

email - dchealth@co.delaware.in.us

CERTIFIED FOOD HANDLER

BILL HUFFMAN

TE20504441

Expire

Date of Inspection

4/5/11

Release Date

4/15/11

Follow Up (Yes - No)

NO

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT


Based on an inspection this day, the item(s) noted below identify violation(s) 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 WAL-MART SUPERCENTER #1665			Telephone Number (765) 284-7181		
Establishment Address (number and street, city, state, ZIP code) 4801 W CLARA LN MUNCIE IN 47304					
E-Mail Address			Purpose: 1 - ROUTINE		Menu Type: 2 - LIMITED MENU
Owner's Name WAL-MART STORES EAST, LP			SUMMARY OF VIOLATIONS: CRITICAL / NON-CRITICAL / REPEAT C _____ NC <u>1</u> _____ R _____		
Owner's Address (city, state, ZIP code) 702 S W 8TH ST BENTONVILLE AR 72716-0500					
Name of Person In Charge WAL-MART STORES, INC.					
Establishment Identification Number 168	County 1 8	District NANCY LARSON			

* Critical items are identified in the narrative columns marked "C" ("NC" Non-Critical)

* Violation(s) repeated from previous inspections are denoted in the "SUMMARY OF VIOLATIONS" and in the narrative below as "R"

[illegible]

Received By (Name and Title Printed)	Inspected By:	
Jon Rodeffer	NANCY LARSON	
Received By: (Signature)	Inspector Signature:	Page 1 of ____
		

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