Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name GRACELAND BAPTIST CHURCH FOOD PANTRY	**Telephone Number** Est 812-944-6448 Own 812-944-6448	**Date of Inspection** 06/18/2025	**ID#**
Address 3600 KAMER MILLER RD, NEW ALBANY IN 47150			
Owner GRACELAND BAPTIST CHURCH	**Purpose** X **Routine** ___ **Follow-up** ___ **Complaint** ___ **Pre-Operational** ___ **Temporary** ___ **HACCP** ___ **Other (list)**	**Follow Up**	**Released**
Owner's Address 3600 KAMER MILLER RD NEW ALBANY, IN 47150			
Person in Charge JOHN PEARCE			
Responsible Person's Email TAMMYFR8S@HOTMAIL.COM		**Menu Type** 1 X 2 __ 3 __ 4 __ 5 __	
Certified Food Handler			

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 NARRAIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
431		X	X	Observed the window sill in need of cleaning.	1 week
				I RECOMMEND DATING CARTONS OF EGGS.	

Summary of Violations C 0 NC 1 R 1 1

Received by (name and title printed): TAMMY FREITAS	Inspected by (name and title printed): Thomas Snider CFS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: