## Instructions for Using Electronic Proof of Claim (ePOC)

File a claim via ePOC at <u>www.arb.uscourts.gov/ecf/epoc.html</u>

- Make sure you are choosing the proper District in Arkansas (Eastern or Western)
- Enter the Case Number. For example: 16-10004
- Enter the **Name of Creditor**. Type in the first letter of the creditor name or leave blank to see all creditors on the case.
- Select Filed by.
- Check that you will comply with redaction rules. All filers must redact: Social Security or taxpayeridentification 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.
- Click Next
- Select Creditor. If creditor name and/or address DO NOT match, select "Creditor not listed" to correct.

Part 1: Identify the Claim	
1. Creditor Name	<ul> <li>NOTE: Before proceeding, verify the debtor(s) name and case number to confirm the claim is being filed in the correct case.</li> <li>Enter or verify the name of the creditor and the address where notices should be sent</li> <li>Enter the filer's telephone number, email address and other names the creditor used with the debtor</li> </ul>
<ol><li>Has this claim been acquired from someone else?</li></ol>	<ul> <li>If yes, enter from who the claim was acquired</li> </ul>
3. Where should notices and payments to the creditor be sent?	<ul> <li>If applicable, select Payment Address IF it differs from Notice Address in Section 1 and enter the address where payments should be sent, telephone number and email address of the recipient</li> <li>If applicable, enter a uniform claim identifier for electronic payments</li> </ul>
4. Does this claim amend one already filed?	<ul> <li>If yes, you will see the message: NOTE-you should only amend a claim if you are the original claimant or the transferee of the claim</li> <li>Click OK</li> <li>Select the court claim number and filed on date from the time-stamp on the claim being amended</li> </ul>

5. Do you know if anyone else has	<ul> <li>If yes, enter the name of the party who made the earlier</li> </ul>
filed a proof of claim for this claim?	
Part 2: Give Information At	bout the Claim as of the Date the Case was Filed
6. Do you have any number you use	• IF yes, enter the last four digits of the identifying number
to identify the debtor?	
7. How much is the claim?	• Enter the amount owed as of the date of the bankruptcy
(required)	filing (i.e. 1,000.00)
	• Does this amount include interest or other charges? IF yes,
	attach a statement itemizing interest, fees, expenses or
	other charges
	• If you have entered a claim amount of \$0.00, enter a brief
	explanation (i.e. unknown, unliquidated)
8. What is the basis of the claim?	• Enter the basis of the claim (i.e. goods sold, money loaned,
	lease, services performed, personal injury or wrongful
	death, credit card)
9. Is all or part of the claim	• IF yes, select the nature of the property (real estate, motor
secured?	vehicle. IF other, enter a description of the collateral
	securing the claim)
	• Enter the basis for perfection (i.e. title, deed)
	Enter the value of the property
	• Enter the amount of the claim that is secured
	• Enter the amount of the claim that is unsecured
	• Enter the amount necessary to cure any default as of the
	date of the petition
	• Enter the annual interest rate as of the date of the petition
	and select whether the rate is fixed or variable
10. Is this claim based on a lease?	• IF yes, and lease payments are delinquent, enter the
	amount necessary to cure the default as of the filing of the
	petition
11. Is this claim subject to a right of	• IF yes, enter a description of the subject property
setoff?	
12. Is all or part of the claim entitled	• IF yes, select the basis for priority claim status and enter the
to priority under 11 U.S.C. § 507(a)?	amount of the claim entitled to priority
Documents: Do you wish to attach	• IF yes, you will be directed to attach the documents AFTER
supporting documentation?	submitting the claim
	• Attachments must be in .pdf format and must not exceed 10
	Mb in size
	Multiple attachments are permitted
	• NOTE: Do not include a copy of a proof of claim form as an
	attachment
Part 3: Sign Below	

Signature	• In the free-text box, enter the name of the signer (required),	
	the signer's title and company/employer	
	• Enter the address, telephone number and email address of	
	the signer	
Submit Claim and Attach Supporting Documentation		
Verification Code and Submit	• Review the claim to verify that all information is correct,	
	including the case number and name	
	• Enter the verification code (required) exactly as it appears	
	(i.e. all-caps)	
	Click Submit Claim	
IF you indicated that you wish to	• Click Browse/Choose File to select the document to be filed	
attach supporting documentation	(.pdf)	
	<ul> <li>If adding more than one attachment, select Add</li> </ul>	
	Attachment	
	Click File Proof of Claim to file claim	
	• The final screen will indicate that your claim is successfully	
	filed and the claim number will appear	
	<ul> <li>Click on the claim number to view and/or print the filed claim</li> </ul>	