

United States Bankruptcy Court for the District of Delaware

Indicate Debtor against which you assert a claim by checking the appropriate box below. **(Check only one Debtor per claim form.)**

Lordstown Motors Corp. (Case No. 23-10831)    
  Lordstown EV Corporation (Case No. 23-10832)    
  Lordstown EV Sales LLC (Case No. 23-10833)

- Date Stamped Copy Returned  
 No self addressed stamped envelope  
 No copy to return

**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. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or 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.

**Part 1: Identify the Claim**

1. Who is the current creditor? ANDREW M. THOMPSON  
 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)

<p>Where should notices to the creditor be sent?</p> <p><u>ANDREW M. THOMPSON</u>                  Name  <u>443 HAMPTONCREST CIRCLE</u>                  Number Street  <u>LAKE MARY FL # 207</u>                  City State ZIP Code  <u>USA</u>                  Country                  Contact phone <u>407-252-7290</u>                  Contact email <u>ANDY@JLAPARTNERS-INSURANCE.COM</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____                  Name                  _____                  Number Street                  _____                  City State ZIP Code                  _____                  Country                  Contact phone _____                  Contact email _____</p>
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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? \_\_\_\_\_

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**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: \_\_\_\_\_

7. How much is the claim?

\$ 375.<sup>00</sup>

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:** \$ \_\_\_\_\_

**Amount of the claim that is secured:** \$ \_\_\_\_\_

**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amount 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: \_\_\_\_\_

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

No

Yes. Check all that apply:

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

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. \$ \_\_\_\_\_

\* 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.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

**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 acknowledgement 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 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 09 25 2023  
MM / DD / YYYY

Andrew M. Thompson

Signature

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

Name ANDREW M THOMPSON  
First name Middle name Last name

Title \_\_\_\_\_

Company \_\_\_\_\_

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 443 HAMPTONCREST CIRCLE - #207  
Number Street

LAKE MARY FL 32746 USA  
City State ZIP Code Country

Contact phone 407-252-7290 Email ANDY@ILA PARTNERS  
INSURANCE.COM

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TIME CRITICAL - MUST RESPOND  
IMPORTANT INFORMATION PERTAINING TO ONE OF YOUR SECURITIES

09/01/23

FIRSTRADE SECURITIES, INC.  
30-50 WHITESTONE EXPWY  
SUITE A301  
FLUSHING, NY 11354

\*\*\*\*\*AUTO\*\*3-DIGIT 327  
ANDREW M THOMPSON  
443 HAMPTONCREST CIRCLE #207  
LAKE MARY FL 32746-4372

A BANKRUPTCY W/ PROOF OF CLAIM  
SECURITY DESCRIPTION: LORDSTOWN MTRS CORP

CUSIP#: 54405Q209  
ACCOUNT#: 000918-46718-17WWWQ  
QUANTITY: 5  
OFFER EXPIRES: OCTOBER 10, 2023 05:00 PM ET  
REPLY BY: OCTOBER 05, 2023 05:00 PM ET

Dear Customer,

Your position in the above security is currently being held in your account at our firm. We will need instructions from you as to what action you wish us to take regarding this offer. The terms and conditions of this offer are outlined in the enclosed material which you should read carefully. As a holder of your securities, we will forward your instructions should you choose to participate in this offer.

If this offer entails any use of customer funds to purchase shares, such as required in a rights subscription or a warrant exercise, all funds must be available in the customers account by the expiration date of the offer. Unless we have otherwise advised you, it is imperative that we receive your instructions no later than the reply date in order to properly fulfill your instructions. Any instructions received after that time will be processed on a "best efforts" basis only. Please be advised that we cannot act without your instructions, and will not be held liable for any instructions that are received after the processing deadline. The due date is prior to the expiration of the offer because we need to know your response prior to the expiration in order to properly fulfill your instructions. Any information given by us, either verbally or in writing is intended as a guide and is not to be used as the basis for any decision regarding this offer.

You are responsible for full compliance with the terms of the offer. In the event of a discrepancy between these terms and the offer material, the offer material will prevail.

JOB NUMBER: E38247 158

CONTROL#: 417845070899

\*\* DO NOT MAIL - PLEASE FOLLOW THE INSTRUCTIONS STATED ABOVE - DO NOT MAIL \*\*

FIRSTRADE SECURITIES, INC.  
30-50 WHITESTONE EXPWY  
SUITE A301  
FLUSHING, NY 11354

000008270



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