Mileage Transfer upon Death of Member
While the Miles expire upon a Member’s death, the Administrator or Executor of the Member’s Estate may request Delta reinstate and transfer the Miles from the deceased Member’s account to one or more members’ accounts. Note: Miles may only be transferred in whole amounts.

Instructions
Mail or fax the following:
   1) Completed Affidavit and Release (pages 2 and 3 of this document)
   2) Copy of the Death Certificate

To the following address:
Delta Air Lines
Dept. 654 SkyMiles Service Center
P.O. Box 20532
Atlanta, GA 30320-2532
Fax: (404) 773-1945

Please allow up to four weeks for processing.
State of: __________________
County of: _____________

AFFIDAVIT AND RELEASE
The undersigned deponent, being duly sworn, deposes and says on oath that:

[Check the appropriate line]

1. ___ (S)he is the court ordered executor/administrator of the estate (the "Estate") of the deceased individual listed on the attached Exhibit A. (the "Decedent").

- or -

___ (S)he is not the court ordered executor/administrator of the estate (the "Estate") of the deceased individual listed on the attached Exhibit A, but nonetheless has authority to act as the executor/administrator of the Estate because
________________________________________________________________________
________________________________________________________________________

[If additional space is needed, please continue on a separate sheet of paper]

2. In accordance with the terms of the Estate, all miles in the Delta Air Lines’ SkyMiles account of the Decedent shall be transferred to the person(s) listed in the attached Exhibit A on the terms specified therein.

3. The undersigned hereby acknowledges that this affidavit will be relied upon by Delta in making the transfer set forth in Exhibit A. The undersigned shall, on behalf of the Estate, indemnify, defend, reimburse and hold Delta Air Lines, Inc. harmless from and against any and all claims, demands, causes of action and expenses (including but not limited to legal expenses) which arise in any manner, in connection with the transfer specified in Exhibit A.

Signed, this _____ day of ______________, 20____.

By: ____________________________________________
   (Signature of Executor)

______________________________________________
   (Print name of Executor)

Sworn and subscribed before me this _____ day of ____________, 20____

____________________________________
Notary Public

My commission expires: __________________________
Exhibit A

Name of deceased SkyMiles member: ___________________________________

Delta SkyMiles account number: ________________________________

Number of SkyMiles: ________________________________

Miles shall be transferred to:

Name: ___________________________________

Delta SkyMiles account number: ________________________________

Number of SkyMiles*: ________________________________

Name: ___________________________________

Delta SkyMiles account number: ________________________________

Number of SkyMiles*: ________________________________

Name: ___________________________________

Delta SkyMiles account number: ________________________________

Number of SkyMiles*: ________________________________

*Note: If transferred to more than one account, SkyMiles must be assigned in whole number mile amounts. (i.e., fractions may not be used).

Contact Information

In case we have questions, how may we contact you?

Name: ________________________________

Email: ________________________________

Telephone: ____________________________