

(6) To be my lawful proxy and to vote any stocks and security I may own or hereafter acquire and to exercise all rights, privileges and options of said stocks and securities.

(7) To invest and reinvest from time to time any funds which I may have, in my attorney's absolute discretion.

(8) To prepare and file such tax returns as may be required by the governments of the State of South Carolina and the United States of America and to make claims for refunds thereto.

(9) To have access to such safety deposit box as may be released in my name.

(10) To manage and control my property and to execute any and all instruments necessary or expedient for that purpose as I might do, if personally present.

(11) To give consent for any medical procedures and to consult with my physician about my health care, or to execute any other documents related to my health care necessary and expedient for that purpose as I might do, if personally present.

And I, the said JANIE H. MASON, do hereby ratify and confirm all acts of my attorney, and do declare that all acts and deeds performed under this instrument shall have the same full force and effect as if performed and signed by me in person. This instrument shall be effective until revoked in writing or until it shall cease by operation of law.

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

IN WITNESS WHEREOF, I, JANIE H. MASON, have

Page 2
J H M
McH. PGM
JHC