

STATE OF SOUTH CAROLINA) S.C.
)
 COUNTY OF GREENVILLE) 1982 POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that as Principal, I, Louise r. Conroy, 111 Wood Avenue, Greer, South Carolina, do hereby constitute, make and appoint the Bank of Greer, Greer, South Carolina, as my true and lawful Attorney-in-Fact, for me and in my name to perform the following acts and deeds:

To receive for me and on my behalf any and all property due to me, with full power and authority to exercise any and every necessary authority to control and manage same including the authority to collect any monies on accounts due to me and to receive for me and in my name any checks made payable to me, or for my benefit, and to endorse my name thereon for the purpose of cashing same or depositing same to my accounts or account in any bank or banks wherein I or they may transact my business; to invest and reinvest principal and earnings of monies, bonds or any other assets, real and personal; and my said Attorney-in-Fact is to have full power and authority under this instrument to issue checks against and withdraw against any deposits or savings accounts at such times and in such amounts as deemed best for my welfare and benefit. Said Attorney-in-Fact shall also have access to and control of the contents of my Safe Deposit Box at the Bank of Greer, Greer, South Carolina, to do and perform any and all acts that further my best interests, as relates thereto.

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. It is my intent that the authority conferred herein shall be exercisable notwithstanding my physical disability or mental incompetence.

This power of attorney shall remain in full force and effect until the earlier of the following events: (i) Attorney has resigned as provided herein; (ii) I have revoked this Power-of-Attorney by written instrument recorded in the public records of the county aforesaid; or (iii) a committee shall have been appointed for me by a court of competent jurisdiction.

In the event that Attorney shall become unable or unwilling to serve or to continue to serve, then Attorney may resign by delivering to me in writing a copy of its resignation and recording the original in the public records of the county aforesaid. Upon such resignation and recording, Attorney shall thereupon be divested of all authority conferred under this Power of Attorney.

For its services as my Attorney-in-Fact, the Bank of Greer shall receive an amount which shall be determined by its Standard Fee Schedule in effect and applicable at the time of performance of such services. If no Standard Fee Schedule shall be in effect at that time, my Attorney shall be entitled to reasonable compensation for the services rendered.

All acts done by Attorney pursuant to this Power of Attorney during any period of disability or mental incompetence shall have the same effect and inure to the benefit of and bind me and my heirs, devisees, legatees, and personal representatives as if I were mentally competent and not disabled.

The powers herein conferred may be exercised by Attorney alone and the signature or act of Attorney on my behalf may be accepted by third persons as fully authorized by me and with the same force and effect as if done under my hand and seal and as if I were present in person, acting on my own behalf and competent. No person who may act in reliance upon the representations of Attorney for the authority granted to Attorney shall incur any liability to me or to my estate as a result of permitting Attorney to exercise any power.

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