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14P1076

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RICHARD R. ROOKER, CLERK
D.C.

Last Will and Testament

OF
ANN A. COBLE

I
DECLARATIONS

1.1 I, ANN A. COBLE, of 2929 McGavock Pike, Nashville, Davidson County, TN 37214, which I declare to be my domicile, do hereby make, publish and declare this to be my Last Will and Testament, hereby revoking all wills and codicils at any time heretofore made by me.

1.2 I am married to CLAY C. COBLE (my "husband"), and we have two (2) children: JAMES EDWARD COBLE and CAROL ANN TINNELL (my "children").

II
PAYMENT OF FUNERAL AND ADMINISTRATION EXPENSES, DEBTS AND TAXES

2.1 My Executor should pay my funeral expense (including the cost of a grave marker), and the expense of administering my estate as soon as possible after my death.

2.2 My Executor shall pay my lawful debts.

2.3 My Executor shall pay my lawful inheritance, estate or other death taxes (including interest and penalties) from my residuary estate. My Executor shall not require a beneficiary of my probate or my non-probate estate to pay any amount of these taxes.

2.4 If my husband dissents from my Will, the above provisions still apply.

III
GENERAL PROVISIONS FOR HUSBAND

3.1 All of the property which I may own at the time of my death, real, personal and mixed, tangible and intangible, of whatsoever nature and wheresoever situated, including all property which I may acquire or become entitled to after the execution of this Will, including all legacies and devises, I bequeath and devise in fee to my husband.

IV
ALTERNATE PROVISIONS IF HUSBAND FAILS TO SURVIVE

4.1 In the event that my husband, Clay C. Coble, shall predecease me, then and in that event:

A. I bequeath and devise my entire estate equally to my two children, James Edward Coble and Carol Ann Tinnell.

GMO
gcm

HARVILL & LOVLACE
ATTORNEYS-AT-LAW
102 BANK AVE.
CENTERVILLE, TENNESSEE
37033
(615)729-4659/3751

BILL GARRETT, Davidson County
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B. In the event either of my children shall not survive me, I devise and bequeath the interest which such child would have received if living, per stirpes unto his/her issue who shall be living at the time of my death, if any; and if none, then I devise and bequeath his/her interest to his/her surviving tenants in common or tenant in common, as the case may be; provided however, that the then surviving issue of any deceased tenant in common shall receive per stirpes and in fee the interest of their deceased parent.

C. I devise and bequeath the equal share of each deceased child of mine, who leaves a child or children (my "grandchild" or "grandchildren") living at the time of my death, to my trustee, to be held in a separate trust for the benefit of each grandchild or grandchildren if under the age of twenty-one (21) years of age at the time of my death, to be administered and distributed as follows:

1. My trustee shall be the child's surviving parent.

2. Until such grandchild reaches the age of twenty-one (21) years, my trustee shall pay to or apply for the benefit of that child so much of the principal or income of the trust as my trustee shall deem necessary or advisable to provide for that child's care, support, maintenance, health and education (including higher or special education). My trustee shall accumulate any income not so distributed and shall add the same to principal annually.

2. My trustee shall distribute to that grandchild the balance of the trust principal and any accumulated income not so distributed when that grandchild reaches the age of twenty-one (21) years.

3. In the event my grandchild dies prior to reaching the age of twenty-one (21) years, my trustee shall distribute the remaining trust principal and any accumulated income to the then living issue of my deceased grandchild in equal shares per stirpes.

4. If any child shall have attained any of such respective ages at the time when such trust fund is directed to be set apart for such child, the Trustee shall distribute to such child such part or parts or all, as the case may be, of such trust fund (instead of holding same in trust) as are directed to be distributed to such child upon attaining such respective ages.

5. Notwithstanding anything in this Will to the contrary, I direct that no trust created hereunder shall continue for a period longer than permissible under my domiciliary state's Rule Against Perpetuities, and upon the expiration of such period, each such trust shall terminate and the assets thereof shall be distributed outright to those persons then in being who would be entitled to receive the trust principal from that trust at the time of the termination specified, in equal shares.

6. If at the termination of any trust created under this Will any part of the trust principal is to be distributed to a person who shall then be the beneficiary of any other trust

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created under this Will, I direct that such person's part of the trust principal be added to his or her trust, to be administered and distributed as an integral part thereof.

V
THE FIDUCIARY

5.1 Appointment:

A. I appoint CLAY C. COBLE as Executor of this Will, with CAROL ANN TINNELL as alternate Executrix.

5.2 Bond:
A. I excuse each fiduciary from making bond.

5.3 General Provision: The following provisions apply to my fiduciary:

A. My fiduciary includes my Executor, Trustee and their successors.

B. My fiduciary may:

(i) At public or private sale, for such consideration and on such terms and conditions as in the judgment of the Executor/Trustee are for the best interest of my estate and each beneficiary, sell, assign, transfer, convey or exchange the assets of my estate and execute and acknowledge appropriate instruments to accomplish these actions.

(ii) Except as limited herein, exercise those powers set forth in Section 3 of Chapter 110 of the Tennessee General Assembly of 1963, T.C.A. 35-50-110, to the extent applicable, all of which provisions and powers are incorporated herein by reference as fully as if copied herein verbatim.

(iii) Enter into each contract reasonably incident or necessary to the administration of the estate which the Executor/Trustee believes to be for the best interest of the estate.

Executed by me this 25 day of Oct, 1993.

Ann A. Coble
ANN A. COBLE

Signed by the said ANN A. COBLE, as and for her Will, in the presence of us, the undersigned, who at her request and in her sight and presence and in the presence of each other, have subscribed our names the day and date above written.

Virginia C. Moss

William Dossett
WITNESSES

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AFFIDAVIT

STATE OF TENNESSEE
COUNTY OF HICKMAN

1. The undersigned, after being first duly sworn according to law, depose and say:

1. That they are adult citizens of Centerville, Tennessee.

2. That they witnessed the execution of the Will of ANN A. COBLE, dated the 25 day of October, 1993, to which this affidavit is being made at the request of the Testatrix, and in accordance with Tennessee Code Annotated 32-2-110.

3. That their signatures are affixed to said Will, that they signed or affixed the same at the instance of and at the request of the Testatrix and in her presence, and in the presence of each other, at the place and on the date recited in said Will.

4. That the Testatrix signed said paper writing as and for her Will in their sight and presence.

5. That at the time they witnessed said Will, the Testatrix in their opinion, was of sound mind.

Denise C. Moss, CENTERVILLE, TENNESSEE

Wallace Daniel, CENTERVILLE, TENNESSEE

Sworn to and subscribed before me

this 25th day of October, 1993.

Notary Public
My commission expires: 7-29-97

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D.C.

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State of Tennessee
Department of Finance and Administration
Bureau of TennCare
Third Party Liability Division
310 Great Circle Road, 4th Floor
Nashville, Tennessee 37243
Toll Free: 866-389-8444 • FAX: 615-413-1941

Bill Haslam
Governor

Mark A. Emkes
Commissioner

6/27/2014

TOMMY C. ESTES
LEGAL COUNSEL
150 FOURTH AVE. N STE 2200
NASHVILLE, TN 37219

RE: CORA COBLE
Last Four Of SSN [redacted]

Dear TOMMY C. ESTES:

This letter constitutes notification of the release of the State of Tennessee's Bureau of TennCare against the above estate for the marked reason:

X This serves as a release of the Bureau of TennCare's interest in recovery from the above referenced estate as required by T.C.A. §71-5-116(c) (2). Based on a review of the information provided on the Request for Release of Estate Recovery Cost Claim form, we do not find long term TennCare benefits paid by the State of Tennessee on behalf of this individual.

___ This release is based upon the surviving spouse deferral, which meets the criteria defined in T.C.A. §71-5-116(c). The State of Tennessee does reserve the right to file a claim for long term care/nursing home services against the estate of the surviving spouse upon the death of the surviving spouse.

___ This release is based upon the decedents age exception, which meets the criteria defined in T.C.A. §71-5-116(c). The State of Tennessee recovers payments made only on behalf of individuals fifty-five years of age or older.

If there are questions, you may contact the Estate Recovery Unit at (866) 389-8444.

Sincerely,

Angela J. Howard

Exhibit "A"

STATE OF TENNESSEE

I, **RICHARD R. ROOKER,** Clerk of the Circuit Court for Davidson County, in the State aforesaid, do hereby certify that the foregoing is a true and correct copy of the ATTACHED EXHIBITS heretofore entered in the SEVENTH Circuit Court for Davidson County, Tennessee, on the 27 day of JUNE , 2014 , in Case Number 14P1076 between TINNELL, CAROL Petitioner, and COBLE, CORA ANN Respondent, as same remains in the records of said Court.

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 21 day of JULY 2014

RICHARD R. ROOKER, Clerk,

By _____
Deputy Clerk

SEAL