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required for the transfer of said property or any part thereof or of any interest therein, and to collect and receive the proceeds from any such sale.

That I further specially authorize my attorney to make appointment of attorney by substitution and I do hereby ratify and confirm all such lawful acts that my said attorney, or my attorney substitute, may do or cause to be done by virtue hereof.

That the rights, powers and authority of my attorney shall remain in full force and effect thereafter until my death. This Power of Attorney shall not be affected by any physical disability or mental incompetence which renders me incapable of managing my estate.

WITNESS MY HAND on this ______ day of July, 1982.

Harriet S. Barnes

Harriet Sloan Barnes

STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE

BEFORE ME, the undersigned authority, on this day personally appeared Harriet Sloan Barnes, known to me to be the person whose name is subscribed to the foregoing Power of Attorney and acknowledged to me that she executed the same for the purposes and consideration therein expressed.

NOTARY PUBLIC IN AND FOR CREENVILLE COUNTY, SOUTH CAROLINA

My commission expires:

October 3, 1985

I accept this appointment, and, in so doing, acknowledge my fiduciary relationship to Harriet Sloan Barnes, and that I am thus accountable and rsponsible to her as a fiduciary.

Margaret Sloan Drake Attorney-In-Fact

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