MAPWORLD FOODS LTD

No. 2 Boundary Road, East Legon - Accra.
P.O. Box Ct 7438 Accra - GHANA
Contact(s): _____

BILL LADING NO: MEDUAHX57059

MSC Mediterranean Shipping Company S.A., its agents and affiliates (herein after "MSC")

Dear Sirs,

In consideration of MSC accepting to deliver to us shipments carried under bills of lading by way of MSC's "Telex Release" procedure, we, the undersigned (MAPWORLD FOODS LTD), hereby confirm as receivers and/or consignees of said shipments:

(a) That we have taken note of the particulars of the contract of carriage and of the Terms and Conditions applicable thereon;

(b) That we accept said Terms and Conditions to be applicable and that we consider ourselves bound by said Terms and Conditions against Delivery of the shipment and, in any event, if we make or purport to make a claim in respect of subject shipment;

(c) That we accept to be party to the contract of carriage as a condition to the Delivery of the shipment to us or to any third party assigned by us or acting as servant or subcontractor to us;

(e) That the present undertaking will remain into force for as long as we will be using MSC's "Telex Release" procedure and that we will keep ourselves acquainted with any change to the carrier's Terms and Conditions that may happen from time to time.

We take note that for ease of reference the up-to-date version of these Terms and Conditions is always available from MSC's Website www.msc.com .

Delivery of the shipment shall mean, in the context of this Letter, release or delivery of the goods or issuance of a delivery order or of any other means, whether electronic or not and/or whether nominative or not, aiming at allowing us to take delivery of the goods.

We furthermore confirm that we shall hold MSC Mediterranean Shipping Company SA harmless and indemnified in respect of any and all liability and/or loss and/or damage it may suffer caused by or incurred in connection with the Delivery of the shipment as aforesaid.

Yours faithfully,

For and on behalf of

(MAPWORLD FOODS LTD)

Authorised signature……

Name:

Position:

Date:

(Stamp/seal)