

For Office Use Only

375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806 Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

	Tobacco Com	pliance Check Pu	irchase Form	
Lic #: 20120003282 LITTLE GROCERY LLC LITTLE GROCERY 1724 UNIVERSITY AVE W ST PAUL, MN 55104-3614	2014		Compliance Check Business I.D, # Pre Ordinance Post Ordinance	
Business Type:				
Convenience Convenie	· ·	42	ore / Pharmacy / Bar Restaurant	☐Tobacco / Smoke Shop ☐Other (private club, bowling, etc.
Date:	9 / 14	Time: 2	: 06 a.n	1. / p.m
	DD YY			
Was purchase attempted? ☐ Yes ☐ No			y/unsafe condition Other Not applicable	
Buyer ALD Age Use 3 initials 15. 66 17		ult US Use 3 initials	Did adult or offi	cer view transaction?
Was sale made? Was age Yes or No Yes or	asked? Was ID requ	A second	Was ID shown?	s or No
Type of purchase: Self Service Clerk assisted Vending machine - Unlocked Location of machine		e of product: Cigarettes_ Smokeless_ CigarsOther (cigare		t spent: \$
Vending machine - Locked Location of machine	0.0.,			
Clerk Information: Female	Male Approxima	te Age: Unde	er 18 Actual a	ge if known
hair uy	o Red Shin	□18 an	nd Over	
Microsoft of Every and Company of the Company of th	Criminal Penal	ty \$		
Licensee: Civil Penalty \$S	uspension:10 days or less	s 11 to 31 days		
For Office Use Only		32 days to 1 ve	ear Over I vear	

___32 days to 1 year___Over 1 year.

Name of Clerk: Mistre Gelachew	Mengesha
1-5-72	
Date of Birth	
Address: 581 St. Anthony	Ao. # 320
Driver's License # or State I. D.#: D9440	45240517