



Choice. With Confidence.

Please use the enclosed Order Form to request Washington County Shared Ride Taxi tickets. Follow the instructions below.

Instructions:

1. Write the Service Date.
2. Write the Request Submitted Date (the date this form is being filled out).
3. Print the Participant Name, Address and Phone Number.
4. Complete the number of tickets requested.
5. Multiply the number of tickets by the cost per ride. Please keep the participant's budget in mind.
6. Write the total amount.
7. Check either Mail, Delivery via Taxi, or Pick-up. To arrange pick-up at Washington County, call 1-888-285-8294.
8. Sign and date the form.
9. Mail, fax or email the order form to:

Mail: iLIFE
P.O. Box 80439
Milwaukee, WI 53208
Fax: 414-918-8213
Email: IRIS.Claims@iLIFE.org

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

1. The approved order form is checked against the participant's budget.
2. iLIFE sends payment for the tickets to Washington County Shared Ride Taxi Transit and emails copies of the order forms to charles.cofta@washcowisconsin.gov.
3. Washington County Shared Ride Taxi Transit receives the payment.
4. Washington County Shared Ride Taxi Transit distributes tickets per the Order Form.

If you need help, please call iLIFE at 1-888-800-5599.

Washington County Shared Ride Taxi Order Form



Service Date: _____

Service Code: T2003

Date Request Submitted: _____

Participant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____

of Punch Cards _____ x \$15 (In-County) per ride = \$ _____

of Punch Cards _____ x \$17 (Cross-County) per ride = \$ _____

Grand Total = \$ _____

Authorized Service Dates: _____

Choose one delivery option: Mail Taxi Delivery Pick-up

Estimated pick-up date: _____

Authorized person to
pick up tickets: _____

Approved: _____ Date: _____
(Participant/Guardian signature)