This Power of Attorney shall not be affected by any physical disability 55 or mental incompetence of the principal which renders the principal incapable of managing his or her own estate.

IN WITNESS WHEREOF, I have he reunto set my hand and seal this 16 day of MARCH (SEAL)

SIGNED, SEALED, PUBLISHED AND DECLARED by the Grantor as and for his or her Power of Attorney, in the presence of us, who, at the Grantor's request and in the Grantor's presence, and in the presence of each other, have hereunto subscribed our names as witnesses this 16 day of MARCH

1982

STATE OF SOUTH CAROLINA

PROBATE

COUNTY OF GREENVILLE

PERSONALLY appeared the undersigned witness and made oath that (s)he saw the within named grantor, sign, seal and as the grantor's act and deed, deliver the within Power of Attorney and that (s)he, with the other witness subscribed above witnessed the execution thereof.

SWORN to before me this Lon

Notary Public For South Carolina

My Commission Expires: 2-21-90

MAR 1 8 1982 at 1:48 P.M.

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