Ni

**S** 

This Power of Attorney shall not be affected by physical disability or mental incompetence of the Principal, which renderes the Principal incapable of managing her own estate.

All acts done by the Attorney-in-Fact pursuant to the power during any period of disability or mental incompetence shall have the same effect and inure to the benefit of and bind the Principal's heirs, devisees, legatees, and personal representative as if the Principal were mentally competent and not disabled. The Attorney-in-Fact shall have a fiduciary relationship with the Principal and shall be accountable and responsible as a fiduciary.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 4th day of \_\_\_\_\_\_, 1981. Harrie H. Bowen

SIGNED, SEALED, PUBLISHED and DECLARED BY Hassie H. Bowen as and for her General Power of Attorney in the sight and presence of the undersigned who, in the sight and presence of Hassie H. Bowen and at her request, and in the sight and presence of each other have hereunts subscribed their names as attesting witnesses.

residing at Greenville, S. C. residing at Greenville, S. C. residing at Greenville, S. C.

STATE OF SOUTH CAROLINA

**PROBATE** 

COUNTY OF GREENVILLE

PERSONALLY APPEARED the undersigned witness and made oath that (s)he saw the within named Hassie H. Bowen, sign, seal, and as her act and deed deliver the within General Power of Attorney; and that (s)he with the other witness subscribed above witnessed the execution thereof.

SWORN to before me this 4th day of June , 1981. My Commission expires: 11/21/90

Page Five. Recorded June 8, 1981 at 10:57 A/M