

Dear American Airlines Customer,

Please accept our sincere apology for the mishandling of your property. We understand your concern and realize the inconvenience this causes. Completion of this form in reference to a delayed bag will allow us to intensify our tracing efforts with the goal of locating and returning your property.

Complete all areas of this form and return it to us no later than 30 days from date of travel for Loss; and 30 days for Damage/Missing Contents from the date of travel and/or the date the bag was received. Failure to return this completed form to us within the time frame may result in the denial of your claim.

Check list:

- Airline ticket receipts
- Baggage claim checks
- Original receipts are required for reimbursement of all delay expenses
- Receipt(s) for excess value claimed
- Receipt(s) for excess baggage charges paid
- Receipt(s) for all items valued over \$100.00
- Receipt(s) for all items are required for Missing Content claims
- Clear and legible government issued photo identification for each passenger making a claim
- Damage claims: retain all damaged bags and/or contents until your claim has been resolved
- Retain a copy of all documents submitted to the airline for your personal records

Please return completed form to us by submitting it online at aa.com/contactbags. If unable to submit the form electronically, mail it to the address below:

American Airlines, Inc.
Central Baggage
4000 E Sky Harbor Blvd.
Phoenix, AZ 85034

Liability Limitations:

Liability for loss, delay, or damage to baggage will be limited as follows:

Domestic Travel (wholly within the United States) - \$3,500 per ticketed passenger
Certain items are excluded from liability; see Contract of Carriage at AmericanAirlines.com

International Travel (including domestic portions of international itineraries) is covered by the Montreal Convention – 1,288 SDRs (Special Drawing Rights) per ticketed passenger

Thank you for your cooperation,

Your American Airlines Central Baggage Team

PASSENGER PROPERTY QUESTIONNAIRE

AAAdvantage: _____ File Reference Number: _____

Type of Claim: (check all that apply)			
<input type="checkbox"/> Lost Luggage	<input type="checkbox"/> Missing Contents		
<input type="checkbox"/> Damaged Luggage and/or Contents	<input type="checkbox"/> Delay Expenses		

Mr. <input type="checkbox"/> First Middle Last Name Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/>	Phone Number Mobile: _____ Business: _____
Permanent Mailing Address: _____ Number Street Apt.	Temporary Mailing Address: _____ Number Street Apt.
City State Zip Code	City State Zip Code
Country Postal Code	Country Postal Code
Email Address: _____	Employed by: _____ Occupation: _____

Your Complete Flight Itinerary

From	To	Airline	Flight Number	Travel Date

Have you, or any member of your household, had a previous baggage claim with AA or any other airline in the last 5 years? Yes No

If yes, list each airline, claimant name and dates (attach an additional page if necessary)

Airline(s) _____ Name(s) _____

Date(s) _____

Information gathered on this form may be shared with other airlines, local, state and federal law enforcement agencies or private insurers.

Number of ticketed passengers traveling in your party:	Number of passengers claiming missing baggage:	Purpose of trip?	Length of stay?
Were you charged for excess and/or overweight baggage: Yes <input type="checkbox"/> No <input type="checkbox"/>	Did you declare and pay for excess value: Yes <input type="checkbox"/> No <input type="checkbox"/> Value declared: \$ _____		
Have you received your baggage: Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, when was your bag received M/D/Y? _____			
Was airline notified of loss immediately? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, at what office? _____ By telephone <input type="checkbox"/> In person <input type="checkbox"/>			
If airline was not notified within 4 hours, state the reason for the delay: _____			
Where and when did you last see your baggage? _____			
Has this loss been reported to another airline and/or insurance company? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide name of airline and city where reported and/or insurance company and phone number. _____			

Certification and Understanding

APPLICABLE IN USA ONLY. It is expressly understood and agreed by the claimant that the furnishing of this form and any assistance given by employees of American Airlines, Inc., are acts of courtesy and shall not constitute a waiver of any rights or an admission of liability by or on the part of American Airlines, Inc., its employees or agents. Any other information and/or documents relating to this statement which are required by American Airlines, Inc., will be furnished by claimant upon request and shall be considered part of this statement.

The United States Post Office has investigative jurisdiction under federal laws relating to sending false or fraudulent claims through the United States mail and any such claims received by American Airlines, Inc., are reported to the United States Postal Authorities. Loss of baggage in interstate shipment or of articles from such baggage come within the purview of federal statutes relating to thefts from interstate shipment and, are therefore, subject to investigation by the Federal Bureau of Investigation.

Complete Reverse Side

BAGGAGE AND CONTENT DESCRIPTION

NOTE: When more than one piece of baggage is lost, complete a separate baggage and content list for each missing bag.

Baggage routing:	Flight number(s) on claim check:	Airport checked from:	Airport checked to:
Baggage tag number(s):		Passenger ticket number(s):	
Number of bags checked:	Number of bags received:	Baggage checked at: Curbside <input type="checkbox"/> Ticket Counter <input type="checkbox"/> Gate <input type="checkbox"/> Other <input type="checkbox"/>	
Was baggage rechecked and new tags issued? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, at what airport?			
Was baggage available at Customs? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If yes, at what city?			
Give details if the original routing was changed after starting your trip:			
Was your property packed in a box? Yes <input type="checkbox"/> No <input type="checkbox"/> Was your property packed with an external cover? (example: golf bag) Yes <input type="checkbox"/> No <input type="checkbox"/>			
Is the name on the bag(s) different from the passenger? If so, what name?			
Please list any initials, marks, tags, ribbons, cords, tape or other exterior markings on your bag(s):			

Bag Type	Material	Color(s)	Brand	Bag Dimensions	Open/Close with Zipper	Wheels	Retractable Handle	Purchase Date	Cost of Bag
	<input type="checkbox"/> Hard <input type="checkbox"/> Soft				<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Gender = M: Male F: Female CH: Child I: Infant (under 2 yrs)

Qty	Article/Item	Size	Gender M,F,CH,I	Description	Color	Material	Brand Label	Store Purchased	Purchase Date	Original Cost
1	Shoes	12	M	White with blue stripes	Leather	Nike	Sears	Jan-13	\$55.00	
4	T-Shirts	L	M	Undershirts	White	Cotton	Hanes	JCP	Jan-13	\$20.00

If additional space is needed, please attach a separate page. Be sure to include a complete description and cost for each item along with receipts for all items valued over \$100.00.

Please note: Receipt(s) for all items are required for Missing Content claims.

TOTAL:	\$
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I do hereby warrant the foregoing statement and those on the accompanying forms to be accurate, complete and true. I hereby make a claim against American Airlines, Inc., in the amount of \$ _____ for a loss occurring on _____.

Claimant signature **Date** **Claimant signature*** **Date**

*Signatures are required for each passenger claiming lost property. Parents may sign for their children under age 18.