code	WT/VAL PPD	WT/VAL COLL	Other PPD	Other COLL	Declare Value for Carriage	Declare Value for Customs
DLA	AIR FRANCE						EUR		X		X		N.V.D.	N.C.V.

Airport of Destination	Flight/Date	For Carrier Use Only	Flight/Date	Amount of Insurance
DOUALA	AF0946/26			

INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance'
ASSICURAZIONE - Qualora il Vettore offra una assicurazione e tale assicurazione sia richiesta in base alle condizioni indicate a tergo, indicare l'importo da assicurare in cifre nelle casella 'Importo assicurato'

Handling Information
NOTIFY: PADRE PIO HOSPITAL AKWA NORD C/O ARCHDIOCESE OF DOULA PO BOX 179, DOULA PO BOX 179
DOULA CAMEROON
LITTORAL REGION MR AKWA NADEGE CARDIACDM@GMAIL.COM- PH:+237/676499460/693020193

SCI
X

No of Pieces RCP	Gross Weight	Kg lb	Rate Class / Commodity Item No.	Chargeable Weight	Rate / Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
8	123.00	K		295.50	4.18	1235.19	MEDICAL LABORATORY EQUIPMENT NOT RESTRICTED HS CODE: 90181200; 90189084; 90213990 FREIGHT PREPAID Dims:1/100x80x1102/65x45x501/61x33x671/67x43x 501/60x40x601/40x40x601/60x20x67
8	123.00			295.50		1235.19	1.772 CBM

	Prepaid	Collect
Weight	1235.19	
Valutation Charge		
Tax		
Total Other Charges Due Agent	0.00	
Total Other Charges Due Carrier	17.72	
Total Prepaid / Total Collect	1252.91	
Currency Conversion Rates / CC Charges in Dest. Currency		
For Carriers use Only at Destination / Charge at Destination		

Other Charges | P.B.A. Fee

Insurance Premium

Special Handling

Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is property described by name and is in proper condition for ccarriage by air according to the applicable Dangerous Goods Regulations.
Il mittente dichiara che le indicazioni contenute sul fronte LTA sono esatte e che qualora una parte della spedizione contenga merci pericolose tale parte è debitamente indicata ed è nelle condizioni richieste ai fini del trasporto per via aerea secondo le norme sulle Merci Pericolose.

RONDI IFF SRL EA2500002642GR

Signature of Shipper or his Agent

19/08/2025 MXP
Executed on (Date) at (Place)

Total collect Charges

057/59477062

IATA **CASS ITALY** ORIGINAL 3 (FOR SHIPPER)