

Fill in this information to identify the case:

Debtor 1 Nikola Corporation

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of _____

Case number _____

RECEIVED

MAR 25 2025

LEGAL SERVICES

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

(CLM)

NKL



0000000013

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.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Smithers Tire & Automotive Testing, Inc</u> Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor _____		
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? <u>Smithers MSE, INC</u> Name <u>425 West Market Sreet</u> Number Street <u>Akron</u> <u>OH</u> <u>44303</u> City State ZIP Code Contact phone <u>330-762-7441</u> Contact email _____	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____	
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____			
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? _____		

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☐ No ☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 4 7 8 0

7. How much is the claim? \$ 348,039.00 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.

Services Performed

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: \$ _____

Amount of the claim that is secured: \$ _____

Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ %

☐ Fixed
☐ Variable

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: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ 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).

☐ 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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

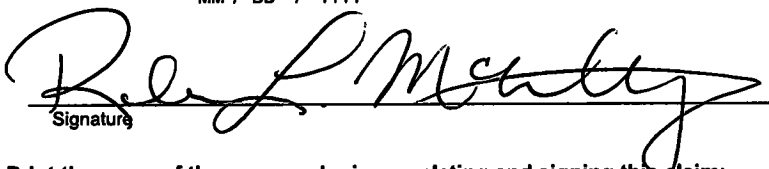
I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

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

Executed on date 03/12/2025

MM / DD / YYYY


Signature

Print the name of the person who is completing and signing this claim:

Name Randee L. McCarthy
First name Middle name Last name

Title Accounting Associate AR

Company Smither's MSE, Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 425 West Market Street
Number Street

Akron OH 44303
City State ZIP Code

Contact phone 330-762-17441 Email rmccarthy@smithers.com

**SMITHERS****Winter Test Center**

Invoice Number 112096

Project

92000000-000-1640

425 West Market Street, Akron, Ohio 44303 Phone: 330-762-7441

BILLED TO:

NIKOLA Corporation
invoices@nikolamotor.com
4141 E Broadway Road
Phoenix, AZ 85040

Invoice Date:

Payment Due:

Purchase Order Number:

Payment Terms:

2/13/2025

03/30/2025

4500007126

Net 45 Days

Comments or Special Instructions:

Quantity:

Description:

Rate:

Amount:

Track and Building Rental

155,570.00

Smithers Quote 24-1007586SC

1/3 payment due of total contract \$466,712.00

Total Due in USD:**155,570.00****INSTRUCTIONS:**

REMIT BY

P.O. Box 76172

CHECK TO:

Cleveland, OH 44101-4755

REMIT BY

Huntington Natl Bank

WIREACH TO:

106 South Main Street

Akron OH 44308

**SMITHERS****Winter Test Center**

425 West Market Street, Akron, Ohio 44303 Phone: 330-762-7441

Invoice Number 112529

Project 92000000-000-1640

BILLED TO:NIKOLA Corporation
invoices@nikolamotor.com
4141 E Broadway Road
Phoenix, AZ 85040

Invoice Date:

Payment Due:

Purchase Order Number:

Payment Terms:

2/28/2025

04/14/2025

4500007246

Net 45 Days

Comments or Special Instructions:

Quantity:

Description:

Rate:

Amount:

Electrical Work

36,899.00

Subtotal:

36,899.00

Total Due in USD:**36,899.00****INSTRUCTIONS:**

REMIT BY

P.O. Box 76172

CHECK TO:

Cleveland, OH 44101-4755

REMIT BY

Huntington Natl Bank

WIREACH TO:

106 South Main Street

Akron OH 44308

**SMITHERS****Winter Test Center**

Invoice Number 111893

Project 92000000-000-1640

425 West Market Street, Akron, Ohio 44303 Phone: 330-762-7441

BILLED TO:

NIKOLA Corporation
Invoices@nikolamotor.com
4141 E Broadway Road
Phoenix, AZ 85040

Invoice Date:

Payment Due:

Purchase Order Number:

Payment Terms:

1/31/2025

03/17/2025

4500007126

Net 45 Days

Comments or Special Instructions:

Quantity:

Description:

Rate:

Amount:

Track and Building Rental

155,570.00

Smithers Quote 24-1007586SC

1/3 payment due of total contract \$466,712.00

Total Due in USD:**155,570.00****INSTRUCTIONS:**REMIT BY
CHECK TO:P.O. Box 76172
Cleveland, OH 44101-4755REMIT BY
WIREACH TO:Huntington Natl Bank
106 South Main Street
Akron OH 44308



SMITHERS

INNOVATE WITH CONFIDENCE

425 West Market Street
Akron, Ohio 44303

RECEIVED

MAR 25 2025

LEGAL SERVICES
Nikola Corporation
Claims Processing Center
c/o Epig Corporate Restructuring, LLC
P.O. Box 4419
Beaverton, OR

CLEVELAND, OH 44115

22 MAR 2025



US POSTAGE

\$000.97⁰

First-Class - IM

ZIP 44303

03/21/2025

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