UNITED STATES BANKRUPTCY COURT R.I. Local Form 2002-1.1

FOR THE DISTRICT OF RHODE ISLAND (Rev. 7/1/15)

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In re: :

 : BK No.

Debtor(s) Chapter

 :

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**CREDITOR CHANGE OF ADDRESS FORM**

1. **Name of Creditor:**
2. **Account Number (last 4 digits only)**:
3. **Old Address:**

Names(s):

Mailing Address:

City, State, Zip Code:

1. **New Noticing Address:**

Mailing Address:

City, State, Zip Code:

1. **New Payment Address:**

Mailing Address:

City, State, Zip Code:

**Check all that apply (you must check one):**

\_\_\_ I am listed as a creditor in the above referenced case.

\_\_\_ I am the transferee as evidenced by the transfer of claim filed in this case on\_\_\_\_\_\_\_\_\_\_\_\_.

I , hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_