ability or mental incompetence of the principal which renders the principal incapable of managing her own estate. It is my intention that the authority conferred herein shall be exercisable notwithstanding my physical disability or mental incompetence.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this

day of July, 1980.

SIGNED, SEALED, PUBLISHED and DECLARED by ANNIE D. WELBORN, as and for the granting of her Power of Attorney in the presence of us, who, in the presence of said principal, ANNIE D. WELBORN, and at her request, and in the presence of each other, have hereunto set our names as attesting witnesses:

Shaf B. Coulina County of GREENVILLE

PROBATE

PERSONALLY appeared before me the undersigned witness and made oath that (s)he saw the within named ANNIE D. WELBORN, sign, seal and as her act and deed deliver the within written Power of Attorney, and that (s)he with the other witness subscribed above witnessed the execution thereof.

SWORN TO before me this 3nd

day of July , 1980.

Sworn To before me this 3nd 

Sworn To before me this 3nd 

Achiefa & Credita 

Notary Public for South Carolina 
My Commission Expires: 5/3/89

RECORDED JUL 3 1980 at 4:36 P.M. 380

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The state which which