



**FORM
FOR NOMINATION OF A
STOCKHOLM CONVENTION OFFICIAL CONTACT POINT**

PARTY/OBSERVER (name of the country):	
NOMINATION OF OFFICIAL CONTACT POINT (OCP)	
Institution/Department	
Address	
Name of contact person (if any)	
Position of contact person	
Telephone	
Telefax	
E-mail address	
THIS NOMINATION OF OCP HAS BEEN SUBMITTED BY:	
Institution/Department	
Address	
Name of person in charge (if any)	
Position of person in charge	
Telephone	
Telefax	
E-mail address	
Date, signature and official seal:	

PLEASE RETURN COMPLETED FORM TO:
Secretariat of the Stockholm Convention
11-13, Chemin des Anémones
CH – 1219 Châtelaine, Geneva, Switzerland
Fax: (+41 22) 917 80 98, e-mail: ssc@pops.int