

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
SOUTHERN DIVISION - DETROIT**

IN THE MATTER OF:

CHAPTER 13  
CASE NO.  
HON.

DEBTOR(S).

\_\_\_\_\_ /

NOTICE OF CREDITOR CHANGE OF ADDRESS

DIRECTIONS: COMPLETE EACH SECTION, SIGN, AND FILE WITH THE COURT

<p>The creditor listed below requests that the address listed in its Proof of Claim be changed.</p> <p>Creditor Name: _____</p> <p>PACER Claim #: _____</p>	<p>We request this change be made to:</p> <p><input type="checkbox"/> All claims associated with this address <b>IN ALL CASES</b> assigned to this Trustee</p> <p><input type="checkbox"/> This case only</p> <p><i>(Void if both <u>or</u> neither option selected)</i></p>
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<p><input type="checkbox"/> Payment ONLY <input type="checkbox"/> Payment and Notice address From (prior address): _____ _____ _____ _____ _____  To (new address): _____ _____ _____ _____ _____</p>	<p><input type="checkbox"/> Notice ONLY From (prior address): _____ _____ _____ _____ _____  To (new address): _____ _____ _____ _____ _____</p>
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I declare under penalty of perjury that the information provided is true and correct to the best of my knowledge and belief.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Creditor/Creditor's Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip code

\_\_\_\_\_  
Telephone Email

\*\*\*THIS FORM IS TO BE USED **ONLY** FOR ADDRESS CHANGES THAT OCCUR **AFTER** THE FILING OF THE INITIAL PROOF OF CLAIM BY THE CREDITOR.