



This document is to be used by departments that use terminals or similar devices to process in-person payments.

Department Name: UO Ticket Office
 Device Location: Ticket Office
 Device ID/Model #: 7315216WL033867/Ingenico IWL255

Name of Reviewer	Date of Review	<i>Indicate that each area was reviewed with a Y or N</i>					
		Serial Number match?	Model number match?	Tamper Evident Stickers intact?	Foreign Object Attached to device?	Pry Marks or Bent, Broken, or Stressed Seams?	Anything unusual?



Ensure the reader has not been exchanged.



Ensure the Security Stickers are in place.