

STATE OF ALABAMA)

SHELBY COUNTY)

DURABLE GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that this power of attorney shall become effective upon the disability, incompetency, or incapacity of the principal, and that I, the undersigned principal, W. A. HENKE in the event of my such disability, incompetency, or incapacity, do hereby appoint BILLY G. HENKE as my true and lawful attorney in fact, and authorize and empower him for me and in my name, to:

(1) Ask, demand, sue for, collect, recover and receive all sums of money, debts, accounts, interest, dividends, annuities and demands whatsoever as are now or shall hereafter become due, owing, payable or belonging to me;

(2) Make, do and transact all and every kind of business of whatever nature he considers necessary; draw checks on my bank account or accounts and make deposits therein and perform any and all other banking functions;

(3) Act for me in any and all matters concerning all property which may be mine at the present time, and which may hereafter become mine, or to which I may now or hereafter be entitled to receive, whether the same be real, personal, or mixed, wherever the same may be situated. I specifically appoint, empower, and authorize my said attorney to act for me as he sees fit in order to protect my interests, and I do hereby specifically grant to and vest in my said attorney full power and authority in my name to sell, at private sale or public sale, and to convey, lease, exchange, mortgage, pledge, and otherwise alienate any or all of my said property, or any interest therein, on such terms as he deems to be proper, in his sole discretion, without the order of authority of any Court;

(4) Make all arrangements and execute all papers and documents that may be necessary or desirable hereafter to cause me to be admitted to and maintained in a Nursing Home, Convalescent Home, Hospital, or other medical, convalescent, or medical facility of boarding facility of any nature, should the same become necessary or desirable in the sole discretion of my said attorney.

This Durable General Power of Attorney, and the authority and powers herein granted, shall not, however, give or grant my said attorney the authority or power to modify or revoke my Last Will and Testament, nor to make any testamentary disposition of my property, nor any part thereof.

W. H. D.

Giving and granting unto BILLY G. HENKE
as my true and lawful attorney, in the event of my disability, incompetency,
or incapacity -- and subject only to the sole limitations as specifically set
forth in the preceding paragraph -- full power and authority to do and perform
all and every act or thing whatsoever requisite and necessary to be done in
and about the premises (including but not limited to the specific powers granted
herein) as full to all intent and purposes as I might or could do if personally
present and not disabled, incompetent, or incapacitated, it being my purpose and
intention to grant unto my said attorney all of the powers over my said property
and estate that I am capable of granting to him as such attorney -- subject only
to the sole limitations as specifically set forth in the preceding paragraph --
all without the order or approval of any Court.

I hereby ratify and confirm all that BILLY G. HENKE
as my true and lawful attorney, shall lawfully do or cause to be done by virtue
of the presents.

This power of attorney and the authority specified herein shall commence on my disability, incompetency, incapacity, and shall then exist during my lifetime continuously from such time until such time as I may thereafter become able, competent, and capacitated and revoke the same in writing.

I hereby nominate and appoint BILLY G. HENKE
by this Durable General Power Of Attorney, to be my guardian, curator, and other
fiduciary in the event of my disability, incompetency, or incapacity, without bond

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of

November

Witness

STATE OF ALABAMA }
SHELBY COUNTY }

I, the undersigned, a Notary Public in and for said County, in said State,
hereby certify that W. A. Henke whose name is signed
to the foregoing Durable General Power Of Attorney, and who is known to me,
acknowledged before me on this day that, being informed of the contents of the
Durable General Power Of Attorney, she executed the same voluntarily on the day the
same bears date.

Given under my hand and official seal this the 1st day of November
1983

Janice Brasher
Notary Public