



**RETAIL FOOD ESTABLISHMENT  
INSPECTION REPORT**  
State Form 48669 (R2/2-05)  
SDH Form 51-0001

**GRANT COUNTY HEALTH DEPT.  
FOOD DIVISION  
401 SOUTH ADAMS STREET  
MARION, IN 46953**

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name <b>AMERICAN LEGION # 95</b>	Telephone Number <b>(765) 674-8623</b>	Date of Inspection (mm/dd/yr) <b>7-23-19</b>	ID # <b>27</b>
Establishment Address (number and street, city, state, ZIP code) <b>424 S MAIN ST. Jonesboro</b>	( ) Owner		
Owner <b>MEMBERS</b>	Purpose: <input checked="" type="radio"/> Routine	Follow-up <b>NO</b>	Release Date <b>8-3-19</b>
Owner's Address <b>SAME</b>	2. Follow-up	Summary of Violations: <b>C 1 NC 3 R 1</b>	
Person in Charge <b>* Danielle Odom</b>	3. Complaint		
Responsible Person's E-mail <b>N/A</b>	4. Pre-Operational	Menu Type (See back of page)	
Certified Food Handler <b>NEED CFH</b>	5. Temporary	<b>1 2 3 X 4 5</b>	
	6. HACCP		
	7. Other (list)		

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/C	R	Narrative	To Be Corrected By
298	NC		INTERIOR OF MICROWAVE IS SOILED WITH FOOD DEBRIS (NOT IN USE)	TODAY
295	NC		THE DRIP TRAYS OF STOVE AND FLAT Plate GRILL ARE SOILED WITH FOOD DEBRIS.	TODAY
345	C		THE HANDSINK IN Kitchen HAS 2 Plastic containers IN HANDSINK "Bar"	TODAY
245	NC	X	4- 3 soiled wiping cloths laying on equipment not in a LINEN BASKET after 1 USE OR IN Sanitize PAIL	TODAY

Received by (name and title printed): <b>* Danielle Odom</b>	Inspected by (name and title printed): <b>Rick Carr - FSTO</b>
Received by (signature): <b>* Danielle Odom</b>	Inspected by (signature): <b>Rick Carr FSTO</b>
cc:	cc: