

## FILED

11/30/2022

Case Number: DA 22-0681

For Production The Supreme COURT STATE OF MONTANA

Name	S
Andrew David Sherod, #3032158	
700 Conley Lake Rd	NOV 3 0 2022
City State Zip  Deer Lodge, Montana 59722  [e-mail address]	Bowen Greenwood Clerk of Supreme Court State of Montana
[Designation of Party]	
IN THE SUPREME COU	RT OF THE STATE OF MONTANA
No [to be assigned	by Clerk of Supreme Court]

NOTICE OF APPEAL

Appellee.

Appellant,

Andrew David Sherod,

v.

State of Montana



O Montana Supreme Court

NOTICE OF APPEAL PAGE 1 OF 4

November , 20 22
November , 20 22 [Date final judgment was entered]
I CERTIFY: [Check one]
$\Box$ This appeal is subject to the mediation process required by M. R. App. P. 7, or
This appeal is not subject to the mediation process required in M. R.
App. P. 7.
I CERTIFY: [Check one]
$\Box$ This appeal is NOT an appeal from an order certified as final under M. R. Civ. P. 54(b), or
☑ This appeal is an appeal from an order CERTIFIED as final under the M. R. Civ. P. 54(b). A true copy of the District Court's "CERTIFICATION ORDER" is attached as exhibit "A."
I FURTHER CERTIFY: [Check one]
$\hfill\Box$ All relevant transcripts of the proceedings in this cause have been ordered from the court reporter, or
$\square$ I have complied with the provisions of M. R. App. P. 8(3).
INCLUDED WITH THIS NOTICE IS: [Check one]
$\square$ A copy of the order or judgment from which I am appealing, or



☐ I will file a copy of the order or judgment from which I am appealing as soon as possible. I have requested a copy of the order or judgment from the Clerk of District Court.			
[Check one of the following]  ☐ the filing fee of \$100.00.			
☑ a Motion to Proceed Without Payment of Filing Fee.			
Respectfully submitted this 20thday of November , 20 22 .  [Signature]   Sherod   [Printed name]   Appellant			
CERTIFICATE OF SERVICE			
I certify that I have filed this <b>Notice of Appeal</b> with the Clerk of the Montana Supreme Court; and that I have mailed or hand delivered copies to the Clerk of the District Court, each attorney of record, each court reporter from whom a transcript has been ordered, and any party not represented by counsel as follows:			
[Clerk of the District Court] Thirteenth Judicial District Court			
P.O. Box 35030 , Billings Montana 59701 [Address]			



O Montana Supreme Court

[Court Reporter]

NOTICE OF APPEAL PAGE 3 OF 4

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[Address]	-
[Name of opposing counsel]	
Yellowstone County Attorney,	
P.O. Box 35035, Billings Montana 59701	
[Address]	
Counsel for	
[Party representing himself or herself]	
[Address]	00.00
DATED this 20 day of November    Movember     Indiew file     [Signature]     Andrew Sheroe	_, 20 <u>22</u>
Andrew Sherod	<u></u>

