

OZONE DEPLETING SUBSTANCES OFFSET PROJECT DATA REPORT				
OPR Staff Use Only	Date Report Received:	OPR Tracking Number:	Date Report Reviewed:	OPR Staff Use Only
PART I. ENTITY SUBMITTING REPORT				
Is this report being submitted by the Offset Project Operator (OPO) or by the Authorized Project Designee (APD)?				<input checked="" type="checkbox"/> OPO <input type="checkbox"/> APD
Note: The person completing this report should be an OPO/APD employee.				
Report Version Number: 3		Date Report Completed: 11/05/2019		Date Report Submitted: 11/14/2019
Person Completing Report: Sandra Hoffman		Phone Number: 419-867-8990		Email Address: sandy.hoffman@agas.com
PART II. OFFSET PROJECT INFORMATION				
Offset Project Name: A-Gas 2019-7		OPR Project ID#: ACR475		ARB Project ID# (if known): CAOD5475
Reporting Period Start Date: 05/17/2019		Reporting Period End Date: 08/08/2019		Offset Project Commencement Date: 05/17/2019
Protocol Version for Project Listing: <input type="checkbox"/> October 20, 2011 <input checked="" type="checkbox"/> November 14, 2014		Protocol Version for Project Reporting: <input type="checkbox"/> October 20, 2011 <input checked="" type="checkbox"/> November 14, 2014		
PART III. OPO/APD INFORMATION				
Part III.A OPO				
OPO Name: Reclamation Technologies, Inc., dba A-Gas				OPO's CITSS ID#: CA 1497
Mailing Address: 1100 Haskins Road		City: Bowling Green		State: OH Zip: 43402
Street Address (if different):		City:		State: Zip:
Contact Person: Sandra Hoffman		Phone Number: 419-867-8990		Email Address: sandy.hoffman@agas.com
Part III.B APD (if applicable) <input checked="" type="checkbox"/> No APD/Not Applicable				
APD Name:				APD's CITSS ID#: CA _ _ _ _
Mailing Address:		City:		State: Zip:
Street Address (if different):		City:		State: Zip:
Contact Person:		Phone Number:		Email Address:
PART IV. REPORTED GHG EMISSIONS AND REDUCTIONS				
Project Baseline Emissions (MTCO₂e): 96,834		Project Emissions (MTCO₂e): 5,817		Total GHG Reductions (MTCO₂e): 91,017

PART V. DESTRUCTION INFORMATION									
Destruction Facility Name: Reclamation Technologies, Inc. dba A-Gas									
Street Address: 1100 Haskins Road					City: Bowling Green		State: OH	Zip: 43402	
Destruction Event #1	Start Date: 05/17/2019				End Date: 06/04/2019				
Destruction Event #2	Start Date: 07/17/2019				End Date: 07/23/2019				
Destruction Event #3	Start Date: 07/23/2019				End Date: 07/28/2019				
Destruction Event #4	Start Date: 08/01/2019				End Date: 08/08/2019				
PART VI. ODS DESTROYED									
Event	Mass ODS (lb)	CFC-11 (mass%)	CFC-12 (mass%)	CFC-13 (mass%)	CFC-113 (mass%)	CFC-114 (mass%)	CFC-115 (mass%)	HCFC-22 (mass%)	HCFC-141b (mass%)
1	23840	72.96	5.33	NA	14.60	1.45	0.15	NA	NA
2	5975	0.11	20.02	NA	0.03	39.96	13.70	NA	NA
3	10030	91.03	1.19	NA	4.17	0.17	NA	NA	NA
4	5230	2.35	1.92	NA	95.28	0.02	NA	NA	NA
PART VII. QUESTIONS									
1. How many parties are in the chain of custody for this project? (Please list all parties in the chain of custody, including their role and contact information in the Appendix at the end of this report.)								Number: 54	
2. Has the offset project met all local, state, and federal regulatory requirements during the Reporting Period, except for any period being excluded pursuant to section 95973(b)(1)? <i>Indicate any excluded time periods below:</i>								<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3. Is all the information in the offset project listing still accurate? <i>If "yes," skip to Part VIII.</i>								<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
a. Does Part II above report an updated Offset Project Commencement Date, Reporting Period Start Date, and/or Reporting Period End Date?								<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. Does Part III above report updated OPO/APD Information?								<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c. Does Part V above report a Destruction Facility different than the one named in the offset project listing?								<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
d. Are there any updates to report for Technical Consultants or Other Parties with a Material Interest? (If "yes," provide those updates on separate attached paper.)								<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
e. Is there an updated list of all Points of Origin by U.S. state for ODS sourced for this project? (If "yes," provide the updated list immediately below.) GA, FL, NY, NC, MO, NJ, IL, CO, MI, PA, UT, D.C., MD, CT, OR, OH, TX, SC, CA								<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
f. Does Part VI above provide an updated list of eligible ODS species destroyed in this project?								<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
g. Does any other information in the project listing need to be updated? (If "yes," provide those updates on separate attached paper.)								<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Part VIII. ATTESTATION AND OPO SIGNATURE

SRH Initial	I certify under penalty of perjury under the laws of the State of California the GHG reductions and/or GHG removal enhancements for			
	Project Name:		Reporting Period Start Date:	Reporting Period End Date:
	A-Gas 2019-7		from 05/17/2019	to 08/08/2019
	are measured in accordance with the Compliance Offset Protocol			
	Check the appropriate Compliance Offset Protocol: <input type="checkbox"/> Ozone Depleting Substances Projects, October 20, 2011, <input checked="" type="checkbox"/> Ozone Depleting Substances Projects, November 14, 2014, and all information required to be submitted to ARB is true, accurate, and complete.			
In signing this form, I certify under penalty of perjury of the laws of California that the information contained in this form is true, accurate, and complete. I further certify that I am an Account Representative of the Offset Project Operator (OPO).				
SIGNATURE: <i>Sandra Hoffman</i>			PRINTED NAME: Sandra Hoffman	
TITLE: Manager of Environmental Services			DATE: 11/14/2019	
APPENDIX. PARTIES IN CHAIN OF CUSTODY				

1	Name of Party	Voya Financial			
	Party's Role	Origin			
	Mailing Address	5780 Powers Ferry Rd.	Atlanta	GA	30327
	Contact	Dana Strdebaker	(877) 234-5667	DANA@REFRIGERANT-SUPPLY.COM	
2	Name of Party	SBD Permitting + Zoning Services			
	Party's Role	Origin			
	Mailing Address	1000 Hollywood Blvd.	Hollywood	FL	33019
	Contact	Blady Urena	(305) 887-3411	blady@semortor.com	
3	Name of Party	Eastman Kodak Company			
	Party's Role	Origin			
	Mailing Address	343 State St.	Rochester	NY	14650
	Contact	Sam DiFrancesca	(585) 781-0820	sam.difrancesca@kodak.com	
4	Name of Party	UF Health- The Oaks			
	Party's Role	Origin			
	Mailing Address	6201 W. Newberry Rd.	Gainesville	FL	32605
	Contact	Trina	(352) 376-2366	TRINA@COMFORTTEMP.COM	
5	Name of Party	IBM Corporation- Research Triangle Park			
	Party's Role	Origin			
	Mailing Address	3039 E. Cornwallis Rd.	Research Triangle Park	NC	27709
	Contact	Derrick Spivey	(919) 337-7136	derrick.spivey@whiting-turner.com	

6	Name of Party	Sunrise Business Center			
	Party's Role	Origin			
	Mailing Address	3500 Sunrise Hwy.	East Islip	NY	11730
	Contact	Phil Thompson	(509) 344-8827	philt@criticalpower.com	
7	Name of Party	Patrick's Heating & Cooling Supply			
	Party's Role	Origin			
	Mailing Address	1625 W 31st St	Kansas City	MO	64108
	Contact	Craig Connel	816-268-1900	crager413@gmail.com	
8	Name of Party	Veolia Environmental Services			
	Party's Role	Origin			
	Mailing Address	1 Eden Ln.	Flanders	NJ	07836
	Contact	Kip Davis	(937) 859-2265	kip.davis@veolia.com	
9	Name of Party	Oakbrook Terrace Tower			
	Party's Role	Origin			
	Mailing Address	1 Tower Ln.	Oakbrook Terrace	IL	60181
	Contact	Gary Elfering	(312) 533-0468	GARY.ELFERING@CARRIER.UTC.COM	
10	Name of Party	Madwire			
	Party's Role	Origin			
	Mailing Address	2001 Danfield Ct.	Fort Collins	CO	80524
	Contact	Cabel Rohloff	(970) 490-1458	Crohloff@aircomfortcolorado.com	
11	Name of Party	MI Department of Community Health			
	Party's Role	Origin			
	Mailing Address	3350 N. Martin Luther King Jr. Blvd.	Lansing	MI	48906
	Contact	Steve Hocking	(248) 207-0842	steve.hocking@professionalthermal.com	
12	Name of Party	University of Pittsburgh Applied Research Center			
	Party's Role	Origin			
	Mailing Address	3170 William Pitt Way	Pittsburgh	PA	15238
	Contact	Greg Ploskina	(412) 287-5277	GREGPLOSKINA@COMCAST.COM	
13	Name of Party	Northside Hospital			
	Party's Role	Origin			
	Mailing Address	1000 Johnson Ferry Road	Atlanta	GA	30342
	Contact	John Butler	770-280-7631	jbutler@bkimechanical.com	

14	Name of Party	Eleven Thirty - Apartments			
	Party's Role	Origin			
	Mailing Address	1130 S Michigan Ave	Chicago	IL	60605
	Contact	Paul Rhynard	773-686-1325	paul.rhynard@raprec.com	
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15	Name of Party	UOP Research Honeywell			
	Party's Role	Origin			
	Mailing Address	200 E Algonquin Rd	Des Plaines	IL	60016
	Contact	Paul Rhynard	773-686-1325	paul.rhynard@raprec.com	
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16	Name of Party	Rapid Recovery - Chicago			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	744 N Michigan Ave.	Villa Park	IL	60181
	Contact	Paul Rhynard	773-686-1325	paul.rhynard@raprec.com	
-					
17	Name of Party	Florida State University			
	Party's Role	Origin			
	Mailing Address	969 Learning Way	Tallahassee	FL	32304
	Contact	David Gillis	904-300-3576	dgillis@raprec.com	
-					
18	Name of Party	Rapid Recovery - Jacksonville			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	11246 Distribution Ave., E	Jacksonville	FL	32256
	Contact	David Gillis	904-300-3576	dgillis@raprec.com	
-					
19	Name of Party	Alton Memorial Hospital			
	Party's Role	Origin			
	Mailing Address	1 Memorial Dr	Alton	IL	62002
	Contact	Noah Lander	314-721-9444	nlender@raprec.com	
-					
20	Name of Party	Rapid Recovery - St Louis			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	6185 Olive Blvd	St. Louis	MO	63130
	Contact	Noah Lander	314-721-9444	nlender@raprec.com	
-					
21	Name of Party	Valley Fair Mall			
	Party's Role	Origin			
	Mailing Address	3601 S 2700 W	West Valley City	UT	84119
	Contact	Jayson Whittle	801-364-6600	jayson.whittle@raprec.com	

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22	Name of Party	Rapid Recovery - Salt Lake City			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	663 S Sandy Pkwy	Sandy	UT	84070
	Contact	Jayson Whittle	801-364-6600	jayson.whittle@raprec.com	
-					
23	Name of Party	WellStar Cobb Hospital Emergency Room			
	Party's Role	Origin			
	Mailing Address	3950 Austell Rd	Austell	GA	30106
	Contact	Adrian Johnson	404-654-3867	ajohnson@raprec.com	
-					
24	Name of Party	Rapid Recovery - Atlanta			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	4787 Clark Howell Hwy, Suite 8	College Park	GA	30349
	Contact	Adrian Johnson	404-654-3867	ajohnson@raprec.com	
-					
25	Name of Party	Quebec House Apartments			
	Party's Role	Origin			
	Mailing Address	2801 Quebec St.	Washington	DC	20008
	Contact	Chris Petza	443-223-6523	cpetza@raprec.com	
-					
26	Name of Party	Northrop Grumman			
	Party's Role	Origin			
	Mailing Address	7301 Sykesville Rd	Sykesville	MD	21784
	Contact	Chris Petza	443-223-6523	cpetza@raprec.com	
-					
27	Name of Party	Rapid Recovery - Baltimore			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	1514 Jabez Rd. Ste 105	Millersville	MD	21108
	Contact	Chris Petza	443-223-6523	cpetza@raprec.com	
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28	Name of Party	Capitol District Energy Center			
	Party's Role	Origin			
	Mailing Address	490 Capitol Ave.	Hartford	CT	06106
	Contact	Daniel Roberts	(860) 293-1990		
-					
29	Name of Party	Peterson Refrigeration Services			
	Party's Role	Origin			
	Mailing Address	22 Field St.	Kane	PA	16735
	Contact	Tim Peterson	(814) 598-4877	peteresonrefrigeration@verizon.net	

30	Name of Party	PCC Structurals			
	Party's Role	Origin			
	Mailing Address	5001 SE Johnson Creek Blvd	Milwaukie	OR	97222
	Contact	Laramie Dorris	503-455-8910	ldorris@raprec.com	
31	Name of Party	Rapid Recovery - Portland			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	410 Beaver Creek Road, #509	Oregon City	OR	97045
	Contact	Laramie Dorris	503-455-8910	ldorris@raprec.com	
32	Name of Party	Cargill Salt			
	Party's Role	Origin			
	Mailing Address	2400 Ships Channel	Cleveland	OH	44113
	Contact	Phil Friedel	440-243-3535	pfriedel@brewer-garrett.com	
33	Name of Party	General Electric Transportation			
	Party's Role	Origin			
	Mailing Address	2901 E Lake Rd	Erie	PA	16511
	Contact	Scott Lindsey	814-725-4561	Scott@lindseyrefrigeration.com	
34	Name of Party	Honeywell Aerospace			
	Party's Role	Origin			
	Mailing Address	400 S Buncombe Rd.	Greer	SC	29650
	Contact	Jonathan Sanders	706-210-8555	jonathan.sanders@raprec.com	
35	Name of Party	Rapid Recovery - Augusta			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	706 Horizon South Pkwy	Grovetown	GA	30813
	Contact	Jonathan Sanders	706-210-8555	jonathan.sanders@raprec.com	
36	Name of Party	Iredell Memorial Hospital			
	Party's Role	Origin			
	Mailing Address	557 Brookdale Dr	Statesville	NC	28677
	Contact	Mickey Beatty	704-839-2234	mbeatty@raprec.com	
37	Name of Party	Rapid Recovery - Charlotte			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	205 Normand Street	Monroe	NC	28110
	Contact	Mickey Beatty	704-839-2234	mbeatty@raprec.com	

38	Name of Party	Chicago Police Department			
	Party's Role	Origin			
	Mailing Address	727 E 111th St	Chicago	IL	60628
	Contact	Paul Rhynard	773-686-1325	p.rhynard@raprec.com	
39	Name of Party	Trane Supply			
	Party's Role	Origin			
	Mailing Address	10300 Springfield Pike	Cincinnati	OH	45215
	Contact	Mark Buckley	781-325-6551	mark.buckley@raprec.com	
40	Name of Party	Rapid Recover - Cincinnati			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	4457 Bethany Rd. Bldg F-200	Mason	OH	45040
	Contact	Mark Buckley	781-325-6551	mark.buckley@raprec.com	
41	Name of Party	Wells Fargo Bank			
	Party's Role	Origin			
	Mailing Address	6301 Gaston Ave	Dallas	TX	75214
	Contact	Brandon Foley	817-539-6800	brandon.foley@raprec.com	
42	Name of Party	Rapid Recovery - Dallas			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	3217 E. Pioneer Parkway	Arlington	TX	76010
	Contact	Brandon Foley	817-539-6800	brandon.foley@raprec.com	
43	Name of Party	San Jose Public Works Department			
	Party's Role	Origin			
	Mailing Address	801 N 1st St	San Jose	CA	95110
	Contact	Oscar Ramirez	925-787-0804	oscar.ramirez@raprec.com	
44	Name of Party	Rapid Recovery - NCA			
	Party's Role	Reclaimer & Intermediate storage facility			
	Mailing Address	3953-B Industrial Way	Concord	CA	94520
	Contact	Oscar Ramirez	925-787-0804	oscar.ramirez@raprec.com	
45	Name of Party	Reclamation Technologies, Inc.			
	Party's Role	Aggregator and origin			
	Mailing Address	1100 Haskins Road	Bowling Green	OH	43402

	Contact	Sandy Hoffman	419-867-8990	sandy.hoffman@agas.com	
		-			
46	Name of Party	Rapid Recovery - Peoria			
	Party's Role	Reclaimer, Transporter, Aggregator, and Intermediate storage facility			
	Mailing Address	8932 West Cactus Road	Peoria	AZ	85381
	Contact	Robbie Eddy	(877) 372-7732	reddy@raprec.com	
		-			
47	Name of Party	Diversified Pure Chem, LLC aka A-Gas Texas			
	Party's Role	Aggregator & Intermediate storage facility			
	Mailing Address	11050 US-287	Rhome	TX	76078
	Contact	Kristen Doan	(817) 636-2089	kristen.doan@agas.com	
		-			
48	Name of Party	Coolgas, Inc.			
	Party's Role	Aggregator & origin			
	Mailing Address	30045 FM2978	Magnolia	TX	77354
	Contact	Kristen Doan	817-636-2089	kristen.doan@agas.com	
		-			
49	Name of Party	R&L Carriers			
	Party's Role	Transporter			
	Mailing Address	PO BOX 271	Wilmington	OH	45177
	Contact	Vicky Lewis	800-543-5589	cservice@rlcarriers.com	
		-			
50	Name of Party	XPO Logistics Freight			
	Party's Role	Transporter			
	Mailing Address	PO BOX 6046	Portland	OR	97228
	Contact	Nancy Keene	844-742-5976	DriverSafety@xpo.com	
		-			
51	Name of Party	Old Dominion Freight Line Inc			
	Party's Role	Transporter			
	Mailing Address	500 Old Dominion Way	Thomasville	NC	27360
	Contact	Samuel C. Faucette	800-235-5569	customer.service@odfl.com	
		-			
52	Name of Party	FedEx			
	Party's Role	Transporter			
	Mailing Address	PO BOX 840 DC 2260	Harrison	AR	72602
	Contact	Sandra Richesin	800-463-3339	srichesin@fedex.com	
		-			
53	Name of Party	Schneider Logistics			
	Party's Role	Transporter			

	Mailing Address	PO BOX 2545	Green Bay	WI	54306
	Contact	Vicki Figlinski	800-558-6767	v_figlinski@schneider.com	
54	Name of Party	YRC			
	Party's Role	Transporter			
	Mailing Address	10990 Roe Ave	Overland Park	KS	66211
	Contact	Bill Schwar	913-344-3049	bill.schwar@yrcfreight.com	

Background for Ozone Depleting Substances Offset Project Data Report

Section 95976(d) of the Cap-and-Trade Regulation specifies reporting requirements for offset projects participating in the Compliance Offset Program. Offset Project Operators (OPO) or Authorized Project Designees (APD) are required to submit an Offset Project Data Report (OPDR) within four months of the end of each (annual) reporting period. This form is designed to help OPOs and APDs provide the information required for offset projects using both the Compliance Offset Protocol Ozone Depleting Substances Projects, October 20, 2011 and the Compliance Offset Protocol Ozone Depleting Substances Projects, November 14, 2014. This information is submitted to the approved Offset Project Registry that is listing the offset project and should also be provided to the ARB-accredited verification body that will be verifying the Offset Project Data Report.

Where to Submit Information Contained in This Form

Please complete the information on the form using your computer. Then either add an electronic signature to the form or print, sign, and scan the form. The completed and signed information and all supporting documentation should be submitted to the appropriate Offset Project Registry.

This form is also available from the ARB website at:

<http://www.arb.ca.gov/cc/capandtrade/offsets/forms/forms.htm>

Detailed Instructions for Ozone Depleting Substances Offset Project Data Report

This form is protected with restricted editing to facilitate completing the form. If the applicant wishes to unprotect the form, the password is "form".

Part I. Entity Submitting Report:

- Indicate whether the Offset Project Operator (OPO) or Authorized Project Designee (APD) is submitting the Offset Project Data Report (OPDR).
- Regulatory amendment in section 95976(d)(10) requires that each version of the OPDR specifies the version number and the date submitted. Moreover, the protocol requires that each OPDR include the date of completion. Please include the OPDR version number, the date of OPDR completion, and the date of OPDR submission to the Offset Project Registry.
- The person submitting the information should indicate the date the form is completed.
- List the name, phone, and email address of the person submitting the information. This person should be an employee of the OPO or APD. The person submitting the information need not be the contact person listed for the OPO or APD in Part III and also need not be the OPO's CITSS account representative signing the OPDR in Part VIII.

Part II. Offset Project Information:

- Provide the name for the offset project and its Offset Project Registry ID number, as provided by the Offset Project Registry listing the project. Also include the ARB project ID number, if known.
- Indicate the Offset Project Commencement Date and the start and end date of the Reporting Period covered in this Offset Project Data Report.
- Indicate the version of the compliance offset protocol under which the project is listed. Also indicate the version under which the project is reporting. A project may report under the version which it is listed or may transition to a subsequent version. A project may transition only at the time of

submitting the initial Offset Project Data Report to the Offset Project Registry (see section 95973(a)(2)(D)).

Part III. OPO/APD Information:

- Enter contact information for the Offset Project Operator (OPO) and Authorized Project Designee (APD) of the offset project. Every project will have an OPO. If a project does not have an APD, please mark the box indicating the project does not have an APD and leave the remaining fields blank.
- For both the OPO and, if applicable, the APD, enter the entity's name, its CITSS ID number, its mailing address, its street address (if different), and the name, phone number, and e-mail address of a contact person for the entity. The CITSS ID is six characters in length, with two letters followed by four numbers (e.g., "CA1234"). **DO NOT PROVIDE THE OPO's or APD's CONFIDENTIAL CITSS ACCOUNT NUMBER**, which begins with the CITSS ID number followed by a hyphen and more numbers.

Part VI. Reported GHG Emissions and Reductions:

- For the Reporting Period covered in this Offset Project Data Report, enter the offset project's baseline emissions, its project emissions, and its total GHG reductions. Emissions should be reported in metric tons of CO₂e.

Part V. Destruction Information:

- Provide the name of the destruction facility and its street address.
- Enter the start and end dates of the ODS destruction events.
- Expand the section or attach additional sheets if the project includes more than five destruction events.

Part VI. ODS Destroyed:

- This part summarizes all the eligible ODS destroyed for each destruction event.
- Enter the total mass of all ODS material destroyed in pounds. This weight includes eligible ODS and other ineligible material, including high boiling residue (HBR), moisture, and ineligible ODS. This should match the weight on the certificate of destruction.
- Enter the mass fraction of each eligible ODS destroyed. For refrigerant projects, HCFC-22 and HCFC-141b are ineligible and should be marked "n/a" or left blank.

Part VII. Questions:

- Provide the number of parties included in the project's chain of custody. Provide the required information for each entity in the chain of custody in the Offset Project Data Report's Appendix.
- This part also includes two questions required in the compliance offset protocol.
- First, the OPO or APD must respond whether the offset project has met all local, state, and federal regulatory requirements during the Reporting Period. Local regulatory requirements include those by any air quality, water quality, zoning, or other agency with jurisdiction over any aspect of the offset project.
- Regulatory amendments in section 95973(b)(1), effective October 1, 2017, allow an OPO or APD to effectively exclude a time period during which a project is out of regulatory compliance and receive ARB or registry offset credits for the remainder of the reporting period. If an OPO or APD is excluding some dates, the OPO or APD should provide the excluded dates.
- Second, the OPO or APD must answer whether the information submitted in the offset project's listing remains accurate. If the listing information remains accurate, skip to Part VIII. For information which is no longer accurate, answer questions 3a through 3g to indicate which portions of the listing information is being updated in this report.

Part VIII. Attestation and OPO Signature:

- Section 95975(d)(5) of the Cap-and-Trade Regulation requires an attestation for Offset Project Data Reports. The attestation should be initialed by the person signing the form.
- The attestation requires the applicant to provide some information to complete the statement. The project name should match the name entered in Part II. The dates covering the project Reporting Period should also be provided. Please note that the dates provided in the attestation should be the same dates provided in Part II. Also indicate the protocol version under which this project is reporting. This may differ from the version under which the protocol is listed.
- Amendments adopted in April 2014 to section 95976(d)(6) require the attestation "be provided to an Offset Project Registry with the Offset Project Data Report if the offset project is listed with an Offset Project Registry."

- The individual signing the document must be registered in CITSS as the OPO's Primary Account Representative or Alternate Account Representative. The individual signing the document may be an APD employee and/or representative; but to sign the document, the individual must be an Account Representative on the OPO's CITSS account.
- Please provide the individual's signature, printed name, corporate title, and date signed.

Appendix. Parties in Chain of Custody:

- Provide the name of each entity included in the chain of custody documentation.
- For each entity, briefly describe their role (e.g. "reclaimer" or "transport"). For each entity, provide their mailing address.
- Also provide the name of a contact person at each entity, along with that person's phone number and email address. Typically the contact person should be an entity employee or representative and should be familiar with the entity's role in offset project activities.
- Use as many pages of the Appendix as necessary. You may expand the section or attach additional sheets for additional entities in the chain of custody.
- When submitting the completed Offset Project Data Report, blank pages in the Appendix and the two Instruction pages need not be submitted.

PART VII. QUESTIONS

g. Does any other information in the project listing need to be updated?
(If "yes," provide those updates on separate attached paper.)

☒ **Yes**
☐ **No**

A-Gas 2019-7 has an updated crediting period of 05/17/2019-05/16/2029. This is different from the original A-Gas 2019-7 Listing Form that stated the crediting period was 04/22/2019-04/21/2029.