Filing a Proof of Claim Online with ePOC

Features and Benefits of Filing a Proof of Claim using ePOC

- Anyone can use this web-based application- no registration required.
- Perfect for pro se individuals, trade creditors, service and health providers, retailers, collection agencies, and attorneys.
- Easy to use, fill-in-the-blank form with spaces to add additional information.
- Can attach exhibits in PDF format.
- Includes hyperlinks to instructions and explanations.
- Can amend the claim at a later date, if necessary.
- Can print a copy of the filed proof of claim with the clerk's filed stamp.
- Saves paper, printer supplies, and postage.
- No waiting for filing confirmation from the clerk's office.
- No chambers copies or trustee copies required.

Requirements

• May need a multi-function printer or scanner and certain software to add PDFs as attachments to a proof of claim.

Filing or Amending a Proof of Claim

- Go to our website, <u>https://www.tneb.uscourts.gov/claims</u>.
- Select Submit or Amend an Electronic Proof of Claim under Electronic Filing of Claims.

Electronic Filing of Claims

Filing a proof of claim through the Court's website is instantaneous, immediately verifiable, and free. A login or password is not required to file a claim through the Court's website. A creditor may file a claim action in a bankruptcy case by clicking on the appropriate link below:

Instructions

- Submit or Amend an Electronic Proof of Claim
- <u>Withdraw a Proof of Claim</u>
- <u>Claim Supplements</u>

File Claim Screen

- Enter the case number.
- Put the name of the creditor in the Name of Creditor box.
- Select your title from the Filed by drop down box (creditor, debtor, attorney, or trustee).
- Read the redaction responsibility and fraudulent claim warnings.
 - Check the box to acknowledge that you understand and comply with the redaction rules.
- Click Next.

| United States Bankruptcy Court Eastern District of Tennessee |
|---|
| File Claim Case Number Example: 14-00002 |
| Name of Creditor Filed by 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. 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. |
| Update this message via Site->ePOCMessageFront |
| Installed Version: 7 |

Select Creditor Screen

- Select the creditor.
 - If the creditor is not listed, or if the creditor's information is not correct, select **Creditor not listed** and create a new record with the creditor's name and address.



Part 1: Identify the Claim

- Confirm that the debtor's name and case number are correct.
- Fill in the creditor's name and the address where notices should be sent.
 - You may add a second address in line 3 if the addresses for payments and notices are different.

| You selected "FILED BY" as CREDITOR. If this is incorrect, <u>START OVER</u> !! | | | | |
|---|---|--|--|--|
| ALL "Yes/No" Questions MUST be ANSWERED | | | | |
| CONFIRM this is the CORRECT Case | | | | |
| Debtor 1 I. M. Debtor | ır | | | |
| Debtor 2 (Spouse, if filing) | | | | |
| Case number: 14-0002 | | | | |
| | | | | |
| 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. Who is the current creditor? | Joe's Mart | | | |
| Address of an address through the same | Vame of the current creditor (the person or entity to be paid for this claim) | | | |
| (Do not add the creditor's name in the | 111 My Street | | | |
| address) | | | | |
| Check for a Foreign Address | | | | |
| (City, State, Zip) | Montgomery , AL 💙 36104 - | | | |
| Telephone Number: 3 | 334-555-1234 | | | |
| Email: J | Joe@JoeCompany.com | | | |
| Ē | Other names the creditor used with the debtor | | | |
| | | | | |
| 2. Has this claim been acquired from someone el | lse? Yes ☑ No 🗌 | | | |
| From whom? | | | | |
| 3. Where should notices and payments to the cred | ditor be sent? (Notice Address Completed in Section 1) | | | |
| Federal Rule of Bankruptcy Procedure (FRBP) 200 | 02(g) | | | |
| □ CHECK if Payment Address differs from Not | tice Address | | | |
| | | | | |
| | (See instructions) | | | |
| 4. You must select the creditor who filed the claim to amend a claim | | | | |
| Does this claim amend one already filed? Yes | No 🗹 | | | |

- If the claim has been acquired by someone else, select Yes in line 2. If not, select No.
- Add a second address for payments, if necessary.
 - **NOTE:** Your claim will appear on the claims register and in the mailing matrix with the noticing address, not the payments address.

| 3. Where should notices and payments creditor be sent? | to the (Notice Address Completed in Section 1) |
|---|--|
| Federal Rule of Bankruptcy Procedure (2002(g) | FRBP) |
| CHECK if Payment Address differ | s from Notice Address |
| Address where payments | Joe's Mart |
| should be sent | P.O. Box 111111 |
| (City, State, Zip) | Montgomery AL V 36104 - |
| Telephone Number: | 334-555-1234 |
| Email: | accounts@JoeCompany.com |
| | Uniform claim identifier for electronic payments in chapter 13 (if you use one): (See instructions) |
| 4. Does this claim amend one already fil | ed? Yes 🗌 No 🗹 |
| 5. Do you know if anyone else has filed a | a proof of claim for this claim? Yes □ No ☑ |

• If you previously filed a claim and need to amend it, select **Yes** in line 4. If not, select **No**. **NOTE:** The creditor's name on the new proof of claim must match the name on the old proof of claim. The system will not detect a previously filed proof of claim if the names are different; for example, Chase Bank is not Chase Auto Leasing.

| 4. Does this claim amend one already | y filed? Yes 🗹 No 🗌 |
|--------------------------------------|---------------------|
| Court Claim Number: Y Filed on: | |

Part 2: Give Information about the Claim as of the Date the Bankruptcy Case was Filed

NOTE: Any box checked Yes must also include the required information. If this information is not included, the claim cannot be filed.

- If you use a number to identify the debtor, select **Yes** in line 6. If not, select **No**.
- Enter the amount of the claim.
 - If the claim amount includes interest or other charges, select **Yes** in line 7 and follow the instructions. If not, select **No**.
- Type the basis of the claim in line 8; for example, goods sold, money loaned, lease, etc.
- If all or part of the claim is secured, select **Yes** in line 9. If not, select **No**.
 - If you selected yes, the screen will expand, asking you, among other things, to enter the nature of the property, the value of the property, and the amount of the claim that is secured.
- If the claim is based on a lease, select **Yes** in line 10 and enter the amount necessary to cure any default as of the date of the bankruptcy petition. If not, select **No**.
- If the claim is subject to a right of setoff, select **Yes** in line 11 and identify the property. If not, select **No**.
- If all or part of the claim is entitled to priority under 11 U.S.C. § 507(a), select **Yes** in line 12. If not, select **No**.
 - If you selected yes, the screen will expand, asking you to check all of the applicable claim descriptions.

| 6 Do you have any number you u | ure to identify the debter? Ver 🖉 No |
|--|---|
| Last 4 digits of the debtor's appount | as any number you use to identify the debter |
| Last 4 digits of the debtor's account | |
| 7. How much is the 1500. | 00 Does this amount include interest or other charges? |
| claim? (required) | |
| | Bankruptoy 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: | ······································ |
| | |
| 8. What is the basis of the claim? | 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. |
| | Good sold |
| | (See instructions) |
| 9. Is all or part of the claim secure | ed? 🖾 Ma |
| | Ves. The claim is secured by a lien on property |
| | |
| 10.Is this claim based | No. |
| on a lease? | ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ |
| | |
| 11. Is this claim subject to a | No No |
| right of setoff? | Yes. Identify the property: |
| | |
| 12. Is all or part of the claim entit | led to priority 🔽 No |
| under in 0.5.6. g sor(a): | Yes Check all that apply: |
| | |
| - | |
| 9. Is all or part of the claim secur | ad? 🗌 No |
| | Yes. The claim is secured by a lien on property. |
| Nature of property: | Kitha alaim is analyzed by the debteds ariseinal socidance. Fig. 4 Madance Result of Claim Attachment (Official Form 440 |
| Real estate. | A) with this Proof of Claim. |
| Motor vehicle | |
| Other. Describe: | |
| | |
| Basis for perfection: | |
| Attach redacted copies | of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, other document that shows the lien has been filed or recorded.) |
| interioring statement, or | our dool nen una shows the lief has been lied of reorided.) |
| Value of property: | |
| Amount of the claim t | hat is secured: |
| Amount of the claim t | that is unsecured: (The sum of the secured and unsecured |
| | amounts should match the amount in line 7.) |
| | |
| Amount necessary to | cure any default as of the date of the petition: |
| -, | |
| E Fixed Ar | inual Interest Rate (when case was filed) % |
| Variable | |
| | |

-1

| 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 |
|---|---|---|
| A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority. | Domestic support obligations (including alimony and child support) under (1)(A) or (a)(1)(B). Up to \$3,350* of deposits toward purchase, lease, or rental of property or personal, family, or household use. 11 U.S.C. § 507(a)(7). Wages, salaries, or commissions (up to \$15,150*) earned within 180 days bankruptcy petition is filed or the debtor's business ends, whichever is ea 507(a)(4). Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). Other. Specify subsection of 11 U.S.C. § 507(a)(((()))) that applies *Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or all | 11 U.S.C. § 507(a) • services for s before the urlier. 11 U.S.C. § fter the date of adjustment. |

Documents

- If you want to attach a document to the proof of claim, it must be in PDF format.
- Read the attachments requirements before attaching PDFs.

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 30 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

Part 3: Sign Below

- Select your title (creditor, creditor's attorney, trustee, debtor, etc.).
- Understand that your signature acknowledges that you have filled out the proof of claim truthfully under penalty of perjury.
- Type your name in the **Signature box.** Add your title, the company you represent, a mailing address, phone number, and email address.

| Part 3: Sign Below | | | | |
|--|--|--|--------------------------------|--|
| The person completing | Check the appropriate box: (required) | | | |
| sign and date it. FRBP | 🗹 I am the credi | itor. | | |
| 9011(b). | I am the credi | tor's attorney or authorized agent. | | |
| If you file this claim | I am the truste | rustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. | | |
| 5005(a)(2) authorizes | □ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. | | | |
| courts to establish local rules specifying what a signature is | 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. | | | |
| A person who files a | I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct. | | | |
| be fined up to \$500,000, imprisoned for up to 5 | I declare under p | I declare under penalty of perjury that the foregoing is true and correct. | | |
| U.S.C. §§ 152, 157 and 3571. | Print the name of | the person who is completing and signing this claim: | | |
| | Signature* | Joe E. Mart | *Type Full Name (required) | |
| | Title | President | | |
| | Company | Joe's Mart | | |
| | | Identify the corporate servicer as the company if the | authorized agent is a servicer | |
| | | | | |
| | Address | 111 My Street | | |
| | | Number and Street | | |
| | (City, State, Zip) | Montgomery AL V 36104 | - | |
| | Contact Phone: | 334-555-1234 | | |
| | Email: | Joe@JoeCompany.com | | |

- Check the reCAPTCHA box and select the appropriate blocks to identify the requested item(s).
- Click Submit Claim.

| I'm not a robot | 2 | |
|-----------------|------------------------------|--|
| | reCAPTCHA Privacy - Terms | |

Supporting Documentation

- Click Browse to attach PDFs to your proof of claim.
- Once the document is attached, click File Proof of Claim.

| UPPORTING DOCUMENTATION (files should be limited to 30 Mb in size.) | |
|---|------------------------------------|
| Browse | Browse |
| Add Attachment File Proof of Claim | Add Attachment File Proof of Claim |

Successful Verification

- Click on the blue number to see and print your claim.
- For amended claims: If you checked Yes in line 4, Part 1, the amendment will be noted on the claims register and the official proof of claim form.

| Fill in this information to identify the case: | FILED |
|---|--|
| Debtor 1 SAMPLE Debtor 2 | U.S. Bankruptcy Court Eastern District of Tennessee |
| (Spouse, if filing) | 2/17/2025 |
| United States Bankruptcy Court Eastern District of Tennessee Case number: 24-50000 | William T. Magill, Clerk |
| Official Form 410 | |
| Proof of Claim | 12/2 |

w.

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.

| 1.Who is the current creditor? | Expansion Capital Group, LLC Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor | | |
|---|--|--|--|
| | | | |
| 2.Has this claim been acquired from someone else? | No Yes. From whom? | | |
| 3.Where should notices and payments to the creditor be sent? | Where should notices to the creditor be sent? Expansion Capital Group, LLC | Where should payments to the creditor be sent? (if different) | |
| Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) | Name 1 c/o Aubrey Thrasher, LLC 3050 Peachtree Road NW Suite 240 Atlanta, GA 30305 | Name | |
| | Contact phone 404-978-1355 | Contact phone | |
| | Contact emailbankruptcy@aubreythrasher.com | Contact email | |
| | Uniform claim identifier (if you use one): | | |
| 4.Does this claim amend one already filed? | No Yes. Claim number on court claims registry (if known) | Filed on | |
| C Designation of the | P M- | MM / DD / YYYY | |
| 5.Do you know if anyone else has filed a proof of claim for this claim? | Yes. Who made the earlier filing? | | |
| Official Form 410 | Deceded Object | | |

Official Form 410

Proof of Claim

page 1

Withdrawing a Proof of Claim

- Go to our website, https://www.tneb.uscourts.gov/claims.
- Select Withdraw a Proof of Claim under Electronic Filing of Claims.

How to File a Claim in a Bankruptcy Case

There are three ways to file a claim in a bankruptcy case: (1) using the electronic filing service on the Court's website; (2) using the CM/ECF system; or (3) by mail or in person.

Electronic Filing of Claims

Filing a proof of claim through the Court's website is instantaneous, immediately verifiable, and free. A login or password is not required to file a claim through the Court's website. A creditor may file a claim action in a bankruptcy case by clicking on the appropriate link below:

Instructions

- Submit or Amend an Electronic Proof of Claim
- <u>Withdraw a Proof of Claim</u>
- <u>Claim Supplements</u>

Withdrawal Box

- Read about the difference between a withdrawal of a claim and an amendment of a claim.
- If you would like to withdraw a claim, click Withdraw Claim.

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.

Withdraw Claim Proof of Claims

File Notice of Withdrawal of Claim

- Enter the case number.
- Put the name of the creditor in the Name of Creditor box.
- Read the notice of redaction responsibility.
 - Check the box saying that you understand that you must comply with the redaction rules.

• Click Next.

| File Notice of Wit Case Number | hdrawal of Claim 14-0002 |
|---|--|
| Name of Creditor | Joe's Mart |
| IMPORTANT NOT taxpayer-identificat compliance with Fe | ICE OF REDACTION RESPONSIBILITY: All filers must redact: Social Security or tion numbers; dates of birth; names of minor children; and financial account numbers, in ed. R. Bankr. P. 9037. This requirement applies to all documents, including attachments. |
| Next | |

Select Claim to be Withdrawn

- Verify the case number and debtor's name.
- Check the box beside the claim you wish to withdraw.
- Attach your notice of withdrawal of the claim.
 - This must be a letter that includes the case number, debtor's name, and claim number. It must be in PDF format.
- Check the reCAPTCHA box and select the appropriate blocks to identify the requested item(s).
- Click Submit Withdrawal of Claim.
- On the verification screen, you will see that your withdrawal has been entered.

| Case N | umber 14-0002 | | | | | |
|--|-------------------------------|-------------------------|------------|--|--|--|
| Debtor | I. M. Debtor | | | | | |
| Select Claim(s) to be Withdrawn | | | | | | |
| Claim | Creditor | Total Claimed | Filed | | | |
| | Trustmark National Bank (bud) | \$1912.15 | 05/18/2015 | | | |
| 2 | Trustmark National Bank (bud) | \$19996.86 | 05/18/2015 | | | |
| 3 | CHARTER COMMUNICATIONS | \$223.52 | 05/21/2015 | | | |
| - 4 | Haynes Ambulance | \$816.0 | 06/01/2015 | | | |
| 5 | TRUSTMARK NATIONAL BANK | \$5000.0 | 05/11/2016 | | | |
| ✓ 6 | Joe's Mart | \$1500.0 | 05/16/2016 | | | |
| 0 7 | CHARTER COMMUNICATIONS | \$500.0 | 06/01/2016 | | | |
| | | | | | | |
| Docume | ents: | | | | | |
| Documents are required to be PDF files. | | | | | | |
| Documents are NOT to exceed 30 Mb in size. | | | | | | |
| The Proof of Claim being withdrawn should NOT be attached to represent the withdrawal of claim document. | | | | | | |
| occurrent. | | | | | | |
| Select the Notice of Withdrawal of Claim (required) C:\Users\ Browse | | | | | | |
| | | | | | | |
| Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. | | | | | | |
| | . 33 102 and 55 11 | | | | | |
| | 2380 2380 E | Inter Verification Code | | | | |
| Submit Withdrawal of Claim Clear Form ** Verify debtor name(s) prior to submitting withdrawal. | | | | | | |

| Successful verification Processing The following Withdrawal of Claim has been filed Case Number: I. M. Debtor Case Number: 14-0002 | |
|--|--|
| Processing The following Withdrawal of Claim has been filed Case Name: I. M. Debtor Case Number: 14-0002 | |
| The following Withdrawal of Claim has been filed Case Name: I. M. Debtor Case Number: 14-0002 | |
| Case Name: I. M. Debtor Case Number: 14.0002 | |
| Case Number: 14-0002 | |
| - 14-0002 | |
| Docket Text: Withdrawal of Claim Nos. 6 (Joe's Mart). | |
| Notice of this filing will be electronically mailed to all attorney and trustee parties associated in this case | |
| File additional Withdrawals | |

3002.1 Claim Supplements

This entry is for parties filing on behalf of mortgage creditors. Do not use this entry to file an amended claim or to attach additional documents. Please call the Clerk's Office if you experience problems or need assistance with modifying your claim.

- Go to our website, https://www.tneb.uscourts.gov/claims.
- Select Claim Supplements under Electronic Filing of Claims.

How to File a Claim in a Bankruptcy Case

There are three ways to file a claim in a bankruptcy case: (1) using the electronic filing service on the Court's website; (2) using the CM/ECF system; or (3) by mail or in person.

Electronic Filing of Claims

Filing a proof of claim through the Court's website is instantaneous, immediately verifiable, and free. A login or password is not required to file a claim through the Court's website. A creditor may file a claim action in a bankruptcy case by clicking on the appropriate link below:

Instructions

- Submit or Amend an Electronic Proof of Claim
- <u>Withdraw a Proof of Claim</u>
- <u>Claim Supplements</u>
 - Read the note about service.
 - Click Claim Supplement or Attachment

File Claim Supplement

- Enter the case number.
- Put the name of the creditor in the Name of Creditor box.
- Read the notice of redaction responsibility.
 - Check the box saying that you understand that you must comply with the redaction rules.
- Click Next.

| Case Number | 14-0002 | |
|------------------|--|--|
| Name of Creditor | Joe's Mart | |
| IMPORTANT NOT | TICE OF REDACTION RESPONSIBILITY: All filers must redact: Social Security or | |

Select Claim to be Supplemented

- Verify the case number and debtor's name.
- Check the box beside the claim you wish to supplement.
- Check the box if your claim was filed with a different agency instead of the court and your claim is not listed.
- Select the type of supplement to be filed.
- Attach the notice of supplement in PDF format.
- Check the reCAPTCHA box and select the appropriate blocks to identify the requested item(s).
- Click Submit Supplement or Attachment.
- On the verification screen, you will see that your supplement has been filed.

| Case Number 14-0002 | | | | | |
|---|-------------------------|------------|--|--|--|
| Debtor ** I. M. Debtor | | | | | |
| Select Claim to be Supplemented | | | | | |
| Claim Creditor | Total Claimed | Filed | | | |
| O 1 Trustmark National Bank (bud) | \$1912.15 | 05/18/2015 | | | |
| O 2 Trustmark National Bank (bud) | \$19996.86 | 05/18/2015 | | | |
| ○ 3 CHARTER COMMUNICATIONS | \$223.52 | 05/21/2015 | | | |
| O 4 Haynes Ambulance | \$816.0 | 06/01/2015 | | | |
| O 5 TRUSTMARK NATIONAL BANK | \$5000.0 | 05/11/2016 | | | |
| ● 6 Joe's Mart | \$1500.0 | 05/16/2016 | | | |
| O 7 CHARTER COMMUNICATIONS | \$500.0 | 06/01/2016 | | | |
| Kesponse to Notice of Final Cure Payment | | | | | |
| Documents: | | | | | |
| Documents are required to be PDF files. Documents are NOT to exceed 30 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) C:\Users\ Browse | | | | | |
| 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. | | | | | |
| 1988 | Enter Verification Code | | | | |
| Submit Supplement Clear Form ** Verify debtor name(s) prior to submitting supplement. | | | | | |

United States Bankruptcy Court Middle District of Alabama Successful verification ... Processing The following Supplement of Claim has been filed Case Name: I. M. Debtor Case Number: 14-0002 Docket Text: Supplement of Claim No. 6 (Joe's Mart).

File additional Supplements