

Modalities of Communication Form

This form is to be used by project participants in order to submit the statement of Modalities of Communication.							
Date of submission	02/02/2011						
Section 1: Project Details							
1. Title of the CDM project activity	Federal Intertrade Pengyang Solar Cooker Project						
2. Please state project ID Number if available	2307						
Section 2: Nomination of Focal Point							
3. Details of the entity/ies nominated as focal point							
 Notes: <u>Sole Focal Point authority</u> - A signature of an authorized signatory of <u>ONLY the entity listed below is required</u> for communication related to the corresponding scope of authority. <u>Shared Focal Point authority</u> - A signature of an authorized signatory of <u>ANY of the entities listed below is required</u> for communication related to the corresponding scope of authority. <u>Joint Focal Point authority</u> - A signature of an authorized signatory of <u>ALL entities listed below are required</u> for communication related to the corresponding scope of authority. <u>Mame of the entity:</u> 							
Ningxia Federal Intertrade Co., Ltd.							
This entity is nominated as focal point for:		Sole	Shared	Joint			
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs				X			
(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.				X			
(c) Communication with the secretariat and CDM EB on matters related to registration and/or issuance. Select this scope if the entity is to be copied on all communication related to the project			X				
Contact details (primary authorized signatory):	Mr.						
Last name: Jiang	Telephone:						
First name: Wei	Fax:						
Email:	Address:						
Specimen signature:							
Contact details (alternate authorized signatory):							
Last name:	Telephone:						
First name:	Fax:						
Email:	Address:						
Specimen signature:							

Name of the entity: Post 2012 Carbon Credit Fund C.V.				
This entity is nominated as focal point for:		Sole	Shared	Joint
(a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs				X
(b) Authority to request the addition of project participants and/or to communicate any voluntary withdrawal and to update contact details of project participant (includes changes in company's name and legal status, addresses etc.				X
(c) Communication with the secretariat and CDM EB on matters related to registration and/or issuance. Select this scope if the entity is to be copied on all communication related to the project			X	
Contact details (primary authorized signatory):	Mr.		II	
Last name: van der Burg	Telephone:			
First name: Markus	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):	Ms.			
Last name: Smalley	Telephone:			
First name: Vi	Fax:			
Email:	Address:			
Specimen signature:	·			