m 1073 5 351

FCOUNTY OF GREENVILLE

STATE OF SOUTH CAROLINA

POMER OF ALTORIEY

Know All Men by These Fresents:

That I, Edna C. Morse of the County of Greenville, State of South Carolina do by these presents hereby make, constitute and appoint my daughter, Jacqueline M. Parks of the County of Greenville, State of South Carolina, true and lawful attorney in fact for me and in my name and stead to do the following and giving the following powers.

- (1.) To execute and to deliver walid deed or deeds to any of my real estate. To execute and deliver valid bills of sale for any of my personal property. To receive the purchase money therefor and to mortgage any of my real or personal property on such terms and conditions as she may see fit and to take back a purches money mortrage on any of my real or personal property on such terms or conditions as she may see fit. To mortgage any of my real or personal property as security on any loan she may receive in my name.
- (2.) To rent or lease any of my real or personal property on such terms as she may see fit.
- (3.) To indorse notes, checks, drafts or bills of exchange which may require my endorsement for deposit or cash or for collection any any bank. To draw checks on any bank account that I may have in my name. To withdraw any amount that I may have on savings or deposit with any building and loan association or add to such account.
- (4.) To collect any amount due me from any person or company and to pay any amounts due by me to any person or company. To Collect, cash or borrow on any insurance policy or contract that I may own.
- (5.) To bring legal proceeding in any court on any cause of action that I may have and to defend any action as defendant in any legal action that I may be a party.
- (6.) To receive any interest or dividends that I may be entitled.

Granting and giving unto said attorney in fact authority and power to do all things necessary or incident to the preformance and execution of the powers herein expressly granted, with power to do and perform all acts authorized hereby, as fully to all intents and purposes as the grantor might do.

This power of attorney shall not be affected by physical disability or mental incompetence of the principal, which renders the principal incapable of managing her own estate.

In Testimony Whereof I have hereunto affixed my seal and Subscribed my name this 28 day of April , 1978.

Ó

M,

O.