



Credit Card Mail-In Payment Form

Use this form to mail-in a payment for any of the following SF Paratransit services:

- SF Access Fare Coupons
- SF Paratransit Taxi Debit Card value
- Replacement fee for a lost/stolen SF Paratransit Taxi Debit Card
- Returned check fee

If you wish to make your payment by mail, fill out the bottom portion of this form completely and mail it to:

SF Paratransit
Finance Department
68 12th Street, Suite 100
San Francisco, CA 94103-1297

SF Paratransit Service Costs (subject to change)

SF Access Fare Coupons	SF Paratransit Taxi Debit Card Value	Debit Card Replacement Fee	Returned Check Fee
\$2.50 per coupon	\$6.00 payment for \$30.00 taxi value	\$5.00	\$15.00

Please fully complete all items and sign. We cannot process incomplete forms.



Cardholder Name: _____ SF Paratransit Rider ID #: _____

Credit Card Type: Visa MasterCard American Express Discover

Credit Card Number: _____ CVC*: _____

(*3 or 4-digit security code)

Expiration Date: _____ Phone Number: _____

Billing Zip Code: _____ Amount to charge from card: \$ _____

Select the SF Paratransit service you wish to purchase (you may choose only one service per form):

- SF Access Fare Coupons
- SF Paratransit Taxi Debit Card Value
- Returned Check Fee
- Lost/Stolen/Damaged Debit Card Replacement Fee
- Shop-a-Round Taxi Debit Card Value

Fill in the mailing address if purchasing SF Access Fare Coupons or a Replacement Debit Card:

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

I authorize SF Paratransit to charge my credit card for the amount shown above.

Signature: _____ Date: _____