**SCHEDULE “I”**

**D&O PROOF OF CLAIM FORM   
FOR CLAIMS AGAINST  
DIRECTORS OR OFFICERS OF THE NORDSTROM CANADA ENTITIES[[1]](#footnote-1)**

This form is to be used only by Claimants asserting a Claim against any Directors and/or Officers of the Nordstrom Canada Entities and NOT for Claims against the Nordstrom Canada Entities themselves. For Claims against the Nordstrom Canada Entities that are not captured in any Statement of Negative Notice Claim, please use the form titled “Proof of Claim Form for Claims Against the Nordstrom Canada Entities”, which is available on theMonitor’s website at <https://www.alvarezandmarsal.com/NordstromCanada>.

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|  | | **Name(s) and Position(s) of Officer(s) and/or Director(s) (the “Debtor(s)”) the Claim is being made against:** | | | | | | | | | | | | | | | | | | | | | |
|  | | Debtor(s): | | | | | | |  | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | |
| **2A.** | | **Original Claimant (the “Claimant”)** | | | | | | | | | | | | | | | | | | | | | |
| Legal Name of Claimant: | | | | | | | |  | | | | | | | | | | |  | | Name of Contact | |  |
|  | | | | | | | |  | | | | | | |  | | | |  | |  | |  |
| Address | | | | | | | | | | | | | | | | | | |  | | Title | |  |
|  | | | | | | | | | | | | | | | | | | |  | | Phone # | |  |
|  | | | | | | | | | | | | | | | | | | |  | | Fax # | |  |
|  | | | | | | | |  | | | | | | |  | | | |  | |  | |  |
| City | | | |  | | | | | | | | Prov /State | | | | |  | |  | | Email | |  |
|  | | | | | |  | | | | | | | | | | |  | |  | |  | |  |
| Postal/Zip Code | | | | | |  | | | |  | | | | | | | | | | | | | |
| **2B.** | **Assignee, if claim has been assigned** | | | | | | | | | | | | | | | | | | | | | | |
| Legal Name of Assignee: | | | | | | |  | | | | | | | | | | |  | | Name of Contact | |  | |
|  | | | | | | |  | | | | | | |  | | | |  | |  | |  | |
| Address | | | | | | | | | | | | | | | | | |  | | Title | |  | |
|  | | | | | | | | | | | | | | | | | |  | | Phone # | |  | |
|  | | | | | | | | | | | | | | | | | |  | | Fax # | |  | |
|  | | | | | | |  | | | | | | |  | | | |  | |  | |  | |
| City | | |  | | | | | | | | Prov /State | | | | |  | |  | | Email | |  | |
|  | | | | |  | | | | | | | | | | |  | |  | |  | |  | |
| Postal/Zip Code | | | | |  | | | | | | | |  | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| 1. **Amount and Type of D&O Claim**   The Debtor(s) was/were and still is/are indebted to the Claimant as follows: | | | | | | |
| Name(s) of Director(s) and/or Officer(s) |  | Currency |  | Amount of Pre-Filing D&O Claim  *(including interest, if applicable, up to March 2, 2023)* | Amount of Restructuring Period D&O Claim |  |
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**4. Documentation**

Provide all particulars of the D&O Claim and all available supporting documentation, including amount and description of transaction(s) or agreement(s), and the legal basis for the D&O Claim against the specific Directors or Officers at issue.

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| **5.** | **Certification** | | | | | |
| I hereby certify that: | | | | | | |
|  | 1. | I am the Claimant or an authorized representative of the Claimant. | | | | |
|  | 2. | I have knowledge of all the circumstances connected with this Claim. | | | | |
|  | 3. | The Claimant asserts this Claim against the Debtor(s) as set out above. | | | | |
|  | 4. | All available documentation in support of this Claim is attached. | | | | |
|  |  |  | | | | |
| All information submitted in this D&O Proof of Claim form must be true, accurate and complete. Filing a false D&O Proof of Claim may result in your Claim being disallowed in whole or in part and may result in further penalties. | | | | | | |
|  |  | | | |  | |
|  |  | | | |  | |
| Signature: | | |  |  |  | Witness[[2]](#footnote-2): |
|  | | |  |  |  | (signature) |
| Name: | | |  |  |  |  |
|  | | |  |  |  |  |
| Title: | | |  |  |  | (print) |
|  | | |  |  |  | |
|  | | |  |  |  | |
| Dated at this day of , 2023. | | | | | | |

**6. Filing of Claims and Applicable Deadlines**

For Pre-Filing D&O Claims, this D&O Proof of Claim must be returned to and received by the Monitor by 5:00 p.m. (Toronto Time) on August 4, 2023 (the “**Claims Bar Date**”).

For Restructuring Period D&O Claims, this D&O Proof of Claim must be returned to and received by the Monitor by 5:00 p.m. (Toronto Time) on the later of (i) the date that is 30 days after the date on which the Monitor sends a General Claims Package or Negative Notice Claims Package with respect to a Restructuring Period D&O Claim and (ii) the Claims Bar Date (the “**Restructuring Period Claims Bar Date**”).

D&O Proofs of Claim must be delivered to the Monitor by prepaid ordinary mail, registered mail, courier, personal delivery or email at one of the applicable addresses below:

Alvarez & Marsal Canada Inc.

in its capacity as Court-appointed Monitor of the Nordstrom Canada Entities   
Royal Bank Plaza, South Tower

200 Bay Street, Suite 2900

P.O. Box 22

Toronto ON M5J 2J1

Canada

Attention: Nordstrom Canada Monitor  
Email: [NordstromCanada@alvarezandmarsal.com](mailto:NordstromCanada@alvarezandmarsal.com)

In accordance with the Claims Procedure Order, notices shall be deemed to be received by the Monitor upon actual receipt thereof by the Monitor during normal business hours on a Business Day, or if delivered outside of normal business hours, on the next Business Day.

**Failure to file your D&O Proof of Claim so that it is actually received by the Monitor on or before 5:00 p.m. on the Claims Bar Date or the Restructuring Period Claims Bar Date, as applicable, WILL result in your D&O Claims being forever barred and you will be prevented from making or enforcing such D&O Claims against the Directors and Officers of the Nordstrom Canada Entities. In addition, you shall not be entitled to further notice of and shall not be entitled to participate as a creditor in the Nordstrom Canada Entities’ CCAA proceedings with respect to any such D&O Claims.**

1. The “**Nordstrom Canada Entities**” are Nordstrom Canada Retail, Inc., Nordstrom Canada Holdings, LLC, Nordstrom Canada Holding II, LLC and Nordstrom Canada Leasing LP. [↑](#footnote-ref-1)
2. If an individual is submitting this D&O Proof of Claim form, have a witness to its certification. [↑](#footnote-ref-2)