To be inserted by Court			
Case Number:			
Date Filed:			
FDN:			
STATEMENT OF CROSS CLAIM			
[SUPREME/DISTRICT/MAGISTRATES] Delete all but one COURT OF SOUTH AUSTRALIA CIVIL JURISDICTION [MINOR CIVIL] If applicable [NAME OF LIST] LIST If applicable			
Please specify the Full Name including capacity (eg Administrator, Liquidator, Trustee) and Litigation Guardian Name (if applicable) for each party. Each party should include a party number if more than one party of the same type.			
First Applicant			
First Respondent			
First Interested Party			
Lodging Party			
Name of law firm / solicitor	Full Name (including Also Known as, capacity (eg Administrator, Li	quidator, Trustee) and Litigation Guardian Name (if applicable))	
If any	Law Firm	Solicitor	
Part 1 Introduction Summary of cross claim – Summarise the co	ross claim in one or two sentences		
Legal basis of cross claim - List causes of a	ction/statutory claims		
Part 2 Background/uncontroversial matters Facts expected to be agreed in separate numbered paragraphs 1.			

Part 3 Other facts forming the basis of the claim Other material facts that support the claim in addition to those in Part 2 in separate numbered paragraphs. Be very particular about each matter – eg when did it occur, where did it occur, what occurred.  1.
Part 4 Orders sought Outline orders sought in separate numbered paragraphs 1.

Certification Mark appropriate section below with an 'x'		
[ ] As the filing lawyer, I certify that this pleading is filed in accordance with the instructions of the party/parties for whom I act. There is a proper basis for each allegation of fact in the pleading and it complies with the Rules of Court.		
[ ] As a Litigant in Person (self-represented), I am responsible for filing this pleading. Each allegation of fact in the pleading is true to the best of my knowledge, information and belief.		
Signature		
Name printed		
Date		