

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

Court Name: Merrimack Superior Court
Case Name: IMO 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: collectively the "ACE Companies"

<u>Century Indemnity Company</u>	<u>("Century")</u>	<u>(773) 991-2812</u>
(Name)	(Address)	(Telephone Number)
<u>ACE Property & Casualty</u>	<u>Insurance Company ("ACE P&C")</u>	<u>(773) 991-2812</u>
(Name)	(Address)	(Telephone Number)
<u>Pacific Employers Insurance</u>	<u>Company ("PEIC")</u>	<u>(773) 991-2812</u>
(Name)	(Address)	(Telephone Number)
<u>ACE American Reinsurance Company ("AARE")</u>		
(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.

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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

All counsel of record

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.

Robin Dusek

Name of Filer

Cohn Baughman

6255875

Law Firm, if applicable

Bar ID # of attorney

525 W Monroe St

Address

Chicago

IL

60661

City

State

Zip code



Signature of Filer

(773) 991-2812

Telephone

robin.dusek@mclolaw.com

E-mail

4/17/25

Date

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Jennifer Arnold

Name of Filer

Cohn Baughman

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