Delaware County Health Department 100 West Main Street, Room 207 Muncie, Indiana 47305	nt CE Carol Brown	CERTIFIED FOOD HANDLER Carol Brown # XE20128466 Expire 6/20/2012		
Fax (765)747-7721 Fax (765)747-7747 email - dchealth@co.delaware.in.us	Date of Inspection 12/29/10	Release Date 1/8/11	Follow Up (Yes - No NO	
Based on an inspection this day, the item(s) noted below ident Sanitation Requirements. The time limit for correction of	ify violation(s) of 410 IAC 7 - 24	ION REPORT Indiana Retail Food Establishm	•	
tablishment Name TARGET #1530		Telephon (765)	e Number 254-9027	
tablishment Address (number and street, city, state, ZIP code) 3601 N, BARR ST.	MUNCIE	IN	47303	
Mail Address		Purpose:	Menu Type:	
vner's Name TARGET STORES		1 - ROUTINE	2 - LIMITED MENU	
vner's Address (city, state, ZIP code) P.O. 9471 MINNEAPOLIS	55440-9 S MN 471	SUMMARY O	F VIOLATIONS:	
me of Person In Charge TARGET CORPORATION		CRITICAL / NON-C	CRITICAL / REPEAT	
tablishment Identification Number 120 18	District L S H	C_0_NC	0 R 0	
itical items are identified in the narrative columns marked "C" ("NC" Non-Cri plation(s) repeated from previous inspections are denoted in the "SUMMARY	itical) OF VIOLATIONS" and in the n	arrative below as "R"	7 ORIGINAL	
nex / R Section	Narrative		Corrected By Date	
NC No Violations.	L.			
derived By (Name and Title Printed) SV. Toan Real		Lynnetta Harl	ey Page 1 of <u>1</u>	
derved By Signature Julan SE. Tram Se		ettos, Murle	rage 1 of	
OFF		C	J	