



## ELECTRONIC PROOF OF CLAIM PROGRAM

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### **OVERVIEW**

The Electronic Proof of Claim (ePOC) program permits proofs of claims and certain other types of documents to be filed directly from the court's website. Submitting an ePOC document for entry in the claims register does not require a CM/ECF login. In addition, no claim form is needed for submitting an original or amended proof of claim – the data entered in the ePOC system will create and file an Official Form B 410 – Proof of Claim, although the filer must upload any supporting documents as PDF files. The following types of documents may be filed with the court using the ePOC program:

- Proof of Claim – Original or Amended
- Withdrawal of a Claim
- Rule 3002.1 Claim Supplements:
  - Notice of Mortgage Payment Change
  - Notice of Postpetition Fees, Expenses, and Charges
  - Response to Notice of Final Cure Payment
  - Proof of Claim Attachment 3001 (c)(1)(d)

(Note: Other types of documents, such as notice of a transfer of a claim or request for payment of an administrative expense, require a CM/ECF login for electronic filing. Creditors may apply for a Limited Filer CM/ECF user account at the court's website: [www.hib.uscourts.gov](http://www.hib.uscourts.gov).)

### **SIGNATURES**

Submitting a document in the ePOC system in full compliance with the court's procedures - including accurately entering the data requested, acknowledging the filer's duty to redact protected personal identifiers, properly uploading documents as PDF files, and correctly entering a randomly generated verification code – shall serve as the submitting individual's signature on the documents, with the same force and effect as if that individual had signed a paper copy of the document.

### **TECHNICAL REQUIREMENTS**

**Browser:** The ePOC program requires use of Internet Explorer 8 or the latest version of Chrome and Firefox.

**PDFs:** When submitting an original or amended proof of claim, the ePOC program will create and file a completed, signed claim form, a copy of which may be printed or saved as part of the process. However, any supporting documents and attachments must be uploaded as PDF files. Documents other than proofs of claim also need to be prepared as PDFs in order to be uploaded and filed with the court. Each PDF file may be created by scanning or using software, and should not exceed 20 MB in size.

## FILE A PROOF OF CLAIM – ORIGINAL OR AMENDED

- 1 From the home page on the court's website, click **File Claims Online**.
- 2 Read the General Information about the ePOC program. When ready, click **>SUBMIT an original or amended claim**.
- 3 The File Claim screen displays.

United States Bankruptcy Court District of Hawaii

**File Claim**

Case Number   
Example: 14-00002

Name of Creditor

Filed by   
Creditor Attorney  
Debtor  
Debtor Attorney  
Trustee

**IMPORTANT WARNING:** 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. §§ 152, 157, and 3571.

I understand that, if I file, I must comply with the redaction rules. I have read this notice.

Next

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.

A local form Request for Payment of Administrative Expense is available for downloading from the court website. The form also contains information regarding particular types of requests.

Installed Version: 5.0

- Enter the case number.
- Enter the name (or a portion of the name) of the creditor filing the claim. If only a portion of the creditor's name is entered, the program will pull all the creditors in the case that contain the entered letters.
- Select the party type filing the claim using the dropdown list. Note: Select **Creditor Attorney** if you are the creditor's attorney and would like to record the creditor address and your address on the claim form and be added to the creditor list.
- Read the redaction notice and check the box to confirm compliance with Fed. R. Bankr. P. 9037.
- Click **Next**.

- 4 If you selected **Creditor Attorney** as the filing party on the previous screen, you will be prompted to enter your name and address. Enter the information and click **Next**. Your name will be added to the creditor list for this case.

United States Bankruptcy Court District of Hawaii

Name of Attorney

Address where notices should be sent

(City, State, Zip)  ,  -

- 5 Select the creditor filing the claim or select **Creditor not listed** to add a new creditor.

United States Bankruptcy Court District of Hawaii

**Select Creditor**

**ABC Bank Loans**  
123 Loan Lane  
Los Angeles, CA 93303

**Bank of Barclay**  
448 Pacific Coast Place  
San Francisco, CA 49484

**Blue Skies Federal Credit Union**  
5958 King Street, Suite 100  
Honolulu, HI 49484

**Xpress Furniture**  
9339 Barclay Bay Blvd.  
Honolulu, HI 49484

Creditor not listed

- 6 The **Claim Information** screen displays. Complete the proof of claim form by entering all the appropriate information that applies to your claim. All **Yes/No** questions must be answered. You may click on the instructions hyperlinks to view official instructions and definitions.

## Case and Creditor Information

United States Bankruptcy Court District of Hawaii

You selected "FILED BY" as CREDITOR ATTORNEY. If this is incorrect, [START OVER!!](#)

**ALL "Yes/No" Questions MUST be ANSWERED**

**CONFIRM this is the CORRECT Case**

Debtor 1 Lobbi Lobster  
Debtor 2 (Spouse, if filing)  
Case number: 15-00500

Fill in all the information about the claim as of 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. Creditor Name Creditor XYZ P.O. Box 12345  
Honolulu, HI 96813

Telephone Number:   
Email:

Other names the creditor used with the debtor

- Verify the debtor name and case number.
- Verify the creditor information.
- Enter the creditor's telephone number, email address and other names used with the debtor.

## Payment Address

If the payment address differs from the address where notices should be sent, check the box and add the payment address information.

CHECK if Payment Address differs from Notice Address

Address where payments should be sent

(City, State, Zip)   -

Telephone Number:

Email:

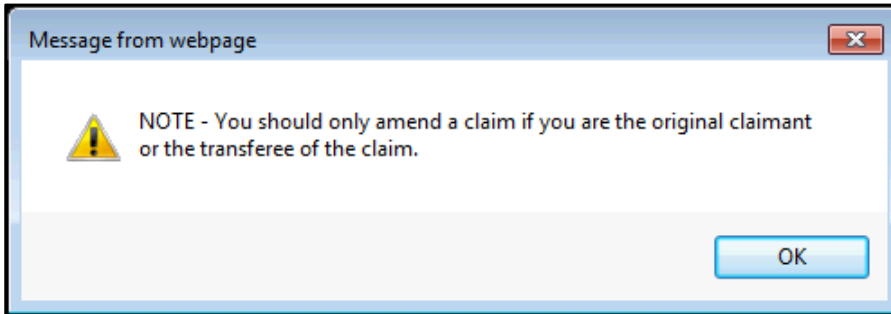
Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
 [\(See instructions\)](#)

### Amended Claim

If you are filing an amended claim, check the box in item 4:

4. Does this claim amend one already filed? Yes  No

A warning message displays advising that only the original claimant or transferee of the claim should amend a claim. Click **OK** to continue.



Click the **Court Claim Number** dropdown arrow to view a list of claims filed by the creditor. Select the claim number to be amended. The **Filed on** date will automatically populate based on the claim number selected. **Be sure to select the correct claim number.**

4. Does this claim amend one already filed? Yes  No

Court Claim Number:  Filed on:

### Unknown Amount of Claim

If you do not know the amount of the claim at this time, enter "0.00" and a brief explanation in the **Comment** box. Be sure to attach documentation to support your explanation.

7. How much is the claim?  (required)

Does this amount include interest or other charges?  
 No  
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

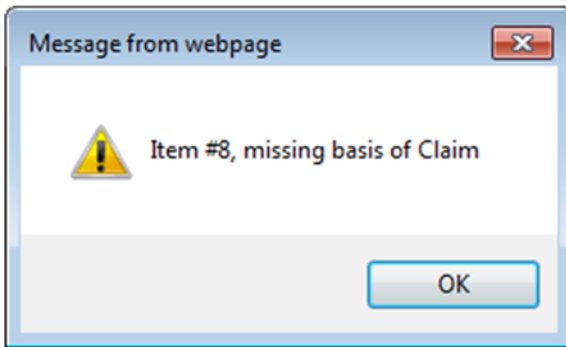
If you have entered a claim amount of \$0, the claim amount is unknown, or the claim is unliquidated, please enter a brief explanation.  
Comment:

The entered explanation will display in the Remarks section on the claims register.

<i>Creditor:</i> (675274) General Welding Supply Company Attn: Carolyn Smith One Hollow Lane Suite 500 Buffalo, NY 10984	<i>Claim No:</i> 7 <i>Original Filed Date:</i> 12/03/2015 <i>Original Entered Date:</i> 12/03/2015	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> admin <i>Modified:</i>
Amount claimed: \$0.00		
<i>History:</i> <a href="#">Details</a> 7-1 12/03/2015 Claim #7 filed by General Welding Supply Company, Amount claimed: \$0.00 (admin)		
<i>Description:</i>		
<i>Remarks:</i> (7-1) Filer Comment: Unknown at this time		

## Required Fields

If a required field is not completed, a message displays upon submitting the form. For example:



Click **OK** and the cursor will appear in the box that is missing information.

The following fields are required:

- All Yes/No questions
- Item 7 – How much is the claim?
- Item 7 Comment – Required only if a claim amount of 0.00 has been entered
- Item 8 – What is the basis of the claim?
- Part 3 – Signature of individual submitting the claim and declaring that the information is true and correct

## Supporting Documentation

If you would like to upload supporting documents, click **Yes** in the **Attachments** section of the claim. You will be prompted to upload supporting documents after the claim is submitted.

**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".)

**Attachments:**

- 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 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?**  Yes  No

- 7 When you are done entering the applicable claim information, enter the **Verification Code** and click **Submit Claim**.

The screenshot shows a web form for submitting a claim. At the top, there is a text input field containing the word "TROUSER". To its right is another text input field labeled "Enter Verification Code (required)". Below these fields are two buttons: "Submit Claim" and "Clear Form". To the right of the "Clear Form" button is a red asterisked note: "\*\* Verify debtor name(s) prior to submitting claim to be filed." At the bottom of the form, there is a red warning: "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, 157, and 3571."

- 8 If you selected **Yes** to the earlier prompt to attach supporting documentation, you will do so now.

The screenshot shows the "SUPPORTING DOCUMENTATION" section of the court's website. The header reads "United States Bankruptcy Court District of Hawaii". Below the header, the text says "SUPPORTING DOCUMENTATION (files should be limited to 20 Mb in size.)". There is a "Browse..." button for selecting a file. At the bottom, there are two buttons: "Add Attachment" and "File Proof of Claim".

- Click **Browse** to choose the PDF for upload.
  - Open it by right-clicking on your mouse and viewing the PDF to verify you have selected the correct document.
  - Double-click on the file or click the Open button in the lower right corner of the File Upload pop-up box to select the PDF for uploading.
  - Click **Add Attachment**.
  - To upload additional attachments, click **Add Additional Attachment** and repeat the process.
  - Once all PDFs have been uploaded, click **File Proof of Claim**.
- 9 After clicking **Submit Claim** and/or **File Proof of Claim**, a verification screen displays. Click the claim number hyperlink to view, print and/or save your filed claim. Note: Any attachments added will NOT be available to view/print unless you use your PACER account.

The screenshot shows a "Successful verification ..." message. The text reads: "Your claim was successfully filed in case number 15-00500. Your claim number is 6." Below this, it says "Open in new window: Click [6](#) to view/print your filed claim." A red note follows: "Note: Any attachment(s) added will NOT be available to view/print unless you have a Pacer account." At the bottom, there is a purple hyperlink: "File additional claims".

Sample filed proof of claim:

Fill in this information to identify the case:	
Debtor 1	Lobbi Lobster
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court	District of Hawaii
Case number:	15-00500

FILED  
 U.S. Bankruptcy Court  
 District of Hawaii  
 12/3/2015  
 Michael B. Dowling, Clerk

**Official Form 410  
 Proof of Claim**

12/15

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

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. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

<b>1. Who is the current creditor?</b>	Creditor XYZ Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
<b>2. Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
<b>3. Where should notices and payments to the creditor be sent?</b>	Where should notices to the creditor be sent? Creditor XYZ Name P.O. Box 12345 Honolulu, HI 96813 Contact phone 808-123-4567 Contact email creditor@email.com Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) Creditor XYZ Name Payments Processing Center 123 Park Blvd. Honolulu, HI 96822 Contact phone _____ Contact email _____
<b>4. Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <span style="float: right;">MM/DD/YYYY</span>	
<b>5. Do you know if anyone else has filed a proof of claim for this claim?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	



**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

<p>6. Do you have any number you use to identify the debtor?</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>9876</u></p>	
<p>7. How much is the claim?</p>	<p>\$ <u>643.00</u></p>	<p><b>Does this amount include interest or other charges?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).</p>
<p>8. What is the basis of the claim?</p>	<p>Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as healthcare information.</p> <p><u>Goods sold</u></p>	
<p>9. Is all or part of the claim secured?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. The claim is secured by a lien on property</p> <p><b>Nature of property:</b></p> <p><input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>.</p> <p><input type="checkbox"/> Motor vehicle</p> <p><input type="checkbox"/> Other. Describe: _____</p> <p><b>Basis for perfection:</b> _____</p> <p>Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)</p> <p>Value of property: \$ _____</p> <p>Amount of the claim that is secured: \$ _____</p> <p>Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</p> <p>Amount necessary to cure any default as of the date of the petition: \$ _____</p> <p>Annual Interest Rate (when case was filed) _____ %</p> <p><input type="checkbox"/> Fixed</p> <p><input type="checkbox"/> Variable</p>	
<p>10. Is this claim based on a lease?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</p>	
<p>11. Is this claim subject to a right of setoff?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Identify the property: _____</p>	

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No	Amount entitled to priority
	<input type="checkbox"/> Yes. <i>Check all that apply.</i>	
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
	<input type="checkbox"/> Up to \$2,775* 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"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____
* Amounts are subject to adjustment on 4/1/16 and every 3 years after that for cases begun on or after the date of adjustment.		

**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. §§ 152, 157 and 3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 12/3/2015

MM / DD / YYYY

/s/ Example Attorney

Signature

Print the name of the person who is completing and signing this claim:

Name Example Attorney

First name Middle name Last name

Title \_\_\_\_\_

Company Creditor XYZ

Address Identify the corporate servicer as the company if the authorized agent is a servicer  
P.O. Box 12345

Number Street  
Honolulu, HI 96813

City State ZIP Code

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

## WITHDRAWAL OF A CLAIM

To withdraw a previously-filed claim, you must first create a document which withdraws the claim. The document should include the following information: filing party, case number, debtor name(s), claimant name, claim number and amount, and reason for the withdrawal. The document must also include the name of the individual authorizing the withdrawal. You may use local form hib\_3006-1 *Notice of Withdrawal of Claim*, which is posted in the Forms section of our website at [www.hib.uscourts.gov](http://www.hib.uscourts.gov).

- 1 From the home page on the court's website, click **File Claims Online**.
- 2 Read the General Information about the ePOC program. When ready, click **>SUBMIT a withdrawal of a claim (PDF required)**.
- 3 Read the explanation. Click **Withdraw Claim** to continue.

United States Bankruptcy Court District of Hawaii

**DO YOU WANT TO FILE A WITHDRAWAL OF CLAIM OR AN AMENDED CLAIM?**

A **withdrawal of claim** is typically filed when the claim was filed in error and there are no funds due the creditor. If you file a withdrawal of claim in a case where you have received distributions from the Trustee, the Trustee will contact you regarding a refund of those funds.

An **amendment of a claim** is filed when there is a change in the amount due, the classification of the claim or if there is documentation that needs to be added or changed. If you wish to file an amended claim, click on "Proof of Claims" check the box to indicate the claim is amending a previously filed claim; and enter the pertinent information on the claim form.

- 4 The filing screen displays.

United States Bankruptcy Court District of Hawaii

**File Notice of Withdrawal of Claim**

Case Number

Name of Creditor

**IMPORTANT NOTICE OF REDACTION RESPONSIBILITY:** All filers must redact: Social Security or taxpayer-identification numbers; dates of birth; names of minor children; and financial account numbers, in compliance with Fed. R. Bankr. P. 9037. This requirement applies to all documents, including attachments.

I understand that, if I file, I must comply with the redaction rules. I have read this notice.

- Enter the case number.

- Enter the name (or a portion of the name) of the creditor withdrawing its claim. If only a portion of the creditor’s name is entered, the program will pull only the claims in the case that contain the entered letters.
- Read the redaction notice and check the box to confirm compliance with Fed. R. Bankr. P. 9037.
- Click **Next**.

5 The withdrawal screen displays.

United States Bankruptcy Court District of Hawaii

Case Number      **13-00133**

Debtor \*\*         **Paws Clause**

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**Select Claim(s) to be Withdrawn**

Claim	Creditor	Total Claimed	Filed
<input checked="" type="checkbox"/> 1	ABC Bank Loans	\$0.0	11/07/2013
<input type="checkbox"/> 2	Xpress Furniture	\$0.0	11/07/2013
<input type="checkbox"/> 3	Bank of Barclay	\$333.0	11/07/2013

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**Documents:**

- Documents are required to be PDF files.
- Documents are NOT to exceed 20 Mb in size.
- The Proof of Claim being withdrawn should NOT be attached to represent the withdrawal of claim document.

Select the Notice of Withdrawal of Claim (required)

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*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.*

Enter Verification Code

\*\* Verify debtor name(s) prior to submitting withdrawal.

- Verify the case number and debtor name.
- Select the claim(s) to be withdrawn. **Be sure you are selecting the correct claim to withdraw.**
- Click **Browse** to choose the PDF of the notice of withdrawal of claim for upload.
- Open it by right-clicking on your mouse and viewing the PDF to verify you have selected the correct document.
- Double-click on the file or click the Open button in the lower right corner of the File Upload pop-up box to select the PDF for uploading.
- Review the penalty for making a false statement.
- **Enter Verification Code.**
- Click **Submit Withdrawal of Claim**.

- 6 The verification screen displays.

<b>United States Bankruptcy Court District of Hawaii</b>
<p>Successful verification ...</p> <p>Processing</p> <p>The following Withdrawal of Claim has been filed</p> <p><b>Case Name:</b> Paws Clause  <b>Case Number:</b> 13-00133  <b>Docket Text:</b> Withdrawal of Claim No. 3 (Bank of Barclay).</p> <p><b>Notice of this filing will be electronically mailed to all attorney and trustee parties associated in this case.</b></p> <p><a href="#">File additional Withdrawals</a></p>

- 7 The withdrawal of claim is docketed in CM/ECF.

11/07/2013	<a href="#">2</a> (1 pg)	Withdrawal of Claim Nos. 3 (Bank of Barclay) (Entered: 11/07/2013)
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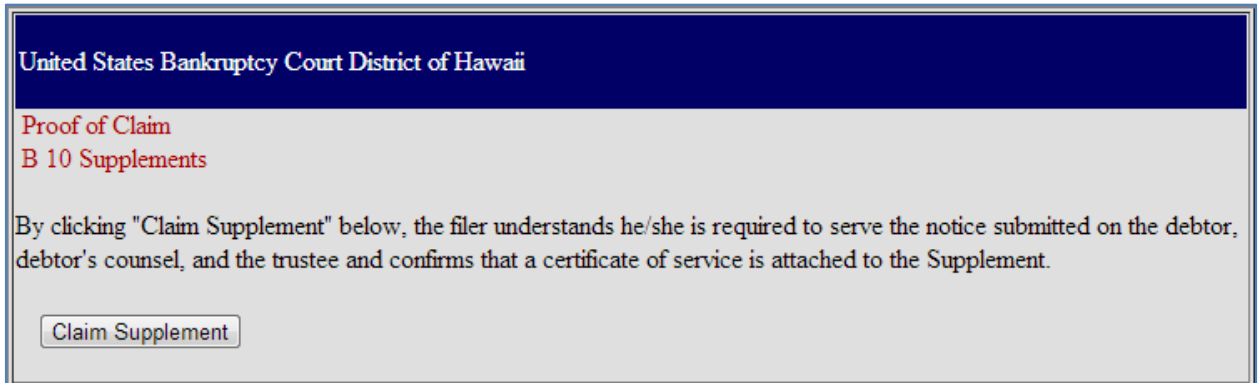
- 8 The withdrawal is also reflected on the claims register.

<b>Creditor:</b> (670928) Bank of Barclay 448 Pacific Coast Place San Francisco, CA 49484	<b>Claim No:</b> 3 Original Filed Date: 11/07/2013 Original Entered Date: 11/07/2013	<b>Status:</b> Withdrawn <a href="#">2</a> Filed by: CR Entered by: ADE Modified:						
Amount claimed: \$333.00 Unsecured claimed: \$333.00								
<b>History:</b> <a href="#">Details</a>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><a href="#">3-1</a></td> <td style="width: 10%; text-align: center;">11/07/2013</td> <td>Claim #3 filed by Bank of Barclay, Amount claimed: \$333.00 (ADE)</td> </tr> <tr> <td style="text-align: center;"><a href="#">2</a></td> <td style="text-align: center;">11/07/2013</td> <td>Withdrawal of Claim Nos. 3 (Bank of Barclay) Status: Withdrawn</td> </tr> </table>			<a href="#">3-1</a>	11/07/2013	Claim #3 filed by Bank of Barclay, Amount claimed: \$333.00 (ADE)	<a href="#">2</a>	11/07/2013	Withdrawal of Claim Nos. 3 (Bank of Barclay) Status: Withdrawn
<a href="#">3-1</a>	11/07/2013	Claim #3 filed by Bank of Barclay, Amount claimed: \$333.00 (ADE)						
<a href="#">2</a>	11/07/2013	Withdrawal of Claim Nos. 3 (Bank of Barclay) Status: Withdrawn						
<b>Description:</b> <b>Remarks:</b>								

## **RULE 3002.1 CLAIM SUPPLEMENTS**

The ePOC program may also be used to file notices related to chapter 13 claims pursuant to Fed. R. Bankr. P. 3002.1: Notice of Mortgage Payment Change, Notice of Postpetition Fees, Expenses, and Charges and Responses to Notice of Final Cure Payment.

- 1 From the home page on the court's website, click **File Claims Online**.
- 2 Read the General Information about the ePOC program. When ready, click **>SUBMIT a Rule 3002.1 claim supplement (PDF required)**.
- 3 Read the explanation. Click **Claim Supplement** to continue.

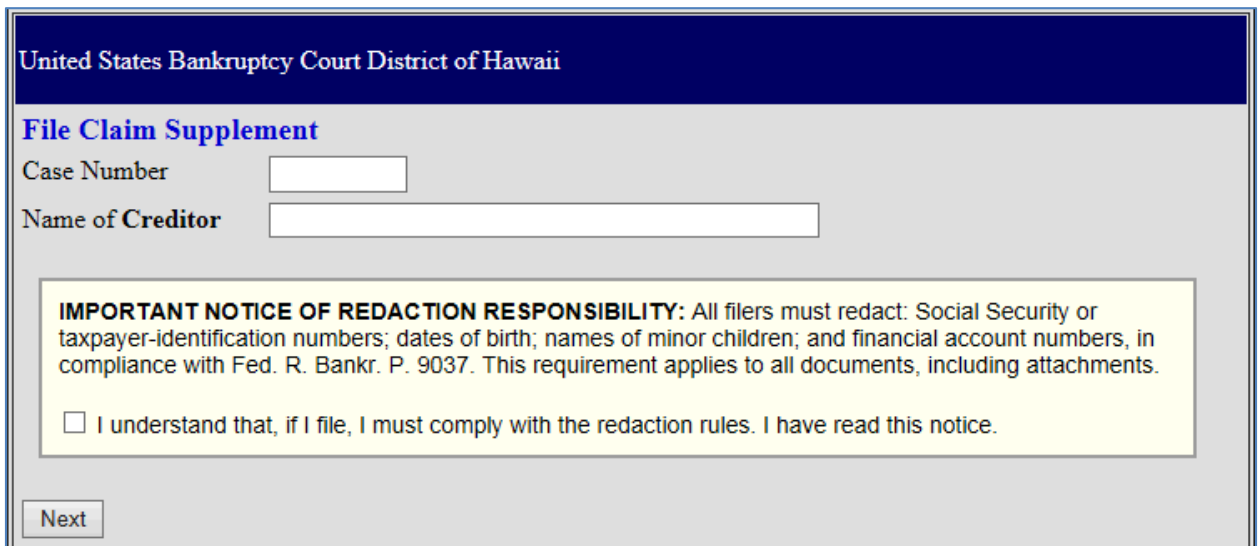


United States Bankruptcy Court District of Hawaii

Proof of Claim  
B 10 Supplements

By clicking "Claim Supplement" below, the filer understands he/she is required to serve the notice submitted on the debtor, debtor's counsel, and the trustee and confirms that a certificate of service is attached to the Supplement.

- 4 The filing screen displays.



United States Bankruptcy Court District of Hawaii

**File Claim Supplement**

Case Number

Name of Creditor

**IMPORTANT NOTICE OF REDACTION RESPONSIBILITY:** All filers must redact: Social Security or taxpayer-identification numbers; dates of birth; names of minor children; and financial account numbers, in compliance with Fed. R. Bankr. P. 9037. This requirement applies to all documents, including attachments.

I understand that, if I file, I must comply with the redaction rules. I have read this notice.

- Enter the case number.
- Enter the name (or a portion of the name) of the creditor supplementing its claim. If only a portion of the creditor's name is entered, the program will pull only the claims in the case that contain the entered letters.
- Read the redaction notice and check the box to confirm compliance with Fed. R. Bankr. P. 9037.
- Click **Next**.

5 The supplemental screen displays.

United States Bankruptcy Court District of Hawaii

Case Number **13-00133**  
 Debtor **Paws Clause**

**Select Claim to be Supplemental**

<u>Claim</u>	<u>Creditor</u>	<u>Total Claimed</u>	<u>Filed</u>
<input checked="" type="radio"/> 1	ABC Bank Loans	\$10000.00	11/14/2013
<input type="radio"/> 3	Bank of Barclay	\$333.00	11/07/2013
<input type="radio"/> 5	ABC Bank Loans	\$1000.00	11/14/2013
<input type="radio"/> 6	Bank of Hawaii	\$5000.00	11/15/2013
<input type="radio"/> 9	Bank of Hawaii	\$20000.00	11/14/2013
<input type="radio"/> 10	Bank of Barclay	\$5000.00	11/14/2013

Check this box if your claim was filed with the a different agency INSTEAD of the Court AND your claim is NOT listed above. Otherwise, select the claim from the above list.

**Type of Supplement to be Filed (select one):**

Supplement 1 - Notice of Mortgage Payment Change  
 Supplement 2 - Notice of Postpetition Fees, Expenses, and Charge  
 Response to Notice of Final Cure Payment  
 Proof of Claim Attachment 3001(c)(1)(d)

**Documents:**

- Documents are required to be PDF files.
- Documents are NOT to exceed 20 Mb in size.
- The Proof of Claim being supplemented should NOT be attached. The Supplement and the Certificate of Service need be attached as a single PDF.

Select the Supplemental PDF (required)

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.*

**HALOGENS**  Enter Verification Code

**\*\* Verify debtor name(s) prior to submitting supplement.**

- Verify the case number and debtor name.
- Select the claim to be supplemented. **Be sure you are selecting the correct claim to supplement.**
- If the claim has NOT been filed, check the box indicating that your claim is NOT listed above and enter the **Creditor Name**.
- Click **Browse** to choose the PDF of the supplemental document for upload. **The supplement and certificate of service must be attached as a single PDF.**
- Open it by right-clicking on your mouse and viewing the PDF to verify you have selected the correct document.

- Double-click on the file or click the Open button in the lower right corner of the File Upload pop-up box to select the PDF for uploading.
- Review the penalty for making a false statement.
- **Enter Verification Code.**
- Click **Submit Supplement.**

6 The verification screen displays.

United States Bankruptcy Court District of Hawaii

Successful verification ...

Processing

The following Supplement of Claim has been filed

**Case Name:** Paws Clause  
**Case Number:** 13-00133  
**Docket Text:** Supplement of Claim No. 4 (ABC Mortgage Company).

[File additional Supplements](#)

7 The supplement displays on the claims register.

<i>Creditor:</i> (670936) ABC Mortgage Company 9383 Pacific Place Suite 1000 Honolulu, HI 96813	<b>Claim No: 4</b> <i>Original Filed Date:</i> 11/07/2013 <i>Original Entered Date:</i> 11/07/2013	<i>Status:</i> Filed by: CR Entered by: ADE Modified:
Amount claimed: \$365411.00 Secured claimed: \$365411.00		
<i>History:</i> <a href="#">Details</a> <ul style="list-style-type: none"> <li><a href="#">4-1</a> 11/07/2013 Claim #4 filed by ABC Mortgage Company, Amount claimed: \$365411.00 (ADE)</li> <li><a href="#">doc</a> 11/07/2013 Notice of Mortgage Payment Changes of Claim No. 4 filed by ABC Mortgage Company</li> </ul>		
<i>Description:</i> <i>Remarks:</i>		

8 If you checked the box indicating that your claim was NOT listed, the claim supplement will be display on the docket sheet.

<a href="#">10</a> (1 pg)	Notice of Mortgage Payment Changes filed by XYZ Mortgage Company (Entered: 12/04/2013)
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