

**Fill in this information to identify your case:**

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _____ District of _____			
Case number (If known) _____			

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).**

**1. Do any creditors have claims secured by your property?**

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	<b>Column A Amount of claim Do not deduct the value of collateral.</b>	<b>Column B Value of collateral that supports this claim</b>	<b>Column C Unsecured portion If any</b>
--	------------------------------------------------------------------------------------	--------------------------------------------------------------------------	------------------------------------------------------

2.1

**Describe the property that secures the claim:**

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name \_\_\_\_\_  
 Number Street \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_

**Last 4 digits of account number** \_\_\_\_\_

2.2 **Describe the property that secures the claim:** \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name \_\_\_\_\_  
 Number Street \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_

**Last 4 digits of account number** \_\_\_\_\_

**Add the dollar value of your entries in Column A on this page. Write that number here:** \$ \_\_\_\_\_

## Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
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Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
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**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
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**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$ \_\_\_\_\_

If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here: \$ \_\_\_\_\_

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

**Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.**

<input type="checkbox"/>	Name _____
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On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
--------------------------	---------------------------

Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
--------------------------	---------------------------------------

<input type="checkbox"/>	Name _____
--------------------------	------------

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
--------------------------	---------------------------

Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
--------------------------	---------------------------------------

<input type="checkbox"/>	Name _____
--------------------------	------------

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
--------------------------	---------------------------

Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
--------------------------	---------------------------------------

<input type="checkbox"/>	Name _____
--------------------------	------------

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
--------------------------	---------------------------

Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
--------------------------	---------------------------------------

<input type="checkbox"/>	Name _____
--------------------------	------------

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
--------------------------	---------------------------

Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
--------------------------	---------------------------------------

<input type="checkbox"/>	Name _____
--------------------------	------------

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

<input type="checkbox"/>	Number _____ Street _____
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Last 4 digits of account number \_\_\_\_\_

<input type="checkbox"/>	City _____ State _____ ZIP Code _____
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