

whatsoever necessary to be done in the premises as fully to all intents and purposes as I might or could do if personally present and acting, with full power of substitution, hereby ratifying and confirming all that my said attorney in fact may do pursuant to this power.

I hereby ratify and confirm all acts doen and caused to be done by my said attorney in fact pursuant to this Power of Attorney. This Power of Attorney shall affected by my subsequent physical disability or my mental incompetence rendering my incompetent to manage my own affairs and estate, but shall continue in full force and affect regardless of my physical or mental condition.

IN WITNESS WHEREOF, I, Alfred C. Waldrop, have hereunto set my hand and seal this 30 day of October, 1982.

*Alfred C. Waldrop*  
Alfred C. Waldrop SEAL

WITNESSES:

#1 *Phyllis M. Marsh*  
#2 *Kay Armbry*  
#3 *Gwynette C. Campbell*

STATE OF SOUTH CAROLINA )  
COUNTY OF GREENVILLE ) PROBATE

PERSONALLY appeared the undersigned witness and made oath that (s)he saw the within named Alfred C. Waldrop sign, seal, and as his act and deed deliver the within written General Power of Attorney, and that (s)he and the other two witnesses hereto, at the request of Alfred C. Waldrop and in his presence and in the presence of each other, witnessed the execution thereof.

*Phyllis M. Marsh*

SWORN to before me this 30<sup>th</sup> day of October, 1982.

*Gwynette C. Campbell* SEAL  
Notary Public for S. C.  
My Commission Expires: 5/22/83

RECORDED DEC 1 1982 at 10:14 A.M.

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