

## **Modalities of Communication Form**

This form is to be used by project participants in order to submit the statement of Modalities of Communication.				
Date of submission		15/03/2012		
Section 1: Project Details				
1. Title of the CDM project activity	AWMS Methane Recovery Project MX06-S-34, Coahuila and Durango, México			
Please state project ID Number if available 1080				
Section 2: Nomination of Focal Point				
3. Details of the entity/ies nominated as focal point				
Notes:   • Sole Focal Point authority - A signature of an authorized signatory of ONLY the entity listed below is required for communication related to the corresponding scope of authority.   • Shared Focal Point authority - A signature of an authorized signatory of ANY of the entities listed below is required for communication related to the corresponding scope of authority.     • Joint Focal Point authority - A signature of an authorized signatory of ALL entities listed below are required for communication related to the corresponding scope of authority.     • Joint Focal Point authority - A signature of an authorized signatory of ALL entities listed below are required for communication related to the corresponding scope of authority.     • Mame of the entity:     AgCert International Ltd.     This entity is nominated as focal point for:   Sole   Shared   Joint     (a) Authority to instruct the secretariat and communicate with the CDM EB on allocation/forwarding of CERs   X				
Contact details (primary authorized signatory):	Mr.	<u> </u>		
Last name: Perkowski	Telephone:			
First name: Leo S.	Fax:			
Email:	Address:			
Specimen signature:				
Contact details (alternate authorized signatory):	Ms.			
Last name: McRoy	Telephone:			
First name: Pamela	Fax:			
Email:	Address:			
Specimen signature:				