Form: ANNEX 2

Date of submission		01/08/2011
Section 1: Project Details		
1. Title of the CDM project activity	Ningxia Shapotou Hydropower Project of Yellow River	
2. Please state reference number if available	1284	
Section 4: Change of contact details (project participants or focal point entities)		
The following entity is an existing project participant/focation hereby requests the following changes to its contact details Project Participant		above CDM project and
Name of the entity: Carbon Asset Management Sweden AB		
Party (country that authorised participation): Sweden		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Holmgren	Telephone:	
First name: Christer	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr.□ Ms.⊠	
Last name: Nord	Telephone:	
First name: Teresa	Fax:	
Email:	Address:	
Specimen signature:		
Signature(s) of designated focal point for scope (b):	Da	ate:
Name:	Signature:	
Only one primary or alternate signatory per focal point entity is required.		

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:		
Project Participant	Focal Point	
Name of the entity: Carbon Asset Management Sweden AB		
Party (country that authorised participation): Switzerland		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Holmgren	Telephone:	
First name: Christer	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. Ms. Ms.	
Last name: Nord	Telephone:	
First name: Teresa	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.		

The following entity is an existing project participant/focal point entity in respect of the above CDM project and hereby requests the following changes to its contact details:		
Project Participant	□ Focal Point	
Name of the entity: Carbon Asset Management Sweden AB		
Party (country that authorised participation): Netherlands		
Contact details (primary authorized signatory):	Mr.⊠ Ms.□	
Last name: Holmgren	Telephone:	
First name: Christer	Fax:	
Email:	Address:	
Specimen signature:		
Contact details (alternate authorized signatory):	Mr. ☐ Ms. 🛛	
Last name: Nord	Telephone:	
First name: Teresa	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.		