APPENDIX 2

INCUMBENCY CERTIFICATE FORMAT

The undersigned, who is an officer, of the		
(Name of Sponsor or Owner Corporation	n ag appropriate	
(Name of Sponsor of Owner Corporation	i, as appropriace	,
certifies that the following listing	of Officers and	Directors
constitutes all duly qualified and si	itting Officers a	nd Directors
of the		
(Name of Sponsor or Owner Corp	poration, as appr	opriate)
as of		
(Date)		
	Beginning	Length of
Name/Title	Date of Term	Term
(Use additional sheets if necessary)		
(Signature and title of certifyi	ing official)	

Page 1 6/91