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LEGAL SERVICES

Fill in this inf	formation to identify the case:
Debtor 1 _	Nikola Corp
Debtor 2 (Spouse, if filing)	
	Jankruptcy Court for the:District of Delaware

Filed: USBC - District of Delaware
Nikola Corporation, Et al
25-10258 (TMH)

NKL

0000000012

Official Form 410

Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Tarci. Identify the Staim								
1.	Who is the current creditor?	Harmun Trucking Inc Name of the current creditor (the person or entity to be paid for this ch Other names the creditor used with the debtor Harmun	aim) Takhar					
2.	Has this claim been acquired from someone else?	No Yes. From whom?						
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Haymun Trucking, Inc. Name 1938 Elliott Dy Number Street Yuka City CA 95993 City State ZiP Code Contact phone 530-870-6016 Contact email Haymuntrucking Chefmail. Con Uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments identifier for electronic payments in chapter 13 (if you uniform claim identifier for electronic payments ident	City State ZIP Code Contact phone					
4.	Does this claim amend one already filed?	No ☐ Yes. Claim number on court claims registry (if known)	Filed on MM / DD / YYYY					
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?						

6.	Do you have any number you use to identify the debtor?	No No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is the claim?	\$ Does this amount include interest or other charges? □ No □ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).		
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.		
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$		
10	Is this claim based on a lease?	No Yes. Amount necessary to cure any default as of the date of the petition. \$		
11.	Is this claim subject to a right of setoff?	No Yes. Identify the property:		

2. Is all or part of the claim	tal No		
entitled to priority under	Yes. Check one:		
11 U.S.C. § 507(a)?		Amount entitled to priority	
A claim may be partly priority and partly	☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	☐ Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$_	
ended to phonty.	□ Wages, salaries, or commissions (up to \$15,150°) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$	
	☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$	
	☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$	
	Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$	
	Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after	r the date of adjustment.	
Part 3: Sign Below			
The person completing	Check the appropriate box:		
this proof of claim must sign and date it.	I am the creditor.		
FRBP 9011(b).			
f you file this claim	I am the creditor's attorney or authorized agent. I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.		
electronically, FRBP 5005(a)(2) authorizes courts	I am a quarenter questy endemos es ether endettes Parlameter Parla 2005		
to establish local rules specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the		
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.		
fraudulent claim could be fined up to \$500,000,	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.		
imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.		
3571.	Executed on date 03/18/2025		
	In /		
	Signature		
	Print the name of the person who is completing and signing this claim:		
	Name Harmun Takho	λ <u>Υ</u>	
	Title		
	Company Harmun Trucking, Inc Identify the corporate servicer as the company if the authorized agent is a servicer.		
	1938 CHINT OV	l	
	Address 1938 FILIOH DY Number Street		
		3	

Harmun Trucking 1938 ELLIOH Dr. J Yuba City, CA 95993

SACRAMENTO CA 957 20 MAR 2025 PM 6 L

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Nikola Corporation Claims Processing center c/o Epig Corporate Restructuring. LLC P. 0'. BOX 4419 Beaverton, Or 97076 - 4419

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