

APPENDIX III
FORM OF ACKNOWLEDGMENT OF
ATTORNEY'S MOTION FOR DISMISSAL
AND
CONSENT TO THE DISMISSAL OF THE APPEAL

Case No. _____

v.

To: Clerk of the Court
United States Court of Appeals
219 South Dearborn Street
Chicago, Illinois 60604

I have been informed of my attorney's intention to move to dismiss my appeal. I concur in my attorney's decision and hereby waive all rights to object or raise any points on appeal.

(Name)

(Street Address or Prison Box)

(City, State, Zip Code)