International Eye Foundation
Board of Directors 2012-2013

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L-R: Board member Julia Sevilla Hopping visits Dr. Abraham Delgado, Director of the new Clínica Oftalmológica Ojo Sano in Managua, Nicaragua.
MESSAGE FROM THE CHAIR AND PRESIDENT

It’s hard to comprehend that there are 285 million men, women and children who are blind or seriously visually impaired because the majority are in developing countries. Unoperated cataract still accounts for half the world’s blindness. The epidemics of diabetic eye disease and macular degeneration in adults, and retinopathy of prematurity in newborns are on the horizon. But thanks to your support, IEF is able to help reduce those numbers each year.

We need qualified ophthalmologists working in highly functioning eye care facilities to address these blinding diseases. Over 15 years ago, IEF reoriented its programming to focus on building leadership and capacity in eye clinics and hospitals around the world. We focus on management, financing, and quality of care. The results are stunning with increases in patients examined, blind eyes operated, and outreach to the rural poor. When IEF was founded in 1961, volunteer ophthalmologists were posted to countries to provide care and training. We have evolved, taking our founder’s mantra to heart. Dr. King paraphrased Maimonides saying:

“If you restore the sight of one man, you benefit one man.  
If you teach one man how to restore sight, you benefit many men.  
And if you teach many men, you benefit mankind.”

IEF is building a global movement toward sustainability programming. Key donors, stakeholders, bilateral agencies, service organizations, international NGOs, and governments are recognizing the need to increase the number of qualified eye care providers, and also strengthen the eye care systems in which they work.

We continue our focus on controlling “river blindness” and childhood blindness. This year, over 1 million people received their annual dose of Mectizan® to prevent blindness from Onchocerciasis. From 2013-2017, IEF will serve as the Technical Advisor to the important USAID Child Blindness Program. And our pioneering SightReach Surgical® program continues to provide new, quality ophthalmic products to eye care providers in the developing world.

It is because you, our donors and supporters, are helping us accomplish our mission. Bringing that mission to the patient level, it means that more grandmothers and grandfathers get sight-restoring cataract surgery, and more children have their sight saved for a lifetime. On behalf of all those grandparents and children, thank you!
Mission

IEF’s mission is to eliminate preventable and treatable blindness by increasing affordability and access to quality, comprehensive and sustainable eye care services for everyone, especially the poor, around the world.

Patients who come to us with eye problems are mostly the elderly and children. Because the elderly cannot see and children are too young, they come with their families. Our clinic is full of families and we do all we can to treat their eyes, operate when we need to, and save their sight so they can go about their daily lives.

Dr. Guerline Roney
Co-Director, Clinique Vision Plus Haiti

Blindness Data

39 million blind (82% over age 50)
246 with low vision (63% over age 50)
285 total visually impaired

1.4 million blind children
2.8 million children with low vision
73% of these live in Africa and Asia

90% of the world’s visually impaired people live in developing countries

WHO data 2011

Member: International Agency for the Prevention of Blindness
VISION2020: The Right to Sight
Member: VISION 2020/USA, VISION 2020/Latin America

IEF is in “Official relations” with the World Health Organization since 1985 and supports the mission and goals of the WHO Programme for the Prevention of Blindness
Prevention & Public Health

Preventing Childhood Blindness saves sight for a lifetime!

Approximately 1.4 million children are blind and 2.8 million children have low vision worldwide. Most (73%) live in Africa and Asia. Saving a child’s sight enables them to be educated and to become productive members of their families and communities.

Through quality, innovative programs, the U.S. Agency for International Development (USAID) is preventing and treating blindness, restoring sight and providing eyeglasses to thousands of people in the poorest communities of the world. The Child Blindness Program (CBP) originated through a Congressional directive in 1991 to deal specifically with the problem of child blindness. Since then, more than 31 eye care and health organizations have received grants totaling approximately $30 million to carry out eye care projects in 58 countries. Primary interventions have included eye health education, vision screening, provision of eyeglasses and other visual aids, cataract and other sight-restoring surgery, education and rehabilitation services, provision of antibiotics and other essential medicines, and training of medical staff and community-based individuals. The sustainability of interventions depend on high quality care, sufficient human resources, state-of-the-art training, increased demand for services, affordable costs, adequate and functional equipment, and efficient clinical and organizational management systems. Continuing its commitment to saving the sight of children, IEF is proud to be the Technical Advisor to the USAID Child Blindness Program for 2013-2017.

Onchocerciasis Control

The one millionth mark was crossed in 2013 with 1,010,376 people in Cameroon's Adamaoua and South Provinces receiving their annual dose of Mectizan® to treat “river blindness”. That is up from 939,535 in 2012. Also, 7,220 Community Directed Distributors in 1,655 communities were trained. Additionally, 402,261 children were treated in schools and communities with praziquantel and mebendazole for other parasitic diseases such as lymphatic filariasis, schistosomiasis and intestinal worms thanks to a grant from Helen Keller International. Each year, the teams go from village to village, often during the rains, along rivers and treacherous roads to ensure that all men, women and children at risk of blindness are treated.

Mr. Patrice Nkwelle, IEF’s Country Representative in Cameroon, will preside over the Non-Governmental Development Organization (NGDO) coalition fighting Neglected Tropical Diseases (NTDs) from June 2014. He will represent all NGDOs in official matters including talks with the African Programme for Onchocerciasis Control (APOC), the Lions Clubs International Foundation, and USAID; and will organize regular meetings with the NGDOs and partners.
Sustainability Initiatives

Looking at the world’s leading causes of blindness, 90% of the blinding conditions can only be treated by a qualified ophthalmologist in a highly functioning, efficient eye care unit. Most eye units in developing countries are inefficient, and lack proper management and revenue to grow services. They cannot attract or retain qualified ophthalmologists who leave for a private practice or more lucrative positions outside their countries. To date, IEF has assisted 35 eye hospitals and clinics in 18 countries (see inside back cover) to become more efficient and productive. They are the ones doing the work on the ground and thanks to IEF and our donors, there are more resources available to treat even more poor people who desperately need eye care. IEF is building a movement among key stakeholders such as the Pan American Health Organization (PAHO), Orbis International, CBM/Latin America, Vision for the Poor, the Global Sight Initiative, and donors who recognize that the only way to address the epidemics of diabetic eye disease, macular degeneration, ROP in children, and of course, quality cataract surgery is to strengthen capacity of eye health systems and services.

Case Study: Clinica Divino Nino Jesus (DNJ) Lima, Peru

DNJ exemplifies how one small eye clinic can become sustainable, grow, and impact national eye care strategies. Established in 1996, DNJ provided general health care using volunteers. In 2006, CBM/LA helped DNJ focus on eye care, invested in capacity building, and in 2009, sponsored a DNJ leadership team to participate in an IEF sustainability workshop in Paraguay. DNJ then began a 3-year sustainability change process with technical assistance from IEF and staff from our Guatemala team member Visualiza.

<table>
<thead>
<tr>
<th>Year</th>
<th>Patient exams</th>
<th>Cataract surgery</th>
<th>Other surgery</th>
<th>All surgery</th>
<th>Spectacles</th>
<th>Cost recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>14,970</td>
<td>548</td>
<td>290</td>
<td>838</td>
<td>1,198</td>
<td>106%</td>
</tr>
<tr>
<td>2007</td>
<td>18,801</td>
<td>519</td>
<td>360</td>
<td>879</td>
<td>3,211</td>
<td>96%</td>
</tr>
<tr>
<td>2008</td>
<td>21,284</td>
<td>655</td>
<td>331</td>
<td>986</td>
<td>3,034</td>
<td>102%</td>
</tr>
<tr>
<td>2009</td>
<td>22,980</td>
<td>909</td>
<td>366</td>
<td>1,275</td>
<td>3,533</td>
<td>102%</td>
</tr>
<tr>
<td>2010</td>
<td>29,064</td>
<td>1,969</td>
<td>421</td>
<td>2,390</td>
<td>3,733</td>
<td>107%</td>
</tr>
<tr>
<td>2011</td>
<td>32,685</td>
<td>2,229</td>
<td>542</td>
<td>2,771</td>
<td>4,006</td>
<td>104%</td>
</tr>
<tr>
<td>2012</td>
<td>40,541</td>
<td>2,318</td>
<td>559</td>
<td>2,871</td>
<td>4,534</td>
<td>102%</td>
</tr>
<tr>
<td>2013</td>
<td>37,501</td>
<td>*1,397</td>
<td>835</td>
<td>2,232</td>
<td>5,554</td>
<td>110%</td>
</tr>
</tbody>
</table>

Yellow section: IEF began its sustainability intervention in 2009 reflecting the growth in services.
* Cataract surgery was reduced in 2013 due to the end of subsidies from the Clinton Initiative.

DNJ is now a national leader in Peru. It collaborated with the Clinton Foundation’s cataract surgery initiative, VISION2020/Latin America, and provides technical assistance to four CBM/Latin America supported hospitals. Two DNJ Executive Directors serve on the Advisory Committee for the Ministry of Health’s (MOH) “National Strategy for Eye Health”. DNJ helps develop eye care delivery standards for Peru, coordinates workshops and courses, and is a technical resource for MOH ophthalmic training programs. Regionally, DNJ led the Rapid Assessment of Avoidable Blindness (RAAB) study, and participated in the PRECOG international cataract outcomes study. DNJ staff joined IEF’s sustainability team to transform more eye hospitals in the region, and recently joined the Global Sight Initiative.
Established in 1999, SightReach Surgical® is the first non-profit platform to address affordability and lack of access to new ophthalmic equipment, instruments and supplies by eye care providers and NGOs in developing countries.

Catalogue:  www.sightreachsurgical.com

Thank you Larry and SightReach Surgical® for helping us each year with the diagnostic instrument sets for our residents. We are very grateful for your excellent service.

Dr. Carlos Portocarrero, Director of Residency Training
Roosevelt Hospital/Unidad Nacional de Oftalmología
Guatemala City, Guatemala

SightReach Surgical’s unique services:

1. Acquisition of ophthalmic products and eye care technology for developing countries and international NGOs.

2. Information on advances and availability of new technologies not readily accessible in developing countries.

3. Strong history of understanding the challenges faced by eye care providers in the developing world because of the International Eye Foundation’s history, experience and expertise in eye care program development.
**World Sight Day 2012**

**Events**

**VISION2020/USA** is a coalition of domestic and international agencies focusing on blindness. An annual Congressional briefing on Capitol Hill in Washington, DC is sponsored to highlight the clinical and economic challenges blindness creates for people, families, communities, and countries. The 2012 theme was “From Vision Research to Vision Loss Prevention”. John Prakash, PhD, Associate Director for International Programs at the National Eye Institute in Bethesda, MD, and John Crews, DPA at the Vision Health Initiative, Division of Diabetes Translation at the Centers for Disease Control and Prevention in Atlanta, GA discussed current vision research to inform clinical services and programs.

The quadrennial 9th General Assembly of the International Agency for the Prevention of Blindness welcomed 1600 delegates from 86 countries to Hyderabad, India. The theme “Eye Health: Everyone's Business” focused on the importance of combining the expertise and resources of the private, public, and commercial sectors to eliminate avoidable blindness around the world. The Hyderabad Declaration on 'The Right to Eye Health' “spells out key issues in eye health and proposes clear strategies to address them. It will shape future discussions on eye health and is a key outcome from the Assembly” (IAPB website). IEF staff were very active at the 9th GA. Ms. Sheffield organized a well attended course titled “Financing Eye Care Institutions in Poor Countries” with six panelists from all regions of the world. Mr. Rahmathullah presented “A Bottom-Up Approach to Influencing National Strategies for Eye Care in Peru” highlighting the tremendous growth of the Clinica Divino Jesus in Lima discussed on page 4 of this report. A poster presentation was accepted reviewing the results of our work supported by the Alcon Foundation at three eye hospitals in rural north India.

IEF's Vice President for Programs, John Barrows (left), received an IAPB Regional Achievement Award for his decades of service to international eye care development. Pictured below L-R are John Barrows, Mr. Baha'a Sabry of the Al Noor Foundation/Egypt, Dr. Nico Yee of Visualiza/Guatemala, and Raheem Rahmathullah. Mr. Sabry and Dr. Nico Yee and his brother Dr. Mariano Yee were recognized as “Eye Health Heroes”. Mr. Sabry’s photo of an Al Noor caravan to a rural village along the Nile in Egypt is at the far left.
Events

American Academy of Ophthalmology (AAO)
2012 Chicago

Some 200 eye care development colleagues joined the third annual Joint Reception hosted by American organizations “celebrating our shared commitment to end avoidable blindness” during the AAO meeting in Chicago in November 2012. Dr. Marilyn Miller (photo inset), a distinguished pediatric ophthalmologist at the University of Chicago with decades of experience in developing countries was honored by the AAO with its International Blindness Prevention Award” She joined us sharing special thoughts about our joint mission in the world.

L-R:
Monty Montoya/SightLife
Nick Kourgialis/HKI
Geoff Tabin/HCP
Jack Blanks/Seva
Randal Avolio/SEE
Victoria Sheffield/IEF
Jenny Hourihana and Rob Walters/Orbis

IEF “Promotion of Peace and Vision Awards”

Citing his years of service on the Board, specifically as Treasurer on the Finance Committee, and his support of IEF programs, Mr. Allen Beach (left) received the 2012 award for a “Community Member”. The award to an “Ophthalmologist” was shared by Drs. Mariano and Nicolas Yee (right) of Visualiza in Guatemala for their partnership with IEF to build capacity of eye clinics and hospitals in the Latin America region and for their dedicated service to their thousands of patients.

Old Fashioned Picnic on Dr. Pilkerton’s Farm

Board member Dr. Ray and wife Sally Pilkerton (left) hosted a glorious Sunday afternoon picnic on their farm in Potomac, MD with hayrides and games for the children, a backyard cookout by Suburban Soul Grill, music by King Street Bluegrass, and a wonderful silent auction. Fundraising was never so much fun!
IEF collaborates and networks with an ever increasing number of hospitals, NGO’s, donors, organizations and manufacturers to bring quality eye care to individuals around the world.

<table>
<thead>
<tr>
<th>HOSPITALS - NGO’S - CORPORATIONS</th>
<th>MULTILATERAL, BILATERAL, GOVERNMENT &amp; PRIVATE ORGANIZATIONS</th>
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<tr>
<td>African Programme for Onchocerciasis Control (APOC)</td>
<td>Cal Coast Ophthalmic Instruments</td>
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<td>Cambrian Medical</td>
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<td>Colburn Technologies</td>
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<td>D.O.R.C.</td>
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<td>Drager</td>
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<td>Aswan Eye &amp; Laser Center - Egypt</td>
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<td>Blantyre Institute for Community Ophthalmology - Malawi</td>
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<td>BNSB Eye Hospital</td>
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<td>Hamilton Medical</td>
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<td>Heine Optotechnik</td>
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<td>Inami</td>
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<td>Indo-German Surgical</td>
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<td>Jedmed</td>
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<td>Hospital Elias Santana - Dominican Republic</td>
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<td>Instituto de la Vision - Mexico</td>
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<td>Zeiss Meditec</td>
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<td>Madigan Army Medical Center Eye Missions</td>
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</table>
The International Eye Foundation is grateful to all the caring people whose generosity offers the gift of sight. Our support comes from many sources -- pennies collected by children learning to care about others, contributions of cash and other financial instruments, in-kind donations from ophthalmologists and corporations, collections taken up by caring optical companies, bequests to leave a lasting legacy, and gifts to honor a person or significant life event. For all of these blessings, we thank you on behalf of the countless people who benefit from your generosity.

We wish to recognize the donors from July 1, 2012 to June 30, 2013. We make every effort to ensure the accuracy of this listing. If an error has been made, or if a donor wishes to remain anonymous, please contact us so that a proper listing may be made. Thank you.

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- Merck & Co., Inc. **

### $100,000 to $499,999
- Alcon Foundation, Inc. **
- Lavelle Fund for The Blind, Inc. **

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- Vision for the Poor
- Waterford Lions Club Community Fund

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- Buffy Cafritz Trust
- Eye Associates of Washington, DC
- Seva Foundation

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- Dr. & Mrs. Claude L. Cowan, Jr.

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Anon
Anonymous
Mrs. Mary Ellen Adair
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Thank You!
# Summarized Statement of Activity and Changes in Net Assets

**International Eye Foundation**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Public Support – Received Directly (Contributions from Individuals, Corporations and Foundations)</td>
<td>5,193,778</td>
<td>3,875,450</td>
</tr>
<tr>
<td>Grants from Governmental Agencies</td>
<td>1,826</td>
<td>31,999</td>
</tr>
<tr>
<td>Other Revenue (Investment Income (loss), Program Service Fees and Equipment Sales, Dues, Miscellaneous Programs, Adjustments to Prior Year)</td>
<td>946,193</td>
<td>1,306,281</td>
</tr>
<tr>
<td><strong>Total Public Support &amp; Revenue</strong></td>
<td><strong>6,141,797</strong></td>
<td><strong>5,213,730</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>5,136,142</td>
<td>4,685,291</td>
</tr>
<tr>
<td>Management and General</td>
<td>450,614</td>
<td>436,084</td>
</tr>
<tr>
<td>Fund Raising</td>
<td>317,528</td>
<td>323,897</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>5,907,284</strong></td>
<td><strong>5,445,272</strong></td>
</tr>
</tbody>
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| Change in Net Assets                                          | 234,513                  | (231,542)                |
| Net Assets, Beginning of Year                                 | 1,844,943                | 2,076,485                |
| Net Assets, End of Year                                       | 2,079,456                | 1,844,943                |

Please note that this is an abbreviated Statement of Activities and Changes in Net Assets. A complete audited financial statement with auditor's opinion may be obtained by contacting:

**International Eye Foundation**
Public Affairs Office  
10801 Connecticut Avenue  
Kensington, MD 20895  
Telephone: 240-290-0263  
Or go online to our website at [http://www.iefusa.org/about/funding](http://www.iefusa.org/about/funding)

**Or you may contact:**
Maryland Office of the Secretary of State  
Charitable Division  
State House  
Annapolis, MD 21401
The International Eye Foundation is diligent in its stewardship of the financial resources entrusted to us by all our donors, large and small. We are proud of the prudent use of these funds in providing effective and high quality eye care services.

2013 IEF Expenditures

Fundraising 5%
G & A 8%
Program 87%

2013 IEF Program Expenditures

Latin America $249,342 5%
Africa $4,340,051 84%
Asia, Europe & Other $549,749 11%

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The International Eye Foundation meets standards for management and charitable solicitations as established by Charity Navigator, Global Impact and regulatory and governmental agencies.

CHARITY NAVIGATOR
Four Star Charity
IEF’s SightReach® Management Program Network - 2013
35 Eye Clinics and Hospitals in 18 Countries

AFRICA
GHANA: Ridge Hospital, Accra
MALAWI: Lions SightFirst Eye Hospital, Lilongwe
MALAWI: Lions Eye Unit, Queen Elizabeth Central Hospital, Blantyre
TANZANIA: Kilimanjaro Centre for Community, Ophthalmology, Moshi

LATIN AMERICA & CARIBBEAN
BRAZIL: Recife Eye Hospital, Recife
ECUADOR: Fundación Oftalmológica del Valle, Cumbaya Quito
EL SALVADOR: Clínica Oftalmológica Dr. José Miguel POSADA Fratti, San Salvador
GUATEMALA: Visualiza, Guatemala City - IEF Regional Demonstration Center
HAITI: Clinique Vision Plus, Cap Haitien
HAITI: Clinique Ophtalmologique Specialisee, Port-au-Prince
HONDURAS: Visión America, Tegucigalpa
HONDURAS: Instituto de la Visión Dr. Douglas Perry (IVDP) and OptiLens, San Pedro Sula
MEXICO: Instituto de la Visión, Montemorelos and Sureste
NICARAGUA: Clínica Oftalmológica Ojo Sano (FONIPRECE) - Nicaragua
PARAGUAY: Fundación Visión, Asunción
PERU: Clinica Oftalmologica Divino Nino Jesús, Lima - IEF Regional Demonstration Center

NORTH AMERICA
USA: Wills Eye Hospital Department of Pediatrics & Genetics, Eagles Youth Partnership, Philadelphia

MIDDLE EAST
EGYPT: Al Noor Foundation/Magrabi Eye Hospital, Cairo - IEF Regional Demonstration Center
EGYPT: Coptic Evangelical Organization for Social Services (CEOSS) Hospital, Menia
EGYPT: Shebin El Koum Hospital, Menofiya
EGYPT: Quena Eye Hospital, Quena
EGYPT: Bani Suef Eye Hospital, Bani Suef
EGYPT: Ismailia Central Hospital Eye Department, Ismailia
EGYPT: Aswan Laser & Eye Center, Aswan

ASIA
INDIA: Gomabai Nethralaya and Research Center, Neemuch, Madhya Pradesh State
INDIA: Bejan Singh Eye Hospital, Kanyakumari District, Tamil Nadu State
INDIA: Akhand Jyothi Eye Hospital, Bihar State
INDIA: Sitapur Eye Hospital, Uttar Pradesh State
INDIA: Rotary Eye Hospital, Himachal Pradesh State

CONSULTANCIES
BANGLADESH: BSNB Eye Hospital, Siraiganj on behalf of Volunteer Eye Surgeons
ETHIOPIA: Synskey Eye Clinic, Addis Ababa on behalf of American Society of Cataract & Refractive Surgery on behalf of ASCRS
PERU: Instituto Regional de Oftalmología, Trujillo on behalf of Orbis International
PERU: Organizacion de Lucha Contra la Ceguera, Arequipa on behalf of CBM/Latin America
PERU: Centro Comunitario Oftalmologico Maranata-CECOM, Trujillo on behalf of CBM/LA
PERU: Fundación Oftalmológica del Norte, Piura on behalf of CBM/LA
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