

Zip Code _____



Ticket Book Order Form

Please Print

Number Printed on your Able-Ride ID Card

Customer Name _____

Address _____

City/Village _____ State _____ Zip Code _____

Address correction: Please check here if this is a new address _____

Mail ticket book(s) to:

Name _____

Address _____ Apt # _____

City/Village _____ State _____ Zip Code _____

DO NOT WRITE BELOW THIS LINE

For Able-Ride office use only.

Date Received _____ Date Mailed _____

No. of Books _____ Ticket Book(s) No. _____

Total \$ _____

For more information, call Able-Ride at 516-228-4000 or (TTY: 516-228-4002).

Tickets are sold in books of 20 and cost \$75 per ticket book. Please check the number of ticket books you are ordering.

PURCHASER

1 books = \$ 75

2 books = \$150

3 books = \$225

4 books = \$300

5 books = \$375

Phone() _____

Purchaser's name/address (if different from customers): _____

OTHER (Indicate below)

Name _____

Address _____ Apt # _____

City/Village _____ State _____ Zip Code _____

Phone() _____

CUSTOMER

Client Code _____

Please enclose money order or check (\$15 fee will be charged for returned checks) payable to NICE and mail with order form to:

NICE NASSAU INTER-COUNTY EXPRESS
C/O TRANSDEV
FINANCE DEPARTMENT
700 COMMERCIAL AVENUE
GARDEN CITY, NY 11530

Phone() _____