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Durable Power of Attorney

STATE OF ALABAMA)
COUNTY OF SHELBY)

1. **KNOW ALL MEN BY THESE PRESENTS:** That I, **Mary L. Hollingsworth**, residing in **Shelby County, Alabama** hereby make, constitute and appoint **Kathy Sue Hollingsworth Vardamore** as my true and lawful **attorney** to act in, manage, and conduct all of my affairs and, for that purpose, in my name, place and stead to do and execute all or any of the following acts, deeds, and things:

(a) To have and gain entry and access to my safety deposit box or vault at any time; to remove any or all contents thereof; to sign any papers or documents relating thereto; to deposit any papers, documents or securities in such safety deposit box or vault and to do with respect to any of the contents of said safety deposit box or vault as my said **attorney** may see fit;

(b) To sell, lease, exchange or dispose of any of my real estate and/or personal property to any person or persons, for any price, and upon such terms and conditions, for cash or on credit, as **she** may deem fit, and to execute any contracts, conveyances, or other instruments whatsoever, with full covenants of warranty;

(c) To demand, recover and receive, all and any sums of money, debts or effects, due, payable, coming or belonging to me;

(d) To borrow sums of money from time to time from any person, firm or corporation, including the borrowing of any sums from any insurance company, and to make and execute promissory notes, mortgages, pledges of insurance policies and any other transfers of security;

(e) To sign checks and otherwise withdraw funds from any bank accounts or other accounts, to endorse any checks, to deposit any checks or other sums in any bank account;

(f) To purchase any goods, merchandise, stocks, bonds or other personal property, on my account for such prices and in such amounts as **she** may deem proper;

(g) To settle and adjust all accounts and demands now subsisting or which may hereafter subsist between me and any person or persons as **she** may deem proper;

(h) To pay and discharge all debts and demands due or payable or which may hereafter become due and payable by me unto any persons, firms, or corporations;

(i) To redeem or cause to be redeemed any bonds, including United States Government Bonds, belonging to me;

(j) To vote at the meetings of stockholders or other meetings of any corporation, to act as my **attorney** or proxy in respect of any stocks, shares or other instruments now or hereafter held by me there, and for that purpose to execute any proxies or other instruments;

(k) To commence and prosecute any suit or action which **she** shall deem proper for the recovery, possession or enjoyment of any thing or matter which is or which may hereafter be due, payable or belonging to me; to defend any suit or action

MLH.

which may be brought against me or in which I may be interested as **she** shall deem proper;

(l) To file claims for medical insurance and to obtain information from any insurance company with respect to any policy of health or medical insurance which I am insured; to have access to my medical records and to obtain information of any type from any physician or other health care professional who may be treating me;

(m) To generally do and perform all matters and things, transact all business, make, execute and acknowledge all contracts, orders, deeds or other conveyances, mortgages, leases and to execute all other instruments of every kind which may be necessary or proper to effectuate all powers hereinabove specifically granted, or any other matter or thing appertaining or belonging to me; with the same full powers, and to all intents and purposes, with the same validity as I could, if personally present (giving and granting unto my said **attorney**, full power to substitute one or more attorneys under **her**, and the same at **her** pleasure to revoke); and hereby ratifying and confirming whatsoever my said **attorney** shall and may do, by virtue hereto.

2. The powers herein granted to my said **Attorney-in-Fact** shall be exercisable by **her** at any time and from time to time.

3. This Power of Attorney shall remain in full force and effect and any party dealing with my said **Attorney-in-Fact** at any time shall be fully protected and is hereby discharged, released and indemnified from so doing in respect of any matter relating hereto unless such particular party shall have received prior notice in writing of the revocation of this power.

4. THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY MY DISABILITY, INCOMPETENCY OR INCAPACITY AND MAY BE EXERCISED NOTWITHSTANDING ANY SUCH DISABILITY, INCOMPETENCY OR INCAPACITY AND NOTWITHSTANDING ANY UNCERTAINTY AS TO WHETHER I AM DEAD OR ALIVE.

5. If **Kathy Sue Hollingsworth Vardamore** shall die, resign, become incompetent or otherwise cease to serve as my **Attorney-in-Fact** hereunder, then I make, constitute and appoint **June Allen Hollingsworth** as **her** successor, with all of the powers, duties and authorities originally granted to my **Attorney-in-Fact** herein.

6. If at any time proceedings are commenced in any court to appoint a guardian, conservator or other fiduciary for me, then I nominate **Kathy Sue Hollingsworth Vardamore** to serve as such fiduciary, and I direct that no bond be required with respect to this appointment. If **Kathy Sue Hollingsworth Vardamore** shall die, resign, become incompetent or otherwise cease to serve as such fiduciary, then I nominate **June Allen Hollingsworth** to serve as such fiduciary, and I direct that no bond be required with respect to this appointment.

M.S.H.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on 3/8/04, 2004.

Mary L. Hollingsworth
Signature

STATE OF ALABAMA)
COUNTY OF SHELBY)

I, the undersigned, a Notary Public, in and for said County, in said State, hereby certify that **Mary L. Hollingsworth**, whose name is signed to the foregoing Power of Attorney and who is known to me, acknowledges before me on this day, that, being fully informed of the contents of the foregoing instrument, **she** executed the same voluntarily on the day the same bears date.

Given under my hand and official seal March 8, 2004.

Carolyn G. Fortner
Notary Public

MY COMMISSION EXPIRES SEPT. 24, 2006

My Commission Expires: _____

(NOTARIAL SEAL)

This instrument prepared by:

Carolyn G. Fortner, Attorney at Law

The Middle Alabama Area Agency on Aging

307 7th Street North

Clanton, AL 35045

(205) 280-4175

NAME AFFIDAVIT

I, the undersigned, do hereby certify that Kathy Sue Hollingsworth Vardamore; Kathy Hollingsworth Varnadore, Kathy Sue Hollingsworth Varnadore are one and the same person.

This the 15th day of August, 2014.

Kathy Hollingsworth Varnadore

Kathy Hollingsworth Varnadore

STATE OF ALABAMA
COUNTY OF JEFFERSON

Sworn to and subscribed before me this the 15th day of August, 2014.

The Undersigned
Notary Public

JACK R. THOMPSON, JR. NOTARY PUBLIC MY COMMISSION EXPIRES OCTOBER 31, 2015 STATE OF ALABAMA

SHELBY COUNTY ALABAMA

Filed and Recorded
Official Public Records
Judge James W. Fuhrmeister, Probate Judge,
County Clerk
Shelby County, AL
09/02/2014 08:54:43 AM
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