



A5 - Receipt for Payment to Informant

Dear Reader:

The following document was created from the MTAS website ([mtas.tennessee.edu](https://www.mtas.tennessee.edu)). This website is maintained daily by MTAS staff and seeks to represent the most current information regarding issues relative to Tennessee municipal government.

We hope this information will be useful to you; reference to it will assist you with many of the questions that will arise in your tenure with municipal government. However, the *Tennessee Code Annotated* and other relevant laws or regulations should always be consulted before any action is taken based upon the contents of this document.

Please feel free to contact us if you have questions or comments regarding this information or any other MTAS website material.

Sincerely,

The University of Tennessee
Municipal Technical Advisory Service
1610 University Avenue
Knoxville, TN 37921-6741
865-974-0411 phone
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Table of Contents

A5 - Receipt for Payment to Informant	3
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Reference Number: MTAS-389

This form should be completed by the agent each time he or she pays an informant for information or for services performed, including the purchase of drugs. It should be signed by the informant, using a pre-assigned code name. The receipt also should be witnessed by another officer.

Form A-5

RECEIPT FOR PAYMENT TO INFORMANT

A. Case or reference # _____ Date _____

I hereby acknowledge receipt of \$ _____ (_____)
numbers words

paid to me by: _____ for consideration of

[] information and/or [] services

Described as follows: _____

Section B is to be filled out when funds are advanced to informant for future purchase(s).

B. It is understood and agreed that this money is to be expended by me only for the purchase, as evidence, of controlled substances. If no such purchase is made, or if such purchase is made for less than the total sum furnished to me before _____, (date/time)

I will forthwith refund the sum furnished or the balance thereof to the above-named officer of the _____ (agency name). In any event, upon demand by the above-named officer at any time, I will forthwith refund to him/her the total amount of any sum thus furnished to me that has not yet been expended by me for the purchase, as evidence, of controlled substance(s). Furthermore, it is understood that this money is the property of _____ (city) and that misuse or conversion of the money to my personal use will render me liable to prosecution.

C. _____ Date _____
Payee code name or number

_____ Date/Time _____
Officer's signature

_____ Date _____
Witness's signature

Original: Filed with fund custodian

Copy: Retained by agent

DISCLAIMER: The letters and publications written by the MTAS consultants were written based upon the law at the time and/or a specific sets of facts. The laws referenced in the letters and publications may have changed and/or the technical advice provided may not be applicable to your city or circumstances. Always consult with your city attorney or an MTAS consultant before taking any action based on information contained in this website.

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Municipal Technical Advisory Service
INSTITUTE *for* PUBLIC SERVICE