

FILED

02/18/2025

Bowen Greenwood  
CLERK OF THE SUPREME COURT  
STATE OF MONTANA

Case Number: DA 24-0396

Form 26

Angelina Rose Ruffatto  
Name  
35120 Dublin Gulch Rd.  
Polson, MT 59860  
City State Zip  
archofkindness@gmail.com  
[e-mail address]  
Appellant  
[Designation of party]

FILED

FEB 18 2025

Bowen Greenwood  
Clerk of Supreme Court  
State of Montana

## IN THE SUPREME COURT OF THE STATE OF MONTANA

No. DA-24-0396  
[to be assigned by Clerk of Supreme Court]

Angelina Rose Ruffatto

Appellant,

MOTION FOR  
EXTENSION OF TIME

v.

Clinton Anderson

Appellee.

[Use this form to ask the Court for more time to file a brief or other document.]

I move the Court for 30 days of additional time to:

☐ File an opening brief on appeal. [M. R. App. P. 26]

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☐ File a response brief. [M. R. App. P. 26]

☒ File a opening brief

The current due date is February 17, 2025.

If this is a second or subsequent request for an extension of time, you must explain the reason the extension is needed. You must also state a good reason why you need the extension of time. [Rule 26(2)]

Briefly explain the reason you need additional time:

I was sincerely hoping that I would not have to request for this extension of time, and that by now I would have at least been able to enter my home one time to get all of my court files and computer, but the insurance company postponed my examination under oath for the fire and there has still

I have contacted opposing counsel or Clint Anderson who been  
[Name of party representing himself or herself] no  
is not represented by counsel, and access

☒ there is no objection to the motion.

☐ there is an objection to the motion.

[M. R. App. P. 16, 26]

☐ I am incarcerated and not required to contact opposing counsel.

DATED this 17 day of February, 2025.

[Signature]

Angeline Ruffatto  
[Print name]



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**CERTIFICATE OF SERVICE**

I certify that I have filed this **Motion for Extension of Time** with the Clerk of the Montana Supreme Court and that I have mailed or hand delivered a copy to each attorney of record and any party not represented by counsel as follows:

\_\_\_\_\_  
[Name of opposing counsel]

\_\_\_\_\_  
[Address]

Counsel for \_\_\_\_\_

Clinton Anderson  
[Other party representing himself or herself]

Po Box 249  
Polson MT 59860  
[Address]

  
[Name]

Angelina Ruffatto  
[Print name]



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