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

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: Circle B Store
OWNER: Robin Staples
PERSON IN CHARGE: Same
ADDRESS: P.O. Box 250
CITY/ZIP: Eminence, MO 65461
PHONE: 577-226-3618
FAX: P.H. PRIORITY: M

EMERGENCY RESPONSE: O
LICENSED TO OFFER: • BAKERY • RESTAURANT • CATERER • SCHOOL • SENIOR CENTER • SUMMER F.P. • DELI • GROCERY STORE • INSTITUTION • TEMP. FOOD
PURPOSE: • Routine • Follow-up • Complaint • Other
FROZEN DESSERT: Approval Disapproved Not Applicable
SEWAGE DISPOSAL: Public Private
WATER SUPPLY: Non-Community Private

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

Compliance Demonstration of Knowledge COS R Compliance Potentially Hazardous Foods COS R
IN OUT Person in charge present, demonstrates knowledge, and performs duties. Employee Health
IN OUT Management awareness; policy present IN OUT N/O N/A
IN OUT Proper use of reporting, restriction and exclusion IN OUT N/O N/A
IN OUT Good Hygienic Practices IN OUT N/A
IN OUT Proper eating, tasting, drinking or tobacco use IN OUT N/O N/A
IN OUT No discharge from eyes, nose and mouth IN OUT N/O N/A
Preventing Contamination by Hands
IN OUT Hands clean and properly washed IN OUT N/A
IN OUT No bare hand contact with ready-to-eat foods or approved alternate method properly followed IN OUT N/O N/A
IN OUT Adequate handwashing facilities supplied & accessible IN OUT N/O N/A
Approved Source
IN OUT Food obtained from approved source IN OUT N/A
IN OUT Food received at proper temperature IN OUT N/A
IN OUT Food in good condition, safe and unadulterated IN OUT N/A
IN OUT Required records available: shellstock tags, parasite destruction IN OUT N/A
Protection from Contamination
IN OUT Food separated and protected IN OUT N/A
IN OUT Food-contact surfaces cleansed & sanitized IN OUT N/A
IN OUT 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 Pasteurized eggs used where required IN OUT N/A
IN OUT Water and ice from approved source IN OUT N/A
Thermometers provided and accurate
IN OUT Food Temperature Control
IN OUT Adequate equipment for temperature control IN OUT N/A
IN IN Approved thawing methods used
IN OUT In-use utensils: properly stored
IN OUT Food packaging: freshly prepared
IN OUT Food labeling: original container
Food Identification
IN OUT In-use utensils: properly stored
IN OUT Food packaging: freshly prepared
IN OUT Food labeling: original container
Prevention of Food Contamination
IN OUT Insects, rodents, and animals not present IN OUT N/A
IN OUT Contamination prevented during food preparation, storage and display IN OUT N/A
IN OUT Personal cleanliness: clean outer clothing, hair restraint, fingernail and jewelry IN OUT N/A
IN OUT Wiping cloths: properly used and stored
IN OUT Fruits and vegetables washed before use

Person in Charge/Title: Date: 7/27/16
Inspector: Telephone No: 66-24131
EPhS. No.: 10724-0
Follow-up: Yes No
Follow-up Date:
<table>
<thead>
<tr>
<th>Code</th>
<th>Reference</th>
<th>PRIORITY ITEMS</th>
<th>Correct by</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>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.</td>
<td></td>
<td>(date)</td>
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<td></td>
<td>No VIOLATIONS</td>
<td></td>
<td>(date)</td>
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<table>
<thead>
<tr>
<th>Code</th>
<th>Reference</th>
<th>CORE ITEMS</th>
<th>Correct by</th>
<th>Initial</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>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.</td>
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<td>(date)</td>
<td></td>
</tr>
</tbody>
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EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: ___________________________  Date: 7/27/16

Inspector: ___________________________  Telephone No.: 501-413  EPHS No.: 841  Follow-up: No

Follow-up Date: ___________________________