



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

TIME IN 12:40 TIME OUT 1:15
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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: Lusey's General Store OWNER: Corp PERSON IN CHARGE: Jolene Shannell
 ADDRESS: 307 N Hwy 19 COUNTY: Shannon
 CITY/ZIP: Winona 65588 PHONE: 572/325/9298 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	Person in charge present, demonstrates knowledge, and performs duties			IN	Proper cooking, time and temperature		
	Employee Health			IN	Proper reheating procedures for hot holding		
IN	Management awareness; policy present			IN	Proper cooling time and temperatures		
IN	Proper use of reporting, restriction and exclusion			IN	Proper hot holding temperatures		
	Good Hygienic Practices			IN	Proper cold holding temperatures		
IN	Proper eating, tasting, drinking or tobacco use			IN	Proper date marking and disposition		
IN	No discharge from eyes, nose and mouth			IN	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN	Hands clean and properly washed			IN	Consumer advisory provided for raw or undercooked food		
IN	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN	Adequate handwashing facilities supplied & accessible			IN	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN	Food obtained from approved source			IN	Food additives: approved and properly used		
IN	Food received at proper temperature			IN	Toxic substances properly identified, stored and used		
IN	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN	Required records available: shellstock tags, parasite destruction			IN	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	Food separated and protected						
IN	Food-contact surfaces cleaned & sanitized						
IN	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: 11/7/26
 Inspector: R. P. [Signature] Telephone No. 417/967/4131 EPHS No. 1773
 Follow-up: Yes No
 Follow-up Date: 11/14/26



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TIME IN 1245	TIME OUT 180
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ESTABLISHMENT NAME Casper's General Store		ADDRESS 307 N Hwy 19		CITY Winona	ZIP 65588
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
OJ Main Walkin		38	Pepper		36
Milk =		37	Pepperoni		37
Choc =		38	Hot		143
Cheese 2 Walkin		36	Olive		38
Bread		36	Pepper		38

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
3-701, 11	Food that is unsafe or discarded adulterated not properly discarded. - Open Bag of Ice in Walkin Freezer Floor - Mix of drinks piled in one of many sinks OS of Main Walkin door. → Clean up ice → Find a better place for drink bottles damaged drink bottles		

Code Reference	CORE ITEMS	Correct by (date)	Initial
3-305, 11	Ice storage on floor in freezer Must be off the floor Food or drinks on floor of other walkin as well		
3-304, 10	Wiping cloths not stored in sanitizer Be sure to make up sanit water + keep wet towels to sanitize as you work.	CCS	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: X	Date: 1/7/25
Inspector: [Signature]	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Telephone No. 417/961/4131	Follow-up Date: 1/14/26
EPHS No. 1777	