CDM-MOC-FORM: ANNEX 2

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

Date of submission:		08/10/2020	
SECTION 1: PROJECT/PROGRAMME DETAILS			
Title of the project/programme of activities:	Guyana Skeldon Bagasse Cogeneration Project		
Project/programme of activities reference number:	1458		
SECTION 3: WITHDRAWAL OF PROJECT PARTICIPANTS ENTITY/IES			
☑ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: International Bank for Reconstruction and Development (IBRD) as Trustee of the Community Development Carbon Fund (CDCF)			
Party (country authorizing participation): Spain			
Name of authorized signatory: Simon Whitehouse			
Signature:	Date (dd/mm/yyyy):		
☑ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: International Bank for Reconstruction and Development (IBRD) as Trustee of the Community Development Carbon Fund (CDCF)			
Party (country authorizing participation): Austria			
Name of authorized signatory: Simon Whitehouse			
Signature:	Date (dd/mm/yyyy):		
☑ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: International Bank for Reconstruction and Development (IBI Fund (CDCF)	RD) as Trustee of the Communit	y Development Carbon	
Party (country authorizing participation): Netherlands			
Name of authorized signatory: Simon Whitehouse			
Signature:	Date (dd/mm/yyyy):		

CDM-MOC-FORM

Signature(s) of the focal point for scope of authority (b) or the project participant requesting the withdrawal (*)			
Name of authorized signatory:	Signature	Date: dd/mm/yyyy	
(Add lines for signatories as necessary. Only one signatory per entity is required.)			
(*) In the case of programme of activities, this section shall be signed by the focal point(s) for scope (b)			