## **CDM-MOC-FORM: ANNEX 2**

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

Date of submission:		3	0/04/2021
SECTION 1: CDM PROJECT/PROGRAMME OF ACTIVITIES DETAILS			
Title of the project / programme of activities:		Improved Cook Stoves for East Africa (ICSEA)	
Project / programme of activities reference number:		7014	
SECTION 2: ADDITION/CHANGE OF LEGAL NAME OF A PROJECT PARTICIPANT ENTITY/IES			
Name of entity: Evangelisches Werk für Diakonie und Entwicklung e.V.			
Address: Caroline-Michaelis-Str.1 10115 Berlin Germany			
Party (country authorizing participation): Germany			
End-date of participation:	■ N/A (participation	is not limited in time)  dd/mm/y	ууу
Contact details (primary authorized signatory):		Mr. ⊠ Ms.□	
Last name: Bosch		Telephone 1:	
First name: Jerg		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature: Date (dd/mm/yyyy):			
Contact details (alternate authorized signatory):		Mr. ☐ Ms. ☒	
Last name: Wunsch		Telephone 1:	
First name: Anja		Telephone 2 (optional):	
Email:		Fax (optional):	
Specimen signature:  Date (dd/mm/yyyy):			
Signature(s) of the focal point for Name of authorized signatory:	scope of authority (b)	Signature	Date: dd/mm/yyyy
(Add lines for signatories as necess	ary. Only one signatory p	er focal point is required.)	