



SARTA Paper Ticket Order Form

Please write LEGIBLY in the spaces below.

Name: (FIRST) _____ (LAST) _____

Address: _____

City: _____ State: _____ Zip: _____

Fixed Route Ticket/Pass:	Price:	Quantity:	Total:
1-Ride Ticket	\$ 1.50		\$
Cleveland Ticket	\$ 2.50		\$
10-Ride Ticket	\$ 15.00		\$

All Day Pass	\$ 3.00		\$
31-Day Pass	\$ 45.00		\$

Proline Tickets: (Proline Client ID _____)

1-Ride Proline Ticket	\$ 2.25		\$
10-Ride Proline Ticket	\$ 22.50		\$

Total:	\$
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No refunds or Exchanges

Purchaser Signature: _____ Date: _____

<p>Please make Checks payable to: SARTA</p> <p>Address and mail Envelopes to:</p> <p>SARTA Attn: Bobbie Barnett 1600 Gateway Blvd. SE Canton, OH 44707</p>	<p>Tickets and Passes will be mailed out within 7-10 days of receiving the completed order form and payment.</p>
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