

STATE OF WISCONSIN  
**PROPERTY TRANSACTION RECORD**

**INSTRUCTIONS: See Reverse Side**

PLEASE PRINT (INK ONLY)											
Seller's Name <i>(Last, First, MI)</i>					Sex	Race	Date of Birth	Height	Weight	Hair	Eyes
Street Address			City		State	ZIP	Driver's License # <i>(Other ID - Specify)</i>			State	
JEWELRY	<input type="checkbox"/> Men's		<input type="checkbox"/> WG <input type="checkbox"/> Silver		<input type="checkbox"/> Ring <input type="checkbox"/> Pendant <input type="checkbox"/> Chain		Kind/Size/Style of Stone Cut			No. of Stones	
	<input type="checkbox"/> Ladies'		<input type="checkbox"/> YG <input type="checkbox"/> Other		<input type="checkbox"/> Charm <input type="checkbox"/> Bracelet <input type="checkbox"/> Other						
	Jewelry Description: <i>(Initials/Inscription)</i>										
<input type="checkbox"/> Watch		Brand			<input type="checkbox"/> Wrist <input type="checkbox"/> Pendant <input type="checkbox"/> Pocket <input type="checkbox"/> Lapel			Serial, Movement, Model or Case No.			
OTHER ARTICLE	<input type="checkbox"/> TV		<input type="checkbox"/> Musical Instrument		<input type="checkbox"/> Electric Tools		<input type="checkbox"/> Computer		<input type="checkbox"/> Power Mower		
	<input type="checkbox"/> Stereo		<input type="checkbox"/> Outboard Motor		<input type="checkbox"/> Video Equipment		<input type="checkbox"/> CD Player/Disc		<input type="checkbox"/> Cellular Telephone		
	<input type="checkbox"/> Camera		<input type="checkbox"/> Snow Blower		<input type="checkbox"/> Typewriter		<input type="checkbox"/> CB Radio		<input type="checkbox"/> Other		
Serial Number			Brand Name		Size		Color		Model		
Detailed Description: <i>(List any identifying marks.)</i>											
FIREARM	<input type="checkbox"/> Derringer		<input type="checkbox"/> Machine Gun		<input type="checkbox"/> Pistol		<input type="checkbox"/> Revolver		<input type="checkbox"/> Rifle		<input type="checkbox"/> Other
	<input type="checkbox"/> Submachine Gun (or Machine Pistol)				<input type="checkbox"/> Shotgun		<input type="checkbox"/> Rifle/Shotgun Combination				
	<input type="checkbox"/> Automatic Action		<input type="checkbox"/> Blank		<input type="checkbox"/> Bolt Action		<input type="checkbox"/> Carbine		<input type="checkbox"/> Percussion		
	<input type="checkbox"/> Flintlock		<input type="checkbox"/> Gas or Air		<input type="checkbox"/> Lever Action		<input type="checkbox"/> Double Barrel <i>(Over &amp; Under)</i>		<input type="checkbox"/> Flare		
<input type="checkbox"/> Pump Action		<input type="checkbox"/> Semi-Auto		<input type="checkbox"/> Single Shot		<input type="checkbox"/> Double Barrel <i>(Side by Side)</i>		<input type="checkbox"/> Other			
Manufacturer's Name			Importer			Model		Barrel Length		Color	
Other Identification			Calibre			Serial Number					
DECLARATION OF OWNERSHIP	<b>DECLARATION OF OWNERSHIP</b> <i>(Must be completed by Seller)</i>										
	1. Is article/firearm totally owned by you? <input type="checkbox"/> Yes <input type="checkbox"/> No										
	If "No", by whom? Name _____										
	Address _____										
2. Was article/firearm found by you? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Give details: _____											
3. If this transaction concerns a firearm complete the following:											
I certify that I am in compliance with state and federal laws regulating possession of a firearm:											
<input type="checkbox"/> Wis. Stats. § 941.29											
and											
<input type="checkbox"/> Title 18 U.S.C., Part 1, ch. 44 §§ 922(g)(1-9) and (h)											
I certify under affirmation and in accordance with Wis. Stats. § 134.71(8)(c)(2), that all statements on this form are true. I understand that if I knowingly make a false statement, I have committed a Class D felony in violation of Wis. Stats. § 946.32(1), and may be prosecuted to the full extent of the law.										RIGHT INDEX FINGERPRINT IMPRESSION	
Buyer's Signature _____					Seller's Signature _____						
Print Name _____					Print Name _____						
Business Name				Street Address/City /State/ZIP							
Transaction Type				Business Transaction Number				Date		Time	
<input type="checkbox"/> Buy <input type="checkbox"/> Pawn											

**FOR OFFICE USE ONLY.**

Name \_\_\_\_\_

(Last)

(First)

(MI)

Sex \_\_\_\_\_

Race \_\_\_\_\_

DOB \_\_\_\_\_

# **INSTRUCTIONS FOR PROPERTY TRANSACTION RECORD**

## **GENERAL:**

Completion of this form is required for every transaction that occurs. Multiple transactions may be recorded on one form unless duplicate items are the subject of the transaction and then separate forms may be necessary. This form must be retained by the dealer for not less than one year and made available to any law enforcement officer for inspection at any time during this period. Additional forms may be obtained by contacting the County or Municipal Clerk.

## **BUSINESS AND SELLER IDENTIFICATION:**

Enter the business name and specify if the item is being purchased or pawned. The business can specify its own number in the "business transaction number" block. Be sure to indicate the full name of the individual. Use M (Male) or F (Female). Authorized abbreviations for Race are: W (White), B (Black), I (American Indian or Alaskan Native), A (Asian or Pacific Islander) or U (Unknown). The height should be entered as feet and inches (e.g., 6'4"), and the hair color using BRO (Brown), BLK (Black), BLN (Blonde), GRY (Gray), RED (Red), SDY (Sandy), WHI (White) and XXX (Other). Eye color abbreviations are: BLU (Blue), BRO (Brown), GRY (Gray), GRN (Green), HAZ (Hazel), PNK (Pink) or XXX (Other). Be sure to enter the complete address and if the identification produced is a driver's license number specify the state that issued the license.

## **JEWELRY TRANSACTION:**

Check the appropriate block describing the jewelry item. If more than one kind of jewelry is involved, additional forms may be required. If the item involves a precious stone describe the kind and size of stone as well as the number of stones in the appropriate area. The "description" area should be used for recording any additional identifying information. If a watch is being sold or pawned, specify the brand and describe the watch in the jewelry description area.

## **OTHER ARTICLE TRANSACTION:**

Check the box that best describes the article. Indicate the serial number, brand name and; if appropriate, the size, color and model of the article. The detailed description area should specify any unique characteristics of the item.

## **FIREARM TRANSACTION:**

Check the box that best describes the weapon type and the action. If the type and action do not fit any of the categories provided, check "other" and describe the character of the weapon. Complete the remainder of the boxes to fully describe the weapon. The "other identification" box should be used to indicate any other characteristics of the weapon, e.g. brown walnut oversized grips, gold or silver inlaid scrollwork, etc.

## **DECLARATION OF OWNERSHIP:**

The individual is required to complete this information and sign the form in the appropriate area. If the item is a weapon, the background certification information is mandatory. A right index fingerprint impression must be obtained. This can be accomplished by having the individual place his/her right index finger on a pre-inked pad and lightly rolling the finger from right to left on the pad. After the finger is inked repeat the rolling process in the appropriate block on the form.

## **MANDATORY HOLDING PERIODS:**

Wisconsin Statute 134.71(8)(d) specifies the length of time items must be "held" by the dealer. Any secondhand article or jewelry purchased or received by a pawnbroker must be kept for not less than thirty (30) days; any article purchased or received by a secondhand article dealer shall be kept for not less than ten (10) days; and any secondhand jewelry purchased or received by a secondhand jewelry dealer shall be kept for not less than fifteen (15) days. During this holding period, the pawnbroker, secondhand article dealer or secondhand jewelry dealer shall permit any law enforcement officer to inspect the secondhand article or jewelry.