

Form 2
IN THE SUPREME COURT OF THE STATE OF MONTANA
Supreme Court Cause No. _____
(To be assigned by the Clerk of the Supreme Court)

Attorney for _____
Address _____
Phone _____
Fax _____
E-mail _____

Appellant/Cross-Appellee,

v. NOTICE OF CROSS-APPEAL

Appellee/Cross-Appellant.

NOTICE is given that _____, the Cross-Appellant above-named and who is the _____ (plaintiff/petitioner/or other designation) in that cause of action filed in the _____ Judicial District, in and for the County of _____, as Cause No. _____, hereby cross-appeals to the Supreme Court of the State of Montana from the final judgment or order entered in such action on the _____ day of _____, 2____.

THE CROSS-APPELLANT FURTHER CERTIFIES:

1. That this cross-appeal ___is/is not___ subject to the mediation process required by M. R. App. P. 7. If subject to mediation, the money judgment being sought ___is/is not___ less than \$5,000.
2. That this cross-appeal ___is/is not___ an appeal from an order certified as final under M. R. Civ. P. 54(b). If this is such an appeal, a true copy of the District Court's certification order is attached hereto as Exhibit "A."
3. That the notice required by M. R. App. P. 27 has been or will be given, within 11 days of the date hereof, to the Supreme Court and to the Montana Attorney General with respect to a challenge to the constitutionality of any act of the Montana Legislature.
4. That all available transcripts of the proceedings in this cause involving the issue(s) cross-appealed ___have been/have not been___ ordered from the court reporter contemporaneously with the filing of this notice of cross-appeal. If all available transcripts have not been ordered, that Cross-Appellant has complied with the provisions of M. R. App. P. 8(3) contemporaneously with the filing of this notice of appeal.
5. That included herewith is the filing fee prescribed by statute, or the affidavit to proceed without payment of the required filing fee prescribed in the Appendix of Forms as Form 3.

Dated this _____ day of _____, 2____.

Attorney for _____

CERTIFICATE OF SERVICE

I hereby certify that I have filed a true and accurate copy of the foregoing NOTICE OF CROSS-APPEAL with the Clerk of the Montana Supreme Court and that I have served true and accurate copies of the foregoing NOTICE OF CROSS-APPEAL upon the Clerk of the District Court, each attorney of record, and each party not represented by an attorney in the above-referenced District Court action, as follows:

(list name and address of Clerk of the District Court and each attorney or party served).

Dated this _____ day of _____, 2____.

Name

Address

Title