

Rev. 3 / March 2022

SWORN STATEMENT

USE OF PPOC (CPAP, EPAP, BIPAP, APAP, VPAP)

NAME & LAST NAME: ID/Passport:

RECORD LOCATOR: FLIGHT NUMBER: DATE:

ORIGIN: DESTINATION:

CONNECTING FLIGHT NUMBER: DATE:

ORIGIN: DESTINATION:

Specify the number and power capacity of each spare battery:

I STATE UNDER OATH THAT:

- ▶ The equipment is in perfect operative condition.
- ▶ I am fit to use the equipment.
- ▶ I have been informed that I must not plug the equipment on board.
- ▶ I am carrying the number of loaded batteries necessary and sufficient to power the equipment according to the duration of the flight as informed by AR.
- ▶ The spare batteries are isolated and protected in order to avoid short circuits.

The undersigned, acting on his/her own behalf or on behalf of the passenger, states that he/she releases Aerolíneas Argentinas S.A., its Agent and employees from any kind of liability arising from any alteration, aggravation, serious injuries or any other consequence which may be sustained by the passenger due to his/her health condition during or as a result of the Air Carriage stated in his/her electronic ticket. Moreover, the undersigned, in his/her relevant capacity, agrees to reimburse Aerolíneas Argentinas for all expenses which may be incurred as a result of the provision of any necessary additional service apart from the specific transportation service, further releasing the Carrier from any obligation and/or payment corresponding to professional fees which may arise from said additional assistance or services.

I hereby confirm that I have read the information provided by the company on its website. I hereby assume responsibility for any false or inaccurate information provided, for carrying prohibited batteries and for any direct or indirect consequences that may arise during transportation.

DATE

SIGNATURE

NAME