

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

It is understood that the herein granted Power of Attorney shall terminate upon my death.

WITNESS MY HAND AND SEAL this 6th day of November, in the year of our Lord one thousand nine hundred and seventy-eight and in the two hundred and second year of the Sovereignty and Independence of the United States of America.

Signed, Sealed and Delivered in the Presence of

Louise G. Hydrick
Ruby L. Perkins
Bruce D. Carter

Plumer (NMN) Perkins (L.S.)
PLUMER (NMN) PERKINS

STATE OF SOUTH CAROLINA)
COUNTY OF LEXINGTON)

PERSONALLY appeared before me BRUCE D. CARTER and made oath that he saw the within-named Plumer (NMN) Perkins sign, seal and as his act and deed, deliver the within-written Power of Attorney; and that RUBY L. PERKINS and LOUISE G. HYDRICK witnessed the execution thereof.

SWORN to before me this 7 day of November, 1978. Bruce D. Carter

James D. [Signature] (L.S.)
Notary Public for South Carolina

My Commission Expires: Aug 15, 1982

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