

(Space above for recording purposes only)

MARY HELEN ROWLAND

To:

GENERAL POWER OF ATTORNEY

BARBARA ROWLAND CRADDOCK

I, **Mary Helen Rowland**, an adult resident citizen of DeSoto County, Mississippi, do hereby name, constitute and appoint **Barbara Rowland Craddock** as my true and lawful Attorney In Fact, with full right and authority, in my name, place and stead to sign my name, and to do any and all things in my behalf and for me that I might do were I present and so doing, hereby revoking all powers of attorney heretofore made by me.

My said Attorney In Fact are fully authorized and empowered among other things to sign for me and in my behalf as my Attorney In Fact any and all instruments of conveyance of real and personal property of every kind and nature whatsoever, and any and all instruments affecting any property, real and personal, or of any kind or nature whatsoever, owned or possessed by me or which may be acquired by me in the future; to sign or endorse checks, notes or other instruments of writing, to sign my name to transfer or cash U. S. Government Bonds, to enter any safety deposit box or other place of safekeeping in which I might have property of any kind and to remove any and all property therefrom; to sell, transfer, pledge, lease, assign, mortgage or encumber any and all real or personal property, including stocks and bonds or other choses in action or instruments evidencing same; to sign any receipt or acquittances for me and in my place and stead; to bring or defend any and all suits of law or in equity which in her judgment she might determine to be to my interest so to do.

The authority of the Barbara Rowland Craddock as my Attorney In Fact shall not be limited by the enumeration herein above of the things specifically named which she is authorized to do for me, but this is a general power of attorney granted by me to the said Barbara Rowland Craddock.

This Power of Attorney shall not be affected by the subsequent disability or incapacity of the said Mary Helen Rowland, or lapse of time.

Prepared by att George Payne Cassar Jr
PO Box 50 Charleston, Miss 38921
662-647-5581

rat: 1
Mary Helen Rowland
8165 Whitehall
SH. 38671

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The said Barbara Rowland Craddock shall not be required to account to any Court for her actions.

I hereby empower and authorize my said Attorney for me and in my name to obtain copies of any financial information, tax returns, wills, trusts or other legal or estate planning documents from any attorney, accountant, financial consultant, broker or other professional hired by me and to consult with any such professionals concerning the same.

I hereby empower and authorize my said Attorney for me and in my name to handle any federal or state tax matters on my behalf, to make any federal or state tax elections on my behalf, to sign any federal or state tax forms on my behalf, including but not limited to Internal Revenue Service Form 2848, "Power of Attorney and Declaration of Representative," to hire Attorney or accountants to represent me in any federal or state tax controversies, to handle any and all matters with the Division of Medicaid of the Mississippi State Department of Health, and to hand all matters in regard to Medicare.

I hereby empower and authorize my said Attorney for me and in my name to disclaim or renounce any interest in property, in whole or in part, including any power with respect to property and including an undivided interest in property transferred to me, with any such disclaimer to be made in writing stating specifically the property or interest disclaimed and delivered to the transferor of the property, the transferor's legal representative, or the holder of the legal title to the property to which the interest relates and with any such disclaimer to be made within the time period and in the manner required for the disclaimer to qualify under Section 2518 of the Internal Revenue Code of 1986, or the corresponding provisions of any subsequent federal law.

I hereby empower and authorize my said Attorney for me and in my name to create and contribute to an employee benefit plan (including a plan for self-employed individual) for my benefit; to select any payment option under any IRA or employee benefit plan in which I am a participant (including plans for self-employed individuals) or to change options I have selected; to make voluntary contributions to such plans; to make "roll-overs" of plan benefits into other retirement plans; to apply for and receive payments and benefits; to waive rights given to non-employee spouses under state or federal law; to borrow money and

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purchase assets therefrom and sell assets thereto, if authorized by any such plans; to make and change beneficiary designations; to consent and/or waive consent in connection with the designation of beneficiaries and the selection of joint and survivor annuities under any employee benefit plan.

I hereby empower and authorize my said Attorney for me and in my name to make gifts from my estate to any person or persons by transferring to those donees or trusts for their benefit cash, stocks, bonds, securities, mineral interests, or any other property or interests of mine in property, as and when my attorney may deem proper, and in amounts consistent with my current estate, the tax consequences of any gift or failure to make any gift, and the donees' respective needs.

Every bank or other financial institution, insurance company, transfer agent, issuer, obligor, safe deposit box company, title insurance company or other person, firm or corporation to which this Power of Attorney is presented is authorized to receive, honor and give effect to all instruments signed pursuant to the foregoing authority of the disposition of the property delivered pursuant thereto. All acts done by my Attorney-In-Fact pursuant to this Power Attorney shall be binding upon me and my heirs and legal representatives.

The powers granted herein shall include withdrawals from all bank checking and savings accounts which include certificates of deposit.

All of the powers and authorities herein granted and conferred shall continue and remain in full force and effect until revoked by me in writing, acknowledged and filed for record in the Office of the Chancery Clerk of DeSoto County, Mississippi.

IN WITNESS WHEREOF I have hereunto signed my name on this the 14th day of August, 2009.


Mary Helen Rowland

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STATE OF MISSISSIPPI
COUNTY OF TALLAHATCHIE

Personally appeared before me, the undersigned authority of law, in and for said county and state,
Mary Helen Rowland, who acknowledged that she executed the foregoing Power of Attorney on the date
therein written for the consideration and purposes expressed as her free and voluntary act and deed.

Given under my hand and seal, this the 14th day of August, 2009.



Connie Greer
NOTARY PUBLIC