

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 21 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

Once you have completed the form, please return it to us by email or mail:

**American Airlines, Inc.**  
Central Baggage  
4000 E Sky Harbor Blvd.  
Phoenix, AZ 85034  
Email: [central.baggage@aa.com](mailto:central.baggage@aa.com)

**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](http://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<br>Mrs. <input type="checkbox"/><br>Ms. <input type="checkbox"/> | Phone Number<br><br>Mobile: _____ Business: _____      |
| Permanent Mailing Address: _____<br>Number Street Apt.   | Temporary Mailing Address: _____<br>Number Street Apt. |
| City State<br>Zip Code   | City State<br>Zip Code                                 |
| Country Postal Code  | Country Postal Code                                    |
| Email Address: _____   | Employed by: _____<br>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"/><br>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? _____<br>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"/><br>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<br><input type="checkbox"/> Soft |          |       |                | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |               |             |

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

| Qty | Article/Item | Size | Gender<br>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: | \$ |
|--------|----|

**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.