

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI

In Re: _____)
 Name _____) Case No. _____
 Debtor(s) _____)

PRO SE NOTICE OF AMENDMENT OF SCHEDULE OF DEBTS AND ADDITION OF CREDITOR

You are hereby notified that the debtor has filed amended schedules of debt to include creditors listed below or on the attachment. By separate copy, you are also notified of the full social security number of the debtor(s). *[Edit this form as appropriate. See examples on page two.]*

Creditor Name and Full Address	Claim Amount, Nature of Claim, Date Incurred	Priority, Secured, General Unsecured

(If more than 4 creditors are added, attach additional sheets using this 3-column format)

- Trustee name, address, and phone, if one has been appointed: _____.
- Deadline for filing complaints objecting to discharge of specific debts or the general discharge of debtor under 11 U.S.C. §§ 523, 727: _____ (insert deadline shown on your notice of first meeting of creditors)

If this claim was added to the schedules after the deadline for filing complaints stated above or if the deadline will expire within 30 days, the creditor shall have 30 days after the date of service below to file complaints.

- Deadline for filing proofs of claim, if any: _____ (insert deadline shown on your notice of first meeting of creditors and then select the paragraph below that applies to your case)

This is a no-asset case. It is unnecessary to file a claim now. If it is determined there are assets to distribute, creditors will receive a notice setting a deadline to file claims.

If this claim was added to the schedules after the deadline for filing claims stated above or if the deadline will pass within 30 days, the creditor shall have 30 days after the date of service below to file a proof of claim.

This is a Chapter 13 case. You have 30 days from the date of this notice or until the bar date, whichever is later, to file your proof of claim. <https://ecf.mowb.uscourts.gov/cgi-bin/autoFilingClaims.pl>

Date: _____
Date Signed _____
(Signature(s) of Debtor and Joint Debtor (if applicable))

(Type or print name of debtor/joint debtor)

Certificate of Service: I, _____, certify the above notice and a separate notice of the full social security number of the debtor(s) were served by first class, postage prepaid mail, on the above-named creditor(s) and parties in interest not receiving electronic notification, on this _____ day of _____.
(day of month document mailed) (month/year document mailed)

(Signature of debtor who mailed documents)

File this Notice (mail or in person) with the Bankruptcy: U.S. Bankruptcy Court, 400 E. 9th St., Room 1510, Kansas City, MO 64106

Instructions: Edit all paragraphs above as appropriate and serve on the creditor(s) listed above.

Below are **EXAMPLES ONLY** of how you may list the Creditors information in the table.

Example One:

Name/Address of Creditor	Amount owed, nature of claim, date incurred	Priority/Secured/Unsecured
ABC Company 1234 Main City, State, Zip	\$100.00, cell service 5/1/2012	unsecured
DEF Company 1234 Main City, State, Zip	\$10,200.00, truck 4/1/2012	secured