

### **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		21/10/2010		
Section 1: Project Details				
1. Title of the CDM project activity	Conversion of existing open cycle gas turbine to combined cycle at Guaracachi power station, Santa Cruz, Bolivia			
2. Please state project ID Number if available	2761			
C4: 2. N	4' CE1 D-:4			

# **Section 2: Nomination of Focal Point**

### 3. Details of the entity/ies nominated as focal point

### Notes:

- · <u>Sole</u> Focal Point authority 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</u> Focal Point authority 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.

## Name of the entity:

Corporación Andina de Fomento - CAF

This entity is nominated as focal point for:		Sole	Shared	Join
(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 EF registration and/or issuance. Select this scope if the ecommunication related to the project				X
Contact details (primary authorized signatory):	Ms.			
Last name: GOMEZ	Telephone:			
First name: MARY	Fax:			
Email:	Address:			
Specimen signature:	Ma			
Contact details (alternate authorized signatory):	Ms.			
Last name: SZAUER	Telephone:			
Last name: SZAUER First name: MARIA TERESA	Telephone: Fax:			

Name of the entity: Kreditanstalt für Wiederaufbau, Frankfurt am Main – KfW				
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 particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a	of project participant			X
(c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project				X
Contact details (primary authorized signatory):	Mr.	'		
Last name: MULDER	Telephone:			
First name: KARIN	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):	Mr.			
Last name: DURTH	Telephone:			
First name: RAINER	Fax:			
Email:	Address:			
Name of the entity: EMPRESA ELÉCTRICA GUARACACHI S.A.				
		Sole	Shared	Joint
EMPRESA ELÉCTRICA GUARACACHI S.A.	nte with the CDM EB on	Sole	Shared	Joint
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communication in the secretariation in the	ants and/or to communicate of project participant	Sole	Shared	Joint
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details	ants and/or to communicate of project participant addresses etc. on matters related to	Sole	Shared	
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the entited to the context of	ants and/or to communicate of project participant addresses etc. on matters related to	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the entite communication related to the project	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):	ants and/or to communicate of project participant addresses etc. In matters related to ty is to be copied on all	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communical allocation/forwarding of CERs  (b) Authority to request the addition of project participany voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all  Mr.  Telephone:	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communical allocation/forwarding of CERs  (b) Authority to request the addition of project participany voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ  First name: JERGES	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all  Mr.  Telephone: Fax:	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, at (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the entition communication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ  First name: JERGES  Email:	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all  Mr.  Telephone: Fax:	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, at (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the entite communication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ  First name: JERGES  Email:  Specimen signature:	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all  Mr. Telephone: Fax: Address:	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB or registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ  First name: JERGES  Email:  Specimen signature:	ants and/or to communicate of project participant addresses etc.  In matters related to ty is to be copied on all  Mr.  Telephone: Fax: Address:	Sole	Shared	X
EMPRESA ELÉCTRICA GUARACACHI S.A.  This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communica allocation/forwarding of CERs  (b) Authority to request the addition of project particip any voluntary withdrawal and to update contact details (includes changes in company's name and legal status, a (c) Communication with the secretariat and CDM EB of registration and/or issuance. Select this scope if the enticommunication related to the project  Contact details (primary authorized signatory):  Last name: MERCADO SUAREZ  First name: JERGES  Email:  Specimen signature:  Contact details (alternate authorized signatory):  Last name: PAZ CASTRO	ants and/or to communicate of project participant addresses etc. on matters related to ty is to be copied on all  Mr.  Telephone: Fax: Address:  Mr.  Telephone:	Sole	Shared	X

This entity is nominated as focal point for:		Sole	Shared	Joint
(a) Authority to instruct the secretariat and communallocation/forwarding of CERs	icate with the CDM EB on			
(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 EF registration and/or issuance. Select this scope if the encommunication related to the project				X
Contact details (primary authorized signatory):	Ms.			ı
Last name: SILVA MATURANA	Telephone:			
First name: CYNTHIA	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):	Mr.			
Last name: SALINAS TORRICO	Telephone:			
First name: CARLOS HOMAR PIERINO	Fax:			
Email:	Address:			