

Court of Appeals of Georgia

ADMISSION APPLICATION

Bar Number: 152422

Date Admitted to State Bar: 11/10/9

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.

Last Name: LANE First Name: LAIVIE Middle Name: M

Signature: [Handwritten Signature]

Firm or Agency: Fulton County Public Defender's Office

Mailing Address (Business address preferred):
100 Peachtree St NW Suite 1600
Atlanta, GA 30303

Telephone Number 404 612 0532

E-mail Address LAIVIE.LANE @ Fultoncountyga.gov

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: 756128 Printed Name: ALISSA JONES

Signature: [Handwritten Signature]

Bar Number: 354375 Printed Name: Michael D. Hill

Signature: [Handwritten Signature]

FOR CLERK'S OFFICE USE ONLY

Date of Admission: 9^{SEP} 2014

Admission by: Clerk [Handwritten Signature] Judge _____ Other _____