



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

|         |            |          |        |
|---------|------------|----------|--------|
| TIME IN | 8:43AM     | TIME OUT | 1:30PM |
| DATE    | 12/18/2023 | PAGE     | 1 of 5 |

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:<br>American Legion Post 133  | OWNER:<br>American Legion   | PERSON IN CHARGE:<br>Sarah Young - Manager   |
| ADDRESS:<br>98 Grand Ave   | ESTABLISHMENT NUMBER:   | COUNTY:<br>Perry-157   |
| CITY/ZIP:<br>Perryville, MO 63775  | PHONE:<br>(573) 547-2588  | FAX: N/A   |
| ESTABLISHMENT TYPE<br><input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input checked="" type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS<br><input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD |   | P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L   |
| PURPOSE<br><input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____   |   |  |
| FROZEN DESSERT<br><input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable<br>License No. _____  | SEWAGE DISPOSAL<br><input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE | WATER SUPPLY<br><input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE<br>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                                   |
|---|---|-----|---|--|---|-----|-------------------------------------|
| <input checked="" type="checkbox"/> OUT | Person in charge present, demonstrates knowledge, and performs duties                       |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Proper cooking, time and temperature                        |     |                                     |
| <input checked="" type="checkbox"/> OUT | <b>Employee Health</b>  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Proper reheating procedures for hot holding                 |     |                                     |
| <input checked="" type="checkbox"/> OUT | Management awareness; policy present  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Proper cooling time and temperatures                        |     |                                     |
| <input checked="" type="checkbox"/> OUT | Proper use of reporting, restriction and exclusion  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Proper hot holding temperatures                             |     |                                     |
| <input type="checkbox"/> IN             | <b>Good Hygienic Practices</b>  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Proper cold holding temperatures                            |     |                                     |
| <input type="checkbox"/> IN             | Proper eating, tasting, drinking or tobacco use   |     |   | IN OUT <input type="checkbox"/> N/A  | Proper date marking and disposition                         |     | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> OUT | No discharge from eyes, nose and mouth  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Time as a public health control (procedures / records)      |     |                                     |
| <input checked="" type="checkbox"/> OUT | <b>Preventing Contamination by Hands</b>  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | <b>Consumer Advisory</b>                                    |     |                                     |
| <input checked="" type="checkbox"/> OUT | Hands clean and properly washed   |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Consumer advisory provided for raw or undercooked food      |     |                                     |
| <input type="checkbox"/> IN             | No bare hand contact with ready-to-eat foods or approved alternate method properly followed |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | <b>Highly Susceptible Populations</b>                       |     |                                     |
| <input type="checkbox"/> IN             | Adequate handwashing facilities supplied & accessible                                       |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Pasteurized foods used, prohibited foods not offered        |     |                                     |
| <input checked="" type="checkbox"/> OUT | <b>Approved Source</b>  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | <b>Chemical</b>   |     |                                     |
| <input type="checkbox"/> IN             | Food obtained from approved source  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Food additives: approved and properly used                  |     |                                     |
| <input type="checkbox"/> IN             | Food received at proper temperature   |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Toxic substances properly identified, stored and used       |     |                                     |
| <input checked="" type="checkbox"/> OUT | Food in good condition, safe and unadulterated  |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | <b>Conformance with Approved Procedures</b>                 |     |                                     |
| <input type="checkbox"/> IN             | Required records available: shellstock tags, parasite destruction                           |     |   | IN OUT <input checked="" type="checkbox"/> N/A   | Compliance with approved Specialized Process and HACCP plan |     |                                     |
| <input checked="" type="checkbox"/> OUT | <b>Protection from Contamination</b>  |     |   | The letter to the left of each item indicates that item's status at the time of the inspection.<br>IN = in compliance    OUT = not in compliance<br>N/A = not applicable    N/O = not observed<br>COS=Corrected On Site    R=Repeat Item |   |     |                                     |
| <input checked="" type="checkbox"/> OUT | Food separated and protected  |     |   |  |   |     |                                     |
| <input checked="" type="checkbox"/> OUT | Food-contact surfaces cleaned & sanitized   |     |   |  |   |     |                                     |
| <input type="checkbox"/> 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 |
|-------------------------------------|-------------------------------------|---|-----|---|-------------------------------------|-----|---|-----|---|
| <input checked="" type="checkbox"/> |                                     | Pasteurized eggs used where required  |     |   | <input checked="" type="checkbox"/> |     | In-use utensils: properly stored  |     |   |
| <input checked="" type="checkbox"/> |                                     | Water and ice from approved source  |     |   | <input checked="" type="checkbox"/> |     | Utensils, equipment and linens: properly stored, dried, handled                       |     |   |
| <input checked="" type="checkbox"/> |                                     | <b>Food Temperature Control</b>   |     |   | <input checked="" type="checkbox"/> |     | Single-use/single-service articles: properly stored, used                             |     |   |
| <input checked="" type="checkbox"/> |                                     | Adequate equipment for temperature control  |     |   | <input checked="" type="checkbox"/> |     | Gloves used properly  |     |   |
| <input checked="" type="checkbox"/> |                                     | Approved thawing methods used   |     |   | <input checked="" type="checkbox"/> |     | <b>Utensils, Equipment and Vending</b>  |     |   |
| <input checked="" type="checkbox"/> |                                     | Thermometers provided and accurate  |     |   | <input checked="" type="checkbox"/> |     | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |     |   |
| <input checked="" type="checkbox"/> |                                     | <b>Food Identification</b>  |     |   | <input checked="" type="checkbox"/> |     | Warewashing facilities: installed, maintained, used; test strips used                 |     |   |
| <input checked="" type="checkbox"/> |                                     | Food properly labeled; original container   |     |   | <input checked="" type="checkbox"/> |     | Nonfood-contact surfaces clean  |     |   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <b>Prevention of Food Contamination</b>   |     |   | <input checked="" type="checkbox"/> |     | <b>Physical Facilities</b>  |     |   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Insects, rodents, and animals not present   |     |   | <input checked="" type="checkbox"/> |     | Hot and cold water available; adequate pressure                                       |     |   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Contamination prevented during food preparation, storage and display                |     |   | <input checked="" type="checkbox"/> |     | Plumbing installed; proper backflow devices   |     |   |
| <input checked="" type="checkbox"/> |                                     | Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry |     |   | <input checked="" type="checkbox"/> |     | Sewage and wastewater properly disposed   |     |   |
| <input checked="" type="checkbox"/> |                                     | Wiping cloths: properly used and stored   |     |   | <input checked="" type="checkbox"/> |     | Toilet facilities: properly constructed, supplied, cleaned                            |     |   |
| <input checked="" type="checkbox"/> |                                     | Fruits and vegetables washed before use   |     |   | <input checked="" type="checkbox"/> |     | Garbage/refuse properly disposed; facilities maintained                               |     |   |
| <input type="checkbox"/>            |                                     |   |     |   | <input checked="" type="checkbox"/> |     | Physical facilities installed, maintained, and clean                                  |     |   |

|   |                             |                              |   |
|---|-----------------------------|------------------------------|---|
| Person In Charge /Title: <i>Sarah Young</i> | Sarah Young - Manager       | Date:                        | 12/18/2023  |
| Inspector: <i>Reagan Mackay</i>             | Reagan Mackay / Jon Peacock | Telephone No. (573) 547-6564 | PHES No. 1847 / 880   |
|   |                             | Follow-up:                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|   |                             | Follow-up Date:              | 1/4/2024  |



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

|  |  |                         |                        |                                  |              |
|--|--|-------------------------|------------------------|----------------------------------|--------------|
| ESTABLISHMENT NAME<br>American Legion Post 133 |  | ADDRESS<br>98 Grand Ave |                        | CITY/ZIP<br>Perryville, MO 63775 |              |
| FOOD PRODUCT/LOCATION                          |  | TEMP. in ° F            | FOOD PRODUCT/ LOCATION |                                  | TEMP. in ° F |
|  |  |                         |                        |                                  |              |
|  |  |                         |                        |                                  |              |
|  |  |                         |                        |                                  |              |

| Code Reference | PRIORITY ITEMS<br>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.  | Correct by (date) | Initial |
|----------------|--|-------------------|---------|
| 6-501.111 (B)  | Observed: In the pantry, rodent droppings were observed on the flooring and shelving.<br>Note: All evidence of rodent activity must be removed.  | 1/4/2024          | SY      |
| 6-501.111 (B)  | Observed: Storage room in the hall, rodent droppings were observed on the floor, shelving and stored material.   | 1/4/2024          | SY      |
| 6-501.111 (B)  | Observed: In the kitchen, the bottom cabinets near the Alto-Shaam hot holding unit, rodent droppings were observed inside the cabinet.<br>Corrected: The manager cleaned up the rodent droppings during inspection.  | COS               | SY      |
| 6-501.111 (B)  | Observed: The walk-in freezer room, rodent droppings were observed on the floor, shelving and HVAC equipment.<br>Note: Partial box of raw potatoes was observed to have rodent droppings inside. This partial box of raw potatoes was voluntarily discarded. Grease spillage was still observed behind the bulk oil tanks. | 1/4/2024          | SY      |
| 6-501.111 (B)  | Observed: The main mens bathroom was observed to have rodent droppings inside the vanity.  | 1/4/2024          | SY      |
| 5-203.11 (A)   | Observed: No hand washing sink located in close proximity to the only working ice machine, located in a closet in the hall.<br>Comment: According to the manager, the ice machine is to be relocated from the Hall's closet to the pantry near the kitchen starting 12/18/2023.  | 1/4/2024          | SY      |

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|-----------------|--|-------------------|---------|
|                 | **Note: During the re-inspection, the manager showed us certain core items that had been corrected. These items that were scheduled to be corrected by 1/4/2024 were reviewed today, 12/18/2023 and the status is listed below.  |                   |         |
| 4-501.14 (A)    | Observed: Three compartment sink drain boards were observed soiled with food and grease like debris.<br>Note: The sink basins were observed clean, however the drain boards were not.  | 1/4/2024          | SY      |
| 3-305.11 (A)(2) | Observed: Food observed that could be disturbed by rodent activity should be stored in a food grade container that protected the food material from contamination.   | 1/4/2024          | SY      |
| 3-305.11 (A)(2) | Observed: Hand washing sink is splashing onto the True prep cooler during hand washing. Potential splash which could directly or indirectly contaminate food unit nearby.  | 1/4/2024          | SY      |
| 4-501.11 (C)    | Observed: Number 10 can opener was observed to have metal shavings and food like debris build up.<br>Note: Cutting or piercing parts of can openers shall be kept sharp to minimize the creation of metal fragments.   | 1/4/2024          | SY      |
|                 |  | 1/4/2024          | SY      |

EDUCATION PROVIDED OR COMMENTS

|  |                             |                          |
|--|-----------------------------|--------------------------|
| Person in Charge /Title: <i>Sarah Young</i> Sarah Young - Manager              |                             | Date: 12/18/2023         |
| Inspector: <i>Reagan Mackay</i> Reagan Mackay / Jon Peacock                    | Telephone No. (573)547-6564 | PHES No. 1847 / 880      |
| Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                             | Follow-up Date: 1/4/2024 |



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| ESTABLISHMENT NAME<br>American Legion Post 133 |              | ADDRESS<br>98 Grand Ave | CITY / ZIP<br>Perryville, MO 63775 |
| FOOD PRODUCT/LOCATION                          | TEMP. In ° F | FOOD PRODUCT/LOCATION   | TEMP. In ° F                       |
|  |              |                         |                                    |
|  |              |                         |                                    |
|  |              |                         |                                    |

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| 5-202.13       | Observed: A handheld spray nozzle was observed at the hand sink behind the bar in the Hall. The spray hose appears to extend below the flood rim of the sink and could cause a cross-connection issue. An air gap or ASSE rated back flow prevention device is needed.   | 1/4/2024          | SY      |
| 3-501.17 (A)   | Observed: Sliced tomatoes and cut ham were observed without date mark in the walk-in cooler.<br>Corrected: Manager date marked this items.<br>Note: The manager stated that these two items were prepared Sunday 12/17/2023.   | COS               | SY      |
| 5-203.11 (A)   | Observed: No hand washing sink at the restaurant bar however the three compartment sink is still behind the bar.<br>Note: According to the manager, a sink was in the process of being ordered during the re-inspection and the order will be placed by the end of the day 12/18/2023.<br>Note: Until the hand washing sink is installed the 3 compartment sink is going to be used solely for hand washing and all dishes will be taken to the dish room for ware washing as a temporary measure. Signage must be put in place until this is corrected to insure employees are not ware washing in this three compartment sink. | 1/4/2024          | SY      |
| 4-202.11 (A)   | Observed: The bulk sugar bin, located in the dish room was observed with cracks in the lid.  | 1/4/2024          | SY      |
| 5-203.14 (A)   | Observed: The back wash line of the water softener located in the dish washing room, was observed to have an indirect drain (air break) not an air gap above the sewage piping.  | 1/4/2024          | SY      |

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| 4-601.11 (C)   | Observed: True prep cooler in the kitchen near the fryers appears to have food like debris built up on the doors.<br>Note: According to the manager this True prep cooler is currently out of service and they are looking at making repairs or getting it replaced.           | 1/4/2024          | SY      |
| 4-501.12       | Observed: Cutting board on the True cooler unit is rough and no longer a cleanable surface.  | 1/4/2024          | SY      |
| 4-903.11 (A)   | Observed: Single-use articles were observed stored on the floor in the pantry room off of the kitchen.<br>Comment: The single-use articles must be placed 6" above the floor.  | 1/4/2024          | SY      |
| 4-601.11 (C)   | Observed: Food and grease like debris was observed to be built up on the floor underneath the fryers, along with inside the bottom cabinet of the frying units in both the kitchen and the dish washing room. Vent hood grease catch pan appears to have grease built up.      | 1/4/2024          | SY      |
| 4-601.11 (C)   | Observed: Char-broiler in both the kitchen and the dish washing room, the clean out trays are soiled with food and grease like debris. In the kitchen the grease is dripping down inside the oven.   | 1/4/2024          | SY      |
| 6-501.12 (A)   | Observed: Floors are soiled with dirt like debris behind the restaurant bar between the floor mats.  | 1/4/2024          | SY      |

EDUCATION PROVIDED OR COMMENTS

|                           |                             |                 |   |
|---------------------------|-----------------------------|-----------------|---|
| Person in Charge / Title: | Sarah Young - Manager       | Date:           | 12/18/2023  |
| Inspector:                | Reagan Mackay / Jon Peacock | Telephone No.:  | (573)547-6564   |
|                           |                             | PHES No.:       | 1847 / 880  |
|                           |                             | Follow-up:      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|                           |                             | Follow-up Date: | 1/4/2024  |



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| ESTABLISHMENT NAME<br>American Legion Post 133 |              | ADDRESS<br>98 Grand Ave | CITY / ZIP<br>Perryville, MO 63775 |
| FOOD PRODUCT/LOCATION                          | TEMP. in ° F | FOOD PRODUCT/ LOCATION  | TEMP. in ° F                       |
|  |              |                         |                                    |
|  |              |                         |                                    |
|  |              |                         |                                    |

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|                | <p>NOTE:</p> <ul style="list-style-type: none"> <li>- Pest control is conducted by Advanced Pest Control for the exterior of the building twice a year and Kammermanns Pest Control for the interior of the building is conducted once a month. They came 12/12/2023 and placed multiple traps throughout the inside and outside of the facility. Their scheduled to start coming every two weeks for maintenance.</li> <li>- Hobart dish machine sanitizes dishes and utensils by a hot water rinse at 160.0° F, inspector verified the temperature of the water using a thermal test strip during initial annual inspection. Note: the data plate on the Hobart dish machine states the water pressure should be (20+/- 5 psi). The pressure gauge was at 10 psi during the cycle. The data plate also states rinse temp 180F and wash temp 150F, the digital thermostat stated the temp was 165F. This is hot enough to kill bacteria however the manufacture plate states it should get up to 180F. Recommend having service tech come look at this machine.</li> <li>- The facilities kitchen was not in operation during today's re-inspection.</li> </ul> |                   |         |

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| 4-601.11 (C)    | Observed: In the walk-in freezer located off of the hall, ice was observed to be built up on food packaging, racks, floor and ceiling.<br>Comment: Food should not be stored directly below dripping water in the freezer that allows ice build-up.  | 1/4/2024          | SY      |
| 3-305.11 (A)(3) | Observed: In the walk-in freezer located off of the hall, boxes of fish and other debris were on the floor.  | 1/4/2024          | SY      |
| 6-501.12 (A)    | Observed: In the walk-in beer cooler, the condensing unit fan covers and racks were soiled with dirt like debris.  | 1/4/2024          | SY      |
| 6-301.14        | Observed: Hand washing signage was not present at every hand washing sink.<br>Note: Additional signage was given during this re-inspection.  | 1/4/2024          | SY      |
| 4-501.11 (A)    | Observed: The ice machine in the pantry is not working, according to the manager.<br>Note: Per the manager, this ice machine is going to be removed and replaced with the working ice machine that is located in the Hall's closet. Work is to start 12/18/2023.   | 1/4/2024          | SY      |
| 6-501.12 (A)    | Observed: Dirt like debris built up on the floor behind the ice machine located in near the Hall's restrooms. Sand like debris on the floor in the back corner of the utility room next to the Hall's restrooms. Oil debris built up on the floor behind the bulk oil tanks located in the walk-in freezer room off of the Hall. | 1/4/2024          | SY      |

EDUCATION PROVIDED OR COMMENTS

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| Person in Charge / Title: <i>Sarah Young</i> | Sarah Young - Manager       | Date: 12/18/2023   |
| Inspector: <i>Reagan Mackay</i>              | Reagan Mackay / Jon Peacock | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Telephone No. (573)547-6564                  | PHES No. 1847 / 880         | Follow-up Date: 1/4/2024   |



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| FOOD PRODUCT/LOCATION                          |  | TEMP. in ° F            | FOOD PRODUCT/ LOCATION |                                  | TEMP. in ° F |
|  |  |                         |                        |                                  |              |
|  |  |                         |                        |                                  |              |
|  |  |                         |                        |                                  |              |

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| 6-202.15 (A)   | Observed: Front doors entering the building and entering the restaurant do not have tight sealing doors. You can see daylight coming through the seals between and underneath.  | 1/4/2024          | SY      |
| 6-202.15 (A)   | Observed: Exit door in the Hall between the stage and the side storage room has day light coming through at the bottom left corner.   | 1/4/2024          | SY      |
| 6-202.15 (A)   | Observed: The exterior double doors leading into the building and the doors leading into the Hall has day light to come in from the seals.  | 1/4/2024          | SY      |
| 6-202.15 (A)   | Observed: The recycling room off of the storage room in the Hall has a lot of daylight coming through walls, joints and door seals that can allows pests inside the facility.<br>Note: This area is located outside the building however the unit is not pest proof. A decision need to be made if this area is going to be made pest proof or if the door leading from the storage room needs to be tight fitting and equipped with a self-closing device. | 1/4/2024          | SY      |
| 4-501.11 (B)   | Observed: The door seals to the salad bar cooler were torn and damaged.   | 1/4/2024          | SY      |

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|   |  |                             |                             |                          |  |
|---|--|-----------------------------|-----------------------------|--------------------------|--|
| Person in Charge /Title: <i>Sarah Young</i> |  | Sarah Young - Manager       |                             | Date: 12/18/2023         |  |
| Inspector: <i>Reagan Mackay</i>             |  | Reagan Mackay / Jon Peacock | Telephone No. (573)547-6564 | PHES No. 1847 / 880      | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|   |  |                             |                             | Follow-up Date: 1/4/2024 |  |