

El Metro Bus Ticket Order Form



| | | | |
|----------------------------|--|--------------|--|
| Organization Name | | Date | |
| Address | | Phone | |
| Requested by | | Email | |
| Ticket Request Date | | | |

Order (please fill in the quantity requested and total amount)

| <i>Fare Description</i> | <i>Fare Amount</i> | <i>Quantity</i> | <i>Total Amount</i> |
|---------------------------------|--------------------|-----------------|---------------------|
| Adult (4 ride ticket) | \$7.00 | | |
| Student (10 ride ticket) | \$15.00 | | |
| Child (1 ride ticket) | \$0.50 | | |
| | | | |
| Total | | | |

Invoice will be mailed to contact information provided below and/or organization name

| | | | |
|-------------------------------|--|--------------|--|
| Authorized Signature | | Date | |
| Printed Name and Title | | Email | |
| Phone | | Fax | |

For office Use Only

| | |
|-----------------------|-------|
| Ticket Numbers | _____ |
| Invoice Number | _____ |
| Received by | _____ |