# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PENNSYLVANIA



# **Electronic Filing of Proof of Claim**

Effective Tuesday, November 1, 2016, proofs of claim and amended proofs of claims can be created and filed electronically for all chapters through the <u>Court's website</u>, except in cases where there is a Claims and Noticing Agent assigned.

- A login and password is not required
- A completed proof of claim form is generated via the information entered on the website. (*Do not upload a completed proof of claim form*)

The filing of a proof of claim electronically on this court's website shall constitute the filer's approved signature and has the same force and effect as if the individual signed a paper copy of the document and the provisions of 18 U.S.C § 152, 18 U.S.C § 157 and 18 U.S.C § 3571 shall apply to such filing.

A person whole files a fraudulent claim could be fined up to \$500,000.00, imprisoned for up to 5 years, or both. 18 U.S.C § 152, § 157, and § 3571

Questions regarding the filing of a proof of claim can be answered by the Help Desk (215) 408-2826

### Filing a proof of claim or an amended proof of claim

- From the Court's Home page, select "File a proof of claim"
- Select "Submit a proof of claim or amended proof of claim."
- Enter the case number in which the claim is being filed in.
- Enter the name of the creditor filing the claim
- Select the party filing the claim
- Read the notice of redaction responsibility, fraudulent claim warning and confirm the claim that you are filing is in compliance by checking the clicking the box.

United States Bankruptcy Co	burt Eastern District of Pennsylvania Test Database
File Claim	
Case Number Example: 14-00002	15-10104 Find This Case
Name of Creditor	Testing Claim Corporation
Filed by Creditor V Creditor Attorney Debtor dates Debtor Attorney applie Trustee IMPORTANT WARNING: 18 U.S.C. §§ 152, 157, ar I understand that, if I	REDACTION RESPONSIBILITY: All filers must redact: Social Security or taxpayer-identification numbers; inor children; and financial account numbers, in compliance with Fed. R. Bankr. P. 9037. This requirement including attachments. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. nd 3571. file, I must comply with the redaction rules. I have read this notice.
NOTE: This form should not be use expense may be filed pursuant to 11	d to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative U.S.C. § 503.
IMPORTANT NOTICE Starting on Jun 1, 2015, all at	ttachments must be in PDF/A format. For more information on PDF/A, please see TRANSITION TO PDF/A
Installed Version: 5.0	

- Click "Next"
- If the creditor is not listed, **select** the radio button "creditor not listed,"



If one of more creditors appear with the same name, **select** the radio button for the correct creditor name and address



# Part 1: Identify the claim

Ι.	Who is the	current creditor?	Enter or con	nfirm the	creditor i	nformation
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You selected "FILED BY" as CREDITOR. If this is incorrect, START OVER !!				
ALL "Yes/No" Questions MUST be ANSWERED				
CONFIRM this is the CORRECT Case				
Debtor 1 Harold Far	mer			
Debtor 2 Mary Farm	ner			
Case number: 15-10104				
Fill in all the information about the claim as of t	the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.			
Part 1: Identify the Claim				
1. Who is the current creditor?	Testing Claim Corporation			
	Name of the current creditor (the person or entity to be paid for this claim)			
Address where notices should be sent	123 Debt Management Highway			
(Do not add the creditor's name in the				
address)				
Check for a Foreign Address				
(City, State, Zip)	Ambler , PA 🗸 17831 -			
Telephone Number:	267-222-3333			
Email:	abcd3@yahoo.com			
	Other names the creditor used with the debtor			
	INIE			

- 2. Has the claim been acquired from someone else? **Select** Yes or No as applicable If you answered "no" go to number 3, if "yes", enter from whom.
- 3. Where should notices and payments to the creditor be sent?

Notice address, is the address entered in number 1 and the payment address defaults to the same address, but can be changed. If the the payment address is different, you must check the applicable box as noted in the below screen print and enter the payment address and all contact information.

<ol> <li>Has this claim been acquired from someon From whom? Debt Collection Agency</li> </ol>	eelse? Yes ✔ No 🗌	
3. Where should notices and payments to the	creditor be sent?	(Notice Address Completed in Section 1)
Federal Rule of Bankruptcy Procedure (FRBP)	2002(g)	
CHECK if Payment Address differs from	Notice Address	
Address where payments		
should be sent		
(City, State, Zip)	<b>`</b>	-
Telephone Number:		
Email:		
	Uniform claim identifier for electronic payments i	n chapter 13 (if you use one): 2

4. If this is the original claim continue on to number 5. If the claim being filed amends a previously filed claim, click the "yes" box and select the claim number associated with the claim being amended.

5. Do you know if anyone else has filed a proof of claim for this claim? Click the box for yes or no as applicable.

#### Part 2: Give Information about the claim as of the date the case was filed.

6. Do you have any number you use to identify the debtor? **Click** the box for yes or no as applicable.

If yes, enter the last for digits of the debtors identifying number.

- 7. How much is the claim? Answer every question under Part 2 of the claim.
  - $\checkmark$  Enter the total amount of the claim and check the box to include or not include interest.
  - $\checkmark$  Enter the basis for the claim
  - ✓ If part of your claim is secured check the yes box and answer all questions, if not check no

**Note:** If part of your claim is secured, you must include an amount in both the secured and unsecured box under number 9, or enter 0 where applicable.

- $\checkmark$  Is the claim based on a lease? Check no or yes as applicable.
- ✓ Is this claim subject to a right of setoff? Check no or yes as applicable
- ✓ If part of your claim is priority check the yes box and answer all questions applicable questions, if not check no

Part 2: Give Information About the Claim as of the Date the Case Was Filed			
6. Do you have any number you use to ide Last 4 digits of the debtor's account or any nu	entify the debtor? Yes I No		
7. How much is the claim? (required) 16292.00	Does this amount includ ✓ No ─ Yes. Attach statemen Bankruptcy Rule 300	e interest or other charge it itemizing interest, fees, e 1(c)(2)(A).	s? xpenses, or other charges required by
If you have entered a claim amount of \$0, the claim Comment:	amount is unknown, or the claim is unliquidated	l, please enter a brief explanati	on.
8. What is the basis of the claim? (required)	Examples: Goods sold, money loaned, lea Attach redacted copies of any documents s Limit disclosing information that is entitled [car [Instructions]]	se, services performed, pers supporting the claim required to privacy, such as healthca	conal injury or wrongful death, or credit card. d by Bankruptcy Rule 3001(c). re information.
<ul> <li>9. Is all or part of the claim secured?</li> <li>Nature of property:</li> <li>Real estate. If the 410-7</li> <li>Motor vehicle</li> <li>Other. Describe:</li> <li>Basis for perfection:</li> <li>Attach redacted copies of docum title, financing statement, or othe Value of property:</li> <li>Amount of the claim that is see Amount of the claim that is una time.</li> </ul>	No Yes. The claim is secured by a lien on prop claim is secured by the debtor's principal re A) with this <i>Proof of Claim</i> .	erty. sidence, file a <i>Mortgage Pro</i> of a security interest (for ex d or recorded.) (The amo	oof of Claim Attachment (Official Form kample, a mortgage, lien, certificate of sum of the secured and unsecured unts should match the amount in line 7.)
✓ Fixed Annual Inte □ Variable	rest Rate (when case was filed) 2	6	
10. Is this claim based on a lease?	s. Amount necessary to cure any default	as of the date of the peti	tion. \$
11. Is this claim subject to a right of setoff? □ Yes.	Identify the property:		
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	✓ No ✓ Yes Check all that apply:		Amount entitled to priority

**Documents**: If filing supporting documentation for the proof of claim, review the instructions, click 'Yes" and add attachment(s) when prompted. If you are not filing supporting documentation click "No"

#### NOTES:

• If you select "Yes" to attach supporting documentation, be sure to attach when prompted because the system will not give you an additional opporturnity and/or issue a warning for not attaching.

Your claim will be processed without the supporting documentation.

• Do not attach a completed proof of claim form as supporting documentation. A completed claim form is generated at the completion of filing.

Documents: Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both.
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d). (See instructions, and the definition of "redacted".)
Artaculutins:
• Necessary documentation can be attached to the Proof of Claim after the information for the form is submitted.
Attachments to the Proof of Claim are required to be PDF files.
Attachments to the Proof of Claim are NOT to exceed 20.0 Mb in size.
Multiple attachments to the Proof of Claim are permitted.
• Do not upload a completed Proof of Claim form as an attachment to this filing. Attaching a completed Proof of Claim will result in multiple versions of the form being filed (the electronically created proof of claim form plus the proof of claim attached). If filing an Amended Proof of Claim, the attachment of the previously filed claim is allowed.
Note: You will have the option to select files to upload for this claim once you click on the "Submit Claim" button below
Do you wish to attach supporting documentation? $\bigcirc$ Yes $\bigcirc$ No

# Part 3: Sign Below

The person completing the proof of claim must review and complete all information in part 3.Next enter the verification code and click submit.

Part 3: Sign Below			
The person completing this proof of claim must sign and date it. FRBP 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C.	Check the appropr I am the credit I am the credit I am the truste I am a guarant I understand that the amount of th I have examined correct. I declare under p	iate box: (required) or. or's attorney or authorized agent. e, or the debtor, or their authorized agent. Bankruptcy Rule 3 or, surety, endorser, or other codebtor. Bankruptcy Rule 3009 an authorized signature on this Proof of Claim serves e claim, the creditor gave the debtor credit for any pay the information in this Proof of Claim and have a reas enalty of perjury that the foregoing is true and correct.	3004. 5. as an acknowledgment that when calculating ments received toward the debt. onable belief that the information is true and
§§ 152, 157 and 3571.	Print the name of t	he person who is completing and signing this claim:	
	Signature*	Shirley Parker	*Type Full Name (required)
	Title	Secretary	
	Company	Testing Claim Corporation	
		Identify the corporate servicer as the company if the	authorized agent is a servicer
	Address	123 Debt Management Highway	
		Number and Street	
	(City, State, Zip)	Ambler PA ¥ 17831 -	
	Contact Phone:	267-222-3333	
	Email:	abcd3@yahoo.com	
	122 Submit Clain	5 Enter Verification Code	: (required) 5 claim to be filed.
Penalty f	for presenting frau	dulent claim: Fine of up to \$500,000 or imprisonmen 18 U.S.C. §§ 152, 157, and 3571.	at for up to 5 years, or both.

Once you have submitted the claim and the claim is free of error messages, you will receive a displayed messaging confirming (1) successful verification and the assigned claim number. From this screen you can print the confirmation as well as print the claim that has been officially filed with the court.

United States Bankruptcy Court Eastern District of Pennsylvania Test Database
Successful verification
Your claim was successfully filed in case number 15-10104. Your claim number is 3.
Open in new window: Click <u>3</u> to view/print your filed claim.
Note: Any attachment(s) added will <b>NOT</b> be available to view/print unless you have a Pacer account.
File additional claims

Claim printed after completion of the filing process

(Spouse, if filing) United States Bankruptcy Database	Court Eastern District of Pennsylvania Test	10/19/2016 Timothy B. McGrath, Clerk
lCase number: 15-10104 Official Form 410 Proof of Claim		
Read the instructions before f	illing out this form. This form is for making a claim for p f an administrative expense. Make such a request accor	ayment in a bankruptcy case. Do not use this form to ding to 11 U.S.C. § 503.
Filers must leave out or redac focuments that support the clain mortgages, and security agreen explain in an attachment.	t information that is entitled to privacy on this form or on any n, such as promissory notes, purchase orders, invoices, iten ents. Do not send original documents; they may be destru	attached documents. Attach redacted copies of any ized statements of running accounts, contracts, judgments yyed after scanning. If the documents are not available,
A person who files a fraudulent	claim could be fined up to \$500,000, imprisoned for up to 5 y	ears, or both. 18 U.S.C. §§ 152, 157, and 3571.
Fill in all the information abou	t the claim as of the date the case was filed. That date is n	on the notice of bankruptcy (Form 309) that you receiv
1.Who is the current	Testing Claim Corporation	
	Name of the current creditor (the person or entity to be paid	for this claim)
	Other names the creditor used with the debtor non-	•
2.Has this claim been acquired from someone else?	☑     No       □     Yes. From whom?	
3.Where should notices	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
creditor be sent?	Testing Claim Corporation	-
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 123 Debt Management Highway Ambler, PA 17831	Name
	Contact phone 267-222-3333	Contact phone
	Contact email abcd3@yahoo.com	Contact email
	Uniform claim identifier for electronic payments in chapter	13 (if you use one):
4.Does this claim amend one already filed?	No     Yes. Claim number on court claims registry (if know	n) Filed on
5.Do you know if anyone else has filed a proof of claim for this claim?	<ul> <li>✓ No</li> <li>□ Yes. Who made the earlier filing?</li> </ul>	MM / DD / YYYY
Official Form 410	Proof of Claim	page 1
Official Form 410		

## **Sample Error Messages**

**Notes:** After submitting the claim form, the system will prompt you of any missed fields that require information. If you receive too many error messages, you will receive a message that the verification has failed, and the claim information will need to be started over from the beginning. *(Examples of a few error messages below)* 

Enter an Interst Rate	Item #8, missing basis of Claim
ОК	ОК
Please answer the question, Do you wish to attach supporting documentation?	The secured + unsecured must equal the total
ОК	ОК

United States Bankruptcy Court Eastern District of Pennsylvania Test Database
Sorry, verification failed
Click h <u>ere</u> to START OVER