

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.

IN WITNESS WHEREOF, I have hereto set my hand and seal this 4th day of February, 1984.

William Henry Benchoff (SEAL)  
WILLIAM HENRY BENCHOFF

Signed, sealed, declared and published to be the Power of Attorney of WILLIAM HENRY BENCHOFF in the presence of us, the undersigned witnesses, who do hereby attest the same at his special instance and request, he signing in our presence and we in his and in the presence of each other.

NAME	ADDRESS
<u>Walter J. [Signature]</u>	<u>Rt 1 Kershaw, S.C.</u>
<u>J. Billy [Signature]</u>	<u>Rt 1 Kershaw, S.C.</u>
<u>Doris M. [Signature]</u>	<u>Rt 1 Kershaw, S.C.</u>

STATE OF SOUTH CAROLINA  
COUNTY OF GREENVILLE PROBATE

PERSONALLY appeared before me the undersigned witness, who, being duly sworn, says that (s)he saw the above named WILLIAM HENRY BENCHOFF sign, seal and as his act and deed, deliver the foregoing Power of Attorney and that (s)he with the other two witnesses subscribed above witnessed the due execution thereof.

Walter J. [Signature]

SWORN to before me this 4th day of March, 1984.

Mary G. [Signature] (SEAL)  
Notary public for South Carolina  
My Commission Expires: 12-18-84

RECORDED MAR 5 1984 at 10:40 A.M.

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