

of interest of whatever nature and however arising shall not in any manner limit any of the powers herein conferred upon my Attorney and he may perform any act which he is authorized to perform under this Power of Attorney, notwithstanding any such conflict of interest. I do hereby ratify and confirm all things so done by my said Attorney, within the scope of the authority herein given, as fully and to the same extent as if by me personally done and performed.

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

All acts done by the Attorney-in-Fact pursuant to the power during any period of disability or mental incompetence shall have the same effect and inure to the benefit of and bind the principal's heirs, devisees, legatees, and personal representative as if the principal were mentally competent and not disabled. The Attorney-in-Fact shall have a fiduciary relationship with the principal and shall be accountable and responsible as a fiduciary.

IN WITNESS WHEREOF, I have hereto set my hand and seal this 30th day of JANUARY, 1981.

IN THE PRESENCE OF:

*N. A. [Signature]*  
*[Signature]*  
*[Signature]*

*[Signature]* (SEAL)  
DOROTHY MAY CURTIN

The foregoing General Durable Power of Attorney consisting of seven pages, this included, was this 30th day of JANUARY, 1981, signed, sealed, published and declared

*[Signature]*

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