

CDM-MOC-FORM Form: ANNEX 2

Date of submission		13/10/2011
SECTION 1: PROJECT DETAILS		
1. Title of the CDM project activity	Olkaria II Geothermal Expansion Project	
2. Please state reference Number if available	3773	
SECTION 2: <u>ADDITION/CHANGE OF NAME</u> OF PROJECT PARTICIPANT		
<input checked="" type="checkbox"/> Add project participant <input type="checkbox"/> 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 <u>Statement of Agreement</u> of the current modalities of communication.		
Name of the entity: Daiwa Securities Capital Markets Co. Ltd.		
Party (country that authorised participation): Japan		
Contact details (primary authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Terao	Telephone:	
First name: Hiroki	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/>	
Last name: Nagao	Telephone:	
First name: Koichi	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:

Fujifilm Corporation

Party (country that authorised participation):

Japan

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Ohki

Telephone:

First name: Nobutaka

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Shibata

Telephone:

First name: Yoshinori

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:

Idemitsu Kosan Co., Ltd.

Party (country that authorised participation):

Japan

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Idemitsu

Telephone:

First name: Shoichi

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Inami

Telephone:

First name: Koji

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.

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Name of the entity:

JX Nippon Oil & Energy Corporation.

Party (country that authorised participation):

Japan

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Hiroshi

Telephone:

First name: Hagio

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Koji

Telephone:

First name: Tanaka

Fax:

Email:

Address:

Specimen signature:

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

Date:

Name:

Signature:

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Add project participant

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Name of the entity:

The Okinawa Electric Power Co., Incorporated

Party (country that authorised participation):

Japan

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Nakachi

Telephone:

First name: Hiroaki

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:

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Name of the entity:

EDP Energias de Portugal, S.A

Party (country that authorised participation):

Spain

Contact details (primary authorized signatory):

Mr. Ms.

Last name: LOBO FERREIRA

Telephone:

First name: HENRIQUE

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):

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Name of the entity:

ENDESA Generacion, SA.

Party (country that authorised participation):

Spain

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Corregidor

Telephone:

First name: David

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):

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Name:

Signature:

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Name of the entity:

GAS NATURAL SDG, S.A.

Party (country that authorised participation):

Spain

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Sanz Garcia

Telephone:

First name: Rosa Ma

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Mateos Bermejo

Telephone:

First name: Elena

Fax:

Email:

Address:

Specimen signature:

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

Date:

Name:

Signature:

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Name of the entity:

Hidroelectrica del Cantabrico, S.A

Party (country that authorised participation):

Spain

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Garcia Marinas

Telephone:

First name: Juan Carlos

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):

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Name of the entity:

Statkraft Carbon Invest AS

Party (country that authorised participation):

Norway

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Bolle

Telephone:

First name: Anne

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Viddal

Telephone:

First name: Mari Grooss

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.

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Name of the entity:

Statoil ASA

Party (country that authorised participation):

Norway

Contact details (primary authorized signatory):

Mr. Ms.

Last name: Egeland

Telephone:

First name: Thomas B

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: Gautesen

Telephone:

First name: Kristian L

Fax:

Email:

Address:

Specimen signature:

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

Date:

Name:

Signature:

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Name of the entity:

Schweizerische Rückversicherungsgesellschaft AG (Swiss RE)

Party (country that authorised participation):

Switzerland

Contact details (primary authorized signatory):

Mr. Ms.

Last name: ECKERT

Telephone:

First name: Vincent

Fax:

Email:

Address:

Specimen signature:

Contact details (alternate authorized signatory):

Mr. Ms.

Last name: SPIEGEL

Telephone:

First name: Andreas

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.