

**UNITED STATES BANKRUPTCY COURT  
EASTERN & WESTERN DISTRICTS OF ARKANSAS**

**CREDITOR REGISTRATION FORM**

Entities filing in cases pending in the U.S. Bankruptcy Court for the Eastern and Western Districts of Arkansas (“Creditors”) that desire to be authorized to file documents electronically should complete this registration form and submit it to the Clerk of the Court.

“Firm” is the name of the Creditor entity on whose behalf an employee or agent (“Filer”) is to be issued a login and password and authorized to file electronically. Complete a separate form for each separate corporate or other distinct legal entity.

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

Firm Federal Tax ID #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Voice Phone Number: \_\_\_\_\_

FAX Phone Number: \_\_\_\_\_

Internet E-Mail Address: \_\_\_\_\_

By submitting this registration form, the undersigned Creditor agrees as follows:

1) Rule 9011 of the Federal Rules of Bankruptcy Procedure and Official Form 10 require that every proof of claim be signed by the person authorized to submit the proof of claim for filing (“Responsible Person”). Creditor will direct each of its Filers and each of its Responsible Persons to read and to comply with the orders and procedural directions of the Court concerning the electronic filing of proofs of claim.

2) If a Filer ceases to be an employee or agent of the Creditor or for any other reason ceases to be authorized to file electronically on behalf of the Creditor, the Creditor will promptly notify the Clerk.

3) The undersigned has read General Order 19.

4) Registration shall constitute a request and an agreement to receive service of pleadings and other papers electronically pursuant to FRBP 9036, where service of pleadings and other papers is otherwise permitted by first class mail, postage prepaid.

The undersigned certifies under penalty of perjury that he or she is properly authorized to submit this Creditor Registration Form on behalf of the Firm identified above.

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Office or Position with the Creditor Firm

Address and telephone  
(if different from information  
provided above)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return to:  
Attn: ECF Help Desk  
United States Bankruptcy Court  
P.O. Box 3777  
Little Rock, AR 72203-3777

**UNITED STATES BANKRUPTCY COURT  
EASTERN & WESTERN DISTRICTS OF ARKANSAS**

**FILER REGISTRATION FORM**

To register for an account on the Court's Electronic Filing System, please provide the information requested below. "Firm" is the name of the entity on whose behalf the Filer is to be authorized to file electronically. If Filer is employed by more than one entity in the same group of entities, attach a continuation sheet with the information requested for each such entity.

First/Middle/Last Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

Firm Federal Tax ID #: \_\_\_\_\_

Filer's Voice Number: \_\_\_\_\_

Filer's FAX Number: \_\_\_\_\_

Filer's E-Mail Address: \_\_\_\_\_

Other ECF Courts You Are Registered With: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By submitting this registration form, the undersigned Filer agrees as follows:

1) Rule 9011 of the Federal Rules of Bankruptcy Procedure and Official Form 10 require that every proof of claim be signed by the person authorized to submit the proof of claim for filing ("Responsible Person"). Filer will check to be sure an image of the signature of the Responsible Person or *"/s/ responsible person"* is attached to or part of each proof of claim filed electronically. The unique password issued to an Filer registered to use the ECF system identifies that Filer to the court each time that the Filer logs on to the ECF system. The use of a Filer's password serves as and constitutes the signature of the Filer for purposes of indicating an understanding of and agreement to comply with the orders and procedural directions of the court concerning the electronic filing of proofs of claim. Therefore, a Filer must protect and secure the password issued by the court. If any reason exists to suspect the password has been compromised in any way, it is the duty and responsibility of the Filer to notify the court immediately. The court will thereafter immediately delete that password from the electronic filing system and issue a new password.

2) If the Filer ceases to be an employee of the Creditor on whose behalf the Filer was authorized to file or ceases for any reason to be authorized to file electronically for that Creditors, the Filer will immediately inform the Clerk of the Court in writing that the Filer is no longer an authorized Filer and will cease using the logon and password issued to that Filer. If any of the information provided by Filer on this form changes, Filer will promptly send an amended

registration form to the Clerk with the then current information.

3) The undersigned has read General Order 19.

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

\_\_\_\_\_  
Applicant's Signature

Approved:

\_\_\_\_\_  
Signature of Authorized Supervisor of Applicant

\_\_\_\_\_  
Office or Position with the Creditor Firm

Address and telephone  
(if different from information  
provided above)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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