

**BANKRUPTCY ACT
(CHAPTER 20)**

BANKRUPTCY RULES

PROOF OF DEBT FORM

1 Bankruptcy Number

B/_____ /_____
(Number) (Year)

2 Name of Bankrupt/Firm

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3 Particulars of Creditor Claiming Debt

Name of Creditor : _____

NRIC/Passport No./Company/Business Registration No. : _____

Postal Address (See note a) _____

Contact Nos. (Tel./HP): _____ Fax No. : _____

Email Address : _____

Your Reference No. : _____

4 Particulars of Claim (See note b)

Date of Debt Incurred	Type of Debt	Currency	Amount
Total Amount of Debt (In Figures)			
Total Amount of Debt (In Words) :			

5 Security Held (Please indicate "NIL" if no securities are being held by the creditor)

Brief Description of Securities : _____

Value of Securities : _____

6 Particulars of Person Authorised to Complete this Proof of Debt Form (if different from person named at item 3)

Name : _____
NRIC NO./Passport No. : _____
Name of Firm/Company : _____
(e.g. Solicitor/Accountants etc.)
Contact Nos. (Tel./HP): _____ Fax No. : _____
Email Address : _____
Your Reference No. : _____

7 Signature of Creditor/Person Authorised to Complete this Proof of Debt Form

- 7.1 I declare that to the best of my knowledge and belief, the bankrupt owes the creditor the amount claimed in box 4 and the creditor holds the securities (if any) as stated in box 5.
- 7.2 I declare that I am duly authorised by the creditor/under the seal of the creditor company (delete where applicable), to complete this Proof of Debt form.

Signature : _____ Date : ____ / ____ / ____

Note :

- a. Please inform the Official Assignee or trustee (as the case may be) of any change in address.
- b. Attach copies of supporting documents and detailed computation of the claim. The onus is upon the creditor to prove the debt.

WARNING : Please note that information given to the Official Assignee must be true. Lodging a false Proof of Debt may be an offence under section 145 of the Bankruptcy Act (Cap. 20) or section 182 of the Penal Code (Cap. 224)

FOR OFFICIAL USE ONLY

Admitted at S\$ _____

This _____ day of _____ year _____

Official Assignee/Trustee