

Name, _____

S. Winterich

Address, _____

Atlanta

Georgia

Admitted, _____

3/8/95

30319-4117

(Blanks above will be filled in by the Clerk of the Court of Appeals)

Roll Book Vol. _____

4782

Number _____

State Bar No. _____

771030

ATLANTA, GEORGIA

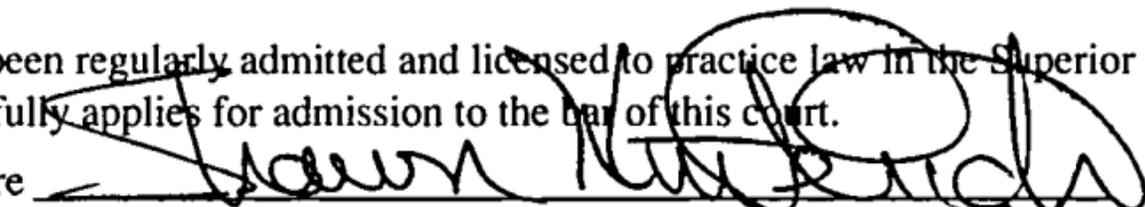
TO THE HONORABLE COURT OF APPEALS OF THE STATE OF GEORGIA:

The petitioner having been regularly admitted and licensed to practice law in the Superior Courts of this State, respectfully applies for admission to the bar of this court.

Signature

Name (Print)

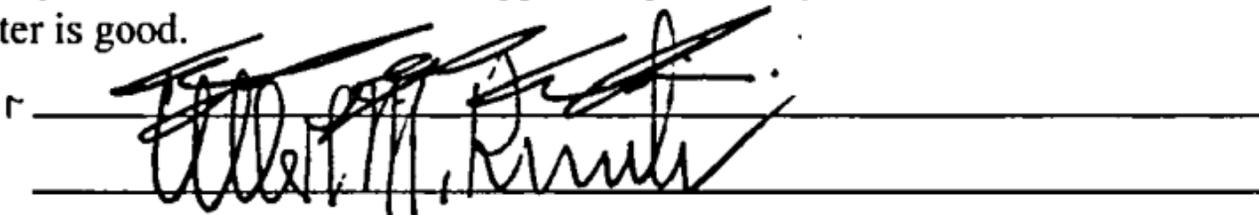
Address



SHAWN M. WINTERICH

1879 N. DRUID HILLS RD, N.E.
ATLANTA, GA 30319-4117

We hereby certify that we know the above applicant personally, and that her/his moral and professional character is good.



(The foregoing certificate must be signed by two members of the bar of the Court of Appeals)

