

household expenses, including my household employees, doctors, nurses, hospitalization and medical expense, hereby giving and granting to my said attorney full power and authority to do and perform all and every act and thing whatsoever necessary to be done in connection with the handling of my affairs as fully to all intents and purposes as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney may do pursuant to this power.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this the 21<sup>st</sup> day of November 1968

WITNESS:

Jane S. Cothran

Dale K. Clark

Sara Hodge

STATE OF SOUTH CAROLINA  
COUNTY OF GREENVILLE

PERSONALLY appeared before me Dale K. Clark and made oath that she saw the within named Jane S. Cothran sign and seal and as her act and deed deliver the within Power of Attorney and that deponent with Sara Hodge witnessed the execution thereof.

SWORN to and subscribed before me this 27th day of November, 1968.

Dale K. Clark

John D. Arceaux  
Notary Public for South Carolina  
My Commission expires: 1-1-1970



Power of Attorney Recorded February 3, 1971 At 4:22 P.M. # 18013