This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Appellate Courts. **Instructions ▼** THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER F-FILED RULE 311(a). Check the box to the Transaction ID: 1-25-0969 File Date: 5/23/2025 4:10 PM right if your case Thomas D. Palella involves custody, Clerk of the Appellate Court APPELLATE COURT 1ST DISTRICT visitation, or removal Appellate Case No.: 1-25-0969 of a child. Enter the appellate court case number. IN THE APPELLATE COURT OF Just below "In the **ILLINOIS** Appellate Court of Illinois," enter the number of the **FIRST** District appellate district where the appeal was filed. Appeal from the Circuit Court If the case name in the Cook In re County trial court began with "In re" (for example, "In re Marriage of Trial Court Case No.: Jones"), enter that 22L010905 Alphonse A. Talarico, attorney name. Below that, Plaintiff/Petitioner (First, middle, last names) enter the names of the parties in the trial court, and check the √ Appellant Appellee Honorable correct boxes to show Anthony C. Swanagan which party filed the appeal ("appellant") Judge, Presiding ٧. and which party is responding to the appeal ("appellee"). ADR Systems of America LLC. et al., Defendant/Respondent (First, middle, last_names) To the far right, enter the trial court county, **Appellant** 1 **Appellee** trial court case number. and trial judge's name. MOTION In 1, check the box that identifies who is filing V 1. Plaintiff/Petitioner-Appellant Plaintiff/Petitioner-Appellee the Motion. Defendant/Respondent-Appellant Defendant/Respondent-Appellee In 2, state specifically what you want the court State what you want the court to do for you: Withdraw my Notice of Appeal. to give you (e.g., "35 more days to file my brief"). This should be a short statement. You will give your reasons in the next section.

In 3, write down the reasons why the court should give the relief you are asking for (e.g. "I need more time to finish and file my brief, because [insert reasons]").

- 3. State the reasons why the court should do what you have asked it to do:
- 1. On May 19, 2025, Alphonse A. Talarico filed a Notice of Appeal in this matter. 2. Subsequently,

Alphonse A. Talarico has learned that a Party has filed a timely post-judgment motion in this case.

3. Pursuant to Illinois Supreme Court Rule 303(a)(2), when a timely post-judgment motion has been filed by any party, a notice of appeal filed before the entry of the order disposing of the last pending post-judgment motion becomes effective when the order disposing of said motion is entered.

4. Given the pending post-judgment motion filed by another party, Alphonse A Talarico's Notice of

Appeal is premature and of no effect at this time. 5. Illinois Supreme Court Rule 303(a)(2) further provides that a party intending to challenge an order disposing of any post-judgment motion must file a notice of appeal or an amended notice of appeal within 30 days of the entry of said order.

6. Alphonse A Talarico seeks to withdraw the previously filed Notice of Appeal to avoid confusion and ensure compliance the proper appellate procedures.7. Alphonse A. Talarico reserves the right

to file a new or amended notice of appeal, if necessary, following the disposition of the pending post

-judgment motion, in accordance with Illinois Supreme Court Rule 303.

Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name.

Telephone

Enter your complete current address and telephone number.

I certify that everything in the *Motion* is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under <u>735 ILCS 5/1-109</u>.

/s/ Alphonse A. Talarico 707 Skokie Blvd. #600
Your Signature Street Address

Alphonse A. Talarico

Print Your Name

Northbrook, Illinois, 60062

City, State, ZIP

(312) 808-1410

MNA-M 2703.2 Page 2 of 5 (01/18)

E	P	0	0	F	OF	2	FF	21/	IC	F
		U	U	г	OI	3		v	10	

I sent this document:

In 1a, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

In 1b, check the box to show how you sent the document, and fill in any other information required on the blank lines.

CAUTION: If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

In c, fill in the date and time that you sent the document.

In 2, if you sent the document to more than 1 party or lawyer, fill in a, b, and c. Otherwise leave 2 blank.

lame:	Robert	Α	Chapmar	1			
	First	Middle	Lá	ast			
Address:	190 South LaSalle Street, Suite 3850 Chicago Illinois 60603						
	Street, Apt #	City	State	ZIP			

Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

 Address of Post Office or Mailbox
 Third-party commercial carrier, with delivery paid for at:

 Name (for example, FedEx or UPS) and office address
 ✓ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
 Email (not through an EFM or EFSP)
 Mail from a prison or jail at:

 On: May 23, 2025

2. I sent this document:

a. To:

Paul Dulberg Name: First Middle Last Address: 4606 Hayden Ct. McHenry Illinois 60051 Street. Apt # City State ZIP Email address: Paul_Dulberg@comcast.net Personal hand delivery By: Regular, First-Class Mail, put into the U.S. Mail with postage paid at: Address of Post Office or Mailbox

Name (for example, FedEx or UPS) and office address

Third-party commercial carrier, with delivery paid for at:

			S	ervice provide mail (not throu lail from a pri	ugh an EFM or EFSP) son or jail at:) or an approved el	ectronic filing
			٨	lame of prison	or jail		
	C.	On:	May 2	3, 2025			
		At:	4:30 Time] a.m. 🔽 p.m.		
In 3, if you sent the document to more than 2 parties or lawyers, fill in a, b, and c.	3. I se	ent this	docum	nent:			
Otherwise leave 3 blank.	a.	To:					
orank.		Name	-	omas	W.	Kost	
			Fii		Middle	Last	
		Addre			ter Street Mount Prospect	Illinois	60056 ZIP
				Street, Apt #	City	State	ZIP
		Emai	l addre	ess: tkos999	@gmail.com		
	b.	Ву:		Personal hand Regular, First-	d delivery Class Mail, put into the U.S.	Mail with postage	oaid at:
			7	Address of Post	t Office or Mailbox		
				hird-party co	mmercial carrier, with deliver	ry paid for at:	
				lame (for exam	nple, FedEx or UPS) and office	address	
			V		ectronic filing manager (EFM		ectronic filing
					ugh an EFM or EFSP)		
				//ail from a pri			
				lame of prison	or jail		
	C.	On:		/2025			
If you are serving more than 3 parties or lawyers, fill out and file 1 or more Additional Proof of Service forms		At:	4:30 Time] a.m. 🔽 p.m.		

Enter the Case Number given by the Appellate Court Clerk: 1-25-0969

Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name.

I certify that everything in the Proof of Service is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.

/s/ Alphonse A. Talarico	
Your Signature	
Alphonse A. Talarico	
Print Your Name	