

THE STATE OF NEW HAMPSHIRE  
JUDICIAL BRANCH  
http://www.courts.state.nh.us

Court Name: Merrimack Superior Court  
Case Name: In the Matter of the Liquidation of The Home Insurance Company  
Case Number: 217-2003-EQ-00106  
(if known)

**APPEARANCE/WITHDRAWAL**

**APPEARANCE**

Type of appearance (Select One)

Appearance  Limited Appearance (*Civil cases only*)

If limited appearance, scope of representation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Select One:

As Counsel for:

Official Committee of the Talc c/o Anderson Kill P.C. 212-278-1000  
Claimants of LTL Management LLC 1251 Avenue of the Americas, NY, NY 10020 (Telephone Number)  
(Name) (Address)  
\_\_\_\_\_  
(Name) (Address) (Telephone Number)  
\_\_\_\_\_  
(Name) (Address) (Telephone Number)

I will represent myself (*self-represented*)

**WITHDRAWAL**

As Counsel for \_\_\_\_\_

Type of Representation: (Select one)

Appearance:

Notice of withdrawal was sent to my client(s) on: \_\_\_\_\_ at the following address:  
\_\_\_\_\_

A motion to withdraw is being filed.

Limited Appearance: (Select one)

I am withdrawing my limited appearance as I have completed the terms of the limited representation.

The terms of limited representation have not been completed. A motion to withdraw is being filed.

2017 JUN -7 A 10:50  
MERRIMACK SUPERIOR

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APPEARANCE/WITHDRAWAL

**For non e-filed cases:**

I state that on this date I am  mailing by U.S. mail, or  Email (only when there is a prior agreement of the parties to use this method), or  hand delivering a copy of this document to:

\_\_\_\_\_  
Other party

\_\_\_\_\_  
Other party's attorney

**OR**

**For e-filed cases:**

I state that on this date I am sending a copy of this document as required by the rules of the court. I am electronically sending this document through the court's electronic filing system to all attorneys and to all other parties who have entered electronic service contacts (email addresses) in this case. I am mailing or hand-delivering copies to all other interested parties.

Robert M. Horkovich

Name of Filer

Anderson Kill P.C. 1679778

Law Firm, if applicable Bar ID # of attorney

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Address

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City State Zip code

/s/ Robert M. Horkovich 6/6/2022

Signature of Filer Date

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E-mail