Order Form

Visit www.chicago-card.com to order Chicago Card Plus_®.

Client #:Nur	mber of Employ	/ees:	Order Date:		
Order Information		Delivery I	Delivery Information		
Company		Company	Company		
Contact		Contact	Contact		
Title		Title	Title		
Address		Address	Address		
City/State/Zip		City/State/Zip	City/State/Zip		
Phone		Phone	Phone		
Fare Instrument	Value	Quantity	Subtotal	Make check payable	
RTA FareCheck	\$			to RTA/CTA Transit Benefit Fare Program (Please make a copy of this order form for your records). Mail your check and order form to: RTA/CTA Transit Benefit Fare Program, P.O. Box 75003 Chicago, Illinois 60675-5003	
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$				
RTA FareCheck	\$			A penalty fee of \$300 will be asessed for orders requiring special handling. Orders are processed within 10 business days of receipt.	
RTA FareCheck	\$				
CTA Transit Card	\$30.00				
CTA Transit Card	\$35.00				
CTA Transit Card	\$50.00				
CTA Transit Card	\$60.00			 If you have questions regarding this order, please call 	
CTA 30-Day Pass	\$75.00				
CTA 30-Day Reduced Fare Pass	\$35.00			Customer Service at 1-800-531-2828.	
A Subtotal: Total face value of a	I FareChecks, Tr	ansit Cards and F	Passes	\$	
■ Processing Fees: Number of FareChecks, Transit Cards and Passes x 50 ¢				\$	
Chicago Card Monthly Passes and Fees (from Line C on reverse side of this form)				\$	
D Shipping & Handling				\$11.00	
TOTAL: Lines A through D					

Chicago Card_® **Monthly Pass Order Form**

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Employee Name	Chicago Card # (existing cardholders only)	Month/Year
▲ Subtotal: Number of cards x \$75	\$	
Processing Fees: (\$5 fee for replacement cards)	 \$	
C Total for Chicago Card Monthly Passes and (Take this total and enter it in Line C on reverse side of	\$	

Orders for Chicago Card Monthly Passes, both new and reload updates, **must be postmarked by the 10th of each month** to ensure activation for the following month.