

Court of Appeals

Admission Application

State of Georgia Bar Number: 383990 Superior Court of Walker County
Date Admitted: 06/16/1995

The petitioner, having been regularly admitted and licensed to practice law in the superior courts of this State, and being a member in good standing of the State Bar of Georgia, respectfully applies for admission to the bar of this Court.

Last Name: Ingle First Name: Karen Middle Name: W

Signature: Karen W Ingle

Mailing Address: 4211 Cloud Springs Rd
Ringgold, GA 30736

We hereby certify that we are members of the bar of the Court of Appeals of Georgia, that we know the above applicant personally and that her/his private and professional character is good.

Bar Number: N/A Printed Name: _____
Signature: _____

Bar Number: N/A Printed Name: _____
Signature: _____

Request for replacement certificate *

Attorney Roll

(Please sign after the Oath has been administered)

FOR CLERK'S OFFICE USE ONLY

Date of Admission: _____

Admission by: In Court _____ Judge _____ Clerk _____

Orig Admission date to Court of Appeals
7/7/95

COURT OF APPEALS

47 Trinity Avenue, S.W.
Suite 501
Atlanta, GA 30334
(404) 656-3450

Receipt No. 107026

DATE 30 November 2012

RECEIVED OF The Ingle Law Firm, LLC

WE ACKNOWLEDGE RECEIPT OF THE FOLLOWING:

BRIEF OF APPELLANT _____

ENUMERATION OF ERRORS _____

WITHDRAWAL FEE _____

PHOTOCOPIES _____

ADMISSION FEE _____

CERTIFICATION FEE Replacement

APPLICATION COST _____

OTHER _____

CASE NUMBER _____

AMOUNT \$ 10.⁰⁰

Regions Bank # 081727

Sola M. Diamond

CLERK