

CLAIM FORM

a) Company number: B389 516 741

b) Registered office address: Centre d'Affaires Parc Lumiere, 46 Avenue des Freres Lumiere, F-78190 Trappes, France

c) The Company acts by its administrators, A R Bloom, A M Hudson and S J Harris of Ernst & Young LLP, One More London Place, London, SE1 2AF and S J Taylor of Isonomy Limited, Leawood Hall, Holloway, Derbyshire DE4 5AQ

<p>d) How to lodge</p> <p>This form may be submitted online at https://cva.emeanortel.com</p> <p>or by completing this form and by sending a scanned copy by email to cva@emeanortel.com</p> <p>or by completing this form and sending it to Nortel Networks, PO Box 4725, Maidenhead, SL60 1HN, United Kingdom.</p> <p>If you wish to deliver the claim by hand please contact the Administrators by phone or email for separate address details.</p> <p>THIS FORM MUST BE RETURNED BY 9 FEBRUARY 2019.</p>	<p>e) Instructions for completing this form</p> <p>If you are a creditor of the Company, please complete and submit this form.</p> <p>The forms may have two sides. If so, both sides should be completed and all relevant information provided.</p> <p>For a claim to be valid, this form must be signed by the creditor or by a person authorised to act on his behalf.</p> <p>Supporting documentation does not need to be provided with this form but the Joint Administrators may require you in future to provide any information necessary to substantiate your claim.</p> <p>For questions relating to completion of this form, you may call +44 (0) 20 7951 6160 or send an email to cva@emeanortel.com.</p>
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f) **IN THE HIGH COURT OF JUSTICE**
CHANCERY DIVISION
COMPANIES COURT

NO. 539 OF 2009 / CR-2009-000048

IN THE MATTER OF:

NORTEL NETWORKS S.A. (IN ADMINISTRATION)

AND

IN THE MATTER OF THE INSOLVENCY ACT 1986

Lodgement of claim

(bg) "Предявяване на вземане"
(cs) "Přihlášení pohledávky"
(da) »Anmeldelse af fordring«
(de) „Anmeldung einer Forderung“
(el) «Αναγγελία απαιτήσεως»
(es) «Presentación de crédito»
(et) "Nõude esitamine"
(fi) "Saatavaa koskeva ilmoitus"

(fr) «Production de créance»
(ga) "Taisceadh éilimh"
(hr) „Poziv na prijavu tražbine ”
(hu) "Követelésbejelentés"
(it) «Insinuazione di credito»
(lt) "Reikalavimo pateikimas"
(lv) "Prasījuma iesniegums"
(mt) "Prezentazzjoni ta' talba"

(nl) „Indiening van een schuldvordering”
(pl) "Zgłoszenie wierzytelności"
(pt) «Reclamação de crédito»
(ro) "Cerere de admitere a creanței"
(sk) "Prihláška pohľadávky"
(sl) "Prijava terjatve"
(sv) "Anmälan av fordran"

Details of CVA Claim

1	Name of creditor at 14 January 2009	
2	If the creditor is a company, give the creditor's registration number and country of registration	
3	If the creditor has assigned his claim since 14 January 2009, please provide the assignee's name	
4	Address of creditor (or assignee) for correspondence in respect of the claim	
5	For convenience, name, telephone number (including country code) and address for contact in respect of the claim	
6	Email address for contact	
7	Is any party jointly liable for the debt?	YES / NO
8	If so, identify the party or parties in question and specify the nature of the claim against each one	
9	Total amount of claim, including any Value Added Tax or other sales tax and outstanding uncapitalised interest as at the date the company went into administration (14 January 2009). You should state the claim in the currency in which it was incurred, and may specify several claims in different currencies if necessary	
10	If amount(s) in section 9 above include any Value Added Tax or other sales tax please state amount	
11	If amount(s) in section 9 above include outstanding uncapitalised interest please state amount and provide details of the agreement or other basis by which the	

	interest has been incurred	
12	Particulars of how and when debt incurred (if you need more space append a continuation sheet to this form)	
13	Please specify details of any document or other evidence by reference to which your claim can be substantiated: <i>Note that you may provide any document or other evidence with this form</i>	
14	Please specify details of any payment received from the Secondary Proceeding in relation to the claim. <i>Note that you may provide any document or other evidence with this form</i>	
15	Particulars of any security held, including details of the assets covered by the security, the value of the security, and the date it was given.	
16	Particulars of any reservation of title claimed in respect of goods supplied to which the claim relates.	
17	Are you claiming preferential status under English insolvency law? If so, please provide details.	
18	Does the Company have a claim against you which may result in a set off? If so, please provide details.	YES / NO
19	So far as you are aware, has anyone else filed a Claim Form in relation to your claim? If so, please provide details.	YES / NO
20	To receive dividends by direct payment, please provide bank details. All dividends will be paid in EURO. Please include the following information as applicable:	
	Please tick to indicate where your bank account is located	<input type="checkbox"/> Europe <input type="checkbox"/> UK <input type="checkbox"/> USA <input type="checkbox"/> Other
	Bank name	
	Bank account name	
	Bank account number	
	Sort code (UK accounts only)	
	IBAN number (if applicable)	
BIC/SWIFT code (non-UK only)		

	Routing bank (US accounts only)	
	Bank special instructions (optional)	
21	Signature of Creditor or person authorised to act on his behalf	
	Date	
	Name in BLOCK LETTERS	
	Position with or relation to Creditor	
	Address of person signing (if different from 4 above)	
For official use only		
	Admitted for dividend for	
	€	
	Date	
	Supervisor	

THIS FORM MUST BE RETURNED BY 9 FEBRUARY 2019