CDM-MOC-FORM Form: ANNEX 1

Date of submission		30/03/2012
Section 1: Project Details		
1. Title of the CDM project activity	CECIC HKE Zhangbei Lvnaobao Wind Power Project	
2. Please state project ID Number if available	3399	
Section 2: List of project participants		
Name of the entity: Asian Development Bank as Trustee of the Asia Pacific Carbon Fund		
Party (country that authorised participation): Sweden		
Contact details (primary authorised signatory):	Mr.	
Last name: Yao	Telephone:	
First name: Xianbin	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorised signatory):	Mr.	
Last name: Um	Telephone:	
First name: Woochong	Fax:	
Email:	Address:	
Specimen signature: Name of the entity:		
Asian Development Bank, as trustee of the Asia Pacific Carbon Fund Party (country that authorised participation):		
Spain Contact details (primary authorised signatory):	Mr.	
Last name: Yao	Telephone:	
First name: Xianbin	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorised signatory):	Mr.	
Last name: Um	Telephone:	
First name: Woochong	Fax:	
Email:	Address:	
Specimen signature:		

Name of the entity: CECIC HKE Wind Power CO.,LTD		
Party (country that authorised participation): China		
Contact details (primary authorised signatory):	Mr.	
Last name: Li	Telephone:	
First name: Shusheng	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorised signatory):		
Last name:	Telephone:	
First name:	Fax:	
Email:	Address:	
Specimen signature:		
Name of the entity: Kingdom of Spain		
Party (country that authorised participation): Spain		
Contact details (primary authorised signatory):	Ms.	
Last name: Montalvo	Telephone:	
First name: Alicia	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorised signatory):	Ms.	
Last name: Fernandez	Telephone:	
First name: Maria Jesus	Fax:	
Email:	Address:	
Specimen signature:		

Name of the entity: Swedish Energy Agency		
Party (country that authorised participation): Sweden		
Contact details (primary authorised signatory):	Mr.	
Last name: Bostrom	Telephone:	
First name: Bengt	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorised signatory):	Ms.	
Last name: Myrman	Telephone:	
First name: Johanna	Fax:	
Email:	Address:	
Specimen signature:		