EARL	Y ACTION DESK REVI	EW FINDING	iS .			
ARB Staff	ARB Form Tracking Number:	Date Findings Received:		Date Findings Proce	essed:	ARB Staff
Use Only	Date Findings Reviewed:	Date More Infor	mation Requested:	Date Findings Appro	oved:	Use Only
PART	I. VERIFICATION BODY II	NFORMATION				
	tion Body Name: nmental Services, Inc.			Verification Body II H2-16-002	O Number:	
PART	II. EARLY ACTION PROJEC	CT INFORMATIO	ЭN			
Alder	ction Project Name: Stream Preserve		· · · · · · · · · · · · · · · · · · ·	EAOP Project ID#: CAR655	ARB Projec	
	f Party Requesting Desk Review: east Wilderness Trust					
	ng Period Start Date: cember 2006	· · · · ·	Reporting Period En 31 December 20			
Note: A	separate Early Action Desk Revi	ew Findings must l	pe provided for each	reporting period bein	g reviewed.	
Part I	II. ATTACHMENT					
$\square$	Report Detailing the Desk Re	view Findings				
Part I	V. DESK REVIEW FINDING	SS SUMMARY				
as Pr	ere the previously provided offse ssurance to support the issuance ogram?	of early action off	set credits by the Ea	rly Action Offset		Yes No
ca ar	ere the data checks conducted b alculated correctly and demonstropplicable quantitative materiality ethodology?	ate the early action	n offset project data	report meets the	- I 🛛	Yes No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable early action reporting period?				Yes No		
Part V. VERIFICATION BODY ATTESTATION AND SIGNATURE						
If the ve below.	erification body answered <u>"No″ t</u> If the verification body answere	<u>o any</u> of the three d d "Yes" to all three	questions in Part IV, questions, provide t	sign this form in Part he attestation in Part	V.A immedia V.B.	itely
Part V.A. LEAD VERIFIER SIGNATURE IF NOT CONCURRING						
SIGNAT	URE:		PRINTED NAME:			
TITLE: DATE:		DATE:				

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting

period.	•
ATTESTATION SIGNATURE:	PRINTED NAME:
	Jonathan Pomp
TITLE:	DATE:
ARB Lead Verifier, # H2-14-188	11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OF	FICER
I concur with the findings in this form and certing the Offset Verification Body on all matters related to the other section and the other section and the other section and the section and t	fy that I am duly authorized to represent and legally bind ed to this form.
ATTESTATION SIGNATURE:	PRINTED NAME:
and the second	Janice McMahon
TITLE:	DATE:
Sr. Vice President/Technical Director	11 July 2016
Forestry Carbon and GHG Services	

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EARL	Y ACTION DESK REVI	EW FINDING	iS			
ARB Staff	ARB Form Tracking Number:	Date Findings Re	sceived:	Date Findings Proce	ssed:	ARB Staff
Use Only	Date Findings Reviewed:	Date More Inform	mation Requested:	Date Findings Appro	oved:	Use Only
PART	I. VERIFICATION BODY I	NFORMATION				
	tion Body Name: nmental Services, Inc.			Verification Body ID H2-16-002	> Number:	
PART	II. EARLY ACTION PROJE	CT INFORMATIO	ON			
Alder §	ction Project Name: Stream Preserve			EAOP Project ID#: CAR655	ARB Proje CAFR01	
	f Party Requesting Desk Reviews east Wilderness Trust	·				
	ng Period Start Date: Nuary 2007		Reporting Period En 31 December 20			
	separate Early Action Desk Revi	ew Findings must b			g reviewed.	
Part II	II. ATTACHMENT					
	Report Detailing the Desk Re	view Findings			·	
Part I	V. DESK REVIEW FINDING	SSUMMARY				
as Pr	ere the previously provided offs ssurance to support the issuance ogram?	e of early action off	set credits by the Ea	arly Action Offset		] Yes ] No
2. W ca ap	ere the data checks conducted to alculated correctly and demonstroplicable quantitative materiality ethodology?	ate the early action	n offset project data	report meets the	gram L	Yes No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable early action reporting period?				Yes No		
20010-00-000 (CONCERNE)	. VERIFICATION BODY AT					
If the ve below.	erification body answered <u>"No″ t</u> If the verification body answere	<u>o any</u> of the three of d "Yes" to all three	questions in Part IV, auestions, provide i	sign this form in Part the attestation in Part	V.A immed V.B.	liately
	A. LEAD VERIFIER SIGNATURE	a an	week is an end of a first strend such as a group of the			
SIGNAT	URE:		PRINTED NAME:			
TITLE: DATE:			DATE:	•		

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period

period.	· · · · · · · · · · · · · · · · · · ·
ATTESTATION SIGNATURE:	PRINTED NAME: Jonathan Pomp
TITLE: ARB Lead Verifier, # H2-14-188	DATE: 11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify that I the Offset Verification Body on all matters related to thi	
ATTESTATION SIGNATURE:	PRINTED NAME: Janice McMahon
TITLE: Sr. Vice President/Technical Director Forestry, Carbon, and GHG Services	DATE: 11 July 2016

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EARL	Y ACTION DESK REVI	EW FINDING	îS			
ARB Staff	ARB Form Tracking Number:	Date Findings Re	eceived:	Date Findings Processed: Date Findings Approved:		ARB Staff
Use Only	Date Findings Reviewed:	Date More Infor	mation Requested:			Use Only
PART	I. VERIFICATION BODY I	NFORMATION				
	ation Body Name: onmental Services, Inc.			Verification Body II H2-16-002	) Number:	
PART	II. EARLY ACTION PROJE	CT INFORMATI	ON		CEF GRAM	
Alder	ction Project Name: Stream Preserve			EAOP Project ID#: CAR655	ARB Project CAFR010	
	of Party Requesting Desk Review east Wilderness Trust	:				
	ing Period Start Date: nuary 2008		Reporting Period E 31 December 20		····	
Note: A	separate Early Action Desk Revi	ew Findings must l	be provided for each	reporting period bein	g reviewed.	
Part I	II. ATTACHMENT					
$\boxtimes$	Report Detailing the Desk Re	view Findings				
Part I	V. DESK REVIEW FINDING	GS SUMMARY				
a	/ere the previously provided offs ssurance to support the issuance rogram?					Yes No
<ol> <li>Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification</li> <li>Yes methodology?</li> </ol>						
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable arrly action reporting period?			Yes No			
Part V	. VERIFICATION BODY AT	TESTATION AN	ID SIGNATURE			
	erification body answered <u>"No" (</u> If the verification body answere					tely
and the second	A. LEAD VERIFIER SIGNATURE		n en			
SIGNAT	TURE:		PRINTED NAME:			
TITLE:	E: DATE:		DATE:			

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period

period.	
ATTESTATION SIGNATURE:	PRINTED NAME:
	Jonathan Pomp
TITLE:	DATE:
ARB Lead Verifier, # H2-14-188	11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify that I	am duly authorized to represent and legally bind
the Offset Verification Body on all matters related to th	is form.
ATTESTATION SIGNATURE:	PRINTED NAME:
	Janice McMahon
	DATE.
	DATE:
TITLE: Sr. Vice President/Technical Director Forestry, Carbon, and GHG Services	DATE: 11 July 2016

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ISD/CCPEB #25 (Rev 07/14)

EARLY ACTION DESK REVIEW FINDINGS						
ARB Staff	ARB Form Tracking Number:	Date Findings Re	eceived:	Date Findings Proce	essed:	ARB Staff
Use Only	Date Findings Reviewed:	Date More Infor	mation Requested:	Date Findings Appre	oved:	Use Only
PART	I. VERIFICATION BODY I	NFORMATION				
	ation Body Name: onmental Services, Inc.	······		Verification Body ID H2-16-002	Number:	
PART	<b>II. EARLY ACTION PROJE</b>	CT INFORMATI	ON .			
Alder	ction Project Name: Stream Preserve	· ·		EAOP Project ID#: CAR655	ARB Projec CAFR010	
	of Party Requesting Desk Review east Wilderness Trust	1				
	ing Period Start Date: nuary 2009		Reporting Period En 31 December 20			
Note: /	A separate Early Action Desk Revi	ew Findings must l	be provided for each	reporting period bein	g reviewed.	
Part 1	II. ATTACHMENT					
$\boxtimes$	Report Detailing the Desk Re	view Findings				
Part 1	V. DESK REVIEW FINDING	GS SUMMARY				
a P	Vere the previously provided offs ssurance to support the issuance rogram?	of early action off	set credits by the Ea	rly Action Offset		Yes No
c a	Vere the data checks conducted la alculated correctly and demonstr pplicable quantitative materiality nethodology?	ate the early action	n offset project data	report meets the		Yes No
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable early action reporting period?				Yes No		
Part \	Part V. VERIFICATION BODY ATTESTATION AND SIGNATURE					
If the v below.	verification body answered <u>"No″ t</u> If the verification body answere	<u>o any</u> of the three d "Yes″ to all three	questions in Part IV, questions, provide t	sign this form in Part he attestation in Part	V.A immedia V.B.	ntely
Part V.A. LEAD VERIFIER SIGNATURE IF NOT CONCURRING						
SIGNA	TURE:	· · · ·	PRINTED NAME:	·		
TITLE:		DATE:				

Part V.B. LEAD VERIFIER ATTESTATION AND SIGNATURE	Part V.B. LEAD VERIFIER ATTESTATION AND SIGNATURE IF CONCURRING			
I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period.				
ATTESTATION SIGNATURE:	PRINTED NAME: Jonathan Pomp			
TITLE: ARB Lead Verifier, # H2-14-188	DATE: 11 July 2016			
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER				
I concur with the findings in this form and certify that I the Offset Verification Body on all matters related to thi				
ATTESTATION SIGNATURE:	PRINTED NAME: Janice McMahon			
TITLE: Sr. Vice President/Technical Director Forestry, Carbon, and GHG Services	<b>DATE:</b> 11 July 2016			

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EAR	LY ACTION DESK REVI	EW FINDING	iS			
ARB Staff		Date Findings Received:		Date Findings Processed:		ARB Staff
Use Only	Date Findings Reviewed:	Date More Infor	mation Requested:	Date Findings Appro	oved:	Use Only
PAR	I. VERIFICATION BODY I	NFORMATION			APRIL 17	24043 215397
	Verification Body Name:Verification Body ID NumbEnvironmental Services, Inc.H2-16-002					
PAR	TII. EARLY ACTION PROJE	CT INFORMATI	ON			
Alde	Action Project Name: r Stream Preserve			EAOP Project ID#: CAR655	ARB Project	
	of Party Requesting Desk Review neast Wilderness Trust	:				
	ting Period Start Date: Anuary 2010		Reporting Period En 31 December 20		• •	
	A separate Early Action Desk Revi	ew Findings must l	be provided for each	reporting period bein	g reviewed.	
Part	III. ATTACHMENT					
X	Report Detailing the Desk Re	view Findings				
Part	IV. DESK REVIEW FINDING	GS SUMMARY				
	Were the previously provided offs assurance to support the issuance Program?					Yes No
2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the					Yes No	
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and					Yes No	
Part	V. VERIFICATION BODY AT	TESTATION AN	ID SIGNATURE			國際統計
If the below	verification body answered <u>"No"</u> . If the verification body answere	<u>to anv</u> of the three d "Yes″ to all three	questions in Part IV, e questions, provide t	sign this form in Part the attestation in Part	: V.A immedia V.B.	ntely
19. March 19. March	A. LEAD VERIFIER SIGNATURE	يسي بالماد ومراجعة فالمتحا فالمعاد المشتقية المرزي المالي				
SIGN	ATURE:		PRINTED NAME:			
TITLE: DATE:			DATE:	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·					

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period

ATTESTATION SIGNATURE:	PRINTED NAME: Jonathan Pomp
TITLE: ARB Lead Verifier, # H2-14-188	<b>DATE:</b> 11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify that I the Offset Verification Body on all matters related to thi	
ATTESTATION SIGNATURE:	PRINTED NAME: Janice McMahon
TITLE: Sr. Vice President/Technical Director Forestry, Carbon, and GHG Services	DATE: 11 July 2016

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Page 2 of 4

EAR	LY ACTION DESK REVI	EW FINDING	S			
ARB Staff	ARB Form Tracking Number:	Date Findings Re	eceived:	Date Findings Processed:		ARB Staff
		nation Requested:	Date Findings Appr	oved:	Use Only	
PART	I. VERIFICATION BODY I	NFORMATION				
	ation Body Name: onmental Services, Inc.			Verification Body II H2-16-002	D Number:	
PART	II. EARLY ACTION PROJE	CT INFORMATI	0N			
Alder	ction Project Name: Stream Preserve		•	EAOP Project ID#: CAR655	ARB Project	
	of Party Requesting Desk Review east Wilderness Trust	:				
Report	ing Period Start Date: nuary 2011		Reporting Period E 31 December 20		a,a,a,	
Note: /	A separate Early Action Desk Revi	ew Findings must l	pe provided for each	reporting period bein	g reviewed.	. San Barri
Part I	II. ATTACHMENT					
$\boxtimes$	Report Detailing the Desk Re	view Findings				
Part 1	V. DESK REVIEW FINDING	GS SUMMARY				
a a	Vere the previously provided offs ssurance to support the issuance program?					Yes No
o a r	2. Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification Internation Interna					
3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable Interval Interva						
Part \	/. VERIFICATION BODY AT	TESTATION AN	ID SIGNATURE			6
	verification body answered <u>"No" (</u> If the verification body answere					ately
	A. LEAD VERIFIER SIGNATURE					
SIGNA	SIGNATURE: PRINTED NAME:					
TITLE: DATE:						
		······				

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting period.

Schoul	
ATTESTATION SIGNATURE:	PRINTED NAME: Jonathan Pomp
TITLE:	DATE:
ARB Lead Verifier, # H2-14-188	11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify that I the Offset Verification Body on all matters related to thi	
ATTESTATION SIGNATURE:	PRINTED NAME: Janice McMahon
TITLE: Sr. Vice President/Technical Director Forestry, Carbon, and GHG Services	<b>дате:</b> 11 July 2016

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ISD/CCPEB #25 (Rev 07/14)

		EW FINDING		the state of the second states	Sector Sector	
ARB Staff	ARB Form Tracking Number:	Date Findings Received:		Date Findings Processed: Date Findings Approved:		ARB Staff Use Only
		Date More Inforr	nation Requested:			
PART I.	VERIFICATION BODY II	NFORMATION				
	Verification Body Name:Verification Body ID NumbEnvironmental Services, Inc.H2-16-002					
PART I	I. EARLY ACTION PROJE	CT INFORMATI	0N			
Alder S	ion Project Name: tream Preserve		EAOP Project ID#: CAR655	ARB Project	Project ID#: FR0105	
	Party Requesting Desk Review: ast Wilderness Trust					
Reporting Period Start Date:			Reporting Period End Date: 31 December 2012			
Note: A s	eparate Early Action Desk Revi	ew Findings must l	pe provided for each	reporting period bein	g reviewed.	
Part III	I. ATTACHMENT					
	eport Detailing the Desk Re	view Findings				
Part IV	. DESK REVIEW FINDING	IS SUMMARY				
ass	1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset In No					
calo app						Yes No
ver the	3. Does this verification body conclude with reasonable assurance that it concurs that a positive verification statement should have been issued based on the Early Action Verification Report and the Offset Verification Statement submitted to the Early Action Offset Program for the applicable <b>No</b>					
Part V.	VERIFICATION BODY AT	TESTATION AN				
If the ver	rification body answered <u>"No″ t</u> f the verification body answere	<u>o any</u> of the three of "Yes" to all three	questions in Part IV,	sign this form in Part	t V.A immedi V.B.	ately
	LEAD VERIFIER SIGNATURE	i destrictual destruction administration	NAMES AND A DESCRIPTION OF A DESCRIPTION OF A DESCRIPTION OF A DESCRIPTION			
SIGNATU	RE:	· .	PRINTED NAME:			
TITLE:		DATE:				

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting

period.	·
ATTESTATION SIGNATURE:	PRINTED NAME:
	Jonathan Pomp
TITLE:	DATE:
ARB Lead Verifier, # H2-14-188	11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify that I the Offset Verification Body on all matters related to th	
ATTESTATION SIGNATURE:	PRINTED NAME:
	Janice McMahon
TITLE:	DATE:
Sr. Vice President/Technical Director	11 July 2016

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EARL	Y ACTION DESK REVI	EW FINDING	S			
ARB Staff	지수는 것에 가지 나는 것 같아요. 그는 것 같은 것 같아요. 이들은 것은 것 같아? 전문에 가지지 않는 것 않았는 것 같아요. 그는 것 같아? 나는 것을 물었다.		ceived	Date Findings Processed:		ARB Staff
Use Only	Date Findings Reviewed:	Date More Inforr	nation Requested:	Date Findings Appre	oved:	Use Only
PART	I. VERIFICATION BODY I	NFORMATION				
Verification Body Name:Verification Body ID IEnvironmental Services, Inc.H2-16-002					) Number:	
PART	II. EARLY ACTION PROJE	CT INFORMATIO	ÐN			
Alder	ction Project Name: Stream Preserve		EAOP Project ID#: CAR655	ARB Proje CAFR01	<b>B Project ID#:</b> FR0105	
	of Party Requesting Desk Review east Wilderness Trust	1				
Reporti	ng Period Start Date: Nuary 2013	Reporting Period End Date: 31 December 2013				
Note: A	separate Early Action Desk Revi	ew Findings must b	e provided for each	reporting period bein	g reviewed.	a sata da sata Sata da sata da
Part I	II. ATTACHMENT					
$\boxtimes$	Report Detailing the Desk Re	view Findings			•	
Part I	V. DESK REVIEW FINDING	GS SUMMARY				
a	1. Were the previously provided offset verification services sufficient to render a reasonable assurance to support the issuance of early action offset credits by the Early Action Offset Interview					
<ol> <li>Were the data checks conducted by the offset verification body for the Early Action Offset Program calculated correctly and demonstrate the early action offset project data report meets the applicable quantitative materiality threshold as set forth in the early action quantification</li> <li>No methodology?</li> </ol>						
v tł						Yes No
Part V	. VERIFICATION BODY AT	TESTATION AN	DSIGNATURE			
If the v below.	erification body answered <u>"No″ t</u> If the verification body answere	<u>to any</u> of the three of d "Yes" to all three	questions in Part IV, questions, provide t	sign this form in Part the attestation in Part	V.A immed	iately
An All Markets	A. LEAD VERIFIER SIGNATURE	ale bear strends with the Statistic strends	The second s			
SIGNAT	URE:		PRINTED NAME:			
TITLE:			DATE:			

I certify under penalty of perjury under the laws of the State of California that I have conducted a desk review in accordance with the requirements of section 95990(f)(3) and concur with the issuance of a positive verification statement based on the Early Action Verification Report and Offset Verification Statement that was submitted to the Early Action Offset Program for the applicable early action reporting

period.	
ATTESTATION SIGNATURE:	PRINTED NAME:
	Jonathan Pomp
TITLE:	DATE:
ARB Lead Verifier, # H2-14-188	11 July 2016
Part V.C. SIGNATURE BY VERIFICATION BODY OFFICER	
I concur with the findings in this form and certify tha the Offset Verification Body on all matters related to	
ATTESTATION SIGNATURE:	PRINTED NAME: Janice McMahon
TITLE:	DATE:
Sr. Vice President/Technical Director	
SI. VICE FIESIGEIN TECHINICAL DIRECTOR	11 July 2016

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