CDM-MOC-FORM Form: ANNEX 2

Date of submission	12/08/2010
Section 1: Project Details	
1. Title of the CDM project activity	RSCL cogeneration expansion project
2. Please state project ID Number if available	0127
Section 4: Change of contact details (project participants or focal point entities)	
The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:	
Name of the entity: Kommunalkredit Public Consulting GmbH	
Party (country that authorised participation): Austria	
Contact details (primary authorized signatory):	Mr.
Last name: Diernhofer	Telephone:
First name: Wolfgang	Fax:
Email: Mr.	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Ms.
Last name: Stockinger	Telephone:
First name: Andrea	Fax:
Email: Ms.	Address:
Specimen signature:	
Signature(s) of designated focal point for addition of project participant and communication of voluntary withdrawal of project participants:	