CDM-MOC-FORM Form: ANNEX 2

Date of submission	06/05/2011
SECTION 1: PROJECT DETAILS	
1. Title of the CDM project activity	Rwanda Electrogaz Compact Fluorescent Lamp (CFL) distribution project
2. Please state reference Number if available	3404

SECTION 2: ADDITION/CHANGE OF NAME OF PROJECT PARTICIPANT

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: BASF SE	
Party (country that authorised participation): Germany	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Evers	Telephone:
First name: Horatio	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☒ Ms. ☐
Last name: Merger	Telephone:
First name: Roland	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: Austria-Kommunalkredit Public Consulting GmbH	
Party (country that authorised participation): Austria	
Contact details (primary authorized signatory):	Mr.☐ Ms.☒
Last name: Amerstorfer	Telephone:
First name: Alexandra	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☒ Ms.☐
Last name: Eichberger	Telephone:
First name: Sascha	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: Government of Canada-Ministry of Foreign Affairs and International Trade	
Party (country that authorised participation): Canada	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Pringle	Telephone:
First name: Gary	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: Maersk Olie og Gas AS	
Party (country that authorised participation): Denmark	
Contact details (primary authorized signatory):	Mr.☒ Ms.☐
Last name: Norgaard	Telephone:
First name: Torben	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☒ Ms.☐
Last name: Ng	Telephone:
First name: Chris	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: DONG Naturgas A/S	
Party (country that authorised participation): Denmark	
Contact details (primary authorized signatory):	Mr.☐ Ms.☒
Last name: Harpsoe Braten	Telephone:
First name: Cilla	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr.☒ Ms.☐
Last name: Green	Telephone:
First name: Gavin	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.

☒ **Add project participant**
☐ **Change name of project participant**

The following entity is hereby added as a project participant or is newly named in respect of the above CDM project. By providing a specimen signature below, the project participant confirms its acceptance of the Statement of Agreement of the current modalities of communication.

Name of the entity: Goteborg Energi AB	
Party (country that authorised participation): Sweden	
Contact details (primary authorized signatory):	Mr. ☒ Ms. ☐
Last name: Dalman	Telephone:
First name: Bengt Goran	Fax:
Email:	Address:
Specimen signature:	
Contact details (alternate authorized signatory):	Mr. ☐ Ms. ☐
Last name:	Telephone:
First name:	Fax:
Email:	Address:
Specimen signature:	

Signature(s) of designated focal point for scope (b): Date: .....

Name: ..... Signature: .....

Only one primary or alternate signatory per focal point entity is required.