

ASSIGNMENT OF BENEFITS WHILE INTERNED, HELD PRISONER, HOSTAGE, OR MISSING

To: American Airlines, Inc.

"You are hereby directed to pay all monthly compensation allowable to me under Article 30.M.6. contained in the current Agreement between American Airlines, Inc. and the Association of Professional Flight Attendants, while interned, held prisoner or hostage, or missing, as follows:

Initially, to _____, _____,
(Name) (Address)
as long as living, and thereafter to _____,
(Name)
_____ as long as living, and thereafter to
(Address)
_____, _____,
(Name) (Address)
as long as living.

"The balance, if any, and any amounts accruing after the death or legal determination of death of all persons named in the above designations shall be held for me or, in the event of my death before receipt thereof, shall be paid to the legal representative of my estate.

"The foregoing directions may be modified from time to time by letter signed by the undersigned, and any such modification shall become effective upon receipt of such letter by the Company.

"Payments made by the Company pursuant to this direction shall fully release the Company from the obligation of making any further payment with respect thereto.

(Flight Attendant Signature)

Date: _____

Employee No. _____"

When complete, turn this form into your Flight Service Manager