



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

TIME IN	1045	TIME OUT	1130
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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Brian Berry</i>	PERSON IN CHARGE: <i>Dick Norris</i>
ADDRESS: <i>125 College</i>		COUNTY: <i>Texas</i>
CITY/ZIP: <i>Licking 65542</i>	PHONE: <i>573/674/4891</i>	FAX:
		P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE		
<input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS		
PURPOSE		
<input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> 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 OUT N/A	Food separated and protected				IN = in compliance	OUT = not in compliance	
IN OUT N/A	Food-contact surfaces cleaned & sanitized				N/A = not applicable	N/O = not observed	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				COS = Corrected On Site	R = Repeat Item	

#### 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:

Date:

*10/21/25*

Inspector: *John Herleman*

Telephone No. *573/674/4891*

EPHS No. *1773*

Follow-up:  Yes  No  
Follow-up Date: *10/30/25*



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

TIME IN	TIME OUT
PAGE 1 of 1	

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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Lickins Elementary</i>	OWNER: <i>Brian Berg</i>	PERSON IN CHARGE: <i>Diane Norris</i>
ADDRESS: <i>125 College</i>		COUNTY: <i>Texas</i>
CITY/ZIP: <i>Lickins 65542</i>	PHONE: <i>572/174/4881</i>	FAX: <i></i>
P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L		
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS		
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> 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 OUT N/A	Food separated and protected				IN = in compliance	OUT = not in compliance	
IN OUT N/A	Food-contact surfaces cleaned & sanitized				N/A = not applicable	N/O = not observed	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				COS = Corrected On Site	R = Repeat Item	

#### 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:

*Dest Approval*

Date:

*11/4/25*

Inspector: *R. B.*

Telephone No. *417/967/6131*

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 1045	TIME OUT 1130
PAGE 2 of 2	

ESTABLISHMENT NAME	ADDRESS	CITY	ZIP
Lickiins Elementary	125 College	Lickiins	65542
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/ LOCATION	TEMP.
Milk OS Day	33	B. Hov	145
Milk true 3beyOS	35	Ranch	47
Slice Cup True 2 OS	37	Meat Day	45
Pulled Pork 14.4	143	Nuggets	171
Beef Ban Flgy	141	Orn	
PRIORITY ITEMS			
Code Reference	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.		
4-301.16.12	301.16.12) not sanitizing		
4-301.114	No Sanitizer in dish machine. I placed it to no effect ⇒ Replace Bleach / check timer		
	- Insufficient Sanitization in dish truck Bucket as well		
CORE ITEMS			
Code Reference	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.		
4-301.11	Troyson 3bey in kitchen not sanitizing 48 F. temp C 45-46 also indicated on temp Denni		
	⇒ Currently in process of Repairs.		
4-302.14	No test kit for sanitizer		

**EDUCATION PROVIDED OR COMMENTS**

Person in Charge /Title: <i>John L. Clark</i>			Date: <i>10/21/25</i>
Inspector: <i>John L. Clark</i>	Telephone No. <i>417-967-1131</i>	EPHS No. <i>HOT 1773</i>	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: <i>10/30/25</i>
MO 580-1814 (11-14)			



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

TIME IN 1130	TIME OUT 1200
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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Brian Berry</i>	PERSON IN CHARGE: <i>Leanney Butters</i>
ADDRESS: <i>125 College</i>	COUNTY: <i>Taylor</i>	
CITY/ZIP: <i>Licking 65542</i>	PHONE: <i>573/674/4891</i>	FAX:
P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L		
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> RESTAURANT <input checked="" type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS		
PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> 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						
IN OUT N/A	Food separated and protected				The letter to the left of each item indicates that item's status at the time of the inspection.		
IN OUT N/A	Food-contact surfaces cleaned & sanitized				IN = in compliance	OUT = not in compliance	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				N/A = not applicable	N/O = not observed	
					COS = Corrected On Site	R = Repeat Item	

#### 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: <i>Xuan Berry</i>	Date: <i>3/13/25</i>		
Inspector: <i>2 LBN</i>	Telephone No. <i>417/674/4131</i>	EPHS No. <i>1273</i>	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Follow-up Date: _____



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

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 PRIOR TO THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO CORRECT THESE DEFICIENCIES WITHIN THE TIME SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Lickey Elementary</i>	OWNER: <i>Brian Berry</i>	PERSON IN CHARGE: <i>Jeanette Butcher</i>			
ADDRESS: <i>123 College St</i>		COUNTY: <i>Texas</i>			
CITY/ZIP: <i>Lickey 65552</i>	PHONE: <i>573/674/4891</i>	FAX: <i></i>			
ESTABLISHMENT TYPE					
<input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT	<input type="checkbox"/> C. STORE <input checked="" type="checkbox"/> SCHOOL	<input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> DELI <input type="checkbox"/> TEMP. FOOD	<input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN	<input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS
PURPOSE					
<input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other					
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY	<input type="checkbox"/> NON-COMMUNITY Date Sampled _____	<input type="checkbox"/> PRIVATE Res.	

#### 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 to 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
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 Procedures and HACCP plan
	Protection from Contamination				The letter to the left of each item indicates that item's status at the time of inspection.
IN OUT N/A	Food separated and protected				IN = in compliance N/A = not applicable COS = Corrected On Site
IN OUT N/A	Food-contact surfaces cleaned & sanitized				OUT = not in compliance N/O = not observed R = Repeat Item
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
		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	COS		✓		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:

Date: 21/9/20

Inspector: *R. P. B.*

Telephone No. *417/1961/4131*

EPHS No. *1993*

Follow-up:  Yes  
Follow-up Date:



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

TIME IN	TIME
---------	------

PAGE 2 of 2

ESTABLISHMENT NAME	ADDRESS	CITY	ZIP
Lickins Elementary	125 College St	Bixby	65
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/ LOCATION	
Chili 1 Hot	135	Chop	
Chili 2 Hot	141	Hot	
Apple Slides 3 hot	38	Juice	
Cold Hot	39	Cheese	
Chili Stew	37	Ranch	
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 <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.		
	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.		
4-601.16	Improper order of Sanitizer - Wash - Rinse - Sanitizer we do not mix Bleach + soap wtr.		

**EDUCATION PROVIDED OR COMMENTS**

Person in Charge /Title: <i>Janette Galtersas Food Service Supervisor</i>		Date: <i>2/19/24</i>
Inspector: <i>J. Galtersas</i>	Telephone No. <i>417/967-4131</i>	EPHS No. <i>1773</i>
		Follow-up: <input type="checkbox"/> Yes Follow-up Date:



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

TIME IN	TIME
PAGE of	

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE OWNER OR OPERATOR WITHIN THE TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE. FAILURE TO CORRECT THESE DEFICIENCIES WITHIN THE TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Brian Burz</i>	PERSON IN CHARGE: <i>Janette Burz</i>				
ADDRESS: <i>125 College St</i>		COUNTY: <i>Texas</i>				
CITY/ZIP: <i>Licking 65552</i>	PHONE: <i>573/674/4891</i>	FAX: <i></i>				
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> RESTAURANT		<input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL	<input type="checkbox"/> CATERER <input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> DELI <input type="checkbox"/> TEMP. FOOD	<input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN	<input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other						
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY	<input type="checkbox"/> NON-COMMUNITY Date Sampled _____			
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 to 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
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 and 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 Procedures and HACCP plan
	Protection from Contamination				
IN OUT N/A	Food separated and protected				The letter to the left of each item indicates that item's status at the time of inspection.
IN OUT N/A	Food-contact surfaces cleaned & sanitized				IN = in compliance N/A = not applicable COS = Corrected On Site
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				OUT = not in compliance N/O = not observed R = Repeat Item

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
		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:

Date:

*Janette Burz* 9/15/23

Inspector: *Janette Burz*

Telephone No.

*417-967-4431*

EPHS No.

*1773*

Follow-up:

Yes

Follow-up Date:



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

TIME IN	TIME OUT
PAGE _____ of _____	

ESTABLISHMENT NAME <i>Licking Elementary</i>	ADDRESS <i>125 College St</i>	CITY <i>—</i>	ZIP <i>—</i>
FOOD PRODUCT/LOCATION <i>French Fries Chex B 13 a Sausage Hambruger Preptin Bacon Milk</i>	TEMP. <i>38 38 741 139 33</i>	FOOD PRODUCT/ LOCATION <i>Chex milk Juice Fruit cocktail</i>	TEMP. <i>05 36 — —</i>
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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>		
	<i>NO Priority Violations</i>		
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). <b>These items are to be corrected by the next regular inspection or as stated.</b>		
4-501.114	<i>Insufficient Sanitation in Dish machine - Switches go down not up</i>		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Diane Buthers Food Service Super.</i>	Date: <i>9/15/23</i>		
Inspector: <i>DK</i>	Telephone No. <i>407/741/431</i>	EPHS No. <i>1773</i>	Follow-up: <input type="checkbox"/> Yes
Follow-up Date: <i>—</i>			



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

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 OWNER OR OPERATOR PRIOR TO THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO CORRECT THESE DEFICIENCIES WITHIN THE TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Christine Wright Supt</i>	PERSON IN CHARGE: <i>Sandy Hardin</i>
ADDRESS: <i>125 College St</i>	COUNTY: <i>Texas</i>	
CITY/ZIP: <i>Licking 65542</i>	PHONE: <i>573/674/4891</i>	FAX:
P.H. PRIORITY : <input type="checkbox"/> H <input type="checkbox"/> L		
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS		
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____ Resu

#### 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 to 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
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 Procedures and HACCP plan
	Protection from Contamination				The letter to the left of each item indicates that item's status at the time of inspection.
IN OUT N/A	Food separated and protected				IN = in compliance N/A = not applicable COS = Corrected On Site
IN OUT N/A	Food-contact surfaces cleaned & sanitized				OUT = not in compliance N/O = not observed R = Repeat Item
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
		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	COS		✓		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>Christine Wright Supt</i>	Date: <i>2/24/23</i>
Inspector: <i>Christine Wright Supt</i>	Telephone No. <i>417/961/4131</i>
	EPHS No. <i>1773</i>
	Follow-up: <input type="checkbox"/> Yes
	Follow-up Date:



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

TIME IN \_\_\_\_\_  
TIME OUT \_\_\_\_\_  
PAGE 2 of 2

ESTABLISHMENT NAME <i>Licking Elementary</i>	ADDRESS <i>125 College St</i>	CITY <i>Licking</i>	ZIP <i>6</i>
FOOD PRODUCT/LOCATION <i>Copys Hot Linc Chicken nuggets Norma Dumplins 3 bag lunches Salad - - - Salad - - -</i>	TEMP. <i>151 155 40 40 39</i>	FOOD PRODUCT/ LOCATION <i>Choc milk Wht milk Choc milk Wht milk</i>	<i>3 bag lunches - - - -</i>
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 <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.		
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 <b>are to be corrected by the next regular inspection or as stated.</b>		
3-304.10	<i>- wiping cloths not stored in sanitized - milk in 1st thing change out is needed</i>		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Janette Butnerus</i>	Date: <i>2/24/23</i>		
Inspector: <i>JK</i>	Telephone No. <i>417/961/4121</i>	EPHS No. <i>1173</i>	Follow-up: <input type="checkbox"/> Yes Follow-up Date:



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

TIME IN 10:30 TIME OUT  
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 INSPECTOR OR THE ESTABLISHMENT OWNER WITHIN THE TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE. FAILURE TO DO SO MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Christine Wright Supt</i>	PERSON IN CHARGE: <i>Sandy Maden</i>
ADDRESS: <i>125 College St</i>		COUNTY: <i>Texas</i>
CITY/ZIP: <i>Licking 65542</i>	PHONE: <i>573/674/4871</i>	FAX: <i></i>
P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> L		
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> TAVERN <input type="checkbox"/> MOBILE VENDORS		
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY Date Sampled _____ Result _____

#### 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 to 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
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 Procedures and HACCP plan
	Protection from Contamination				The letter to the left of each item indicates that item's status at the time of inspection.
IN OUT N/A	Food separated and protected				IN = in compliance N/A = not applicable COS = Corrected On Site
IN OUT N/A	Food-contact surfaces cleaned & sanitized				OUT = not in compliance N/O = not observed R = Repeat Item
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
		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	CCS		✓		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:

Date:

10/20/22

Inspector: <i>Sandy Maden</i>	Telephone No. <i>913/967/4131</i>	EPHS No. <i>1777</i>	Follow-up: <input type="checkbox"/> Yes
-------------------------------	-----------------------------------	----------------------	---

Follow-up Date:



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

TIME IN	TIME
PAGE 2 of 2	

ESTABLISHMENT NAME <i>Licking Elementary</i>	ADDRESS <i>125 College St</i>	CITY <i>Licking</i>	ZIP <i>65</i>
FOOD PRODUCT/LOCATION <i>Pizza Pouches</i>	TEMP. <i>201</i>	FOOD PRODUCT/LOCATION <i>Slappy Joe Saus 05 3 day</i>	
<i>Wm.</i>	<i>135</i>	<i>Choc milk</i>	<i>3rd 34</i>
<i>Chex mix</i>	<i>39</i>	<i>Wht milk</i>	
<i>Wht m.fl.</i>	<i>38</i>		
Ranch	3 bay h.fl.	35	
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 <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.		
7-104.11	<i>Sanitizer WAY too strong - - 2 m<sup>1</sup>/ gallon - give pippetts to mix &amp; only going to make 1 gallon at a time</i>		
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.		
	<i>No Core</i>		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Sandy Maddox</i>	Date: <i>10/20/22</i>		
Inspector: <i>2 PHS</i>	Telephone No. <i>417/967/4121</i>	EPHS No. <i>1773</i>	Follow-up: <input type="checkbox"/> Yes Follow-up Date:



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

TIME IN	TIME OUT
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 EXT 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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: *Licking Elementary School* OWNER: *Christine Wright Supt.* PERSON IN CHARGE: *Sandy Maddox*  
ADDRESS: *25 College St* COUNTY: *TEXAS*

CITY/ZIP: *Licking, Mo. 65547* PHONE: *573-674-4891* FAX: *-* P.H. PRIORITY:  H  M

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 <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY	Date Sampled _____	PRIVATE 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	CC
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 OUT N/A	Food separated and protected				IN = in compliance	
IN OUT N/A	Food-contact surfaces cleaned & sanitized				N/A = not applicable	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				COS = Corrected On Site	
					OUT = not in compliance	
					N/O = not observed	
					R = Repeat Item	

#### 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
✓		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: *Sandy Maddox*

Date: *11/27/22*

Inspector: <i>Sandy Maddox</i>	Telephone No. <i>417-667-4131</i>	EPHS No. <i>920</i>	Follow-up: <input type="checkbox"/> Yes
--------------------------------	-----------------------------------	---------------------	---



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

TIME IN	TIME OUT
PAGE 2 of 2	

ESTABLISHMENT NAME <i>Licking Elementary School</i>	ADDRESS <i>125 College St.</i>	CITY <i>Licking, Mo.</i>	ZIP <i>65542</i>
FOOD PRODUCT/LOCATION <i>2.22% / Hot C.R.B. Milk / Service Fruit Juice / FRUIT 3.00</i>	TEMP. <i>175° 38° 36°</i>	FOOD PRODUCT/ LOCATION <i>BUTTER / 3.00.</i>	TEMP. <i>37°</i>

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.  <i>NO VIOLATIONS</i>		
Code Reference	CORE ITEMS	Correct by (date)	Initial
	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.		
EDUCATION PROVIDED OR COMMENTS			

Person in Charge /Title: <i>Emily Spader</i>	Date: <i>11/27/22</i>
Inspector: <i>Connie H. Martin</i>	Telephone No. <i>417-967-4131</i> EPHS No. <i>920</i>
MO 580-1814 (11-14)	Follow-up: <input type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date:



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

TIME IN	TIME OUT
11:30	12:00
PAGE 2	of 2

ESTABLISHMENT NAME <i>Licking Elementary</i>		ADDRESS <i>125 College</i>	CITY <i>Licking</i>	ZIP <i>65542</i>
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION	TEMP.
Choc	<u>Dar</u>	40	Front St. St.	Out
Wht		41	Side	
Milk	Front 3 bays	38	3 bays #2	37
Trt		39		
Orang		37		
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 <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.			Correct by (date) Initial
	<i>no violations</i>			
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) Initial
	<i>no violations</i>			

**EDUCATION PROVIDED OR COMMENTS**

Person in Charge /Title: John Hall Date: 3/18/25  
Inspector: R. M. Telephone No. 417/907-4121 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	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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Licking Elementary</i>	OWNER: <i>Brian Berry Principal</i>	PERSON IN CHARGE: <i>Jeanette Butthers</i>
ADDRESS: <i>125 College</i>		COUNTY: <i>Texier</i>
CITY/ZIP: <i>Licking 65542</i>	PHONE: <i>573/674/4891</i>	FAX: <i></i>
		P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L

ESTABLISHMENT TYPE					
<input type="checkbox"/> BAKERY	<input type="checkbox"/> C. STORE	<input type="checkbox"/> CATERER	<input type="checkbox"/> DELI	<input type="checkbox"/> GROCERY STORE	<input type="checkbox"/> INSTITUTION
<input type="checkbox"/> RESTAURANT	<input checked="" type="checkbox"/> SCHOOL	<input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> TEMP. FOOD	<input type="checkbox"/> TAVERN	<input type="checkbox"/> MOBILE VENDORS

PURPOSE					
<input type="checkbox"/> Pre-opening	<input checked="" type="checkbox"/> Routine	<input type="checkbox"/> Follow-up	<input type="checkbox"/> Complaint	<input type="checkbox"/> Other	

FROZEN DESSERT	SEWAGE DISPOSAL	WATER SUPPLY		
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> Not Applicable		
License No. _____	<input type="checkbox"/> PUBLIC	<input checked="" type="checkbox"/> COMMUNITY	<input type="checkbox"/> NON-COMMUNITY	<input type="checkbox"/> PRIVATE
	<input type="checkbox"/> 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 OUT N/A	Food separated and protected				IN = in compliance	OUT = not in compliance	
IN OUT N/A	Food-contact surfaces cleaned & sanitized				N/A = not applicable	N/O = not observed	
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				COS = Corrected On Site	R = Repeat Item	

#### 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: <i>Jeanette Butthers</i>	Date: <i>9/24/24</i>
Inspector: <i>Re-PH</i>	Telephone No.: <i>417/961/4131</i>
EPHS No. <i>1773</i>	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date:



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

TIME IN	TIME OUT
PAGE	of

ESTABLISHMENT NAME <i>Licking Elementary</i>		ADDRESS <i>125 College</i>		CITY <i>Licking</i>	ZIP <i>65542</i>
FOOD-PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCATION		TEMP.
Choc.	Dairy	35	Sulfd	36g	38
White	-	34	Juice	-	38
Pasta	Hut	141			
Cereals	36g 1	39			
Choc	36g 2	37			
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 <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.			Correct by (date) Initial
<i>No violations</i>					
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) Initial
<i>No violations</i>					
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: <i>Jeanette Butcher</i>				Date: <i>9/24/24</i>	
Inspector: <i>Jeanette Butcher</i>		Telephone No. <i>417/967-4431</i>	EPHS No. <i>1773</i>	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
				Follow-up Date:	