DONNIE S.TANKERSLEY R M.O

iva 1032 no 886

STATE OF SOUTH CAROLINA

::: POWER OF ATTORNEY :::

COUNTY OF GREENVILLE

:::

KNOW ALL MEN BY THESE PRESENTS that I, Camie A. King, of the County and State aforesaid, have constituted, made and appointed and by these presents do constitute, make and appoint my son, Tee W. King, my true and lawful Attorney-in-Fact, for me and in my name and stead to perform the following acts and deeds:

To lease or sub-lease any of my property, and to collect for me any rentals from tenants renting or leasing the same, and to collect any other accounts which may be due to me, with full power and authority to exercise any legal means for the leasing and for the collection of the rentals; 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 the same, or depositing said checks, along with any other funds payable to me in any bank or banks wherein I or he transacts my business; and to have full power and authority under this instrument by his signature as Attorney-in-Fact, to issue checks and draw from said deposits, or any savings accounts, at such times and in such amounts as deemed best for my support and needs. My Attorney-in-Fact is further empowered to execute deeds, notes and mortgages pertaining to any real property that I may own.

If necessary, he shall have authority to sign for me and in my name any application or forms to secure payments under hospital insurance policies or hospital benefits under the Government plat, or Medicare, to which I may be entitled, and to receive payment of the same and disburse proceeds according to the authority granted herein.

Giving and granting unto the said Lee W. King, my Attorney-in-Fact, by these presents full power and authority to do generally all and every act whatsoever needful and necessary to be done in and about the premises for the completion thereof, for me and in my name as I might or could do if personally present and ratifying the same.

Should I become physically or mentally incapacitated, this Power of Attorney shall not be invalidated because of such condition, but shall remain in full force and effect until my death or until revoked by me personally, it being one of the purposes herein to empower my said Attorney-in-Fact to make provision for my needs under such conditions.

WITNESS my hand and seal	, this the $\_$	11	day of
SIGNED, sealed and delivered in the presence of:			100
Caralyn H. M. Carely		Carnie Camie A. K	ing State O(SPAI)
Morma T. Moris		Fille	
STATE OF SOUTH CAROLINA	:::	V OF DET	
COUNTY OF GREENVILLE	:::	ينجها	,

HAWKINS, ELLIS AND HUDSON ATTORNEYS AT LAW P. O. Box 196 107 CHURCH ST. GREER, SOUTH CAROLINA

PERSONALLY appeared before me \_\_Norma T. Morris and made oath that he saw the within named Caffie A. King sign, seal, and as her act and deed deliver the within written Power of Attorney, and

**ID** 

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