Use this form to purchase monthly bus passes for Maritime Metro Transit in the Manitowoc area. Instructions for completing and submitting the form are below.

**Instructions:**

1. Print the Participant Name, Address and Phone Number.
2. Write the number of passes requested.
3. Write the month for which the pass(es) are needed.
4. Multiply the number of passes requested by cost. Please keep the participant's budget in mind.
5. Write the total amount.
6. Sign and date the form.
7. Mail, fax or email the completed order form to:

   **iLIFE**
   P.O. Box 91760
   Milwaukee, WI  53209
   Fax: 414-937-2034
   Email: IRIS.Claims@iLIFEfms.com

After iLIFE receives the order form, the process is as follows:

1. iLIFE sends payment to Maritime Metro Transit.
2. The participant picks up passes at the Maritime Metro Transit office.

   **Maritime Metro Transit**
   915 S. 11th Street
   Manitowoc, WI 54220
   Phone: 920-686-3560

If you have any questions or need help, please call iLIFE at 1-888-800-5599.

**Things to remember:**
- Payment can take more than 30 days to occur. Submit the form as far in advance as possible to receive your tickets in time for your need.
- A new form must be submitted for each month you want a monthly pass.
Maritime Metro Transit
(Manitowoc)
Transit Order Form

Ordering Information
Participant Name: __________________________________________________________

Address: __________________________________________________________________

City: ____________________________ State: _________ Zip: __________

Phone Number: __________________________________________________________

Service Month: __________________________________________________________

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost Per Item</th>
<th>Number of Items</th>
<th>Total Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Bus Pass</td>
<td>$25.00</td>
<td>X</td>
<td>=</td>
</tr>
</tbody>
</table>

Participant/Guardian Signature: ______________________________________ Date: __________