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or such life sustaining devices as shall be specified by any of my attorneys in fact named herein,

NOW, THEREFORE, THIS SPECIAL POWER OF ATTORNEY:

1. Empowerment of Attorney

Attorney is authorized as follows:

(a) In Attorney's sole discretion, to discontinue all, some, or any medication being administered to me and all, some; or any life sustaining devices being operated for my benefit, provided in the opinion of two or more physicians licensed to practice in South Carolina, based upon ordinary standards of medical practice, given in writing to Attorney:

(i) I have undergone an irreversible cessation of total spontaneous brain function, or

(ii) I have lost consciousness for a period of six months and my condition is terminal, irreversible, or there is no reasonable medical expectation of recovery.

(b) In Attorney's sole discretion, to petition any court of competent jurisdiction for a mandatory injunction requiring compliance by hospital staff, doctors, nurses or any other medical personnel with the actions taken by Attorney authorized under the special power of attorney.

(c) In Attorney's sole discretion, prior to taking any of the actions authorized hereunder, to seek on my behalf and at my expense a declaratory judgment from any court of competent jurisdiction interpreting the validity of any or all acts authorized by this special power of attorney, but such declaratory judgment shall not be necessary in order for Attorney to perform any act authorized hereunder.

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