

LAST WILL
OF
SUSAN E. CLINE

I, Susan E. Cline, declare this instrument to be my last Will. I revoke all other Wills and Codicils.

1. I am over the age of eighteen years.
2. My testamentary capacity is unaffected by any emotional, mental or physical problem.
3. The name of my husband is James M. Cline.
4. The names of my step-children are Angela M. Blevins and Jacqueline R. Daniel.
5. Incorporation by Reference. At the time of my death, there may be attached to this Will a written statement or list of items of tangible personal property not otherwise specifically disposed of by this will other than money, evidences of indebtedness, documents of title, securities, and property used in trade or business. This list will be in my handwriting and will be signed by me. It will describe the items and devisees with reasonable certainty. The items on this list are to be distributed to the respective devisees.

This section is effective only if I survive James M. Cline.

6. Residuary Gift. I give the rest of my estate to the James M. Cline and Susan E. Cline Trust which was established by a Revocable Trust Agreement executed on this date, but prior to the execution of this Will, for distribution under the terms of the Trust Agreement.

I make no provision for Jacqueline R. Daniel or her heirs under this instrument.

7. Taxes. All taxes assessed against my estate are to be paid out of my estate and shall be borne by each beneficiary in proportion to his interest in my estate.

8. Personal Representative. I appoint James M. Cline to serve as my estate's personal representative. If he cannot serve, for any reason, I appoint Kenneth R. Hargis to serve as my estate's personal representative. If Susan E. Cline and Kenneth R. Hargis are unable to serve, for any reason, I appoint Arvest Trust Company, N.A., to serve as my estate's personal representative.

I request that my estate's personal representative be allowed to serve without giving bond.

9/25/2015

Susan E. Cline



9. General Powers of Personal Representative. My estate's personal representative may dispose of any part of my estate in the manner he deems best to pay my debts, effectuate the terms of this Will, or for any other purpose without first securing the approval of any disposition of any court in which my estate might be administered.

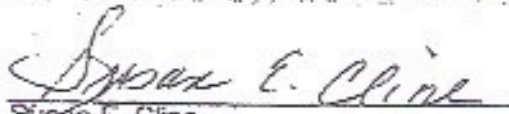
My estate's personal representative may exercise any of the powers provided in Arkansas Code Annotated, Section 28-69-304, et seq., as they now exist or as they might be subsequently amended.

10. Heroic Measures. If I should have an incurable or irreversible condition that will cause my death within a relatively short time, and I am no longer able to make decisions regarding my medical treatment or if I should become permanently unconscious, I direct my attending physician, pursuant to the Arkansas Rights of the Terminally Ill or Permanently Unconscious Act, Ark. Code Ann. 20-17-201, et seq., as they now exist or as they might be subsequently amended, to withhold or withdraw life-sustaining treatments that are no longer necessary to my comfort or to alleviate pain.

11. Interpretation. The terms of this Will are to be interpreted under Arkansas law.

12. Simultaneous Death. If James M. Cline and I die in a manner which makes it impossible to determine which of us died first, my Will is to be construed as if I survived him.

I execute this instrument today, 9/25/2015 2015, in the presence of the witnesses whose signatures appear below. I asked them to be my attesting witnesses.


Susan E. Cline

We state that the above will, consisting of this page and one (1) preceding typewritten page, was signed by Susan E. Cline after she declared it to be her last Will. The declaration and signing were made in our presence. Susan E. Cline requested that we attest her Will which we did in her presence and in the presence of each other. Susan E. Cline appeared to be in good emotional, mental and physical health.

Each of us is eighteen years of age or older.

Date 25 September 2015.

NAMES

ADDRESSES

<u>Stephen Lee Wood</u>	<u>Rogers Arkansas</u>
<u>Rebecca Wood</u>	<u>Rogers AR</u>

PROOF OF WILL

STATE OF ARKANSAS
COUNTY OF BENTON

We,

Rebecca F Wood
and STEPHEN LEE WOOD

the witnesses whose names are signed to the attached instrument, being sworn declare to the undersigned authority that the testatrix signed the instrument as her last Will, that she signed willingly, and that she executed it as her voluntary act for the purposes expressed in the Will, and that each of the witnesses, in the presence and hearing of the testatrix and each other, signed the Will as a witness and that to the best of his or her knowledge, the testatrix was at the time eighteen years of age or older, of sound mind, and under no constraint or undue influence.

Rebecca F Wood
Witness

Stephen Lee Wood
Witness

SUBSCRIBED TO AND SWORN TO BEFORE ME:

DATE: 25 Sept 2015

Mary Grayson
Notary Public

My commission expires: 30 July 2020

This instrument prepared by:
Stephen Lee Wood, P.A.
110 South Second Street
Rogers, Arkansas 72756

OFFICIAL SEAL
MARY GRAYSON
NOTARY PUBLIC, ARKANSAS
BENTON COUNTY
COMMISSION #12377037
COMMISSION EXP. 07/30/2020

LAST WILL
OF
SUSAN E. CLINE

I, Susan E. Cline, declare this instrument to be my last Will. I revoke all other Wills and Codicils.

1. I am over the age of eighteen years.
2. My testamentary capacity is unaffected by any emotional, mental or physical problem.
3. The name of my husband is James M. Cline.
4. The names of my step-children are Angela M. Blavins and Jacqueline R. Daniel.
5. Incorporation by Reference. At the time of my death, there may be attached to this Will a written statement or list of items of tangible personal property not otherwise specifically disposed of by this will other than money, evidences of indebtedness, documents of title, securities, and property used in trade or business. This list will be in my handwriting and will be signed by me. It will describe the items and devisees with reasonable certainty. The items on this list are to be distributed to the respective devisees.

This section is effective only if I survive James M. Cline.

6. Residuary Gift. I give the rest of my estate to the James M. Cline and Susan E. Cline Trust which was established by a Revocable Trust Agreement executed on this date, but prior to the execution of this Will, for distribution under the terms of the Trust Agreement.

I make no provision for Jacqueline R. Daniel or her heirs under this instrument.

7. Taxes. All taxes assessed against my estate are to be paid out of my estate and shall be borne by each beneficiary in proportion to his interest in my estate.

8. Personal Representative. I appoint James M. Cline to serve as my estate's personal representative. If he cannot serve, for any reason, I appoint Kenneth R. Hargis to serve as my estate's personal representative. If Susan E. Cline and Kenneth R. Hargis are unable to serve, for any reason, I appoint Arvest Trust Company, N.A., to serve as my estate's personal representative.

I request that my estate's personal representative be allowed to serve without giving bond.

9/25/2015

Susan E. Cline



9. General Powers of Personal Representative. My estate's personal representative may dispose of any part of my estate in the manner he deems best to pay my debts, effectuate the terms of this Will, or for any other purpose without first securing the approval of any court in which my estate might be administered.

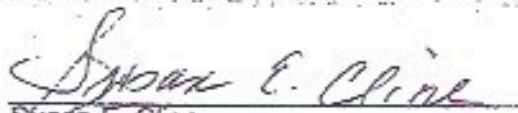
My estate's personal representative may exercise any of the powers provided in Arkansas Code Annotated, Section 28-69-304, et seq., as they now exist or as they might be subsequently amended.

10. Heroic Measures. If I should have an incurable or irreversible condition that will cause my death within a relatively short time, and I am no longer able to make decisions regarding my medical treatment or if I should become permanently unconscious, I direct my attending physician, pursuant to the Arkansas Rights of the Terminally Ill or Permanently Unconscious Act, Ark. Code Ann. 20-17-201, et seq., as they now exist or as they might be subsequently amended, to withhold or withdraw life-sustaining treatments that are no longer necessary to my comfort or to alleviate pain.

11. Interpretation. The terms of this Will are to be interpreted under Arkansas law.

12. Simultaneous Death. If James M. Cline and I die in a manner which makes it impossible to determine which of us died first, my Will is to be construed as if I survived him.

I execute this instrument today, 9/25/2015 2015, in the presence of the witnesses whose signatures appear below. I asked them to be my attesting witnesses.


Susan E. Cline

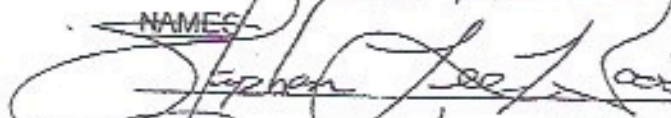
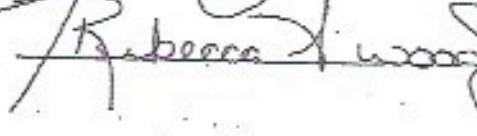
We state that the above will, consisting of this page and one (1) preceding typewritten page, was signed by Susan E. Cline after she declared it to be her last Will. The declaration and signing were made in our presence. Susan E. Cline requested that we attest her Will which we did in her presence and in the presence of each other. Susan E. Cline appeared to be in good emotional, mental and physical health.

Each of us is eighteen years of age or older.

Date 25 September 2015.

NAMES

ADDRESSES

	<u>Rogers, Arkansas</u>
	<u>Rogers AR</u>

PROOF OF WILL

STATE OF ARKANSAS
COUNTY OF BENTON

We,

Rebecca F Wood
and STEPHEN LEE WOOD

the witnesses whose names are signed to the attached instrument, being sworn declare to the undersigned authority that the testatrix signed the instrument as her last Will, that she signed willingly, and that she executed it as her voluntary act for the purposes expressed in the Will, and that each of the witnesses, in the presence and hearing of the testatrix and each other, signed the Will as a witness and that to the best of his or her knowledge, the testatrix was at the time eighteen years of age or older, of sound mind, and under no constraint or undue influence.

Rebecca F Wood
Witness

Stephen Lee Wood
Witness

SUBSCRIBED TO AND SWORN TO BEFORE ME.

DATE: 25 Sept 2015

Mary Grayson
Notary Public

My commission expires: 30 July 2020

This instrument prepared by:
Stephen Lee Wood, P.A.
110 South Second Street
Rogers, Arkansas 72756

OFFICIAL SEAL
MARY GRAYSON
NOTARY PUBLIC, ARKANSAS
BENTON COUNTY
COMMISSION #12377937
COMMISSION EXP. 07/30/2020