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POWER OF ATTORNEY

FILED
GREENVILLE, S.C.
SEP 1 8 44 AM '83
STONNIE S. WESLEY
R.M.

STATE OF SOUTH CAROLINA §
COUNTY OF GREENVILLE §

KNOW ALL MEN BY THESE PRESENTS: That we, H. D. BRUCE and MERLE STAGGS BRUCE, of the said County and State have made, constituted and appointed, and by these presents do make, constitute and appoint Calvin B. Reeves of Dallas County, Texas, our true and lawful attorney for us, or the survivor of us, in our name, place and stead, to do any and every act and exercise any and every power that we might or could do or exercise in our own right and that he shall deem proper or advisable, intending hereby to vest in him a full and universal Power of Attorney, giving and granting unto our said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully, to all intents and purposes, as we might or could do if personally present, including the power to open, draw upon, or close any bank account, savings account, certificate of deposit or money market fund, to sell or otherwise dispose of any property, real or personal, lease or rent any real property owned by us, all upon such terms and for such consideration as our said attorney may deem proper, hereby ratifying and confirming whatsoever our said attorney shall or may do by virtue hereof in the premises.

We, and each of us, agree and represent to those dealing with our said attorney-in-fact that this Power of Attorney may be voluntarily revoked alone by revocation entered in the Register of Mesne Conveyances of Greenville County, South Carolina.

DURABLE POWER

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

BINDING EFFECT

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

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