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DK P BK 141 PG 154
DESOTO COUNTY, MS
W.E. DAVIS, CH CLERK

DURABLE POWER OF ATTORNEY

EXECUTED BY

GEREN E. WILLIAMS

1. APPOINTMENT OF ATTORNEY-IN-FACT

A. I, **GEREN E. WILLIAMS**, residing in Olive Branch, Desoto County, Mississippi, hereby appoint my wife, Donna Jo Williams, a resident of Olive Branch, Mississippi, as my Attorney-In-Fact under the Uniform Durable Power of Attorney Act.

B. If my wife, Donna Jo Williams, shall predecease me or having accepted the appointment shall die or resign then in such event I appoint my daughter, Ashley Renee Williams Moore, to serve as my Attorney-In-Fact under the Uniform Durable Power of Attorney Act.

C. This power of attorney shall not be affected by my subsequent disability or incapacity. I intend for the authority conferred on my wife and daughter herein to be exercisable by them notwithstanding any such disability or incapacity.

2. POWERS

I authorize my Attorney-In-Fact to take the following actions on my behalf:

A. Monies. To use the funds in any account of mine on deposit with any banking or any other financial institution, for my health, support and comfort; to collect any monies due me; to make deposits and withdrawals, whether by check or otherwise; to renew or not to renew any certificates of deposit; and to have full access to the contents of my safe deposit box.

Gerena Williams
901-647-1016



B. **Personal Property.** To buy, sell, or otherwise deal with personal property on my behalf, including but not limited to automobiles, clothing, jewelry, furniture, furnishings and other household or personal effects.

C. **Real Estate.** To sell, rent, maintain and otherwise deal with my real estate upon such terms and conditions as my Attorney-In-Fact may determine to be in my best interest (including the power to take back a purchase-money mortgage in part payment of the purchase price in the event of a sale). This authorization includes, but is not limited to, my residence.

D. **Medical Care.** To contract for my entry into, maintenance at, or release from any hospital, convalescent center, nursing home, or other health care facility, including the authority to approve or disapprove any proposed medical treatment to the extent that I am, in the opinion of my treating physician, incompetent or incapable of acting for myself.

E. **Other Acts.** To take any and all actions on my behalf as fully and effectively as if I were personally present. In conferring this general power of attorney on my wife and daughter, I am fully aware of the broad authority being granted, and express my full confidence in them.

3. **RATIFICATION OF ACTS**

I ratify and confirm all acts done by my Attorney-In-Fact under this durable power of attorney. All third parties acting in good faith reliance on this power shall be absolved of any liability pursuant to the provisions of the Uniform Durable Power of Attorney Act.



IN WITNESS WHEREOF, I hereby execute this durable power of attorney on the 11-10-10 day of November, 2010.

Ger E. Williams
GEREN E. WILLIAMS

STATE OF TN
COUNTY OF shelby

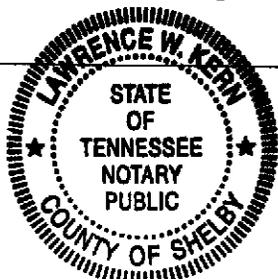
Before me, a Notary Public in and for said State and County, duly commissioned and qualified, personally appeared GEREN E. WILLIAMS, to me known to be the person described in and who executed the foregoing Durable Power of Attorney, and acknowledged that he executed the same as his free act and deed.

WITNESS my hand and Notarial Seal at office this the 10 day of November, 2010.

Lawrence W Kern

Notary Public

My Commission Expires:



MY COMMISSION EXPIRES:
9-10-2014

LAWRENCE W KERN
8519 Sweet Oaks Cv
Cammotown, TN 28138
wk 901-687-0997

LW