## **CDM-MOC-FORM: ANNEX 3**

This annex is to be used by a focal point of a CDM project activity to request its voluntary withdrawal from its role(s) as a focal point.

| Date of submission:                                                                                                                                                             |                             | 04/01/2021 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------|
| SECTION 1: CDM PROJECT DETAILS                                                                                                                                                  |                             |            |
| Title of the project activity:                                                                                                                                                  | Itaoca Landfill Gas Project |            |
| Project activity reference number:                                                                                                                                              | 4657                        |            |
| SECTION 2: VOLUNTARY WITHDRAWAL OF FOCAL POINT ENTITY/IES                                                                                                                       |                             |            |
| The following entity is designated as a focal point in the above CDM project activity and hereby confirms its voluntary consent to be withdrawn from its role as a focal point. |                             |            |
| Name of entity: International Bank for Reconstruction and Development (IBRD) as Trustee of the Spanish Carbon Fund (SCF)                                                        |                             |            |
| Name of authorized signatory:<br>Jose Andreu                                                                                                                                    |                             |            |
| Signature:                                                                                                                                                                      | Date (dd/mm/yyyy):          |            |
| ☐ Tick to confirm that evidence of communication as per the CDM project cycle procedure has been attached                                                                       |                             |            |
| Signature(s) of the focal point for scope of authority (b) or the withdrawing focal point entity  Name of authorized signatory:  Signature  Date: dd/mm/yyyy                    |                             |            |
| (Add lines for signatories as necessary. Only one signatory per entity is required.)                                                                                            |                             |            |