

United States Bankruptcy Court
District of Connecticut



Electronic Filing of Proof of Claim Guide

December 2023

Proofs of claim may be filed, amended, and supplemented through the Court's website, except in cases where there is a Claims and Noticing Agent assigned. This Guide will outline the steps needed to create and electronically file a Proof of Claim or Supplement.

When filing a proof of claim or amended proof of claim, a filing party shall comply with the requirements of 11 U.S.C. § 501, Federal Rules of Bankruptcy Procedure 3001 – 3005, and all applicable Local Bankruptcy Rules.

- A Proof of Claim may be filed electronically for all chapters, except for cases with a Claims and Noticing agent. A login and password is not required.
- Do not upload a completed Proof of Claim form (Official Form B 410) as an attachment to the electronically filed claim.
- The name and complete address of the creditor must be entered on the screen so that it appears on the proof of claim form. If an attorney is filing the claim on behalf of a creditor, the attorney should also enter his/her name and address. The name and title, if any, of the person authorized to file the claim is required on the claim form.
- Supplements accepted through ePOC:
 - Supplement 1 – Notice of Mortgage Payment Change
 - Supplement 2 – Notice of Postpetition Fees, Expenses, and Charge
 - Response to Notice of Final Cure Payment
 - Other Supplement to Proof of Claim

The filing of a proof of claim electronically on this Court's website shall constitute the filer's approved signature and have the same force and effect as if the individual signed a paper copy of the document.

The penalty for filing a fraudulent claim may include a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152, 3571.

Questions regarding electronically filing a Proof of Claim can be answered by the Help Desk via telephone (Hartford: 860-240-3675; New Haven: 203-773-2009, Bridgeport: 203-579-5808) or email to: ctb_ecf_help@ctb.uscourts.gov.

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File a Proof of Claim or Amended Proof of Claim

1. From the Court's Home Page, select the link for "ePOC" on the link to the left of the screen or navigate to the "Case Info" page and select "Electronic Proof of Claim Filing."
2. On the "Electronic Filing of Proofs of Claim – ePOC" screen, select "*File a Proof of Claim or Amend a Proof of Claim.*"

[Home](#) » [Case Info](#)

ePOC

Electronic Filing of Proofs of Claim (ePOC)

A creditor (a party to whom a debtor owes money or claims to be owed money by a debtor) may file, supplement, and amend proofs of claim electronically through the Court's website without a CM/ECF login/password through the ePOC application using the link below. You may also file Claim Supplements; Notice of Mortgage Payment Change; Notice of Postpetition Fees, Expenses, and Charges; and a Response to Notice of Final Cure Payment, through this program. This service is an alternative to completing a paper copy of Proof of Claim Form (B410) and mailing it to the Court.

ePOC allows for the electronic submission of proofs of claim for all chapters, except for cases that have been assigned to a Claims and Noticing Agent. Please click [here](#) to find a list of cases employing a Claims and Noticing Agent.

If you currently have a CM/ECF login/password, please continue to file proofs of claim in CM/ECF as you normally would.

If you are filing a proof of claim electronically for the first time, PLEASE READ all information provided below BEFORE attempting to file your proof of claim using this link.

NAME AND ADDRESS INFORMATION:

The name and complete address of the creditor must appear on the claim form. If an attorney is filing the claim on behalf of a creditor, the attorney should also enter his/her name and address. The name and title, if any, of the person authorized to file the claim is required on the claim form.

COMPLIANCE WITH RULES

When filing a proof of claim or amended proof of claim, the creditor shall comply with the requirements of 11 U.S.C. § 501, Federal Rules of Bankruptcy Procedures 3001 - 3005, and all applicable Local Bankruptcy Rules regarding the attachment of documentation in electronic format sufficient to establish the validity and status of the claim and any applicable security interest.

FORCE AND EFFECT OF ELECTRONIC SUBMISSION:

A claim filed, supplemented, or amended electronically on this Court's website will constitute the filer's approved signature and have the same force and effect as if the filer signed a paper copy of the document and shall constitute entry of the proof of claim or related document in the claims register maintained by the clerk pursuant to Federal Rule of Bankruptcy Procedure 5003.

PENALTY FOR FILING FRAUDULENT CLAIMS:

The penalty for filing fraudulent claims may include a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152, 3571.

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 Federal Rule of Bankruptcy Procedure 9037. This requirement applies to all documents, including attachments.

[FILE A PROOF OF CLAIM](#) or [AMEND A PROOF OF CLAIM](#)

[SUPPLEMENT A PROOF OF CLAIM](#)

[ePOC USER GUIDE](#)

[FREQUENTLY ASKED QUESTIONS](#)

Enter the Case and Creditor Information

1. Enter the case number in which the claim is being filed.
Remember to first verify the case number and debtor name before proceeding.
2. Enter the name of the creditor filing the claim.
3. Select the party filing the claim by using the drop-down list for the “Filed by” box (*i.e.*, creditor, creditor attorney, debtor, debtor attorney or trustee).
4. Read the Redaction Notice and ensure any information being filed complies with Fed. R. Bankr. P. 9037 including any supplemental documentation to support the proof of claim. After review, check the Redaction box.
5. Click Next.

United States Bankruptcy Court District of Connecticut

File Claim

Case Number
Example: 14-00002

Name of Creditor

Filed by

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.

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "motion" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Installed Version: 7

Creditor Information

6. If the letters/words entered in the “Name of Creditor” box match with a creditor already listed in the case, a pick list screen will appear.
 - a. If the name of the creditor AND address **exactly match** the creditor’s information, select the button next to the name of that creditor to link it to the proof of claim.
 - b. **If the name of the creditor or address are different**, select the button next to “Creditor not listed” to create a new creditor record.

United States Bankruptcy Court District of Connecticut

Select Creditor

Creditor ABC
1 Main Street
Anywhere, CT 06111

Creditor not listed

7. If there are no matches for existing creditors, select the button next to “Creditor not listed” to create a new creditor record.

United States Bankruptcy Court District of Connecticut

Select Creditor

Creditor not listed

8. In the next screen, the electronic Proof of Claim will appear. Verify the case information (debtor’s name and case number) and fill out information about the claim.

9. In Part 1 (Identify the Claim): Provide information about the current creditor. If the creditor was already listed in the case as a creditor, the address information will be filled in with the pre-existing information. If this information is not exact or accurate, go back and select “Creditor Not Listed” to create a new creditor record.

For Creditors Previously Listed:

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 **ABC Creditor**
123 Main Street
Anytown, CT 06000

Telephone Number:

Email:

Other names the creditor used with the debtor

2. Has this claim been acquired from someone else? Yes No

3. Where should notices and payments to the creditor be sent? (Notice Address Completed in Section 1)
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

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):
 [\(See instructions\)](#)

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

Court Claim Number: Filed on:

5. Do you know if anyone else has filed a proof of claim for this claim? Yes No

Who made the earlier filing?

For Creditors Not Previously Listed:

Part 1: Identify the Claim	
1. Who is the current creditor?	
	ABC Creditor <small>Name of the current creditor (the person or entity to be paid for this claim)</small>
Address where notices should be sent (Do not add the creditor's name in the address)	<input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> Check for a Foreign Address	
<small>(City, State, Zip)</small>	<input type="text"/> , <input type="text"/> - <input type="text"/>
Telephone Number:	<input type="text"/>
Email:	<input type="text"/>
	Other names the creditor used with the debtor <input type="text"/>
2. Has this claim been acquired from someone else? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	From whom? <input type="text"/>
3. Where should notices and payments to the creditor be sent? (Notice Address Completed in Section 1)	
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	
<input checked="" type="checkbox"/> CHECK if Payment Address differs from Notice Address	
Address where payments should be sent	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<small>(City, State, Zip)</small>	<input type="text"/> , <input type="text"/> - <input type="text"/>
Telephone Number:	<input type="text"/>
Email:	<input type="text"/>
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): <input type="text"/> (See instructions)
4. You must select the creditor who filed the claim to amend a claim	
Does this claim amend one already filed? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
5. Do you know if anyone else has filed a proof of claim for this claim? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Who made the earlier filing? <input type="text"/>	

REMEMBER:

- If the address where notices should be sent differs from where a payment should be sent, select the checkbox next to “Payment Address differs from Notice Address.” Enter the name and contact information for where a payment should be sent.

Identifying an Amended Claim:

- If you are amending a previously filed claim, select the box “Yes” in response to Question 4 to indicate that this claim amends a previously filed claim. A pop-up box displays the message: “NOTE – you should only amend a claim if you are the original claimant or the transferee of the claim.” If you are the original claimant or the transferee, click OK.
 - A drop-down list appears with the claim numbers of any previously filed claims associated with the creditor entered.

- Select the claim number that is being amended.
- The “Filed on” date will automatically populate based on the claim number selected.
- Continue to Question 5 on the screen.

10. In Part 2 (Give Information About the Claim as of the Date the Case Was Filed): Provide information about the amount and nature of the claim. An amount is required. If the amount is \$0, an explanation must be provided.

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

6. Do you have any number you use to identify the debtor? Yes No
 Last 4 digits of the debtor's account or any number you use to identify the debtor:

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:

8. What is the basis of the claim? (required) 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.

[\(See instructions\)](#)

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-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, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property:
Amount of the claim that is secured:
Amount of the claim 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:
 Fixed **Annual Interest Rate** (when case was filed) %
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property:

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**

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 10.0 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

11. Documents supporting the Proof of Claim may be attached and uploaded in PDF Format. Do Not upload a copy of Official Form B 410 (Proof of Claim). This fillable form will create the B 410 Form. If the answer is Yes to “Do you wish to attach supporting documentation,” a screen will appear after submitting the claim to upload supporting documents.
12. In Part 3 (Sign Below): Provide information about the filer of the electronic proof of claim. Select the appropriate checkbox indicating the role of the filer. Enter the signature and title of the filer.

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: (required)

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.

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

Signature* *Type Full Name
(required)

Title

Company
Identify the corporate servicer as the company if the authorized agent is a servicer

Address
Number and Street

(City, State, Zip) -

Contact Phone:

Email:

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.

I'm not a robot

** Verify debtor name(s) prior to submitting claim to be filed.

After verifying all the information on the electronic Proof of Claim is correct, check the box for “I’m not a robot” and complete the reCAPTCHA verification.

REMEMBER

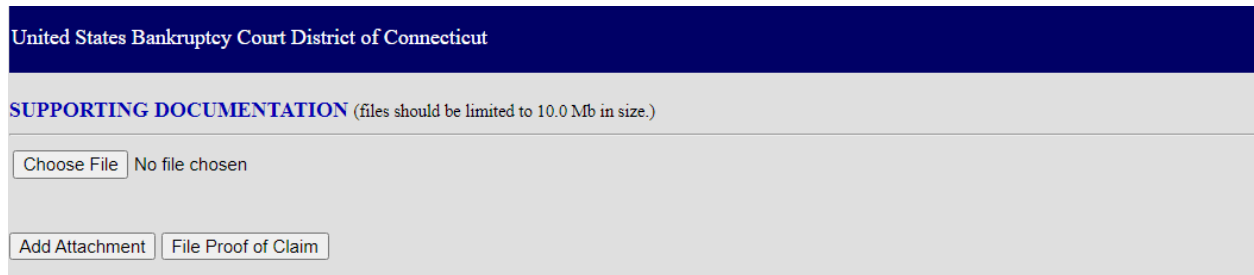
- The filing of a proof of claim electronically on this court’s website shall constitute the filer’s approved signature and have the same force and effect as if the individual signed a paper copy of the document and the provisions of 18 U.S.C. §§ 152, 3571 shall apply to such filing.

- The electronic filing of a proof of claim shall constitute entry of the proof of claim in the claims register maintained by the Clerk pursuant to Fed. R. Bankr. P. 5003.

13. Select the button for “Submit Claim.”

14. The next screen will allow supporting documentation to be uploaded.

- To upload supporting documentation, select the button “Choose File” to navigate to the location of the PDF file for the supporting documentation.
- Once finding the appropriate file, select “Add Attachment.” If multiple PDFs need to be filed for a Proof of Claim, select Add Attachment again to add more files.



United States Bankruptcy Court District of Connecticut

SUPPORTING DOCUMENTATION (files should be limited to 10.0 Mb in size.)

Choose File No file chosen

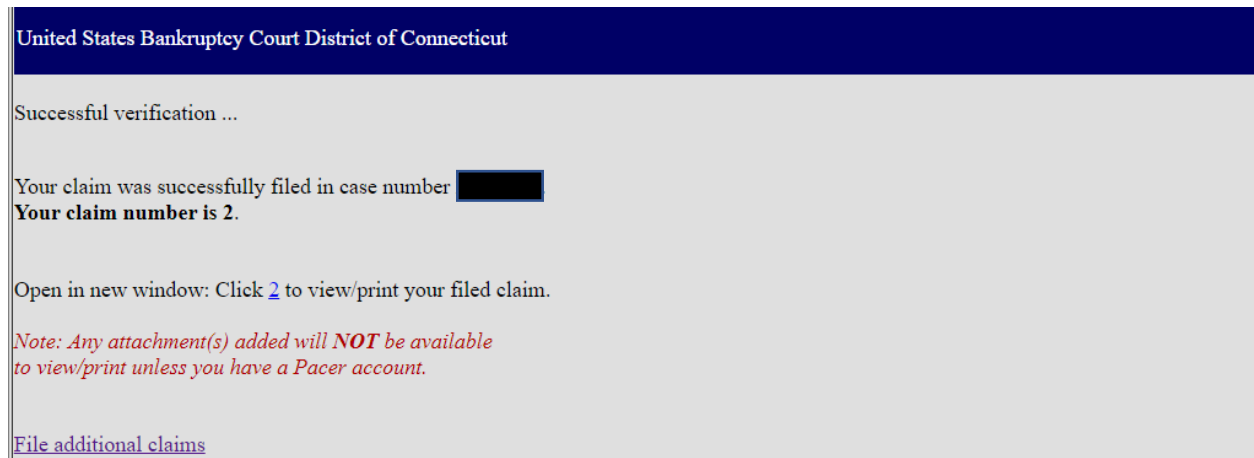
Add Attachment File Proof of Claim

15. After review, select “File Proof of Claim.” **WARNING: There is no further opportunity to modify the Proof of Claim and selecting “File Proof of Claim” will file the Proof of Claim.**

A screen will appear indicating your claim was successfully filed. The claim number will be displayed. Print this screen for your records.

You can view, print, and save a copy of the electronically filed Proof of Claim from this verification page. To access the Proof of Claim submitted, click on the hyperlink of the claim number. An ECF login and password is not required to view the Proof of Claim. However, to view any attachments, ECF will prompt for a login and password.

NOTE: If a required field is not completed, a message will appear indicating the missing, required field.



United States Bankruptcy Court District of Connecticut

Successful verification ...

Your claim was successfully filed in case number [REDACTED]
Your claim number is 2.

Open in new window: Click [2](#) to view/print your filed claim.

*Note: Any attachment(s) added will **NOT** be available to view/print unless you have a Pacer account.*

[File additional claims](#)

The following is an example of an electronically filed Proof of Claim Official Form B 410 using ePOC.

Case 21-0000 Claim 2 Filed 11/20/23 Desc Main Document Page 1 of 3

Fill in this information to identify the case:	
Debtor 1	John Doe
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court District of Connecticut	
Case number: 21-0000	

FILED
 U.S. Bankruptcy Court
 District of Connecticut
 11/20/2023
 Clerk's Office-pc, Clerk

**Official Form 410
 Proof of Claim**

04/22

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		SAMPLE PROOF OF CLAIM	
1. Who is the current creditor?	ABC Creditor 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? ABC Creditor Name 123 Main Street Anytown, CT 06000 Contact phone 860-111-1111 Contact email creditorabc@creditor.com Uniform claim identifier for electronic payments in chapter 13 (if you use one):	Where should payments to the creditor be sent? (if different) Name Contact phone Contact email	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known)		Filed on MM/DD/YYYY
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?		

Official Form 410

Proof of Claim

page 1

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

6. Do you have any number you use to identify the debtor? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 1234

7. How much is the claim? \$ 10000.00 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).

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.
money loaned

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-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, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

SAMPLE PROOF OF CLAIM

Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
 Fixed
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No	
	<input type="checkbox"/> Yes. <i>Check all that apply.</i>	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.	<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 \$3,350* 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 \$15,150*) 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 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

SAMPLE PROOF OF CLAIM

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 11/20/2023
MM / DD / YYYY

/s/ Jane Doe

Signature

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

Name Jane Doe

First name Middle name Last name

Title President

Company ABC Creditor

Address 123 Main Street

Identify the corporate servicer as the company if the authorized agent is a servicer
Number Street
Anytown, CT 06000

City State ZIP Code

Contact phone 860-111-1111 Email anywhere@creditor.com

Supplement a Proof of Claim

Claims filed with a Claims and Noticing Agent may not be supplemented using ePOC.

Type of Supplements to a Proof of Claim:

- Supplement 1 - Notice of Mortgage Payment Change
- Supplement 2 - Notice of Postpetition Fees, Expenses, and Charge
- Response to Notice of Final Cure Payment
- Supplement to Proof of Claim

Document Requirements:

- Documents are required to be PDF files.
- Documents are NOT to exceed 10.0 Mb in size.
- The Proof of Claim being supplemented should NOT be attached.
- A supplement and its certificate of service need to be attached as a single PDF.

1. On the “Electronic Filing of Proofs of Claim – ePOC” screen, select “Supplement a Proof of Claim”

PENALTY FOR FILING FRAUDULENT CLAIMS:

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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 Federal Rule of Bankruptcy Procedure 9037. This requirement applies to all documents, including attachments.

[FILE A PROOF OF CLAIM](#) or [AMEND A PROOF OF CLAIM](#)

[SUPPLEMENT A PROOF OF CLAIM](#)

[ePOC USER GUIDE](#)

[FREQUENTLY ASKED QUESTIONS](#)

2. On the following screen, select “Claim Supplement or Attachment.”

United States Bankruptcy Court District of Connecticut

Proof of Claim
410 Supplements or Attachments

By clicking "Claim Supplement or Attachment" 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.

3. On the next screen, enter the case number and name of the creditor. Review the Redaction and Fraudulent Filing Warnings. After reviewing, check the box indicating “I understand that, if I file, I must comply with the redaction rules. I have read this notice.”

United States Bankruptcy Court District of Connecticut

File Claim Supplement or Attachment

Case Number
Example: 14-00002

Name of Creditor

Filed by

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.

4. If the name of the creditor matches a filed Proof of Claim, the next screen will list the available proofs of claim to supplement.

If no creditor name is provided, the next screen will provide a list of all available proofs of claim to supplement.

Make sure to verify the debtor name and case information in the next screen before supplementing a claim.

United States Bankruptcy Court District of Connecticut

Case Number
Debtor
Joint Debtor

[Redacted Case Number]
[Redacted Debtor Name]
[Redacted Joint Debtor Name]

Select Claim to be Supplemented

<u>Claim</u>	<u>Creditor</u>	<u>Total Claimed</u>	<u>Filed</u>
<input checked="" type="radio"/> 2	ABC Creditor	\$10000.00	11/20/2023

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
- Supplement to Proof of Claim

Documents:

- Documents are required to be PDF files.
- Documents are NOT to exceed 10.0 Mb in size.
- The Proof of Claim being supplemented should NOT be attached. The Supplement and the Certificate of Service need to be attached as a single PDF.

Select the Supplemental PDF (required) No file chosen

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.

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

5. Select the correct proof of claim to supplement.
6. Select the Type of Supplement.
7. Upload the PDF Supplement.
8. Complete the reCAPTCHA verification.
9. Verify the Debtor Name and Case Number and select Submit Supplement or Attachment.
WARNING: There is no further opportunity to modify the Supplement and the supplement will be filed after selecting "Submit Supplement or Attachment."

10. Upon successful submission, a confirmation screen will appear.

United States Bankruptcy Court District of Connecticut

Successful verification ...

The following Supplement of Claim has been filed

Case Name: [REDACTED]

Case Number: [REDACTED]

Docket Text: Supplement of Claim No. 2 (ABC Creditor).

[File additional Supplements or Attachments](#)