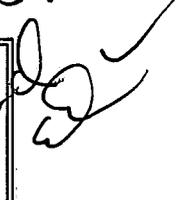


No fee received
need original of app. - will mail
C# 1759

Entered 

Court of Appeals of Georgia

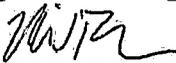
ADMISSION APPLICATION

Bar Number: 749604 Date Admitted to State Bar: JUNE 2015

To the Honorable Court of Appeals of Georgia:

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. **Attorneys must register in the Court of Appeals EFAST system after being admitted.**

Last Name: Felsen First Name: Michael Middle Name: Joseph

Signature: MICHAEL JOSEPH FELSEN  Digitally signed by MICHAEL JOSEPH FELSEN
DN: cn=MICHAEL JOSEPH FELSEN, o=OFFICE OF CENTRAL COUNCIL OF ADMINISTRATION, email=MJFELSEN@PPMH.ORG, c=US
Date: 2015.10.28 12:25:41 -0400

Firm or Agency: Phoebe Putney Health System

Mailing Address (Business address preferred):
417 W. Third Ave
Albany, GA 31706

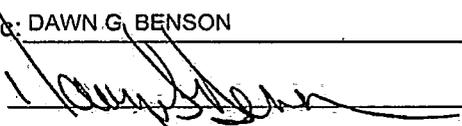
Telephone Number 229-312-4104

E-mail Address MFELSEN@PPMH.ORG

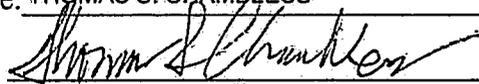
Sponsor Certification

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: 052299 Printed Name: DAWN G. BENSON

Signature: 

Bar Number: 119800 Printed Name: THOMAS S. CHAMBLESS

Signature: 

FOR CLERK'S OFFICE USE ONLY

Date of Admission: _____

Admission by: Clerk _____ Judge _____ Other _____

COURT OF APPEALS

47 Trinity Avenue, S.W.

Suite 501

Atlanta, GA 30334

(404) 656-3450

Receipt No. 113878

DATE: 10/29/15

RECEIVED OF Michael Jelsea

WE ACKNOWLEDGE RECEIPT OF THE FOLLOWING:

BRIEF OF APPELLANT _____

ENUMERATION OF ERRORS _____

WITHDRAWAL FEE _____

PHOTOCOPIES _____

ADMISSION FEE 3000 Albany _____

CERTIFICATION FEE _____

APPLICATION COST _____

OTHER _____

CASE NUMBER _____

AMOUNT \$ 3000
C# 1759

Clruder
CLERK