AAA Hudson Valley Road Service Reimbursement Form

Please fill out the form below and attach all ORIGINAL receipts.
Send to AAA Hudson Valley, 618 Delaware Avenue, Albany NY 12209

Member Information			
Name:		Address:	
Membership Number:		Expiration Date:	
Phone Number:		Work Number:	
Was AAA Called for Service? YES NO		Date & Time:	
If not, Why was AAA Service not available or used?			
Was AAA Membership Card Presented to Service Person: YES NO			
Name of Responding Garage :			
Make of Car:	Model:	Year:	License Plate #

Services Rendered – Consideration for Reimbursement

Towing	
Location of Disablement:	
Where was car towed? (City & State)	
Miles towed:	Amount Charged:

Fuel Delivery	
Amount charged for Delivery:	Cost of Fuel per gallon:

Extrication/Winching	
Number of trucks used:	Number of service people:
Time on location:	Amount Charged:
Reason for Extrication:	

Locksmith			
Key Stuck in Ignition ☐	Charges: $	Gain Entry into Car or Truck ☐	Charges: $
Replace Lost Keys ☐	Charges: $	Other:	Charges: $

Trip Interruption			
Location:		Type of Occurrence:	
Number of Hours or Days Disabled:			
Police Jurisdiction filling report (if any)			
Name of Officer:		Report #:	
Expenses Occurred:	Food: $	Lodging: $	**OR** Car Rental: $

Please add any additional comments here