

## **Modalities of Communication Form**

This form is to be used by project participants in order to suf	bmit the statement of Modalities o	of Commun	nication.	
Date of submission		28/10/2010		
Section 1: Pr	oject Details			
1. Title of the CDM project activity	Bunge Guara biomass project			
2. Please state project ID Number if available	0529			
Section 2: Nomina	tion of Focal Point			
3. Details of the entity/ies nominated as focal point				
Notes:  • Sole Focal Point authority - A signature of an authoric communication related to the corresponding scope of authoric • Shared Focal Point authority - A signature of an authoric for communication related to the corresponding scope • Joint Focal Point authority - A signature of an author communication related to the corresponding scope of authoric formula in the corresponding scope of autho	ty. corized signatory of <u>ANY of the expectation</u> the control of authority. The control of the c	entities list	ed below	<u>is</u>
Name of the entity: Bunge Fertilizantes S.A				
This entity is nominated as focal point for:		Sole	Shared	Joint
(a) Authority to instruct the secretariat and communicate allocation/forwarding of CERs	e with the CDM EB on			X
(b) Authority to request the addition of project participal any voluntary withdrawal and to update contact details of (includes changes in company's name and legal status, additional company's name and legal status additional company	f project participant			X
(c) Communication with the secretariat and CDM EB on registration and/or issuance. Select this scope if the entity communication related to the project				X
Contact details (primary authorized signatory):	Mr.	*	,	
Last name: Leite Severo	Telephone:			
First name: Joaquim	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):				
Last name:	Telephone:			
First name:	Fax:			
Email:	Address:			
Specimen signature:				

Name of the entity: Ecopart Assessoria em Negócios Empresariais Ltda.					
This entity is nominated as focal point for:		Sole	Shared	Joint	
(a) Authority to instruct the secretariat and communica allocation/forwarding of CERs	Authority to instruct the secretariat and communicate with the CDM EB on ocation/forwarding of CERs			X	
<ul> <li>(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.</li> <li>(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</li> </ul>				X	
				X	
Contact details (primary authorized signatory):	Ms.	'			
Last name: Hirschheimer	Telephone:				
First name: Melissa	Fax:				
Email:	Address:				
Specimen signature:					
Contact details (alternate authorized signatory):					
Last name:	Telephone:	Telephone:			
First name:	Fax:				
Email:	Address:				
Name of the entity:					
Ecoinvest carbon S.A.					
This entity is nominated as focal point for:		Sole	Shared	Joint	
	te with the CDM EB on	Sole	Shared	Joint X	
This entity is nominated as focal point for:  (a) Authority to instruct the secretariat and communication of the secretariation of the secre	ants and/or to communicate of project participant	Sole	Shared		
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	ants and/or to communicate of project participant addresses etc. n matters related to	Sole	Shared	X	
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 entited the communication with the secretariat and communication with the se	ants and/or to communicate of project participant addresses etc. n matters related to	Sole	Shared	X	
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