



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 CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: <i>KTR Trading Post</i>	OWNER: <i>JR Knutzer</i>	PERSON IN CHARGE: <i>Elieen Wagner</i>
ADDRESS: <i>199 W Hwy B</i>	CITY/ZIP: <i>Raymondville 65555</i>	COUNTY: <i>Texas</i>
PHONE: <i>401/945 7/6542</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 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:	Date: <i>9/4/26</i>		
Inspector: <i>[Signature]</i>	Telephone No. <i>417/967-4131</i>	EPHS No. <i>17713</i>	Follow-up: ☐ Yes ☒ No
			Follow-up Date:



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
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TIME IN	11:00	TIME OUT	11:45
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: <u>AKK Trading Post</u>		OWNER: <u>DR Knetzer</u>	PERSON IN CHARGE: <u>Elaine Wagner</u>	
ADDRESS: <u>199 W Hwy 13</u>			COUNTY: <u>Texas</u>	
CITY/ZIP: <u>Raymondville 45555</u>		PHONE: <u>417/457/6542</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/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		
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		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
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		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge / Title: <u>X Elaine Wagner</u>			Date: <u>1/29/26</u>		
Inspector: <u>R JH</u>	Telephone No. <u>417/961/4131</u>	EPHS No. <u>1773</u>	Follow-up: ☐ Yes ☒ No	Follow-up Date: _____	

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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>K & R Trading Post</i>	OWNER: <i>JR Knetzer</i>	PERSON IN CHARGE: <i>Elaine Wegner</i>
ADDRESS: <i>199 Hwy 137</i>		COUNTY:
CITY/ZIP: <i>Raymoreville 65555</i>	PHONE: <i>417/4516542</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 _____

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☒ IN ☐ OUT	Adequate handwashing facilities supplied & accessible	<i>COS</i>		☒ IN ☐ OUT ☐ N/O ☐ N/A	Pasteurized foods used, prohibited foods not offered		
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☒ 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		
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					☒		Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Joanna Heath</i>	Date: <i>8/31/29</i>		
Inspector: <i>JM</i>	Telephone No.: <i>417/9414171</i>	EPHS No.: <i>1713</i>	Follow-up: ☒ Yes ☐ No Follow-up Date: <i>9/4/29</i>



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

TIME IN 2 TIME OUT 2
PAGE 1120 of 1145

ESTABLISHMENT NAME		ADDRESS		CITY		ZIP	
K&R Trading Post		159 W Hwy B		Raymondville		65555	
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.		
Milk		38	Diet		155		
Ham		32	Ham		418		
Bacon		39	Pepperoni		37		
Milk		38	Pepperoni		38		
Choc milk		38	Chicken nug		40		
Cold tubette							
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.							
NO violations							
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.							
8-302.13 - Food Contact Surfaces							
No violations							
EDUCATION PROVIDED OR COMMENTS							
Person in Charge /Title: Eileen Wayne					Date: 1/27/20		
Inspector: R. P. H.		Telephone No. 417/967-4178		EPHS No. 1113			
Follow-up: ☐ Yes ☒ No					Follow-up Date:		