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:	0.	3/01/2024	
SECTION 1: PROJECT/PROGRAMME DETAILS			
Title of the project/programme of activities:	Methane recovery and combustion generation from anaerobic animal systems under the Land Bank of th Carbon Finance Support Facility	manure management	
Project/programme of activities reference number:	5979		
SECTION 3: WITHDRAWAL OF PROJECT PARTICIPANTS ENTITY/IES			
☑ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: Kingdom of Spain - Ministry for the Ecological Transition and Digital Transformation	nd Demographic Challenge & Minis	stry of Economic Affairs	
Party (country authorizing participation): Spain			
Name of authorized signatory: Valvanera Ulargui Aparicio			
Signature:	Date (dd/mm/yyyy):		
☑ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: Norwegian Ministry of Climate and Environment			
Party (country authorizing participation): Norway			
Name of authorized signatory: Anne Smeby Evjen			
Signature:	Date (dd/mm/yyyy):		
✓ Voluntary withdrawal ☐ Administrative withdrawal			
The following entity is registered as a project participant in the above CDM project / programme of activities and hereby confirms its voluntary consent to be withdrawn.			
Name of entity: Swedish Energy Agency			
Party (country authorizing participation): Sweden			
Name of authorized signatory: Sigrid Persson			
Signature:	Date (dd/mm/yyyy):		

CDM-MOC-FORM

Signature(s) of the focal point for scope of authority (b) or the project participant requesting the withdrawal (*)			
Name of authorized signatory:	Signature	Date: dd/mm/yyyy	
(Add lines for signatories as necessary. Only one signatory per entity is required.)			
(*) In the case of programme of activities, this section shall be signed by the focal point(s) for scope (b)			