December $\frac{2}{}$, 1995

Permission to Seek Medical Treatment And Power of Attorney

I, Sally C. Hopkins, give my mother, Loyce Shelton of 320 Quebec St., Birmingham and/or my sister, Mary Lynn Davidson, of 88 Southern Hills Pkwy, Calera, permission to seek medical treatment for my daughter, Cathleen Harris, 16 yrs old, and act on her behalf in the event of an accident or illness while she is in their care.

I also give my permission to Loyce Shelton and/or Mary Davidson to act as guardian to my daughter, Cathleen Harris, while she is in their care, and to do as they see necessary to ensure her

safety and well being.

Signed

Sally C. Hopkins 1026 N. Johnson St. Mineola, TX 75773 (903) 569-6352 home (903) 569-6228 work

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THE STATE OF TEXAS COUNTY OF WOOD

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personally appeared stated that she is duly qualified and authorized in all respects to make this affidavit; that she has read the above statement, and is, within her personal knowledge, true and correct.

SUBSCRIBED AND SWORN TO before me by the said Lally on this 2/st day of December, 1995

Notary Public - IN AND FOR The State of Texas

My Commission Expires: 4-4-99

