

United States Bankruptcy Court for the Southern District of New York	Your Mail ID is 5CE72118-4059-4C
Name of Debtor: Spirit Airlines, LLC	For Court Use Only
Case Number: 25-11896	Claim Number: 0000010643
	File Date: 02/19/2026 07:33:16

Proof of Claim (Official Form 410)

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. With the exception of 503(b)(9), 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.

04/25

Part 1: Identify the Claim

1. Who is the current creditor?

Name of the current creditor (the person or entity to be paid for this claim): DELTA AIR LINES, INC.

Other names the creditor used with the debtor: Delta

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?

Name DELTA AIR LINES, INC.
 Address POST OFFICE BOX 20536
 1030 DELTA BOULEVARD
 City ATLANTA
 State GA ZIP Code 30320-2533
 Country (if International): _____
 Phone: 404-715-2189
 Email: david.cartee@Delta.com
 Uniform claim identifier (if you use one): _____

Where should payments to the creditor be sent? (if different)

Name _____
 Address _____
 City _____
 State _____ ZIP Code _____
 Country (if International): _____
 Phone: _____
 Email: _____

4. Does this claim amend one already filed?

No
 Yes.
 Claim number on court claims register (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:

4880

7. How much is the claim?

\$ 381,966.11

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.

Goods Sold/Services Performed (Trade)

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 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 petition.**

\$ 13,136.77

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)?

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 \$3,800* 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 \$17,150*) 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 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

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

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

13. Does this claim qualify as an Administrative Expense under 11 U.S.C. § 503(b)(9)?

No
 Yes. **Amount that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9):** \$ _____



1030 Delta Blvd.
Atlanta, GA 30354

Your Order Number	Customer Number	Billing Date	Terms	Due Date	Business Number	Invoice Number	Station
	1014880	01/15/2026	NT30	02/14/2026	8801	91191676	BWI

SPRIT AIRLINES, INC - BK
2800 EXECUTIVE WAY
MIRAMAR, FL 33025

WIREACH Delta Air Lines, Inc. JPMorgan Chase Bank ABA 021000021 Acct 730131042 SWIFT CHASUS33	CHECK	OVERNIGHT DELIVERY
	WIREACH ONLY	Delta Air Lines 1030 Delta Blvd. Atlanta, GA 30354

For wire payments email remittance details to ARTrade.delta@delta.com and include invoice number in the reference field

Amount Due in USD 73,765.87	Amount Enclosed
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1030 Delta Blvd.
Atlanta, GA 30354

"BWI Pre-Petition Billing CRE Mar 12, 2025 - Aug 29, 2025"

INVOICE

Your Order Number	Customer Number	Billing Date	Terms	Due Date	Business Number	Invoice Number	Station
	1014880	01/15/2026	NT30	02/14/2026	8801	91191676	BWI

Item	Transaction Date	Service	Quantity	Sales Unit	Unit Price	Total
000010	08/29/2025	"BWI PRE-PETITION BILLING CRE MAR 12, 20 "BWI Pre-Petition Billing CRE Mar 12, 2025 - Aug 29, 2025" Final amount	1	EA	73,765.87	73,765.87

Amount Due in USD 73,765.87

Past due amounts are subject to late charges



1030 Delta Blvd.
Atlanta, GA 30354

SPRIT AIRLINES, INC - BK
2800 EXECUTIVE WAY
MIRAMAR, FL 33025

WIRE/ACH Delta Air Lines, Inc. JPMorgan Chase Bank ABA 021000021 Acct 730131042 SWIFT CHASUS33	CHECK	OVERNIGHT DELIVERY Delta Air Lines 1030 Delta Blvd. Atlanta, GA 30354
WIRE/ACH ONLY		

For wire payments email remittance details to ARTrade.delta@delta.com and include invoice number in the reference field

Amount Due in USD 295,063.47	Amount Enclosed
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1030 Delta Blvd.
Atlanta, GA 30354

"BWI Pre-Petition Billing ACS Mar 12, 2025 - Aug 29, 2025"

INVOICE

Your Order Number	Customer Number	Billing Date	Terms	Due Date	Business Number	Invoice Number	Station
	1014880	01/15/2026	NT30	02/14/2026	8801	91191675	BWI

Item	Transaction Date	Service	Quantity	Sales Unit	Unit Price	Total
000010	08/29/2025	"BWI PRE-PETITION BILLING ACS MAR 12, 20 "BWI Pre-Petition Billing ACS Mar 12, 2025 - Aug 29, 2025" Final amount	1	EA	295,063.47	295,063.47

Past due amounts are subject to late charges

Amount Due in USD 295,063.47



1030 Delta Blvd.
Atlanta, GA 30354

SPRIT AIRLINES, INC - BK
2800 EXECUTIVE WAY
MIRAMAR, FL 33025

WIREACH Delta Air Lines, Inc. JPMorgan Chase Bank ABA 021000021 Acct 730131042 SWIFT CHASUS33	CHECK	OVERNIGHT DELIVERY Delta Air Lines 1030 Delta Blvd. Atlanta, GA 30354
WIREACH ONLY		

For wire payments email remittance details to ARTrade.delta@delta.com and include invoice number in the reference field

Amount Due In USD 13,136.77	Amount Enclosed
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1030 Delta Blvd.
Atlanta, GA 30354
BWI Spirit Sublease

INVOICE

Your Order Number	Customer Number	Billing Date	Terms	Due Date	Business Number	Invoice Number	Station
	1014880	08/01/2025	NT30	08/31/2025	8801	91170182	BWI

Item	Transaction Date	Service	Quantity	Sales Unit	Unit Price	Total
000010	08/31/2025	SPIRIT SUBLEASE Final amount	1	EA	13,136.77	13,136.77

Amount Due In USD 13,136.77

Past due amounts are subject to late charges

United States Bankruptcy Court for the Southern District of New York
 Spirit Aviation Holdings, Inc., et al.
 Claims Processing Center
 c/o Epiq Corporate Restructuring, LLC
 P.O. Box 4419
 Beaverton, OR 97076-4419

To submit your form online please go to
<https://dm.epiq11.com/SpiritAirlines> and click on "File a Claim" under
 "Case Actions"

Use your Mail ID for access

Your Mail ID is as follows: 5CE72118-4059-4C

Name of Debtor (Select only one Debtor per Proof of Claim form):

- Spirit Airlines, LLC. [25-11896]
- Spirit Aviation Holdings, Inc. [25-11897]
- Spirit Finance Cayman 1 Ltd. [25-11898]
- Spirit Finance Cayman 2 Ltd. [25-11899]
- Spirit IP Cayman Ltd. [25-11900]
- Spirit Loyalty Cayman Ltd. [25-11901]



ECR:SPJ-60856376

DELTA AIR LINES, INC.
 POST OFFICE BOX 20533
 1030 DELTA BOULEVARD
 ATLANTA GA 30320-2533

Check box if the address on the envelope sent to you by the court needs to be updated. Identify your replacement address in Part 1 (Section 3) below.

For Court Use Only

Proof of Claim (Official Form 410)

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Except for claims under 503(b)(9), 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?

Name of the current creditor (the person or entity to be paid for this claim): DELTA Air Lines Inc

Other names the creditor used with the debtor: DELTA

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?

Name: DELTA Air Lines Inc

Number Street: P.O. Box 20536

City State ZIP Code: Atlanta GA 30320

Country (if International): _____

Contact phone: 404 715 2189

Contact email: David.CARTEE@Delta.com

Uniform claim Identifier (if you use one): _____

Where should payments to the creditor be sent? (if different)

Name: _____

Number Street: _____

City State ZIP Code: _____

Country (if International): _____

Contact phone: _____

Contact email: _____

4. Does this claim amend one already filed?

No

Yes. Claim number on court claims register (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.

7. How much is the claim?

\$ 381,966.11

Does this amount include interest or other charges? _____

8. What is the basis of the claim?

Lease and Services
 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).



Last 4 digits of the debtor's account or any number you use to identify the debtor:

4 8 8 0

No

Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

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 security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

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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 petition.

\$ 13,136.77

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)?

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 \$3,800* 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 \$17,150*) 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.

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

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. Does this claim qualify as an Administrative Expense under 11 U.S.C. § 503(b)(9)?

No

Yes. Amount that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____

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 co-debtor. 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 2/18/2026 Lewis W Moore
MM/DD/YYYY Signature

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

Name Lewis W Moore
First name Middle name Last name

Title General Manager - Accounting

Company Delta Air Lines, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1030 Delta Blvd.
Number Street

Atlanta, GA 30354
City State ZIP Code

Contact Phone 404-715-6754 Email lewis.moore@delta.com

