STATE OF SOUTH CAROLINA )
: IRREVOCABLE POWER OF ATTORNEY
COUNTY OF GREENVILLE )

I, Adele Harrison, do hereby make, and appoint
Lottie Wadell my attorney in consideration of the care which
she has given to me during the course of my recent illness
and in recognition of my love, affection and desire that
she manage my affairs and oversee the management of my
assets as well as taking care to see that all of my creditor's
are paid from my assets. Her responsibilities include, but
are not limited to, the following:

a. H.

- 1. The collection of any delts owing to me, whether in the form of rents, interest on my investments, interest or dividends from any stocks, bonds, or other securities.
- 2. The appointment and/or discharge of persons or institutions employed or consulted to care for me in time of illness or health, including physicians, nurses, psychologists, nursing assistants, janitors, maids, cooks, or others providing services to me either directly or indirectly.
- 3. The retaining and/or discharge of legal counsel, auditors, advisors, counsellors, or investors where such persons are deemed to be necessary in advising either me or Lottie Waddell.
- 4. The hiring of laborers or maintenance personnel or firms who may be necessary to preserve my home or to protect my property from decay, deterioration, or defect.
- 5. The management of any and all savings accounts in any savings institutions where they may be located.
- 6. The management of my checking account to ensure that adequate and reasonable funds are in said accounts to cover any checks written threon.
- 7. The transfer of funds from either a savings account to my checking account(s) or vice versa as may be deemed appropriate.

