

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

REGISTRATION FORM TO FILE ELECTRONICALLY

Applicant Information:

First/Middle/Last Name: _____

Bar Registration Number: _____

State of Registration: _____

Firm Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Year Admitted to the Bar of the United States District Court for the Western District of Pennsylvania:
_____, or Case Number where admitted Pro Hac Vice: _____.

By submitting this registration form, the undersigned agrees that:

1. The provisions of the Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the Local Bankruptcy Rules shall be followed when filing documents electronically.
2. A registered attorney is responsible documents submitted electronically by means of the attorney's login and password.
3. A registered attorney's system eligibility may be restricted or revoked by the Court.
4. A registered attorney is required to keep all contact and email information in their CM/ECF account current and up to date.

I hereby certify that:

- I have attended the CM/ECF training provided by the Clerk and attest to having entered, or having overseen the entry of, all the data in the CM/ECF test submitted to the Clerk; or
- I have electronically filed documents and have a valid login and password for the
 United States Bankruptcy Court or United States District Court (check a box) in
the _____ (name of district).

The undersigned requests a login and password to the Court's CM/ECF system in order to file documents electronically.

Date

Attorney Signature

Please return completed form to:
Clerk's Office, U.S. Bankruptcy Court, Attn: CM/ECF Registration, 5414 U.S. Steel Tower, 600 Grant Street, Pittsburgh, PA 15219