

United States Bankruptcy Court - Western District of Wisconsin

Case Management/Electronic Case Files - Attorney Registration Form

This form shall be used by **ATTORNEYS** to register for filing privileges to electronically file documents using the CM/ECF system in the U.S. Bankruptcy Court for the Western District of Wisconsin. Registered attorneys will have privileges both to electronically submit documents, and to view and retrieve electronic docket sheets and documents as available for cases assigned to the CM/ECF system.

First/Middle/Last Name: _____

Last four digits of SSN: _____ Attorney Bar #: _____ State: _____

Firm Name: _____

Firm Address (Street/P.O. Box): _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

E-Mail Address: _____

Secondary Address: _____

Contact me to schedule attorney training:

ECF Attorney Training (circle all that apply): Debtor Creditor

Important! If you are a registered filer in another jurisdiction or have prior CM/ECF training or filing experience, the following required information is needed and no further training is required.

Court name: _____

Contact person (for verification of participant status): _____

Phone Number of Court/Contact: _____

The Bankruptcy Court for the Western District of Wisconsin reserves the right to require onsite training in the use of the CM/ECF system prior to the issuance of a user login and password to any prospective participant.

By submitting this form, the applicant agrees to abide by the following rules:

1. I agree that a filing made with my judiciary login and password constitutes my signature for all purposes, including the Federal Rules of Bankruptcy Procedure and any local rules of the court, and shall have the same force and effect as if I had affixed my signature on a paper document being filed. Signatures will be indicated by "/s/" and the typed name of the person signing in the following format: "/s/ Jane Smith" on the signature line.

2. I agree to protect the security of my password and I shall be solely responsible to the court regarding each record entered into the CM/ECF system using my login and password. The login and password will only be used by me and by employees to whom I give authorization.

3. I agree to maintain my contact information (e.g. email address, mailing address, telephone number). All changes will be made through Utilities > Maintain Your ECF Acct.

4. I understand that electronically filed documents requiring original signatures from any person other than me must be maintained by me in paper form, bearing the original signatures, until the end of any appeal period after closing of the case or proceeding in which the documents were filed. Upon the court's request, I must provide the original signed documents for review.

5. I agree to comply with the redaction requirements, pursuant to Fed. R. Bankr. P. 9037. I understand that filers, and not the court, are solely responsible for redacting documents.

6. I understand it is my responsibility to pay all applicable fees and my failure to do so may result in the temporary loss of my login privileges to the system.

7. I understand that a user accesses court information via the court's CM/ECF site or through the Public Access to Court Electronic Records (PACER) Service Center. Although the court manages the procedures for electronic filing, all electronic public access to case filed documents occurs through PACER. A PACER login and password may be obtained from the PACER Service Center at <http://pacer.psc.uscourts.gov> or by calling 800-676-6856 for assistance.

8. If the terms and conditions change, information regarding the changes will be posted on our website at <http://www.wiwb.uscourts.gov>. I understand that it is my responsibility to read any posted changes. Continued use of my CM/ECF account following any posted changes means that I accept and agree to the changes.

I certify under penalty of perjury that the information I am submitting to register for electronic filing is true and correct. I acknowledge that I have read and agree to the terms and conditions above.

Please email registration form to monica_olson@wiwb.uscourts.gov

or mail to Wisconsin Western - Divisional Office:

U.S. Bankruptcy Court
Western District of Wisconsin
500 S. Barstow St., RM 100
Eau Claire, WI 54701

Attorney Signature and Date