

TIME IN TIME OUT
DATE PAGE **1** of

ESTABLISHMENT	FOR CORRECTIONS SPECIF	OWNER:		JULI		00/110			PERSON IN CHARGE:		
ADDRESS:					FST	ABLIS	HMENT	NUMBER:	COUNTY:		
CITY/ZIP:		PHONE:			FAX						
ESTABLISHMENT TYPE					1700				P.H. PRIORITY : H	М	L
BAKERY RESTAURANT	C. STORE CATER SCHOOL SENIO		_I IMER F	.P.		GROCE	RY STOR		ISTITUTION MOBILE V EMP.FOOD	ENDOR	S
PURPOSE Pre-opening	Routine Follow-up	Complaint	Othe	er							
	approved Not Applicable	SEWAGE DISPOS PUBLI	С			UPPL\ IUNIT`		NON-COM Date Sam	IMUNITY PRIVATE		
License No.		PRIVA RISK FAC		AND	INTE	RVEN	TIONS				
Risk factors are food p	preparation practices and emplo	vee behaviors most con	nmonly	report	ed to th	ne Cent	ers for Dis	ease Control	and Prevention as contributing factor	ors in	_
oodborne illness outbr	eaks. Public health interventio Demonstration of	ns are control measure	s to pre	vent fo	odbor	ne illnes	ss or injury		otentially Hazardous Foods	COS	s
	Person in charge present, den		000				N/O N/A		king, time and temperature		
IN OUT	and performs duties	o o lith		_				Dranar rah	acting procedures for bot holding		
IN OUT	Employee H Management awareness; polic			-	IN (N/O N/A		eating procedures for hot holding ling time and temperatures		-
N OUT	Proper use of reporting, restric	tion and exclusion					N/O N/A		holding temperatures		
N OUT N/O	Good Hygienic Proper eating, tasting, drinking			-		<u>OUT</u> OUT	N/A N/O N/A		I holding temperatures e marking and disposition	_	
IN OUT N/O	No discharge from eyes, nose						N/O N/A	Time as a p	public health control (procedures /		
	Preventing Contamina	ation by Hands		_		001		records)	Consumer Advisory	_	
N OUT N/O	Hands clean and properly was				IN	OUT	N/A		advisory provided for raw or		
	No bare hand contact with rea	dv-to-eat foods or						undercooke Hid	ed food ghly Susceptible Populations		\rightarrow
N OUT N/O	approved alternate method pro	operly followed		_							
N OUT	Adequate handwashing faciliti accessible				IN (OUT I	N/O N/A	offered	d foods used, prohibited foods not		
N OUT	Approved Se Food obtained from approved			_	IN	OUT	N/A	Food additiv	Chemical ves: approved and properly used		
N OUT N/O N/A	Examples a strend at many set to see					OUT	1071	Toxic subst	ances properly identified, stored and	ł	
N OUT	Food in good condition, safe a	nd unadulterated						used Conforr	mance with Approved Procedures		-
N OUT N/O N/A	Required records available: sh destruction	0,11			IN	OUT	N/A	Compliance and HACCF	e with approved Specialized Process P plan	6	
N OUT N/A	Protection from Co Food separated and protected		-	_	The	letter to	the left o	f each item in	dicates that item's status at the time	of the	
	Food-contact surfaces cleaned					ection.				, or the	
N OUT N/A	Proper disposition of returned				_		in complia = not appl		OUT = not in compliance N/O = not observed		
N OUT N/O	reconditioned, and unsafe foo							d On Site			
	Good Retail Practices are preve		OD RE				ogona ob	omicala and	nhusiaal ahiaata inta faada		
IN OUT	Safe Food and Wat		COS	R	IN	OUT	logens, ch		prysical objects into loods.	COS	R
	urized eggs used where require	ł						tensils: prope			_
vvater	and ice from approved source						handled		and linens: properly stored, dried,		
	Food Temperature Co						Single-u	se/single-ser	vice articles: properly stored, used		
	ate equipment for temperature ved thawing methods used	control					Gloves	used properly	equipment and Vending	-	_
	nometers provided and accurate						Food an		ontact surfaces cleanable, properly		+
	Food Identification							d, constructed	d, and used s: installed, maintained, used; test		_
	Food Identification						strips us	ed			
Food	properly labeled; original contair Prevention of Food Conta						Nonfood	l-contact surfa	aces clean hysical Facilities	-	_
Insect	s, rodents, and animals not pres						Hot and		vailable; adequate pressure	<u> </u>	+
Conta	mination prevented during food				1				roper backflow devices		1
and di Perso	splay nal cleanliness: clean outer clotl	ning, hair restraint.			1		Sewage	and wastewa	ater properly disposed	+	+
finger	nails and jewelry				1		Ĵ			<u> </u>	_
	g cloths: properly used and store and vegetables washed before								rly constructed, supplied, cleaned erly disposed; facilities maintained		+
1 10113	and regetables mastica beible				1				alled, maintained, and clean	+	+
							1 Hyoroda	Tuon not			

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	OOD ESTABLISHMENT IN	SPECTION REPORT			PAGE ² of		
ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP			
FO	DD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT	/ LOCATION	N	TEMP. ir	۱°F
Code		PRIORITY II	TEMS			Correct by	Initial
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		EDUCATION PROVI	DED OR COMMENTS				
Person in Ch	arge /Title:			D	ate:		
Inspector:	Kaleb Trur	n	Telephone No. EF (573)431-1947	PHS No. Fo	ollow-up:	Yes	No
MO 580-1814 (9-13)	<u> </u>	DISTRIBUTION: WHITE - OWNER'S COP	(573)431-1947 Y CANARY – FILE COPY		ollow-up Date:		E6.37A



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ESTABLISHMEN	ISHMENT NAME ADDRESS CITY /Z			CITY/ZIP				
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