



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 CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>Coopers Kitchen</i>		OWNER: <i>Brenda Cooper</i>		PERSON IN CHARGE: <i>Brenda Cooper</i>	
ADDRESS: <i>101 N Hwy 17</i>		CITY/ZIP: <i>Summersville 65571</i>		COUNTY: <i>Texas</i>	
PHONE: <i>417/247/9674</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.

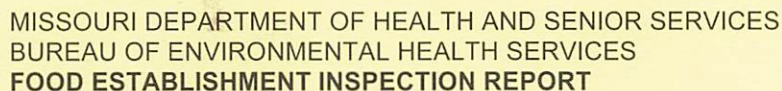
Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN/ OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
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 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: <i>B. Cooper</i>			Date: <i>5/12/26</i>		
Inspector: <i>[Signature]</i>	Telephone No. <i>417/247/4131</i>	EPHS No. <i>1773</i>	Follow-up: ☒ Yes ☐ No	Follow-up Date: <i>5/29/26</i>	



TIME IN 1130	TIME OUT 1200
PAGE 2 of 2	

ESTABLISHMENT NAME		ADDRESS		CITY	ZIP
Coopers Kitchen		101 N Hwy 17		Summersville	65571
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCATION		TEMP.
Milk	Wait Fridge	38	Mayo	Prep table	38
Butter		37	Milk		37
Hamburger	2 day	35	Cellar	Nat'l. i.	37
Cheese		36	Old Fridge	Old Fridge	44
Hot		35	Refr		47
Code Reference	PRIORITY ITEMS				Correct by (date)
	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.				Initial
	no priority				
Code Reference	CORE ITEMS				Correct by (date)
	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.				Initial
4-301.11	Old Refrigerator not maintaining temperature → Check seals, may need to clean coils clean → Keep food in traps				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: <i>x B Cooper</i>				Date: <i>5/12/26</i>	
Inspector: <i>01/11/26</i>	Telephone No. <i>412/513/431</i>	EPHS No. <i>17/3</i>	Follow-up: ☒ Yes ☐ No Follow-up Date: <i>4/28/26</i>		



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 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>Coopers Kitchen</i>	OWNER: <i>Bradley Cooper</i>	PERSON IN CHARGE: <i>Bradley Cooper</i>
ADDRESS: <i>101 N Hwy 17</i>		COUNTY:
CITY/ZIP: <i>Summersville 65571</i>	PHONE: <i>417/247/9674</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/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		
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 N/A = not applicable COS = Corrected On Site OUT = not in compliance N/O = not observed 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: <i>Bradley Cooper</i>	Date: <i>10/4/25</i>		
Inspector: <i>[Signature]</i>	Telephone No. <i>417/247/413</i>	EPHS No. <i>1773</i>	Follow-up: ☐ Yes ☒ No
			Follow-up Date:

[illegible]



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

TIME IN 100	TIME OUT 1:30
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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: <u>Summersville-H Coopers Kitchen</u>		OWNER: <u>Brooklyn Cooper</u>	PERSON IN CHARGE: <u>Brooklyn Cooper</u>
ADDRESS: <u>101 N Hwy 17</u>		COUNTY: <u>Texas</u>	
CITY/ZIP: <u>Summersville 65571</u>	PHONE: <u>417/241/9679</u>	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 _____

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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			IN OUT N/A	Consumer Advisory		
IN OUT N/O	Hands clean and properly washed				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	COS		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		
✓		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: <u>Brooklyn Cooper</u>		Date: <u>10/7/25</u>	
Inspector: <u>711</u>	Telephone No. <u>417/241/4131</u>	EPHS No. <u>1873</u>	Follow-up: ☐ Yes ☐ No
		Follow-up Date: <u>10/14/25</u>	



ESTABLISHMENT NAME <i>Coopers Kitchen</i>		ADDRESS <i>101 N Hwy 17</i>		CITY <i>Summersville</i>	ZIP <i>65571</i>
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
<i>Juice</i>	<i>Fant</i>	<i>39</i>	<i>Saled</i>	<i>#1 Ref</i>	<i>38</i>
<i>milk</i>		<i>28</i>	<i>Chicken</i>	<i>#1 -</i>	<i>37</i>
<i>Gravy</i>	<i>Hot</i>	<i>151</i>	<i>tomato</i>	<i>#2 Ref</i>	<i>40</i>
<i>Hamburger</i>	<i>2 Burg</i>	<i>35</i>	<i>Ranch</i>	<i>#3 Ref</i>	<i>48</i>
<i>Chicken</i>	<i>-</i>	<i>35</i>	<i>tomato</i>		<i>46</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 MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.		

[illegible]

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.		

[illegible]

EDUCATION PROVIDED OR COMMENTS	

Person in Charge /Title: <i>x B. [unclear] Court</i>			Date: <i>10/8/25</i>
Inspector: <i>2-12 [unclear]</i>	Telephone No. <i>407/961/4131</i>	EPHS No. <i>1713</i>	Follow-up: ☒ Yes ☐ No Follow-up Date: <i>10/16/25</i>
MO 580-1814 (11-14)	DISTRIBUTION: WHITE - OWNER'S COPY	CANARY - FILE COPY	E6.37A



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

TIME IN 12 00	TIME OUT 12 28
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.

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ADDRESS: <i>101 N Hwy 17</i>	COUNTY: <i>Texas</i>	
CITY/ZIP: <i>Summersville 65571</i>	PHONE: <i>417/247/9676</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		
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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 N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
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		Adequate equipment for temperature control					Gloves used properly		
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		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>Bradley Cooper</i>	Date: <i>4/17/25</i>		
Inspector: <i>R. P. H.</i>	Telephone No.: <i>417/567/1131</i>	EPHS No.: <i>1777</i>	Follow-up: ☐ Yes ☒ No Follow-up Date:

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

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

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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: <i>Coopers Kitchen</i>	OWNER: <i>Bradley Cooper</i>	PERSON IN CHARGE: <i>Brooklyn Cooper</i>
ADDRESS: <i>101 N Hwy 17</i>	COUNTY: <i>Texas</i>	
CITY/ZIP: <i>Summersville 65571</i>	PHONE: <i>417/247/9670</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			
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: <i>Jackie Lee</i>	Date: <i>7/17/24</i>		
Inspector: <i>7/17/24</i>	Telephone No. <i>417/247/9131</i>	EPHS No. <i>1723</i>	Follow-up: ☐ Yes ☒ No
			Follow-up Date:

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

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ESTABLISHMENT NAME <i>Compos's Kitchen</i>	ADDRESS <i>101 N Hwy 17</i>	CITY <i>Summersville</i>	ZIP <i>65571</i>
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/LOCATION	TEMP.
<i>Pie H.</i>	<i>40</i>		
<i>D. H.</i>	<i>31</i>		

[illegible][illegible]

EDUCATION PROVIDED OR COMMENTS			
Person in Charge /Title: <i>Jackie Rice</i>			Date: <i>7/17/21</i>
Inspector: <i>201/1/201/1/201/1</i>	Telephone No. <i>411/331/431</i>	EPHS No. <i>1377</i>	Follow-up: ☐ Yes ☒ No Follow-up Date: <i>7/17/21</i>



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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: <u>Coopers Kitch.</u>	OWNER: <u>Bradley Cooper</u>	PERSON IN CHARGE: <u>Bradley Cooper</u>
ADDRESS: <u>101 N Hwy 17</u>	COUNTY: <u>Texas</u>	
CITY/ZIP: <u>Summersville</u>	PHONE: <u>417/247/9670</u>	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 _____

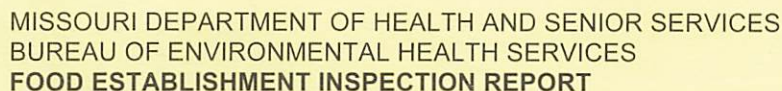
RISK FACTORS AND INTERVENTIONS

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			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			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: <u>Jackie Lee</u>		Date: <u>7/9/24</u>	
Inspector: <u>2 PH</u>	Telephone No. <u>417/967/431</u>	EPHS No. <u>1773</u>	Follow-up: ☒ Yes ☐ No
		Follow-up Date: <u>7/19/24</u>	



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ESTABLISHMENT NAME <i>Cooper's Kitchen</i>		ADDRESS <i>101 N Hwy 17</i>		CITY <i>Summersville</i>	ZIP <i>65571</i>
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCATION		TEMP.
<i>Green beans</i>	<i>Stovetop</i>	<i>135</i>	<i>Ambras is</i>	<i>Wegbych Fridge</i>	<i>40</i>
<i>Beef Frito</i>	<i>Mushroom</i>	<i>40</i>	<i>Peppers</i>	<i>Wegbych</i>	<i>40</i>
<i>Rench</i>	<i>Beef-Fridge</i>	<i>38</i>	<i>Relish</i>	<i>Front Fridge</i>	<i>45</i>
<i>Hamburger</i>	<i>Cheese Frito</i>	<i>32</i>	<i>Cottage Cheese</i>		<i>45</i>

[illegible][illegible]

EDUCATION PROVIDED OR COMMENTS	

Person in Charge /Title: <i>X Jackson Rev</i>			Date: <i>7/9/24</i>
Inspector: <i>X Jackson Rev</i>	Telephone No: <i>412/967/4131</i>	EPHS No. <i>1723</i>	Follow-up: ☒ Yes ☐ No Follow-up Date: <i>7/16/24</i>