

STATE OF ALABAMA
BALDWIN COUNTY

## DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, That I, CARRIE THOMAS is resident of the County of Baldwin, State of Alabama, have made, constituted and appointed, and by these presents do make, constitute and appoint BERNICE JOHNSON, my true and lawful attorney, for me and in my name, place and stead to ask, demand, sue for, collect and receive all sums of money, dividends, interest, payments on account of debts and legacies and all property now due or which may hereafter become due and owing to me, and give good and valid receipts and discharge for such payments; to sell, assign and transfer stocks and bonds and securities standing in my name or belonging to me; to buy and sell securities of all kinds in my name and for my account and at such prices as shall seem good to him; to sign, execute, acknowledge and deliver in my name all transfers and assignments of securities; to borrow money and to pledge securities for such loans if in the judgment of my attorney such action should be necessary; to manage real property, to sell, convey and mortgage realty, to foreclose mortgages and to take title to property in my name if she thinks proper, and to execute, acknowledge and deliver deeds of real property, mortgages, releases, satisfactions and other instruments relating to realty which he colsiders necessary; to place and effect insurance; to do business with banks, and particularly to endorse all checks and drafts made payable to my order and collect the proceeds; to sign in my name checks on all accounts standing in my name, and to withdraw funds from said accounts, to open accounts in my name or in his name as my attorney in fact; to make such payments and expenditures as may be necessary in connection with any of the foregoing or with the administration of my affairs; to have access to, to remove property from, and to add property to, any safe deposit box in my name or in my name jointly with another, and to acquire such in my attorney-in-fact's discretion; to retain counsel and attorneys on my behalf, to appear for me in all actions and proceedings to which I may be a party in the Courts of Alabama, or any other state in the United States; to commence actions and proceedings in my name and, to sign and verify in my name all complaints, petitions, answers and other pleadings of every description; to make and verify income tax returns, and to represent me in all income tax matters before any office of the Internal Revenue Service, within the limitations to the applicable Revenue Ruling and Procedures; to execute oil, gas and mineral leases, rental and royalty division orders, and any and all instruments and documents relating thereto; to pay my ordinary household expenses; to arrange for and pay the cost of medical, dental, nursing, hospital, convalescent, and other health care and treatment including, but not limited to, the admission to hospitals, nursing homes, rest homes, or other care facilities or institutions; to consent or refuse consent to treatment; to make application for insurance, pension, or employee benefits related to such health care and treatment, including, but not limited to, benefits under Social Security, Medicare and Medicaid; and to obtain on my behalf copies of medical reports, summaries, or other related information concerning me, made

or taken before or after the date of this instrument, and to execute any written consents on my behalf for the disclosure of such reports, summaries, or related information as may be required under any applicable federal statute, statutes of any state of the United States, or ordinances, rules, requirements of any local government or municipality, or agency.

GIVING AND GRANTING unto my said attorney full power and authority to do and perform all and every act, deed, matter and thing whatsoever in and about my estate, property, and affairs as fully and effectually to all intents and purposes as I might or could do in my own proper person if personally present, the above especially enumerated powers being in aid and exemplification of the full, complete and general power herein granted and not in limitation or definition thereof; and hereby ratifying all that my said attorney shall lawfully do or cause to be done by virtue of these presents.

And I declare that any act or thing lawfully done hereunder by my said attorney shall be binding on myself, and my heirs, legal and personal representatives, and assigns; whether the same shall have been done before or after my death, or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by any person acting in reliance hereon. This power of attorney shall not be affected by my subsequent disability, incompetency, or incapacity. This power of attorney may be filed for record in any public office.

	IN WITNESS WHI	BREOF, I have	hereunto	set my	hand a	nd seal on	this the
4	_day of $\mathcal{M}$	W					1
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			CARRIE T	HOMAS			<u> </u>

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BALDWIN COUNTY

I, the undersigned authority in and for said County, in said State, do hereby certify that *CARRIE THOMAS*, whose name is signed to the foregoing Power of Attorney, and who is known to me, acknowledged before me on this day, that being informed of the contents of the Power of Attorney, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal, on this the <u>day</u> of May, 2002.

NOTARY PUBLIC \
MY COMMISSION EXPIRES: 5/27/03