IN WITNESS WHEREOF,	I have hereunto set m	ay hand and seal thi	ĹS
ay the day of	1118174 . 19	79.	
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V	_ ^	<i>a</i> 0	^
	Dolor	es C. Lash c. LASHLEY	leu
	DOLORES	C. LASHLEY	0
a a		. p.1	
for the granting of her Power presence of said principal, Dopresence of each other, have l	OLORES C. LASHLEY, and	resence of us, who i d at her request, a	in the nd in the
VITNESSES:			
Calvin F. Leag	m.		
Elezabeth M. ale			
Schafe B. Kndry			
	* * * * *		
STATE OF SOUTH CAROLINA	)		
COUNTY OF CDEENUTIFE	1	PROBAT	E

PERSONALLY appeared before me the undersigned witness and made oath that (s)he saw the within named DOLORES C. IASHLEY, sign, seal and as her act and deed deliver the within written Power of Attorney, and that (s)he with the other witness subscribed above witnessed the execution thereof.

SWORN TO before me this

| Alexabeth M. Alewine
| Commission Expires: /-19-79
| Commission Expires: /-19-79

2000

RECORDED JAN 9 1979 at 12:11 P.M.

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