

## Modalities of Communication Statement (Version 03.0)

Date of submission:		11/09/2013		
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS				
Title of the project/programme of activities:	Consolidated Distillers of the Far East Methane Recovery and Destruction Project			
<b>Project/programme of activities reference number:</b> <i>(if available)</i>	9205			
SECTION 2: NOMINATION OF FOCAL POINT ENTITY/IES				
Notes: • <u>Sole</u> Focal Point authority - An authorized signatory communication related to the corresponding scope of autho • <u>Shared</u> Focal Point authority - An authorized signat communication related to the corresponding scope of autho • <u>Joint</u> Focal Point authority - Authorized signatories communication related to the corresponding scope of autho	rity. fory <u>ANY of the entities listed be</u> rity. of <u>ALL entities listed below are</u>	low is req	uired to sig	
Name of entity: Consolidated Distillers of the Far East, Inc.				
Address: 330 Sen. G. Puyat Ave., The World Centre Makati Philippines				
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: Masi	Telephone 1:			
First name: Ferdinand	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			