

(c) I do hereby ratify and confirm and covenant to ratify and confirm all acts done and caused to be done by my said Attorney-in-Fact, including anything which may be done between the revocation of these presents by death or in any manner, and notice of such revocation reaching said Attorney-in-Fact.

(d) I do hereby covenant and agree that my Attorney-in-Fact shall have no liability for any acts or deeds done or executed by my Attorney-in-Fact hereunder except for willful misconduct done in bad faith.

(e) If the authority contained herein shall be revoked or terminated by operation of law without notice, I hereby agree for myself, my executors, administrators, heirs and assigns, in consideration of my Attorney-in-Fact's willingness to act pursuant to this Power of Attorney, to save and hold my Attorney-in-Fact harmless from any loss suffered or any liability incurred by my Attorney-in-Fact in so acting after such revocation or termination without notice.

(f) I direct that this Power of Attorney shall continue in effect until revoked by me in writing or terminated by law.

(g) The terms and conditions hereof shall insure to the benefit of and become binding upon the undersigned parties, their heirs and assigns, executors and administrators.

(h) All words, used herein in the singular shall include the plural, and the masculine gender shall include the feminine.

(i) No cancellation hereof, by operation of law otherwise, shall be effective as to any person relying upon this Power of Attorney unless such person shall have received actual notice in writing of its cancellation.

**SURVIVAL OF PHYSICAL DISABILITY OF MENTAL INCOMPETENCE**

This Power of Attorney shall not be affected by physical disability or mental incompetence of the principal which renders the principal incapable of managing his own estate. It is the intent of the undersigned that the authority conferred upon the above named Attorney-in-Fact shall be exercisable notwithstanding my physical disability or mental incompetence in accordance with an Act to provide that Power of Attorney shall not be terminated by the disability or mental incompetence of the principal whenever the document creating the Power of Attorney so provides and establishes certain safeguards, enacted by the General Assembly of the State of South Carolina in January 31, 1978.

IN WITNESS WHEREOF, we have hereunto set our hands and seals to this Durable Power of Attorney this 31 day of Nov 1988.

Mittie B. Waddell  
Mittie B. Waddell

SIGNED, SEALED, PUBLISHED AND DECLARED by the party signed above as and for a Durable Power of Attorney, in the presence of us, who, at the request of the person above, and in his/her presence, and in the presence of each other, have hereunto set our hands as attesting witnesses.

Thelma Neild  
Harless Hardin  
Jan D. [unclear]

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