

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF VIRGINIA  
\_\_\_\_\_ Division**

In re

Case No.

Debtor(s)

Chapter

**AMENDMENT COVER SHEET**

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:

\_\_\_ Voluntary Petition [*Specify reason for amendment:* \_\_\_\_\_]

Official Form 6 Schedules

- \_\_\_ Summary of Schedules
- \_\_\_ Schedule A - Real Property
- \_\_\_ Schedule B - Personal Property
- \_\_\_ Schedule C - Property Claimed as Exempt
- \_\_\_ Schedule D - Creditors Holding Secured Claims
- \_\_\_ Schedule E - Creditors Holding Unsecured Priority Claims
- \_\_\_ Schedule F - Creditors Holding Unsecured Nonpriority Claims }
- \_\_\_ Schedule G - Executory Contracts and Unexpired Leases
- \_\_\_ Schedule H - Codebtors
- \_\_\_ Schedule I - Current Income of Individual Debtor(s)
- \_\_\_ Schedule J - Current Expenditures of Individual Debtor(s)

- Check one:**
- } \_\_\_ **Creditor(s) added**
  - ) \_\_\_ **NO creditor(s) added**
  - ) \_\_\_ **Creditor(s) deleted**
  - \_\_\_ **Soc. Sec. No. amended\***

**[NOTE: The form "NOTICE TO CREDITOR(S) (RE AMENDMENT)" is still required when adding or deleting creditors. \*Amendment of debtor(s) Social Security Number requires that a hard copy of this cover sheet together with a completed Official Form 21 – Statement of Social Security Number(s) be submitted to the Clerk's Office for entry of the amended Social Security Number into the Court's database. ]**

- \_\_\_ Statement of Financial Affairs
- \_\_\_ Chapter 7 Individual Debtor's Statement of Intention
- \_\_\_ Chapter 11 List of Equity Security Holders
- \_\_\_ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims
- \_\_\_ Disclosure of Compensation of Attorney for Debtor
- \_\_\_ Other:

**NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES**

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the United States Trustee, the trustee in this case, and to any and all entities affected by the amendment as follows:

Date: \_\_\_\_\_

\_\_\_\_\_  
Attorney for Debtor(s) [or *Pro Se* Debtor(s)]

State Bar No.:

Mailing Address:

Telephone No.: