



## Modalities of Communication Statement (Version 03.0)

<b>Date of submission:</b>	20/10/2015												
<b>SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS</b>													
<b>Title of the project/programme of activities:</b>	Paradigm Sub Saharan Africa Cook Stove Programme												
<b>Project/programme of activities reference number:</b> (if available)	9672												
<b>SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES</b>													
<p>Notes:</p> <ul style="list-style-type: none"> <li>· <b>Sole Focal Point authority</b> - An authorized signatory of <u>ONLY the entity listed below is required</u> to sign for communication related to the corresponding scope of authority.</li> <li>· <b>Shared Focal Point authority</b> - An authorized signatory <u>ANY of the entities listed below is required</u> to sign for communication related to the corresponding scope of authority.</li> <li>· <b>Joint Focal Point authority</b> - Authorized signatories of <u>ALL entities listed below are required</u> to sign for communication related to the corresponding scope of authority.</li> </ul>													
<b>Name of entity:</b> The Paradigm Project													
<b>Address:</b> 619 N Cascade Ave Colorado Springs United States of America													
<b>This entity is nominated as a focal point with the authority to:</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Sole</th> <th style="width: 15%;">Shared</th> <th style="width: 15%;">Joint</th> </tr> </thead> <tbody> <tr> <td>(a) Communicate in relation to requests for forwarding of CER</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> <tr> <td>(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</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> <tr> <td>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	Sole	Shared	Joint	(a) Communicate in relation to requests for forwarding of CER	X	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	X	(c) Communicate on all other project or programme related matters not covered by (a) or (b) above	X	X
Sole	Shared	Joint											
(a) Communicate in relation to requests for forwarding of CER	X	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	X											
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above	X	X											
<b>Contact details (primary authorized signatory):</b>	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>												
Last name: Bellefeuille	Telephone 1:												
First name: Neil	Telephone 2 (optional):												
Email:	Fax (optional):												
Specimen signature:	Date (dd/mm/yyyy):												
<b>Contact details (alternate authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>												
Last name: Matocha	Telephone 1:												
First name: Johanna	Telephone 2 (optional):												
Email:	Fax (optional):												
Specimen signature:	Date (dd/mm/yyyy):												
Is this entity changing its name?	<b>No</b>												
Former entity name, if applicable:													
Is this entity also a project participant?	<b>Yes</b>												
If the entity is also a project participant, do the same signatories represent it in its project participant role?	<b>Yes</b>												
<b>Name of entity:</b> Nordic Environment Finance Corporation													

<b>Address:</b> Fabianinkatu 34, P.O.Box 241 00171 Helsinki Finland			
<b>This entity is nominated as a focal point with the authority to:</b>	<b>Sole</b>	<b>Shared</b>	<b>Joint</b>
<b>(a) Communicate in relation to requests for forwarding of CER</b>			<b>X</b>
<b>(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</b>			<b>X</b>
<b>(c) Communicate on all other project or programme related matters not covered by (a) or (b) above</b>			<b>X</b>
<b>Contact details (primary authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>		
Last name: Lindegaard	Telephone 1:		
First name: Helle	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
<b>Contact details (alternate authorized signatory):</b>	Mr. <input type="checkbox"/> Ms. <input checked="" type="checkbox"/>		
Last name: Nyberg	Telephone 1:		
First name: Tina	Telephone 2 (optional):		
Email:	Fax (optional):		
Specimen signature:		Date (dd/mm/yyyy):	
Is this entity changing its name?	<b>No</b>		
Former entity name, if applicable:			
Is this entity also a project participant?	<b>Yes</b>		
If the entity is also a project participant, do the same signatories represent it in its project participant role?	<b>Yes</b>		