Modalities of Communication Statement (Version 03.0)

Date of submission:	01/02/2013

SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS

Title of the project/programme of activities:	Methane Recovery and Electricity Generation Project GCM 19
Project/programme of activities reference number: *(if available)*	0633

SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES

Notes:

· **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.

· **Joint Focal Point authority** - Authorized signatories of ALL entities listed below are required to sign for communication related to the corresponding scope of authority.

Name of entity:
EcoSecurities Ltd.

Address:
40/41 Park End St.
OX1 1JD Oxford
United Kingdom of Great Britain and Northern Ireland

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: Thompson	Telephone 1:
First name: James	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:
Cargill International S.A.

Address:
14, Chemin de Normandie,
1206 Geneva
Switzerland

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			
(c) Communicate on all other project or programme related matters not covered by (a) or (b) above			

Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Bishton	Telephone 1:
First name: Peter	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**