MTA TICKET BY MAIL ORDER FORM

MTA Transit Store
6 St. Paul Street, 1st Floor
Baltimore, MD 21202

410-454-7973

Please mail completed order form to the above address. Mobility Ticket Books may be ordered at anytime. Monthly ticket orders must be received no later than the 25th of each month, or by the 22nd if a holiday falls within the last 7 days of the month. Otherwise, they will be processed for the following month. MTA is not responsible for lost, damaged, or stolen passes. Passes will not be refunded or replaced.

Name:_____
(First) (Middle Initial) (Last)

Address:_____

City/State/Zip:_____

Home Phone:_____ Work Phone:_____ E-Mail:_____

TICKET TYPE	QUANTITY	PRICE			AMOUNT
Monthly Pass (Full Fare)	_____	X	$ 64.00	=	_____
Monthly Pass (Senior/Disabled)	_____	X	$ 16.50	=	_____
Express Bus	_____	X	$ 80.00	=	_____
	_____				_____
	_____				_____
Mobility Ticket Book (20)	_____	X	$ 37.00	=	_____
			SUB-TOTAL	=	_____
			Less **Commuter Choice/SmartBenefits**	=	_____
			Add $5.75 for Certified Mail Delivery (Optional)	=	_____
			Add $20.00 for 2 day Federal Express	=	_____
			TOTAL BALANCE DUE		_____

Purchase Information:

CHECK

Check No:_____ **Date:**_____ **Amount:**_____

Major Credit Card ***(Circle One)*** **VISA MASTERCARD AMEX DISCOVER (TRANSERVE VISA)**

CREDIT CARD:

Name on Credit Card:_____ ***(Please Print)*** **AMOUNT :** __**$**_____

Account Number:_____ **Expiration Date:**_____

Signature:_____ **Date:**_____

TRANServe Visa Card or Go Card:

Name on Credit Card:_____ *(Please Print)* ***AMOUNT:***__**$**_____

Account Number:_____ **Expiration Date:**_____