

shall not be required to see to the proper authority of my attorney in fact nor shall any third party be required to see to the proper application of any proceeds under this Power of Attorney. The word attorney as used herein shall include both the singular and the plural as the facts or circumstances may indicate.

10. This power of attorney shall not be affected by physical disability or mental incompetence of the principal, Sallie Q. Bost, which renders the principal incapable of managing her own estate. It is the intent of the principal to create a durable power of attorney conferring upon her attorney in fact the power to act on behalf of the principal notwithstanding later disability or mental incompetence of the principal, pursuant to the authority of Section 32-13-10 of the 1976 Code of Laws of South Carolina, as amended.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this the 6 day of Jan, 1983.

Sallie Q. Bost
Sallie Q. Bost

IN THE PRESENCE OF:

L. Lora Sue
Maria B. Sullivan
Harold W. Cella

STATE OF SOUTH CAROLINA)
)
COUNTY OF GREENVILLE)

PROBATE

PERSONALLY appeared before me Harold W. Cella and made oath that (s)he saw the within named Sallie Q. Bost sign, seal and as her act and deed, deliver the within written General Power of Attorney, and that (s)he with L. Lora Sue and Maria B. Sullivan witnessed the execution thereof. Said witnesses acknowledge that they saw both the principal and each witness execute the within document.

Harold W. Cella

SWORN to before me this 7 day of January, 1983.

Harold W. Cella (SEAL)
Notary Public for South Carolina
My Commission Expires: _____

RECORDED JAN 7 1983
at 3:06 P.M.

1983

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