

§ 12.3 Notice of Cross-Appeal

**IN THE [Insert Number] JUDICIAL DISTRICT DISTRICT COURT OF [Insert Name]
COUNTY, KANSAS (CRIMINAL)(CIVIL) DEPARTMENT**

[Insert Name],

Plaintiffs-Appellees,

vs.

[Insert District Court Case Number]

[Insert Name],

Defendant-Appellant.

NOTICE OF CROSS-APPEAL

[Name the cross-appealing party or parties] cross-appeal(s) from [designate the judgment or part of the judgment or other appealable order] to the Court of Appeals of the State of Kansas.

Attorney's Signature

/s/ _____

Attorney's Name (typed or printed)

Kansas Attorney Registration Number

Address

Telephone Number

Fax Number

E-mail Address

Name of the Party Represented

CERTIFICATE OF SERVICE

I certify that a true and correct copy of this Notice of Cross-Appeal was sent by [Insert Method] on [Insert Date] to:

[Insert names and addresses of those on whom service is made.]

/s/
Attorney's Name and Registration Number