

Dear Passenger,

El Al Israel Airlines Ltd. does its utmost to deliver your baggage on-time and damage-free. Nevertheless, there are cases in which baggage is delayed, damaged or lost, for which we apologize in advance. We are sorry for any inconvenience you were caused as a result of the event you are reporting.

Please complete the attached form, and send it to the El Al office nearest your place of permanent residence by mail, e-mail, or fax. Israeli residents should use the above address, and United States residents should send claims to our New York office. For the office nearest you, please visit our website at www.elal.co.il.

All claims must be submitted in writing within 7 days from the time you received the baggage in the event of claims for damage or missing items, or 21 days in the event of claims for delayed baggage.

I. PLEASE SUBMIT COPIES OF THE FOLLOWING DOCUMENTS WITH THIS FORM:

- Flight ticket
- Boarding pass
- Baggage tags (attached to your flight ticket and/or suitcase)
- Report filed at the airport (Property Irregularity Report and/or Damage Report)
- Applicable receipts

If you do not have all of the above documents, please state so when submitting your claim.

All claims will be handled in accordance with the General Conditions of Carriage and international conventions and laws which determine airlines' limits of liability. In the event that you fail to provide all of the documents or information requested by us, we reserves the right to dismiss your claim in whole or in part.

II. PERSONAL DATA

Last (Family) Name As appears on passport		Title and First (Given) Name	
I.D. Number * OR Passport No. (Specify Country)		Gender	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Address line 1		Address line 2 (Where applicable)	
City/State		Postal/ZIP Code	
Country		Matmid Number TL/SL/GL/PL/TP	
Telephone		Fax	
Cell phone		Email	

*** I.D. Number is mandatory for Israelis. Non-Israelis must provide passport number.**

V. DAMAGE TO BAGGAGE OR ITEMS MISSING:

1. Damage is to contents suitcase

Details _____

2. When and where did you discover the damage or missing items? _____

3. Details of missing or damaged items:

Item	Quantity	Date of Purchase	Purchase Price	Currency	Damaged	Missing	Receipt? (Yes/No)
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
TOTAL:							

VI. SECURITY SEPARATION *Fill this section **only** if Security took or damaged your belongings*

1. Object(s) detained _____

2. Loss Damage

3. Airport where detention occurred: _____

4. Were you given a receipt? Yes (please attach) No

5. Who detained the object(s)? El Al Security Airport Security Other _____

6. Value of object(s) _____

VII. DELAYED RECEIPT OF BAGGAGE

Note: In the event that your luggage was delayed upon returning to your place of residence, do not fill out this section; after 21 days have elapsed, please fill out section VIII on page 5.

1. Number of days of visit (not in your place of residence) _____
2. Delay (in days/hours) in receiving baggage _____
3. Details of expenses incurred because of delay:

Date	Description of Expense	Receipt? (Yes/No)	Purchase Price	Currency
TOTAL:				

VIII. BAGGAGE DELAYED FOR MORE THAN 21 DAYS

1. Details of baggage contents (use an additional page if necessary):

Item	Quantity	Age	Value	Currency
TOTAL:				

IX. DECLARATION

I hereby submit my claim against El Al Israel Airlines Ltd. in the sum of _____ in _____ (currency) for the loss/damage incurred on (date) _____.

Bank Account Details (for use in the event of compensation):

Account Owner Name:	Account Currency:
Bank Name and Number:	Branch Number:
Account Number:	IBAN:

In consideration for the receipt of compensation in connection with this claim, I hereby release, acquit and forever discharge El Al Israel Airlines Ltd. ("EL AL") and/or its employees, servants and agents and/or any other person for whom EL AL is liable, for all claims and demands for damages sustained and/or which may hereinafter at any time be sustained by me or any other person, arising out of, in connection with, or incidental to the loss, delay, or damage referred to in this claim.

I acknowledge that any compensation to be paid by EL AL will be received in full accord and satisfaction of a disputed claim and does not constitute any admission of liability by EL AL.

By submitting this form, I hereby declare that all the details in this document and in all the appended documents are accurate, complete and true.

Signature*

Date

(Persons signing must be at least 18 years old. Parents may sign for their children under age 18.)