| EARLY ACTION DESK REVIEW FINDINGS | | | | | | | | | |
|--|--|---|---|------------------------|---|---|---|---------|--|
| ARB Staff Use Only | ARB Form Tracking Number: Date Findings Reviewed: | Date Findings Received: Date More Information Requested: | | | Date Findings Processed: Date Findings Approved: | | ARI Stai Use Onl | ff e | |
| PART'I VERIFICATION BODY INFORMATION | | | | | | | | | |
| Verifica SES, In | tion Body Name: C. | | | | Verificat H2-12-0 | i <mark>on Body ID</mark> Ni 11 | umber: | | |
| PART | PART II. EARLY ACTION PROJECT INFORMATION | | | | | | | | |
| Early Ac EOS-JA | ction Project Name: A-09-01 | | | EAOP Pr CAR604 | oject ID#: | ARB Project : Unknown | ID# (if known |); | |
| | f Party Requesting Desk Review: imate, Inc. | | and a supply in a plant in the second sec | | | | | | |
| Offset F March 2 | Project Data Report (Reporting Pe 2, 2010 | - | March 18, 20 | 10 | , | orting Period) | | | |
| Note: A Period) | separate Early Action Desk Revie for which an Early Action Verific | ew Findings must l ation Report and O | e provided for Ifset Verificat | r each Of ion State | fset Projec ment is be | t Data Report (ing reviewed. | Reporting | | |
| Part I | 11. DESK REVIEW FINDING | as | | | | | | | |
| ់ ខទ | ere the previously provided offse ssurance to support the issuance ogram? | | | | | | ⊠ Yes □ No | | |
| ca ar m | ere the data checks conducted b alculated correctly and demonstra oplicable quantitative materiality ethodology? | ate the early action threshold as set fo | n offset projec orth in the ear | t data re ly action | port meets quantifical | the tion | 🛛 Yes 🗌 No | | |
| ve th | oes this verification body concluc erification statement should have ne Offset Verification Statement s ffset Project Data Report year? | been issued base | d on the Early | Action V | erification | Report and | Xes | | |
| in Part | /erification body answered <u>ng</u> IV. Please provide a report t Ire hare in Part III. | <u>to any</u> of the th to ARB that expla | ree question ains the reas | s above ons for | , please d your findi | lo <u>not</u> sign th ngs and prov | e attestatio ide your | n | |
| SIGNAT | | | PRINTED N | IAME: | Mannann | an a | | | |
| TITLE: | | | DATE: | Hidisin | ht <u>eine</u> | | | | |
| Part I | VALVERIFICATION BODY AT | TTESTATION A | ND SIGNAT | URE | | | | | |
| | verification body answered are below. | <u>ves to all</u> of t | he question | s in Pa | rt III ab | ove, p lea se | provide yo | ur | |
| 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 Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form. | | | | | | | | | |
| SIGNAT | | 2. – – – Tärrörnar a _{nd} – oossoo o _{n o} erritteitataan Ade | PRINTED Rob Doi | | | 4-7 Marillandi Huli Halla - 4-24 (* 1999) 1997 - Yani Bandari Marilandi Hallandi Hallandi Hallandi Hallandi Hallandi Hallandi Hallandi Hallandi Hallandi | 27 fod holone i su ser ge over """ 12 kars obba | | |
| TITLE: Directo | or, Carbon Verification Progra | ms | DATE: October | 21, 201 | 13 | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | | |

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| EARLY ACTION DESK REVIEW FINDINGS | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| ARB Form Tracking Number: Date Findings Received: ARB Staff Use Date Findings Reviewed: Date More Information Requeste Only | Date Findings Processed: ARB Staff ed: Date Findings Approved: Use Only | | | | | | | |
| PART I. VERIFICATION BODY INFORMATION | | | | | | | | |
| Verification Body Name: SES, Inc. Verification Body ID Number: H2-12-011 | | | | | | | | |
| PART II. EARLY ACTION PROJECT INFORMATION | | | | | | | | |
| | AOP Project ID#: ARS Project ID# (if known): CAR604 Unknown | | | | | | | |
| Name of Party Requesting Dask Review: EOS Climate, Inc. | | | | | | | | |
| | Data Report (Reporting Period) End Date: | | | | | | | |
| Note: A separate Early Action Desk Review Findings must be provided for a Period) for which an Early Action Verification Report and Offset Verificatio | each Offset Project Data Report (Reporting n Statement is being reviewed. | | | | | | | |
| Part III: DESK REVIEW FINDINGS | | | | | | | | |
| 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 Program? | | | | | | | | |
| Were the data checks conducted by the offset verification body for t calculated correctly and demonstrate the early action offset project applicable quantitative materiality threshold as set forth in the early methodology? | data report meets the Yes vaction quantification INO | | | | | | | |
| 3. Does this verification body conclude with reasonable assurance that verification statement should have been issued based on the Early A the Offset Verification Statement submitted to the Early Action Offset Offset Project Data Report year? | Action Verification Report and Yes et Program for the applicable No | | | | | | | |
| If the verification body answered <u>no to any</u> of the three questions in Part IV. Please provide a report to ARB that explains the reason signature here in Part III. | | | | | | | | |
| SIGNATURE: PRINTED NA | ME; | | | | | | | |
| TITLE: DATE: | | | | | | | | |
| Part IV. VERIFICATION BODY ATTESTATION AND SIGNATU | IRE | | | | | | | |
| If the verification body answered <u>yes to all</u> of the questions signature below. | in Part III above, please provide your | | | | | | | |
| 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 Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form. | | | | | | | | |
| SIGNATURE: PRINTED Rob Dobs | 1 | | | | | | | |
| TITLE: Director, Carbon Verification Programs October 2 | 23, 2013 | | | | | | | |

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| | EARLY ACTION DESKREWIEW EINDINGSE | | | | | | | | |
|---|--|--|--|---|-----------|------------------------|-------------------------|---------------|--------------|
| ARB Staff | ARB Form Tracki | A set of the set of th | Date Findings Re | | | | js Piocessed) | S | ARB Staff |
| Use Only | Date Findings Re | vlewedi | Date More Information Requested: | | | Date Finding | | Use Only | |
| PARE | n Marala(4/5a) | onexodyan | Inorimate (o) ki | | | | | | |
| | tion Body Name: obal Services | | | | | Verificati H2-12-00 | on Body ID N 07 | umber; | |
| PART | HI. FARLY ACT | | in all the second s |)N | | | | | |
| Early Ac EOS-JA | tion Project Name -09-01 | | | | EAOP Pro | oject ID#: | ARB Project CAOD0016 | ID# (if know | wn): |
| | f Party Requesting mate Inc. | Desk Review: | | | | | | . | |
| | roject Data Repor | t (Reporting Pe | eriod) Start Date: | Offset Project 5/25/10 | t Data Re | eport (Repo | rting Period) | End Date: | |
| Note: A | separate Early Act for which an Early | | | e provided fo | | | | (Reporting | |
| Partei | ♦==DESK(REV) | ewerinding | is | | | | | | |
| as | | | | tes sufficient to render a reasonable et credits by the Early Action Offset No | | | | | |
| 2. W ca ap | ere the data check loulated correctly oplicable quantitat ethodology? | and demonstra | te the early action | n offset projec | t data re | port meets | the | Yes | |
| ve th | pes this verification prification stateme e Offset Verification fset Project Data 1 | nt should have on Statement s | been issued based | d on the Ea <mark>r</mark> ly | Action V | erification I | Report and | 🛛 Yes 🗌 No | - |
| in Part | verification body IV. Please prov Ire here in Part 1 | ide a report t | | | | | | | tion |
| SIGNAT | | | | PRINTED N | IAME: | | | | |
| TITLE: | | | | DATE: | | | | | |
| 2211.01 | | (0)/=:(0)0)/ <i>3</i> / | eetaan to maa | NDES GINAT | URE | | | | |
| | verification boo ire below. | ly answered | <u>yes to all</u> of t | he question | s in Par | rt III abo | ove, please | provide y | your |
| 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 Offset Project Data Report year. | | | | | | | | | |
| SIGNAT | URE: | | | PRINTED Francis | | | | | |
| TITLE: Verifica | ation Forester | | | DATE: Septem | ber 9, 20 |)13 | | | |
| | | | Email the inform | ation in this f | orm to | | | | |

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| Part V. EXECUTIVE OFFICER ATTESTATION AND S | SIGNATURE |
|---|--|
| In my capacity as Executive Vice President of SCS Glob have reviewed the findings generated by the lead ver lead verifier's findings and I certify that I am duly a Services, in its capacity as the Offset Verification Body, | ifier. On the basis of that review, I concur with the authorized to represent and legally bind SCS Global |
| SIGNATURE: | PRINTED NAME: Robert J. Hrubes |
| | |
| TITLE: Executive Vice President | DATE: September 9, 2013 |

| EAR | VACED (D) NEDES (CR | i Miaveanid I.C | S | P | | | | |
|---|---|---|---------------------------------------|---|-----------------------|-------------------------------|---------------------|--|
| ARB Staff Use | ARB Form Tracking Numb | er: Date Findings Re Date More Inform | | ted: | | gs Processed: gs Approved: | ARB Staff Use | |
| Only | | | | | | | Only | |
| PARI | I FENINE (FAVE (CINEBO) | 9) # 1/1201:10//1010101 | | | | | | |
| | ation Body Name: Iobal Services | · · · · | · · · · · · · · · · · · · · · · · · · | | Verificat H2-12-00 | ion Body ID N)7 | umber: | |
| PAR | | | AC | | | | | |
| | ction Project Name: A-09-01 | | | EAOP P CAR604 | roject ID#: 4 | ARB Project CAOD0016 | ID# (if known): | |
| | of Party Requesting Desk Re limate Inc. | eview: | , | | | La , | | |
| | Project Data Report (Repor | ting Period) Start Date: | Offset Projec 1/20/11 | t Data R | Report (Repo | orting Period) | End Date: | |
| Note: A | separate Early Action Desi for which an Early Action | | e provided for | | | | (Reporting | |
| Parter | III. DESK REVIEWERN | DINGS | | | | | | |
| a | | | | s sufficient to render a reasonable t credits by the Early Action Offset | | | | |
| 2. V c a | /ere the data checks condu alculated correctly and dem pplicable quantitative mate nethodology? | nonstrate the early action | n offset projec | t data r | eport meets | the | ⊠ Yes □ No | |
| v tl | oes this verification body c erification statement should ne Offset Verification Stated Iffset Project Data Report y | d have been issued base ment submitted to the Ea | d on the Early | Action | Verification | Report and | ⊠ Yes □ No | |
| If the in Part | verification body answel IV. Please provide a re ure here in Part III. | red <u>no to any</u> of the th | | | | | | |
| SIGNA | | <u> </u> | PRINTED N | IAME: | | | | |
| TITLE: | | | DATE: | | | | | |
| | | DNAAbel-Abrie (GNAA | NDESICINAL | URE | | | | |
| | verification body answ ure below. | vered <u>yes to all</u> of t | he question | s in Pa | art III abo | ove, please | provide your | |
| 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 Offset Project Data Report year. | | | | | | | | |
| SIGNA | | PRINTED NAME: Rori Cowan | | | | | | |
| TITLE: Progra | m Associate | | DATE: Septemi | ber 9, 2 | 2013 | | | |
| | · | Fmail the inform | 24 . t. 28.5 . 2 | | | 7 | | |

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| Part V. EXECUTIVE OFFICER ATTESTATION AND SIGNATURE | | | | | | | |
|---|---|--|--|--|--|--|--|
| In my capacity as Executive Vice President of SCS Glob have reviewed the findings generated by the lead ver lead verifier's findings and I certify that I am duly a Services, in its capacity as the Offset Verification Body, | ifier. On the basis of that review, I concur with the authorized to represent and legally bind SCS Global | | | | | | |
| SIGNATURE: | PRINTED NAME: | | | | | | |
| | Robert J. Hrubes | | | | | | |
| | | | | | | | |
| TITLE: Executive Vice President | DATE: September 9, 2013 | | | | | | |

| EARLY ACTION DESK REVIEW FINDINGS | | | | | | | | | | |
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| ARB Staff Use | ARB Form Tracking Number: Date Findings Reviewed: | Date Findings Rec Date More Inform | | | Date Findings Processed: Date Findings Approved: | | 3 F | | | |
| Only | | | | | 3 | Only | | | | |
| PART | PART I. VERIFICATION BODY INFORMATION | | | | | | | | | |
| Verifica SES, In | tion Body Name: C. | | ······ | Verificat H2-12-01 | ion Body ID Nu 11 | nber: | | | | |
| PART | II. EARLY ACTION PROJEC | T INFORMATIO | N | | | | | | | |
| EOS-JA | | | EAOP CAR6 | Project ID#: 04 | ARB Project II CAOD0016 |)# (if known) | : | | | |
| | f Party Requesting Desk Review: imate, inc. | | | | | | | | | |
| Offset P Septem | Project Data Report (Reporting Pe ber 24, 2010 | | Offset Project Data September 30, 201 | 0 | - · | | | | | |
| | separate Early Action Desk Revie for which an Early Action Verifica | | | | | leporting | | | | |
| Part II | I. DESK REVIEW FINDING | ŜŚ | | | | | | | | |
| as | ere the previously provided offse surance to support the issuance ogram? | | | | | | | | | |
| ca ap m | ere the data checks conducted b lculated correctly and demonstra plicable quantitative materiality ethodology? | ate the early action threshold as set for | offset project data th in the early acti | report meets on quantificat | the ion | ⊠ Yes □ No | | | | |
| ve th Of | pes this verification body conclud erification statement should have e Offset Verification Statement s fset Project Data Report year? | been issued based ubmitted to the Ear | on the Early Action ly Action Offset Pro | n Verification ogram for the | Report and applicable | X Yes | | | | |
| in Part | verification body answered <u>no</u> IV. Please provide a report t ure here in Part III. | | | | | |) | | | |
| SIGNAT | | | PRINTED NAME: | | ar Manusan yan an da Antonia Anganya ya mataka ka ka ka a a da | | _ | | | |
| TITLE: | · · · · · · · · · · · · · · · · · · · | | DATE: | | | · · | | | | |
| Part IV | /. VERIFICATION BODY A | TTESTATION AN | D SIGNATURE | | | | | | | |
| If the | verification body answered are below. | | | Part III abo | ove, please p | rovide you | r | | | |
| 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 Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form. | | | | | | | | | | |
| STORES | | | PRINTED NAME Frank Bryant | : | | | | | | |
| TITLE: Preside | ent | | DATE: May 15, 2014 | | | | · | | | |
| | | | | | | | | | | |

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| EARLY ACTION DESK REVIEW FINDINGS | | | | | | | | |
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| ARB Staff Use | ARB Form Tracking Number: Date Findings Reviewed: | Date Findings Reco Date More Informa | | | Date Findings Processed: Date Findings Approved: | | St | RB taff Ise |
| Only | | | | | | 30 | | nly |
| PART | I. VERIFICATION BODY IN | FORMATION | | | | | | |
| Verifica SES, In | tion Body Name: C. | | | | Verificat H2-12-01 | ion Body ID Nu 11 | mber: | |
| PART | II. EARLY ACTION PROJEC | T INFORMATIO | N | | | | | |
| Early Ac EOS-JA | ction Project Name: A-09-01 | | | eaop Pr Car604 | oject ID#: | ARB Project I CAOD0016 | D# (if know | vn): |
| Name of EOS Cli | f Party Requesting Desk Review: imate, Inc. | | | | | L | | |
| Offset P Novemb | Project Data Report (Reporting Pe Der 4, 2010 | 1 | November 11 | , 2010 | | orting Period) E | | |
| | separate Early Action Desk Revie for which an Early Action Verific | | | | | | Reporting | |
| Part II | II. DESK REVIEW FINDING | SS | | | | | | |
| as | | | ces sufficient to render a reasonable Let credits by the Early Action Offset No | | | | | |
| ca ap m | ere the data checks conducted b loculated correctly and demonstra oplicable quantitative materiality ethodology? | ate the early action of threshold as set for | offset project th in the earl | : data re y action | port meets quantificat | the ion | 🛛 Yes 🗌 No | |
| ve th | bes this verification body conclud erification statement should have e Offset Verification Statement s ffset Project Data Report year? | been issued based | on the Early | Action V | erification I | Report and | 🛛 Yes 🗌 No | |
| If the v in Part | verification body answered <u>no</u> IV. Please provide a report t ure here in Part III. | | | | | | | ion _ |
| SIGNAT | | | PRINTED N | AME; | | | <u></u> | |
| TITLE: | | | DATE: | | | | | |
| | | | | | - | | | 5 - 14 A - 14 |
| in the second | V. VERIFICATION BODY A | | | | | | | |
| signatu | verification body answered ire below. | | | | | | | |
| 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 Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form. | | | | | | | | |
| | | | PRINTED Frank Br | | - , | | | |
| TITLE: Preside | ent | | DATE: May 16, | 2014 | · · · · · | | | |
| | | | | | | | | |

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| EARLY ACTION DESK REVIEW FINDINGS | | | | | | | | | |
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| ARB Staff Use | ARB Form Tracking Number: Date Findings Reviewed: | Date Findings Received: Date More Information Requ | | sted: | Date Findings Processed: Date Findings Approved: | | | ARB Staff Use | |
| Only PART | I. VERIFICATION BODY IN | FORMATION | | | | | | Only | |
| | tion Body Name: | | | | Verificat H2-12-01 | ion Body ID Nu | mber: | | |
| 1. J | II. EARLY ACTION PROJEC | | DN | | | | | | |
| Early Ac EOS-JA | c tion Project Name: \-09-01 | ······································ | • | EAOP P CAR60 | Project ID#: 4 | ARB Project I CAOD0016 | D# (if k | nown): | |
| | f Party Requesting Desk Review: imate, Inc. | aan an | | | | · | | | |
| Offset P | Project Data Report (Reporting Pe 26, 2011 | eriod) Start Date: | Offset Proje January 28, | | Report (Repo | orting Period) E | nd Dat | e: | |
| Note: A | separate Early Action Desk Revie for which an Early Action Verifica | w Findings must t ation Report and O | e provided fo | or each C | Offset Project tement is bei | : Data Report (ng reviewed. | Reporti | ng | |
| Part II | II. DESK REVIEW FINDING | :S | | | | | | | |
| as | ere the previously provided offse surance to support the issuance ogram? | t verification servi of early action off | ces sufficient set credits by | fficient to render a reasonable X Ye dits by the Early Action Offset X Offset | | | | | |
| 2. W ca ap | ere the data checks conducted b loculated correctly and demonstra oplicable quantitative materiality ethodology? | te the early action | n offset proje | ct data r | eport meets | the | X N | 'es lo | |
| ve th | pes this verification body conclud erification statement should have e Offset Verification Statement s ffset Project Data Report year? | been issued base | d on the Earl | y Action | Verification I | Report and | _ | 'es Io | |
| If the v in Part | <i>verification body answered <u>no</u> IV. Please provide a report t Ire here in Part III.</i> | <u>to any</u> of the th o ARB that expla | ree question ins the reas | ns abov sons for | e, please do your findin | o <u>not</u> sign the Igs and provi | e attes de you | tation r | |
| SIGNAT | | an ta'uuu dalimaa aa | PRINTED | NAME: | | | | | |
| TITLE: | | | DATE: | | · | | | | |
| Dart T | V. VERIFICATION BODY A | TESTATION A | | TURE | | | ing the state | ennes a const | |
| If the | verification body answered ire below. | | | an an the start | art III abo | ove, please p | provide | your | |
| 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 Offset Project Data Report year. I further certify that I am duly authorized to represent and legally bind the Offset Verification Body on all matters related to this form. | | | | | | | | | |
| SI/ | | | Frank E | D NAME: Bryant | , | | | | |
| TIPLE: Preside | ent | | DATE: May 16 | , 2014 | | | | | |
| | | | | | | | | | |

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