



CENTRAL COMMUNITY TRANSIT

Website: www.cctbus.org

Litchfield Office

812 East Ripley ~ P.O. Box 36
Litchfield, MN 55355
Phone: 320-693-7794
Fax: 320-593-2889

Willmar Office

1320 22nd Street SW ~ P.O. Box 186
Willmar, MN 56201
Phone: 320-214-7433
Fax: 320-214-7754

Olivia Office

612 East Lincoln
Olivia, MN 56277
Phone: 320-523-3589
Fax: 320-523-1043

SERVICE VOUCHER

Agency/Individual: This form must be completed & accompany all requests for transit goods (passes/tokens) from CCT

AUTHORIZATION FOR PURCHASE OF:

Punch passes @ \$18.00 = \$
Punch passes @ \$34.00 = \$
Punch passes @ \$48.00 = \$
Punch passes @ \$100.00 = \$
Tokens @ \$2.00 ea. = \$

FREQUENCY PURCHASE AMOUNT:

one time only
per month
as needed

S&H fee (add \$5.25 each mailing)*= \$ *(limit of up to 4 passes in one mailing)

TOTAL AMOUNT \$

SPECIAL INSTRUCTIONS

PAYMENT FORM:

Payment enclosed for TOTAL AMOUNT for items listed.

Bill to: Agency
Attn:
Address

MAIL TO: (Recipient's Name and Address and Telephone #):

Office Use Only:
Date Mailed
By Staff

PICK UP AT C.C.T. OFFICE

Recipient (Name) (or representative)

Recipient has been notified of the above.

AUTHORIZED BY: Signature Tel. #

Agency Name:
Address:

AUTHORIZE DATE:

DATE EXPIRES: