

FOR OFFICE USE ONLY

MAILED _____



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RETURNED _____

EMERGENCY ROAD SERVICE REPORT/REIMBURSEMENT APPLICATION

Please answer all questions. (Space for additional comments and information on back of form.)

Note: If your membership card was issued by an AAA Club in another state, submit this application and your receipt to your home club.

NO REFUNDS WILL BE GRANTED IF APPLICATION IS SUBMITTED MORE THAN SIXTY (60) DAYS AFTER THE DATE OF SERVICE.

Membership # _____ Club Code _____ Valid Through _____ Service Date ___/___/___ Hr _____ am/pm

Member's Name _____ Telephone(Day) _____

Address _____ City _____ State _____

Zip _____

Vehicle: Make _____ Year _____ Body Style _____

Were you present with the vehicle when road service was rendered? _____

Cause/nature of disablement _____

Exact location of vehicle (Hwy/St./Intersection/Milepost) _____

Name/address of garage that rendered road service _____

IN AREAS WHERE AAA SERVICE WAS AVAILABLE AND NOT USED BY MEMBER, REIMBURSEMENTS ARE LIMITED TO THE AMOUNT AAA WOULD HAVE PAID FOR THE SERVICE.

Was vehicle on public road? _____

Did you call a AAA office (Y/N)? _____ Did you call a AAA station (Y/N)? _____ What numbers did you call? _____

If you **DID NOT CALL** AAA, why not? _____

What service was rendered to vehicle? _____

Was vehicle towed? _____ Number of miles _____ To where? _____

Time spent by garage at scene of disablement _____

Amount paid for road service \$ _____

PLEASE COMPLETE AND SIGN THE REVERSE SIDE

