giving and granting to my 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 I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney may do.

This power of attorney shall not be affected by any physical disability or mental incompetence which may render me incapable of managing my own estate at some time in the future.

IN WITNESS WHERBOF, I have hereunto set my hand and seal, this

24 day of Fers., 1979.

Era weer Tynores	(SEAL)
Eva Harie Turner	

SIGNED, SEALED, PUBLISHED and declared by Eva Harie Turner, the above named grantor, as and for her Power of Attorney, in the presence of the undersigned, who, at her request and in her presence and in the presence of each other, have hereunto subscribed our names as attesting witnesses.

Dadys Pleater	Ln.			
Andys P. Wester an C. Coole &	7/1			
STATE OF SOUTH CAROLINA	:::			
COUNTY OF GREENVILLE	:::			
PERSONALLY appeared b	efore ne	.s. Alverson		
and made oath that he saw	the within na:	ed Eva Xarie T	urner sign, seal	
and as her act and deed de		in written Powe	r of Attorney fo	r
	liver the with			r -
the uses and purposes ment	liver the with	he with Gla		r -
and as her act and deed de the uses and purposes ment and witnessed the execution th	Ann C. Cool	he with Gla		r
the uses and purposes ment	Ann C. Cool; nereof. efore rusry, 1979	he with Gla	Jys P. Wooten	r

RECUIDED FEB 2 7 1979 at 9:24 Au

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