

Modalities of Communication Statement (Version 03.0)

Date of submission:		23/08/20	013			
	DAMME OF ACTIVITIES					
Title of the project/programme of activities:	SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS Title of the project/programme of activities: Distribution of Improved cook stove- Phase 15					
Project/programme of activities reference number:	8810	310 VC- 111	<u>asc 13</u>			
(if available)	0010					
SECTION 2: NOMINATION O	F FOCAL POINT ENTITY	/IES				
Notes:	of ONI With a souther listed halosse	:				
 Sole Focal Point authority - An authorized signatory of ONLY the entity listed below is required to sign for communication related to the corresponding scope of authority. Shared Focal Point authority - An authorized signatory ANY of the entities listed below is required to sign for communication related to the corresponding scope of authority. 						
· <u>Joint Focal Point authority</u> - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.						
Name of entity: Vitol S.A.						
Address: D'Arve 28, Boulevard du Pont CH 1205 Geneva Switzerland						
This entity is nominated as a focal point with the authorit	y to:	Sole	Shared	Joint		
(a) Communicate in relation to requests for forwarding of CER				X		
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures				X		
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above				X		
Contact details (primary authorized signatory):	Mr. ⋈ Ms. □					
Last name: Fransen	Telephone 1:					
First name: David	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature:	Date (dd/mm/yyyy):					
Contact details (alternate authorized signatory):	Mr. ⋈ Ms. □					
Last name: Doucakis	Telephone 1:					
First name: Nikolas	Telephone 2 (optional):					
Email:	Fax (optional):					
Specimen signature:	Date (dd/mm/yyyy):					
Is this entity changing its name?	No					
Former entity name, if applicable:						
Is this entity also a project participant?	Yes					
If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes					
Name of entity: M/s G K Energy Marketers Pvt Ltd						

Address: Flat No. 350, Building No. 25, Ground Floor, Lokmanya 1 411030 Maharashtra India	Nagar, LBS Road, Pune			
This entity is nominated as a focal point with the authority to:		Sole	Shared	Joint
(a) Communicate in relation to requests for forwarding of CER				X
(b) Communicate in relation to requests for addition and/or voluntary withdrawal of project participants and focal points, as well as changes to company names, legal status, contact details and specimen signatures				X
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above				X
Contact details (primary authorized signatory):	Mr. ☑ Ms. □			
Last name: Kabra	Telephone 1:			
First name: Gopal	Telephone 2 (optional):			
Email:	Fax (optional):			
Specimen signature:	Date (dd/mm/yyyy):			
Is this entity changing its name?	No			
Former entity name, if applicable:				
Is this entity also a project participant?	Yes			
If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes			