

IMPORTANT: FINAL NOTICE OF DEADLINE

MARCH 12, 2007 IS THE DEADLINE FOR PILOTS WITH SCHEDULED CLAIMS
TO FILE PROOFS OF CLAIM.

On or about January 24, 2007 you may have received a package from Delta's Compensation, Benefits and Services Department containing information concerning the claims you may have as a result of Delta's termination of the Pilot's Bridge Plan and the Supplemental Annuity Plan or Delta's changes to the retire health care benefits. Each of the packages you received from Delta may have included, among other things, one or more of the following:

1. An informational notice alerting you to the amount and type of your claims;
2. Information regarding any claim you may have for medical benefits resulting from the settlement between Delta and your Section 1114 Committee; and
3. Information regarding any claim retirees and survivors may have for lost benefits under the non-qualified pension plans (the Delta Pilots Bridge Plan and Delta Pilots Supplemental Annuity Plan).

The package also contained a **Notice of Amendment to Schedules of Assets and Liabilities and of Subject Creditor Bar Date**. ("Notice"). The Notice includes instructions concerning the filing of a proof of claim in the event you disagree with the information reflected in the package. As the nature, amount and type of claims depends on your individual circumstances, it is important that you consider any possible claims you may have carefully. If you disagree, you do not need to file an objection and serve it on the Core Parties as required by the Case Management Order. (Delta Docket no. 660), but you must file a proof of claim and file it with the court at the address given below.

DP3 DOES NOT HAVE SUFFICIENT INFORMATION CONCERNING YOUR INDIVIDUAL CIRCUMSTANCES IN ORDER TO MAKE A DETERMINATION AS TO NATURE OR AMOUNT OF ANY CLAIMS YOU MAY HAVE RELATING TO DELTA'S BANKRUPTCY. YOU SHOULD REVIEW THE INFORMATION AND INSTRUCTIONS IN YOUR PACKAGE CAREFULLY. PLEASE CONSULT YOUR OWN FINANCIAL AND LEGAL ADVISORS REGARDING YOUR CLAIMS.

If you agree with the information in the package your received, including the nature and amount of your claims, then you do not need to take any action. Your distribution on account of the claims reflected in the package will be paid following confirmation of and pursuant to a plan of reorganization.

HOWEVER, IF (i) YOU DISAGREE WITH THE NATURE OR AMOUNT OF YOUR CLAIMS AS THEY HAVE BEEN SCHEDULED BY THE DEBTOR, OR (ii) YOU BELIEVE YOU HAVE ADDITIONAL CLAIMS AGAINST DELTA OR ONE OR MORE OF THE AFFILIATED DEBTORS ARISING FROM THE NON-QUALIFIED PLANS OR MEDICAL PLANS AND THOSE CLAIMS WERE NOT ADDRESSED IN YOUR PACKAGE, **THEN YOU MUST FILE A PROOF OF CLAIM ON OR BEFORE MARCH 12, 2007.**

The nature and amount of your claim may be incorrect for various reasons that are unique to your circumstances. It may be as simple as the debtor has used the wrong date of birth or has misstated the amount of your benefit.

DP3 has been made aware of two groups who believe that they have other reasons to file claims. One group contends that the basis of their claim is that the scheduled amount of the Unsecured Claim failed to include all of their expected benefits to be paid from the non qualified plans. (The calculations in the package for the Balance Claim and the Post Termination Claims exclude that portion of their Formula Benefits which were previously paid from non-qualified plans before the cap increases but which amounts the PBGC disregards in its calculation of the guaranteed benefits or subordinates to a lower priority category because of cap increases in the five years preceding the bankruptcy filing).

A second group contends that the scheduled amount for their Unsecured claim is based on an inaccurate calculation of the amounts paid on account of the non-qualified benefits by the Disability and Survivorship Trust. The second group believes that the Debtor's calculations apply payments from the Disability and Survivorship Trust in such a manner as avoid any liability on account of a short fall in the non-qualified plan, and that the Disability and Survivorship Plan does not authorize the application of the payments in this manner.

You should consult your own legal and financial advisors to determine whether you have a reason to file a claim.

SUGGESTIONS FOR FILING THE PROOF OF CLAIM

If you elect to file a proof of claim for whatever reason, the procedures outlined in the Notice should be strictly observed.

1. You must use Official Proof of Claim Form 10 (Attached). To complete the Proof of Claim form, follow the instructions on the second page of the form. Also attached are two templates which may assist you in describing the basis for your claims. One is for Non-Qualified pension benefits, and the other is for Retiree Medical Benefits. The templates must be attached to the Official Form for filing. We suggest filing two proofs of claims if you disagree with both the amounts scheduled for the pension and the retiree medical claims.

In Box 1 of the Form, if you are seeking additional amounts for your nonqualified plan payments, then check "other" and **insert** "pension benefits, see attachment." If you are seeking additional payments on account of your retiree medical benefits claim, check "Retiree benefits as defined in 11 U.S.C. § 1114(a)" on the right side of Box 1.

In Box 2, indicate the date you became a party to the Pilot Working Agreement or date of employment as a pilot in active service of Delta Air Lines, Inc. If you became a participant under the Delta Retirement Plan as a result of a merger, use the date you became a participant.

In Box 3, insert "No judgment obtained pre-petition" unless you did file suit and obtain a judgment for your benefits. If you do have a judgment, insert the date.

In Box 4, insert what you believe to be the correct amount of your claim on the line with the appropriate designation. Both the Post Termination Claim Settlement provided for unsecured, non priority claims except for the NQ Admin Claim. If your disagreement with Delta's proposal for your claims is the amount of your Unsecured Claim, you should insert the amount you believe to be correct in the first blank designated "unsecured non priority." If you disagree with the calculation of your NQ Admin Claim you should put the number you believe to be the correct amount in the blank designated as unsecured priority on the proof of claim for the Non-Qualified Pension claim. If you agree with the scheduled amount of one of the claims, insert the amount you agree with in the proper blank. Add the two together for the "Total." The same procedure should be followed in Box 4 for the Retiree Medical Benefits Claim except that there is no priority claim involved in the 1114 Retiree Medical Benefit Settlements.

Box 5. If your claim is based on the Post Termination Claims Settlement or 1114 Retiree Medical Benefits Settlements, those settlements did not provide for secured claims. Therefore, you may omit Box 5 unless you and your advisors believe your claim is secured.

Box 6. Insert what you believe is the correct amount of your Unsecured Claim (as that term is defined in the letter from Robert Kight which was included in your package) or your retiree medical benefits claim. Check the box unless you believe that there is collateral for your claim. Neither the Post Termination Settlement nor the Retiree Medical Benefits Settlements provided collateral to the retired pilots as part of their claims.

Box 7. If you believe that there is a mistake in the amount of your NQ Admin Claim, you should check Box 7 and insert the correct amount. Also check the box for "other" and insert "2" in the box.

Remember to sign your name and date the form at the bottom.

2. Each Proof of Claim must be sent so that it is ACTUALLY RECEIVED on or before 5:00 p.m. (Eastern Time) on or before March 12, 2007 as follows:

a. If by Regular First Class Mail to:

United States Bankruptcy Court, Southern District of New York
Delta Claims Processing Center
Bowling Green Station
P.O. Box 5016
New York, New York 10274-5016

b. If by Hand or Courier Delivery (such as Federal Express, DHL etc.):

United States Bankruptcy Court, Southern District of New York
Delta Claims Processing Center
One Bowling Green
Room 534
New York, New York 10004-1408

[Note: Do not attempt to file proofs of claim by facsimile, telecopy or email. Also, unlike previous responses or objections you may have filed, the Proof of Claim only needs to be sent to one location depending on the method by which you send it.]

3. All Proofs of Claim must be written in the English language and denominated in lawful currency of the United States.

IF YOU DISPUTE THE AMOUNT OR NATURE OF YOUR CLAIMS AS REFERENCED IN THE PACKAGE AND YOU FAIL TO FILE A PROOF OF CLAIM, THEN YOU MAY BE BARRED AND ENJOINED FROM FILING A CLAIM OR CONTESTING THE INFORMATION IN THE PACKAGE IN THE FUTURE.

If you file a Proof of Claim, Delta will be free to object to your proof of claim. If Delta objects, you will be notified and may be provided additional instructions regarding how to resolve or litigate the objection. You will likely be required to file a written response to any objection to your proof of claim and will, unless resolved by agreement, be required to appear in person or through counsel before the Bankruptcy Court and offer proof in support of your claim and answering the objection. Any distribution to you under any confirmed plan of reorganization will be delayed until the objection is resolved.

This notice is being furnished for informational purposes only. DP3 is neither encouraging you to nor discouraging you from filing a proof of claim or otherwise participating in the bankruptcy process. DP3 contends it has no obligation and disclaims any duty to review your individualized claims information or to pursue any right or remedy you may have on your individual behalf. DP3 encourages you to consult with your financial advisor, accountant, attorney or other professional as you deem appropriate to discuss your claims.