



FILING A CLAIM

Case Management

CM / ECF

Electronic Case Files

Before logging in to CM/ECF to electronically file a claim, make sure you have prepared and signed a proof of claim using the most recent version of the **Proof of Claim - Official Form B10**. Attach any necessary documentation and scan the document, saving it as a PDF file. Make sure you have redacted (masked or deleted) any protected information such as names of minors, birth dates, portions of Social Security and financial account numbers, and confidential health care information. See the instructions on the form.

- After logging in, select **File Claims** under the **Bankruptcy Events ... Claims** menu.



- On the next screen, enter the case number. You do not need to enter the name or type of creditor. Click the **Next** button.

- The next screen will allow you to select the name of the creditor. Click on the arrow on the right side of the field showing **(select a creditor)**.

CM/ECF Bankruptcy Adversary Query Reports

Select a Creditor for Claim

Case 11-00046: Baby Blue

(select a creditor) ▼

- (select a creditor)
- 20 Largest - 123 Fort Street Honolulu, HI 96813 - 667729 (20 Largest Unsecured Creditors)
- Admin Creditor - 123 Fort Street Honolulu, HI 96813 - 667728 (Administrative)
- Common Creditor - 123 Fort Street Honolulu, HI 96813 - 667730 (Common Creditor)
- Creditor Entity - 123 Fort Street Honolulu, HI 96813 - 667726 (Creditor)
- Creditor Entity - 123 Fort Street Honolulu, HI 96813 - 667727 (Creditor)
- Cruel Creditor - 123 Fort Street Honolulu, HI 96813 - 667725 (Creditor)
- Feel Good - 1 Post Street Baltimore, Guam 12121 - 668077 (Creditor)
- Good, Feel M. - 1 Hilo Lane New York, NY 90909 - 668078 (Creditor)
- Internal Revenue Service - P.O. Box 21126 Philadelphia, PA 19114 - 667737 (Creditor)
- Limited Notice - 123 Fort Street Honolulu, HI 96813 - 667731 (Limited Notice)
- NTCAPR - 123 Fort Street Honolulu, HI 96813 - 667732 (Notice of Appearance)
- Small Potato - One Park Place Russet, Idaho - 667772 (Creditor)

- If your name and address is not listed, click **Add Creditor** below the selection box, then click the **Next** button.

CM/ECF Bankruptcy Adversary

Logout

Select a Creditor for Claim

Case 11-00046: Baby Blue

(select a creditor)

[Add Creditor](#)

Next Clear

- On the next screen, enter the name and address and click the **Next** button to continue. The entry will be added to the selection list.

ECF Bankruptcy ▾ Adversary ▾ Query Reports ▾
Logout

Add Creditor(s)

Case 11-00046 already contains creditors!

Case number 11-00046 Baby Blue
*Name may be 50 characters. Address may be 5 lines, 40 characters each.
More than one creditor may be entered. Separate creditors with a blank line.*

Name and Address
Sam Brown
12 A Street
Hilo, HI 88888

Creditor type Creditor ▾

Creditor committee No Yes Entity

Next Clear

- Select a creditor name and address from the list. A pop-up window will confirm the selection. Click the **Yes** button if the correct creditor has been selected.

https://ecf-test.hib.circ9.dcn/?55120.667772 - Test Databas...

No claims have been filed on behalf of creditor
Small Potato
One Park Place
Russet, Idaho

Is this the correct creditor?

Yes No

Done Internet 100%

- You will need the following information from the proof of claim form: **Amount Claimed** (from the **Amount of Claim as of Date Case Filed** in box 1.), and any amounts that are **Secured** or **Priority** (as shown in boxes 4. and 5.). Any unsecured amount is included in the total amount being claimed. (Explanations of the terms secured, unsecured, and priority are found in the instructions on the reverse side of the claim form.)

B 10 (Official Form 10) (04/10)

UNITED STATES BANKRUPTCY COURT		District of Hawaii	PROOF OF CLAIM
Name of Debtor:		Case Number:	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor (the person or other entity to whom the debtor owes money or property):		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.	
Name and address where notices should be sent:		Court Claim Number: _____ (If known)	
Telephone number:		Filed on: _____	
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Telephone number:		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
1. Amount of Claim as of Date Case Filed: \$ _____ If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim.	
2. Basis for Claim: _____ (See instruction #2 on reverse side)		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier – 11 U.S.C. §507 (a)(4).	
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).	
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(____). Amount entitled to priority: \$ _____	
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
Date: _____	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.		FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

- In the example below, the creditor is asserting that \$15,000 is owed by the debtor and that, of that total amount, \$12,000 is secured. If you wish, you may enter additional comments in the fields marked **Description** and **Remarks**. For example, you might note: “Lawsuit pending – dollar amount of claim to be determined.”

ECF Bankruptcy ▾ Adversary ▾ Query Reports ▾ Utilities ▾

Proof Of Claim Information For
667772 - Small Potato
One Park Place
Russet, Idaho

Case Number: 11-00046	Amends Claim #: <input type="text"/> <input type="button" value="Find"/>
Last Date To File: 10/27/2011	Date Filed: 08/01/2011
Last Date To File(Govt):	

Claimed

Amount Claimed <input type="text" value="15,000.00"/> <i>Enter the Total Amount of Claim as of Date Case Filed (incl. secured, priority, general unsecured & unknown)</i>	Secured <input type="text" value="12,000.00"/> <i>If all or part of your claim is secured, enter the secured amount (Box 4 on claim)</i>	Priority <input type="text"/> <i>If all or part of your claim is entitled to priority, enter the priority amount (Box 5 on claim)</i>
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Description:

Remarks:

Amend options: Clear all Amounts

- After clicking the **Next** button, you will be prompted to attach the PDF file containing an image of the proof of claim. Clicking the **Browse** button will open a pop-up window where you can select the PDF. Make sure you open it first to confirm that the PDF is the correct image, and that it is complete and readable. You may attach additional PDFs by clicking on the radio button **Yes** for **Attachments to Document**. Click the **Next** button when done.

ECF Bankruptcy ▾ Adversary ▾ Query Reports ▾ Utilities ▾

Case 11-00046

Filename

Attachments to Document: No Yes

Choose File to Upload

Look in: 000aaa1

04-02375-aranio.pdf	hit
07-01304-doi.pdf	hit
09-00581 rpt.pdf	hit
09-02188 fr.pdf	hit
10-00837 F acct.pdf	hit
10-01391rpt.pdf	hit

- Clicking the **Next** button on the previous screen will submit the claim to the court. A final screen will appear with the claim number as well as case and creditor information. It will also show the name of the filer and the date and time of filing. This **Notice of Electric Claims Filing** will be sent by email to parties in the case who are registered to receive electronic notice.

MECF Bankruptcy ▾ Adversary ▾ Query Reports ▾

United States Bankruptcy Court
District of Hawaii

Notice of Electronic Claims Filing

The following transaction was received from Attorney, Abel on 8/1/2011 at 5:34 PM HST

[File another claim](#)

Case Name: Baby Blue
Case Number: [11-00046](#)

Creditor Name: Small Potato
One Park Place
Russet, Idaho

Claim Number: [2](#) [Claims Register](#)

Amount Claimed: \$15,000.00
Amount Secured: \$12000.00
Amount Priority:

- If you have questions or need assistance, please call the Help Desk at (808) 522-8100 x 171 between 8:30 a.m. and 3:30 p.m. on days when the court is open, or send an email to helpdesk@hib.uscourts.gov.