CUSTOMER TICKET COPY REQUEST FORM

Dear Customer,

At the time you purchased your ticket, you were given a receipt for the transaction. If you cannot locate the receipt and need a copy of your ticket, we will send you one for a \$20.00 processing fee. Please attach a check to this form or give us your credit card number to charge the fee, and furnish as much of the following information as possible:

→	Passenger Name:					
	Ticket Number:					
+	Ticket purchased at	on				
+	Travel dates:					
→	Flight numbers:		_			
→	Was the ticket traveled or	(circle one)?	Yes	No		
	Form of payment (circle of				Other	
+	Credit card #:					
+					card was used to purchase this ticket	
	and you cannot provide u	s with this cred	it card nun	nber, we will be	e unable to provide you a copy of th	
	ticket (for confidentiality	reasons).				
_						
	If you wish to charge the fee to	your credit card, p	lease enter th	ne following infor	mation:	
	→ Credit card #:					
	→ Expiration Date:					
	→ Your signature authori	zing Alaska Ai	rlines to bi	ll your card for	20.00	
	Signature:					
L	Digitatore					
The ticket c	opy should be mailed to you at:					
	•					
	C1 1					
	City/State:				p:	
	Phone Number (optional):				P	
Or faxed to	` .			,		
	Fax #:					
	Signature:					
	Signature:					
17	4 90 41 1 24			4 6430 00 DI		
Your reque	est will not be processed withou	it your signature	and paymei	it of \$20.00. Plea	ase mail to:	
		А	laska Airline	es		
		Attn: Refun				
			O. Box 6890			

Seattle, WA 98168-0900 FAX # (206) 392-7587

Sincerely,

Alaska Airlines Representative CZ-9 (04/98)