



114CDG22579874

HAWB No: CDGA25466131

Shipper's Name and Address ILSA DIAGNOSTICS 8 RUE SAINT HILAIRE SAINT OUEN L'AUMO 95310 FR TE +33134670025		Shipper's Account Number FRILDISOL	<b>Not Negotiable</b> <b>House Air Waybill</b> Issued by GEODIS FF FRANCE 3 RUE DU REMBLAI - ZONE CARGO 4 CS 14671 TREMBLAY EN FRANCE, 95725, ROISSY CDG CED														
Consignee's Name and Address ILEX BIOTECH		Consignee's Account Number ILILBITLV	Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity.														
KODAK BLDG, 7 HATFUNA STREET P.O.B 10249 KIRIAT ARIE INDUSTRIAL PETACH TIKVA 4900202 IL		<p>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 GIVEN 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 higher value for carriage and paying a supplemental charge if required.</p>															
Issuing Carrier's Agent Name and City GEODIS FF FRANCE ROISSY		Accounting Information															
Agent's IATA Code 20-4 7009/9510	Account No. 9510																
Airport of Departure (Addr. of First Carrier) and Requested Routing CHARLES-DE-GAULLE APT/PARIS		Reference Number C11730429	Optional Shipping Information														
To TLV	By First Carrier Routing and Destination LY	to by to by	Currency EUR	CHGS CC	WT/VAL X	Other PFO PFO X	Declared Value for Carriage NVD	Declared Value for Customs NCV									
Airport of Destination TEL AVIV-YAFO		Requested Flight/Date LY324/07	Amount of Insurance XXX		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".												
Handling Information FR/RA/09010-09 PRINTED : 31-JUL-25 12:08 /AS6 AIRSAVE AIRPORT TO AIRPORT/ UNSECURED CARGO																	
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							SCI <input checked="" type="checkbox"/>	X									
No. Of Pieces RCP	Gross Weight kg 145.0	Rate Class Commodity Item No. Q	Chargeable Weight 198.5	Rate Charge	Total		Nature and Quantity of Goods (Ind. Dimensions or Volume) SAFE SAMPLING PLATE, NEO TIPS, STORAGE MODULE. VOL 1.190 M3										
1	145.0				As Agreed												
Prepaid		Weight Charge	Collect	Other Charges													
		Valuation Charge															
		Tax															
Total Other Charges Due Agent		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 properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations.															
Total Other Charges Due Carrier																	
Total Prepaid	Total Collect	EMMANUELLE LINA Signature of Shipper or his Agent															
Currency Conversion Rates		CC. Charges in Dest. Currency		31-Jul-25		ROISSY CDG CEDEX	GEODIS FF FRANCE										
				Executed on (date)		at (place)	Signature of Issuing Carrier or its Agent										
For Carrier's use only at Destination		Charges at Destination		Total Collect Charges													

Copy 8 - (for Agent)