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APPENDIX 2

INCUMBENCY CERTIFICATE FORMAT

The undersigned, who is an officer, of the		
(Name of Sponsor or Owner Corporation,	as annronriato	, hereby
(Name of Sponsor of Owner Corporation,	, as appropriate	,
certifies that the following listing of	of Officers and	Directors
constitutes <u>all</u> duly qualified and sit	ting Officers a	nd Directors
of the		
(Name of Sponsor or Owner Corr	poration, as app	ropriate)
as of(Date)		
(Date)		
	Beginning	Length of
Name/Title	Date of Term	Term
		•

(Use additional sheets if necessary)

(Signature and title of certifying official)