

1 F L O R I D A)
2 COUNTY OF LEON)

CERTIFICATE OF OATH

3 I, the undersigned authority, certify
4 that Thomas C. DeWard personally appeared before
5 me at 35539 Schookraft Road, Livonia MI 48150 and was
6 duly sworn by me to tell the truth.

7 WITNESS my hand and official seal in the
8 city of Livonia, County of Wayne,
9 State of Michigan, this
10 (DAYMO) 17th Day of November, 1997.

11
12 Linda S. Bennett
Notary Public
13 State of Michigan

LINDA S. BENNETT
Notary Public
MICHIGAN

14 Personally know OR produced identification _____.
15 Type of identification produced _____
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CERTIFICATE OF DEPONENT

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This is to certify that I, THOMAS De WARD, have read the foregoing transcription of my testimony, Page 1 through 117, given on November 17, 1997 in Docket Number 970410-EI, and find the same to be true and correct, with the exceptions, and/or corrections, if any, as shown on the errata sheet attached hereto.



THOMAS De WARD

Sworn to and subscribed before me this

25th day of November, 1997
Patricia A. Church

NOTARY PUBLIC
State of Florida

My Commission Expires:



ERRATA SHEET

DOCKET NUMBER 970410-EI
THOMAS De WARD
NOVEMBER 17, 1997

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line 18

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Page 96
line 45

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Page 85
line 20

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