



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 10:45	TIME OUT 11:15
PAGE 1 of 2	

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Houston Senior Center		OWNER: Stephanie Roder		PERSON IN CHARGE: Same	
ADDRESS: 301 S Grant				COUNTY: Texas	
CITY/ZIP: Houston 65483		PHONE: 417/967/4119		FAX:	
P.H. PRIORITY: ☐ H ☒ M ☐ L					
ESTABLISHMENT TYPE ☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ RESTAURANT ☐ SCHOOL ☒ SENIOR CENTER ☐ TEMP. FOOD ☐ TAVERN ☐ MOBILE VENDORS					
PURPOSE ☐ Pre-opening ☒ Routine ☐ Follow-up ☐ Complaint ☐ Other					
FROZEN DESSERT ☐ Approved ☐ Disapproved ☐ Not Applicable License No. _____		SEWAGE DISPOSAL ☐ PUBLIC ☐ PRIVATE		WATER SUPPLY ☒ COMMUNITY ☐ PRIVATE	



RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O (N/A)	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT (N/A)	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT (N/A)	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
IN OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
		Pasteurized eggs used where required					In-use utensils: properly stored		
		Water and ice from approved source					Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
		Contamination prevented during food preparation, storage and display					Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge / Title: Stephanie Roder			Date: 7/28/26		
Inspector: J. P. [Signature]		Telephone No. 417/967/4119	EPHS No. 1773	Follow-up: ☐ Yes ☒ No	
Follow-up Date:					



TIME IN	1045	TIME OUT	1115
PAGE	2	of	2

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MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 1130	TIME OUT 1200
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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Houston Senior Center		OWNER: Stephonic Roeder		PERSON IN CHARGE: Stephonic Roeder	
ADDRESS: 301 S Grant				COUNTY: Texas	
CITY/ZIP: Houston 65483		PHONE: 417/967/4119		FAX:	
ESTABLISHMENT TYPE ☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ RESTAURANT ☐ SCHOOL ☒ SENIOR CENTER ☐ TEMP. FOOD ☐ TAVERN ☐ MOBILE VENDORS		PURPOSE ☐ Pre-opening ☒ Routine ☐ Follow-up ☐ Complaint ☐ Other			
FROZEN DESSERT ☐ Approved ☐ Disapproved ☐ Not Applicable License No. _____		SEWAGE DISPOSAL ☒ PUBLIC ☐ PRIVATE		WATER SUPPLY ☒ COMMUNITY ☐ NON-COMMUNITY ☐ PRIVATE Date Sampled _____ Results _____	

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
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		Pasteurized eggs used where required					In-use utensils: properly stored		
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		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
		Contamination prevented during food preparation, storage and display					Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Signature: <i>Sylvia Snellings</i>			Date: 12/1/25		
Telephone No. 417/967/4119			EPHS No. 1773		
Follow-up: ☐ Yes ☒ No			Follow-up Date:		



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 1130	TIME OUT 1200
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ESTABLISHMENT NAME Houston Senior Center		ADDRESS 301 S Grant		CITY Houston	ZIP 65487
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
Tamales Bldg 2b		38	Meat Lasagna		140
Butter			Mixed Veg		138
Chocolate Pie Front 2b		37			
Milk		36			
Meat Lasagna		155			
Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.				Correct by (date)
	no violation				
Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.				Correct by (date)
	no violation				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: X Sylvia Snellings				Date: 12/1/25	
Inspector: J. M. Smith		Telephone No. 401/917/4131		EPHS No. 1773	
				Follow-up: ☐ Yes ☒ No	
				Follow-up Date:	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 1120	TIME OUT 1210
PAGE 1 of 2	

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Houston Senior Center</i>	OWNER: <i>Stephanie Roeder</i>	PERSON IN CHARGE:
ADDRESS: <i>301 S Grant</i>		COUNTY: <i>Texas</i>
CITY/ZIP: <i>Houston</i>	PHONE: <i>417/967/4118</i>	FAX:
P.H. PRIORITY: ☐ H ☒ M ☐ L		
ESTABLISHMENT TYPE ☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ RESTAURANT ☐ SCHOOL ☒ SENIOR CENTER ☐ TEMP. FOOD ☐ TAVERN ☐ MOBILE VENDORS		
PURPOSE ☐ Pre-opening ☒ Routine ☐ Follow-up ☐ Complaint ☐ Other		
FROZEN DESSERT ☐ Approved ☐ Disapproved ☐ Not Applicable License No. _____	SEWAGE DISPOSAL ☐ PUBLIC ☐ PRIVATE	WATER SUPPLY ☐ COMMUNITY ☐ NON-COMMUNITY ☐ PRIVATE Date Sampled _____ Results _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
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GOOD RETAIL PRACTICES

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IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
		Pasteurized eggs used where required					In-use utensils: properly stored		
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		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
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		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge /Title: <i>X Stephanie Roeder</i>	Date: <i>11/9/25</i>		
Inspector: <i>9/11/25</i>	Telephone No.: <i>417/967/4131</i>	EPHS No.: <i>1773</i>	Follow-up: ☐ Yes ☒ No
Follow-up Date:			



ESTABLISHMENT NAME		ADDRESS		CITY		ZIP	
Houston Senior Center		301 S Grand		Houston		65483	
FOOD PRODUCT/LOCATION		TEMP.		FOOD PRODUCT/LOCATION		TEMP.	
Cupids		75.0		Cupids		38	
Tuna		16.5		Butter		37	
Chicken Lvs		13.5		Butter		37	
Chick. W.		13.5		Milk		35	

[illegible][illegible]

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>X</i> <i>Stephanie Keadle</i>			Date: <i>1/9/28</i>	
Inspector: <i>X</i> <i>PH</i> <i>up main floor</i>	Telephone No. <i>457/311/418</i>	EPHS No. <i>1713</i>	Follow-up: ☐ Yes ☒ No Follow-up Date:	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
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TIME IN	TIME OUT
PAGE of	

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Houston Senior Center</i>	OWNER: <i>Stephanie Rogers</i>	PERSON IN CHARGE: <i>Same</i>
ADDRESS: <i>301 S Grant</i>	COUNTY: <i>Texas</i>	
CITY/ZIP: <i>Houston 65483</i>	PHONE: <i>417/967/4117</i>	FAX:
ESTABLISHMENT TYPE ☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ RESTAURANT ☐ SCHOOL ☒ SENIOR CENTER ☐ TEMP. FOOD ☐ TAVERN ☐ MOBILE VENDORS		P.H. PRIORITY: ☒ H ☐ M ☐ L
PURPOSE ☐ Pre-opening ☒ Routine ☐ Follow-up ☐ Complaint ☐ Other		
FROZEN DESSERT ☐ Approved ☐ Disapproved ☐ Not Applicable License No. _____	SEWAGE DISPOSAL ☒ PUBLIC ☐ PRIVATE	WATER SUPPLY ☒ COMMUNITY ☐ NON-COMMUNITY ☐ PRIVATE Date Sampled _____ Results _____

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☒ IN ☐ OUT	Management awareness; policy present			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper cooling time and temperatures				
☒ IN ☐ OUT	Proper use of reporting, restriction and exclusion			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper hot holding temperatures				
	Good Hygienic Practices			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper cold holding temperatures				
☒ IN ☐ OUT ☐ N/O	Proper eating, tasting, drinking or tobacco use			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper date marking and disposition				
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☒ IN ☐ OUT ☐ N/O	Hands clean and properly washed			☒ IN ☐ OUT ☐ N/A	Consumer advisory provided for raw or undercooked food				
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☒	☒	Water and ice from approved source			☒	☒	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			☒	☒	Single-use/single-service articles: properly stored, used		
☒	☒	Adequate equipment for temperature control			☒	☒	Gloves used properly		
☒	☒	Approved thawing methods used					Utensils, Equipment and Vending		
☒	☒	Thermometers provided and accurate			☒	☒	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			☒	☒	Warewashing facilities: installed, maintained, used; test strips used		
☒	☒	Food properly labeled; original container			☒	☒	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
☒	☒	Insects, rodents, and animals not present			☒	☒	Hot and cold water available; adequate pressure		
☒	☒	Contamination prevented during food preparation, storage and display			☒	☒	Plumbing installed; proper backflow devices		
☒	☒	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			☒	☒	Sewage and wastewater properly disposed		
☒	☒	Wiping cloths: properly used and stored			☒	☒	Toilet facilities: properly constructed, supplied, cleaned		
☒	☒	Fruits and vegetables washed before use			☒	☒	Garbage/refuse properly disposed; facilities maintained		
					☒	☒	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Stephanie Rogers</i>	Date: <i>4/29/24</i>		
Inspector: <i>R. [Signature]</i>	Telephone No. <i>417/967/4131</i>	EPHS No. <i>1775</i>	Follow-up: ☐ Yes ☒ No
			Follow-up Date:

