

**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 - District of Hawaii

Case number \_\_\_\_\_

Local Form H1009-1 (4/2024)  
**Cover Sheet for Amendments**

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**Part 1: Amendments** (attach amended documents to this cover sheet)

Check all of the following that are being amended.

Schedules: A/B C G H I J

Statement of Financial Affairs

Chapter 7 Statement of Intention

Chapter 7 Statement of Current Monthly Income (122A-1)

Chapter 7 Means Test Calculation (122A-2)

Chapter 13 Statement of Current Monthly Income (122C-1) and Calculation of Disposable Income (122C-2)

Other:

**Amendments requiring \$34 filing fee**

Schedules: D E/F

Creditor List – *no fee required for amended list if:*

- *only updating an address or*
- *only adding a creditor's attorney*

**Part 2: Declaration**

Under penalty of perjury, the undersigned declares that I have read the documents filed with this declaration and that they are true and correct. *[If filing electronically through ECF, a **Declaration re: Electronic Filing with original signatures must be filed not later than 7 days after filing the amendments.**]*

/s/ \_\_\_\_\_  
Debtor 1

/s/ \_\_\_\_\_  
Debtor 2

Dated: \_\_\_\_\_

Dated: \_\_\_\_\_

**Part 3: Certificate of Service** (attach a list of names and addresses where notice was sent)

The undersigned certifies:

Notice of an amended list, schedule, or statement that affects a creditor or party in interest has been served on each affected entity identified on the attached service list.

A copy of the Notice of Bankruptcy Case, Meeting of Creditors, & Deadlines has been served on any added creditors and parties in interest identified on the attached service list.

Dated: \_\_\_\_\_

/s/ \_\_\_\_\_