

Chain of Custody on wireless swipe terminals to comply with SAQ Requirement 9.9

(Use one form for each wireless device)

Machine received (date) _____

Device serial number _____

Received by whom _____

Stored (where) _____ until event begins and
between events.

1st Event day Date _____ Time _____

Examined/tested by _____ (print name)

Assigned to _____ (signature)

Batched out by _____ (print name)

Returned to storage and examined by _____ (print name)

If battery operated, recharge unit.

Repeat for as many days as unit is in your possession

2nd event day Date _____ Time _____

Assigned to _____ (signature or same as above)

Batched out by _____ (print name)

Returned to storage and examined by _____ (print name)

If battery operated, recharge unit.

Repeat for as many days as unit is in your possession

3rd event day Date _____ Time _____

Assigned to _____ (signature or same as above)

Batched out by _____ (print name)

Returned to storage and examined by _____ (print name)

If battery operated, recharge unit.

Repeat for as many days as unit is in your possession

4th event day Date _____ Time _____

Assigned to _____ (signature or same as above)

Batched out by _____ (print name)

Returned to storage and examined by _____ (print name)

If battery operated, recharge unit.

Repeat for as many days as unit is in your possession

5th event day Date _____ Time _____

Assigned to _____ (signature or same as above)

Batched out by _____ (print name)

Returned to storage and examined by _____ (print name)

If battery operated, recharge unit.

Repeat for as many days as unit is in your possession

Return procedures

Final Examination and packed by

(signature)

Check unit to make sure it is batched out and powered down.

Unit picked up _____ date _____ time (attach copy of shipping label and email the [PCPC](#) that the unit/s has been returned)

The number to the service team at Elavon is 1-800-725-1245 opt 2.