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DESOTO COUNTY, MS
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PREPARED BY/RETURN TO:
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FILE #: 120083

Grantor Address: 6432 Carson Drive, Olive Branch, Mississippi 38654
Grantor Telephone Number: Home - 662-893-7414 Work- 901-491-7474
Grantee Address: 6432 Carson Drive, Olive Branch, Mississippi 38654
Grantee Telephone Number: Home - 662-893-7414 Work- 901-491-7474

CONDITIONAL DURABLE POWER OF ATTORNEY

NOTICE to the Chancery Court of DeSoto County, Mississippi and all interested persons.

Upon the condition that I should subsequently become physically or mentally disabled so as to render me incapable of managing my own estate and personal affairs, I, Debora Monette (Wright) Berry, of 6432 Carson Drive, Olive Branch, Mississippi 38654, as principal, hereby appoint Ransome Lewis Berry of 6432 Carson Drive, Olive Branch, Mississippi 38654, as my attorney-in-fact, in my name, place and stead and for my use and benefit to act in and on my behalf to do every act, without limitation, which I could legally perform as a physically able, competent adult.

If my agent be unable or unwilling to serve, I hereby appoint Linda Carol McAdam of 5014 Harborside Drive, Wichita, KS 67204, as my successor attorney-in-fact for that same purpose.

If my agent be unable or unwilling to serve, I hereby appoint Kevin L. Berry of 8681 Sharit Dairy Road, Gardendale, Alabama, 35071, as my second successor attorney-in-fact for that same purpose.

My subsequent physical or mental disability shall be confirmed through the execution by my primary treating physician and one concurring physician of a statement reciting the following:

1. That he/she she is a duly qualified, licensed and practicing physician within the State of Mississippi, and has had more than three (3) years actual practice of

medicine within the State;

2. That he/she has made a personal, physical and mental examination of me which examination disclosed that I am presently suffering from a physical or mental incapacity.

3. That by reason of my physical or mental condition, I am not physically and/or mentally incapable of managing my own estate.

The physicians' statements shall be filed with the Clerk of the Chancery Court and thereafter it is my intent and desire for this instrument to have full force and effect.

If invoked, this durable power of attorney shall be nondelegable and shall remain in full force and effect until I die or until a written revocation of same is executed by me and filed with the Clerk of the Chancery Court.

This power of attorney shall not be affected by the lapse of time.

All acts done by my attorney-in-fact pursuant to the power conferred by this instrument during any period of my disability shall have the same effect and inure to the benefit of and bind me or my heirs, devisees and personal representatives as I were not disabled.

Dated this the 13th day of April, 2012.

Debora Monette Wright Berry
Debora Monette (Wright) Berry

STATE OF MISSISSIPPI
COUNTY OF DESOTO

PERSONALLY APPEARED before me, the undersigned authority in and for the said state and county, on this the 13th day of April, 2012, within my jurisdiction, the within named Debora Monette (Wright) Berry, who acknowledged that she executed the above foregoing instrument.

Joseph M. Sparkman, Jr.
Notary Public

My commission expires:

