



CITY OF SAINT PAUL  
Christopher B. Coleman, Mayor

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

Telephone: 651-266-9090  
Facsimile: 651-266-9124  
Web: www.stpaul.gov/dsi

### Tobacco Compliance Check Purchase Form

Lic #: 20070001341  
AM PM GAS  
MARATHON MARKET  
719 PAYNE AVE  
ST PAUL, MN 55101-4551

2010

For Office Use Only	
Compliance Check ID #	_____
Business ID #	_____
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: 10 / 21 / 10    Time: 12 : 04 a.m. / p.m.

MM                  DD                  YY

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 B S Z    Age 15    Sex Female    Adult T P F    Did adult or officer view transaction?  
Use 3 initials    16    Male    Use 3 initials    Yes or No  
17

Was sale made?  
 Yes     No

Was age asked?    Was ID requested?  
Yes or  No     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 Marlboro  
 Smokeless \_\_\_\_\_  
 Cigars \_\_\_\_\_  
Other (cigarette papers, lighter, etc.) \_\_\_\_\_

Amount spent: \$ 16 . 00

Clerk Information:     Female     Male    Approximate Age:     Under 18    Actual age if known 38  
 18 and Over

Civil Penalty \$		Criminal Penalty \$	
Licensee Civil Penalty	Suspension	10 days or less	31 to 91 days
For Office Use Only		32 days to 1 year	Over 1 year