

**CDM-MOC-FORM Form: ANNEX 1**

<b>Date of submission</b>		27/06/2012
<b>Section 1: Project Details</b>		
<b>1. Title of the CDM project activity</b>	AES Tietê Afforestation/Reforestation Project in the State of São Paulo, Brazil	
<b>2. Please state project ID Number if available</b>	3887	
<b>Section 2: List of project participants</b>		
<b>Name of the entity:</b> AES Tiete S.A.		
<b>Party (country that authorised participation):</b> Brazil		
<b>Contact details (primary authorised signatory):</b>	Mr.	
Last name: Hotimsky	Telephone:	
First name: Samy	Fax:	
Email:	Address:	
Specimen signature:		
<b>Contact details (alternate authorised signatory):</b>		
Last name:	Telephone:	
First name:	Fax:	
Email:	Address:	
Specimen signature:		
<b>Name of the entity:</b> International Bank for Reconstruction and Development (IBRD) as Trustee of the BioCarbon Fund (BioCF)		
<b>Party (country that authorised participation):</b> Luxembourg		
<b>Contact details (primary authorised signatory):</b>	Ms.	
Last name: Chassard	Telephone:	
First name: Joelle	Fax:	
Email:	Address:	
Specimen signature:		
<b>Contact details (alternate authorised signatory):</b>		
Last name: Prasad	Telephone:	
First name: Neeraj	Fax:	
Email:	Address:	
Specimen signature:		

**Name of the entity:**  
International Bank for Reconstruction and Development (IBRD) as Trustee of the BioCarbon Fund (BioCF)

**Party (country that authorised participation):**  
Italy

**Contact details (primary authorised signatory):** Ms.

Last name: Chassard Telephone:

First name: Joelle Fax:

Email: Address:

Specimen signature:

**Contact details (alternate authorised signatory):** Mr.

Last name: Prasad Telephone:

First name: Neeraj Fax:

Email: Address:

Specimen signature:

**Name of the entity:**  
International Bank for Reconstruction and Development (IBRD) as Trustee of the BioCarbon Fund (BioCF)

**Party (country that authorised participation):**  
Canada

**Contact details (primary authorised signatory):** Ms.

Last name: Chassard Telephone:

First name: Joelle Fax:

Email: Address:

Specimen signature:

**Contact details (alternate authorised signatory):** Mr.

Last name: Prasad Telephone:

First name: Neeraj Fax:

Email: Address:

Specimen signature:

<b>Name of the entity:</b> Government of Canada - Ministry of Foreign Affairs and International Trade	
<b>Party (country that authorised participation):</b> Canada	
<b>Contact details (primary authorised signatory):</b>	Mr.
Last name: Wallace	Telephone:
First name: Jeremy	Fax:
Email:	Address:
Specimen signature:	
<b>Contact details (alternate authorised signatory):</b>	
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	
<b>Name of the entity:</b> International Bank for Reconstruction and Development (IBRD) as Trustee of the BioCarbon Fund (BioCF)	
<b>Party (country that authorised participation):</b> Spain	
<b>Contact details (primary authorised signatory):</b>	Ms.
Last name: Chassard	Telephone:
First name: Joelle	Fax:
Email:	Address:
Specimen signature:	
<b>Contact details (alternate authorised signatory):</b>	
Last name: Prasad	Telephone:
First name: Neeraj	Fax:
Email:	Address:
Specimen signature:	