UNITED STATES POSTAL SERVICE®

Suspicious Transaction Report (STR)

Without alerting customer(s) provide as much of the following information as possible. Complete this form only after the customer leaves. PROVIDE ONLY INFORMATION OBTAINABLE FROM BEHIND THE COUNTER. EMPLOYEE SAFETY IS THE MOST IMPORTANT PRIORITY.

Completed by Postal Employee

Type of Transaction *(Enter all information as appropriate)*

☐ Money Order ☐ Stored Value Card ☐ Wire Transfer

Begin Serial No.: _____ Item No.: _____ Transaction No.: _____

End Serial No.: _____

Total Face Value of Transaction

$

Clerk ID No.	Issue ID No.	Transaction Date	Time of Day AM PM	Phone No. of Office

Type of Activity by Customer

☐ Purchase ☐ Meter Setting ☐ Trust Fund

☐ Redeem or Cash ☐ Stamp Sales ☐ Other *(If other, describe in comments section)*

If You Know the Customer by Name:	Last Name	First Name	
If You Know the Customer's Address:	Address *(No., Street, Box, Suite/Apt. No.)*		
	City	State	ZIP Code
Description of Customer	Sex ☐ Male ☐ Female Approximate Age	Race ☐ White ☐ Black/African American ☐ Hispanic ☐ Asian/Pacific Islander ☐ American Indian ☐ Alaskan Native ☐ Other	
Type of Business *(If known)*		Was Transaction Recorded by Surveillance Camera? ☐ Yes ☐ No	
Did Customer Use Express Mail? ☐ Yes ☐ No		If Yes, What Was the Express Mail No.	

Comments

Attention: Send This Form Daily to the Address Below:

ATTN PS FORM 8105-B
MONEY ORDER BRANCH
ACCOUNTING SERVICE CENTER
PO BOX 82445
ST LOUIS MO 63182-2445