

How To Add A Creditor Or Change A List Of Creditors And File Amended Schedules

Adding creditors or changing your list of creditors usually involves amending Schedules D and E/F. Generally, you must file documents with the Court and pay a fee. You must also mail notices to your newly added creditors.

See [Fed. R. Bankr. P. 1009\(a\)](#) and [L.B.R. 1009-1](#) for more information.

What to file when amending Schedules D and E/F to add creditors:

- (1) the amended schedule. The amended schedule should include all previous information, plus any new information;
- (2) a declaration about an individual debtor's schedule [Form B 106 Declaration](#);
- (3) list of creditors at <https://www.cob.uscourts.gov/efile/sam/signup.aspx> (only the names and addresses of new creditors);
- (4) the Notice of Amendment to Schedule, [L.B.F. 1009-1.1](#);
- (5) a Certificate of Service, similar to [L.B.F. 9013-1.2](#); and
- (6) the [filing fee](#), if any. The filing fee for submitting an amended Schedule D, E/F, or amended list of creditors is \$34.00 and can be paid online at [Pay.gov](#).

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Column C
Unsecured portion
If any

2.1**Describe the property that secures the claim:**

\$ _____ \$ _____ \$ _____

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Last 4 digits of account number _____

2.2**Describe the property that secures the claim:**

\$ _____ \$ _____ \$ _____

Creditor's Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ _____

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.3	<div>Describe the property that secures the claim:</div> <div> <div>Creditor's Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div> <div>Who owes the debt? Check one.</div> <div> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another </div> <div> <input type="checkbox"/> Check if this claim relates to a community debt </div> <div> <div>Date debt was incurred</div> <div>Last 4 digits of account number</div> </div> </div>	\$	\$	\$
2.4	<div>Describe the property that secures the claim:</div> <div> <div>Creditor's Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div> <div>Who owes the debt? Check one.</div> <div> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another </div> <div> <input type="checkbox"/> Check if this claim relates to a community debt </div> <div> <div>Date debt was incurred</div> <div>Last 4 digits of account number</div> </div> </div>	\$	\$	\$
2.5	<div>Describe the property that secures the claim:</div> <div> <div>Creditor's Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div> <div> <div>Who owes the debt? Check one.</div> <div> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another </div> <div> <input type="checkbox"/> Check if this claim relates to a community debt </div> <div> <div>Date debt was incurred</div> <div>Last 4 digits of account number</div> </div> </div>	\$	\$	\$
<div>Add the dollar value of your entries in Column A on this page. Write that number here:</div> <div>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</div>		\$	\$	\$

Part 2:
List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>
<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div>On which line in Part 1 did you enter the creditor? </div> <div>Last 4 digits of account number </div>

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number _____
(If known)

☐ Check if this is an amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
- ☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1

Priority Creditor's Name _____

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.**Who incurred the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
- ☐ Taxes and certain other debts you owe the government
- ☐ Claims for death or personal injury while you were intoxicated
- ☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
- ☐ Yes

2.2

Priority Creditor's Name _____

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.**Who incurred the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
- ☐ Taxes and certain other debts you owe the government
- ☐ Claims for death or personal injury while you were intoxicated
- ☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim

Priority
amountNonpriority
amount

□

Priority Creditor's Name

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

□

Priority Creditor's Name

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

□

Priority Creditor's Name

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

				Total claim	
4.1	Nonpriority Creditor's Name _____			Last 4 digits of account number _____	\$ _____
	Number _____ Street _____			When was the debt incurred? _____	
	City _____ State _____ ZIP Code _____			As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.			<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Disputed	
	<input type="checkbox"/> Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> No			<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Yes					
4.2	Nonpriority Creditor's Name _____			Last 4 digits of account number _____	\$ _____
	Number _____ Street _____			When was the debt incurred? _____	
	City _____ State _____ ZIP Code _____			As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.			<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Disputed	
	<input type="checkbox"/> Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> No			<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Yes					
4.3	Nonpriority Creditor's Name _____			Last 4 digits of account number _____	\$ _____
	Number _____ Street _____			When was the debt incurred? _____	
	City _____ State _____ ZIP Code _____			As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.			<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Disputed	
	<input type="checkbox"/> Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> No			<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Yes					

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☐ No
- ☐ Yes

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify _____

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☐ No
- ☐ Yes

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify _____

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☐ No
- ☐ Yes

Last 4 digits of account number _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim**Total claims
from Part 1**

6a. Domestic support obligations

6a. \$ _____

6b. Taxes and certain other debts you owe the government

6b. \$ _____

6c. Claims for death or personal injury while you were intoxicated

6c. \$ _____

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ _____

6e. Total. Add lines 6a through 6d.

6e. \$ _____

Total claim**Total claims
from Part 2**

6f. Student loans

6f. \$ _____

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ _____

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ _____

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ _____

6j. Total. Add lines 6f through 6i.

6j. \$ _____

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

☐ Check if this is an
amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☐ No

☐ Yes. Name of person _____ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

Signature of Debtor 1

Date _____
MM / DD / YYYY

X

Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case**UNITED STATES BANKRUPTCY COURT DISTRICT OF COLORADO**

Debtor 1:	_____	Case #:	_____
	First Name Middle Name Last Name		
Debtor 2:	_____	Chapter:	_____
	First Name Middle Name Last Name		

Local Bankruptcy Form 1009-1.1**Notice of Amendment of Petition, Lists, Schedules, Statements, and/or Addition of Creditors**

Please check applicable boxes, complete applicable sections **identifying each amendment**, and attach additional pages as necessary.

Part 1 Notice

You are hereby notified that the debtor has filed amended documents:

_____ [petition/list(s)/schedule(s)/statement(s), and/or addition of creditor(s)].

Part 2 Amendments**2.1. Petition**

- ☐ Not applicable (no amendments to Petition)
- ☐ The following section(s) of the Petition are amended as follows:

Section of Petition	Information before amendment	New information

2.2. List(s)

- ☐ Not applicable (no amendments to List(s))
- ☐ The following List(s) are amended as follows:

List	Information before amendment	New information

Change in creditor's name or address on List(s):

Creditor's name and/or address before amendment	Corrected creditor's name and/or address

2.3. Schedule(s)

☐ Not applicable (no amendments to Schedules)

☐ Schedule(s) are amended as follows:

Schedules A/B:

Description of property	Interest in property	Current value of entire property	Current value of portion owned

Schedule C:

Amount of the exemption you claim	Current value of debtor's interest

If you object to this amended claim of exemption, you must file and serve your objection within 30 days after the date this notice is served. Objections must be filed with the Court and a complete copy must be served on debtor's attorney or debtor, if unrepresented.

Schedule D:

New creditor or Amendment to existing creditor	Creditor's name, last 4 digits of account #, mailing address	Claim amount	Collateral	Collateral value	Any other changes
<input type="checkbox"/> New creditor <input type="checkbox"/> Amendment to existing creditor					
<input type="checkbox"/> New creditor <input type="checkbox"/> Amendment to existing creditor					

Schedules E/F:

New creditor or Amendment to existing creditor	Creditor's name, last 4 digits of account #, mailing address	Total claim amount	Priority amount (if any)	Any other changes
<input type="checkbox"/> New creditor <input type="checkbox"/> Amendment to existing creditor				
<input type="checkbox"/> New creditor <input type="checkbox"/> Amendment to existing creditor				

Schedule G:

Contracting/Leasing party and address	What the contract of lease is for

Schedule H:

Co-debtor/spouse, former spouse, or legal equivalent; name and address	Creditor to whom you owe the debt/community state or territory

Schedules I/J:

Amended/New information

2.4. Statement(s)

- ☐ Not applicable (no amendments to Statement(s))
- ☐ The following Statement(s) are amended as follows:

Statement	Information before amendment	New information

2.5. Addition of Creditor(s)

- ☐ Not applicable (no additions)
- ☐ Creditors have been added as follows (and Schedules D, E, or F have been amended accordingly):
- ☐ Creditors have been amended as follows:

Change in creditor's name or address:

Creditor's name and/or address before amendment	Corrected creditor's name and/or address

Part 3 Signature of Debtor's Attorney or Debtor (if unrepresented)

Dated: _____

By: _____
Signature

Bar Number (if applicable): _____

Mailing Address: _____

Telephone number: _____

Facsimile number: _____

E-mail address: _____

Fill in this information to identify your case

UNITED STATES BANKRUPTCY COURT DISTRICT OF COLORADO

Debtor 1: _____ Case #: _____
First Name Middle Name Last Name

Debtor 2: _____ Chapter: _____
First Name Middle Name Last Name

Certificate of Service

Complete applicable sections and delete inapplicable sections.

Part 1 Certificate of Service of Notice and Amended Schedule(s) _____.

I certify that on _____ [insert month/day/year], I served a complete copy of the following:

- Amended Schedule(s) _____;
- Notice of Amendment of Schedules (L.B.F. 1009-1.1);
- Notice of Meeting of Creditors;
- Notice of Possible Dividend along with a proof of claim form (if applicable);

on the following parties in compliance with the Federal Rules of Bankruptcy Procedure and the Court's Local Rules:

[Name]

Case Trustee

[email address]

via CM/ECF

U.S. Trustee

USTPRegion19.DV.ECF@usdoj.gov

via CM/ECF

[List each party and creditor served and the manner of service, e.g., "Attorney Jane Smith, 123 Main St., Denver, CO, 80202" or "Attorney John Smith, via CM/ECF" or attach a copy of the Creditor Address Mailing Matrix]

Part 2 Signature

Dated: _____

By: _____
Signature

Bar Number (if applicable): _____

Mailing Address: _____

Telephone number: _____

Facsimile number: _____

E-mail address: _____

WHAT IS A CERTIFICATE OF SERVICE?

When you file a motion or pleading with the Court, you must file a written statement that you have mailed or delivered a copy of the motion to all interested parties. This is called a Certificate of Service. You must list the name and address of each person and attorney being served with the motion, the name of the party each attorney represents, and you, your attorney or an employee of your attorney must sign the certificate. It is very important to file a Certificate of Service with your pleadings, as the Court may deny your relief if you do not file a Certificate of Service. Because the service of a pleading is critical to obtain the relief that you request, you are strongly urged to consult a bankruptcy attorney.

L.B.R. 1009-1. Amendments to Voluntary Petitions, Lists, Schedules, and Statements

(a) **Amendment.** Unless the Court orders otherwise, if a debtor amends a petition, list, schedule or statement, the amendment must be designated as such. The amended petition, list, schedule, or statement will supersede the prior filing and may not merely state the new or changed items.

(b) **Notice of Amendment.** The debtor must file a notice of amendment that substantially conforms with [L.B.F. 1009-1.1](#), which specifies the amended or new information.

(c) **Service.** In addition to the requirements of [11 U.S.C. § 342\(c\)\(1\)\(link is external\)](#) and [Fed. R. Bankr. P. 1009\(a\)\(link is external\)](#), upon the filing of an amendment adding creditors or parties in interest, the debtor must serve the following to the new creditors or parties:

- 1) the amended schedule;
- 2) the Notice of Amendment to Schedule, [L.B.F. 1009-1.1](#);
- 3) the Notice of Meeting of Creditors; and
- 4) any notice of possible dividend or notice of a bar date for filing proofs of claim, along with a proof of claim form.

(d) **Certificate of Service.** The debtor must file a certificate of service showing compliance with this Rule with the amendment. The certificate of service must be attached to the Notice of Amendment.

(e) **Creditor Requests to Modify Creditor Address Mailing Matrix.** If a creditor wishes to modify the address listed in the schedules or on the Creditor Address Mailing Matrix, the creditor may file or modify a proof of claim or file a notice of change of address and serve a copy to the debtor and debtor's attorney.