



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

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Tobacco Compliance Check Purchase Form

2013

MI LINDA TIERRA
585 UNIVERSITY AVE W
ST PAUL, MN 55103-1940
License Type License #
Cigarette/Tobacco 20080000868

For Office Use Only	
Compliance Check I.D.#	
Business I.D.#	
Pre Ordinance	
Post Ordinance	

Business Type:

- ☐ Convenience ☐ Convenience / Gas ☐ Gas ☐ Drug Store / Pharmacy ☐ Tobacco / Smoke Shop
☐ Supermarket / Grocery ☐ General Merchant ☐ Liquor Store / Bar Restaurant ☐ Other (private club, bowling, etc.)

Date: 08 / 15 / 13
MM DD YY

Time: 01 : 40 a.m. / p.m.

7/24/13 2:30p.m. drive
locked, no one
inside. 23

Was purchase attempted?

☒ Yes ☐ No

If NO, check reason:

- ☐ Does not sell tobacco ☐ Unsatisfactory/unsafe conditions
☐ Out of business ☐ Other
☐ After business hours ☐ Not applicable

Buyer

HTS

Age

15
16
17

Sex

Female
Male

Adult

JWF

Use 3 initials

Did adult or officer view transaction?

Yes or No

Was sale made?

Yes or No

Was age asked?

Yes or No

Was ID requested?

Yes or No

Was ID shown?

Yes or No

Type of purchase:

- ☐ Self Service
☐ Clerk assisted
☐ Vending machine - Unlocked
Location of machine _____

☐ Vending machine - Locked

Location of machine _____

Type of product:

- ☒ Cigarettes Newport
☐ Smokeless
☐ Cigars

Other (cigarette papers, lighter,
etc.) _____

Amount spent: \$ 18 . 39

Clerk Information: ☒ Female ☐ Male, Approximate Age:

☒ Under 18

Actual age if known 15

☐ 18 and Over

Civil Penalty \$	Criminal Penalty \$
Licensee Civil Penalty \$	Suspension: 10 days or less 11 to 31 days
For Office Use Only	32 days to 1 year Over 1 year