

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 <i>American Legion Post #313</i>	Telephone Number ( ) Establishment <i>755-4431</i>	Date of Inspection (mm/dd/yr) <i>7/24/25</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>(PO Box 164) 5222 8th St., Fairmont, WV 26434</i>	Owner <i>American Legion Post 313 INC</i>	Follow up <i>NO</i>	Release Date <i>10 Days</i>
Owner's Address <i>Same</i>	Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list) _____	Summary of Violations:  <i>P - NC - C -</i>	
Person in Charge <i>Mike</i>	Responsible Person's E-mail _____	Menu Type (See back of page)  <i>1 2 X 3 4 5</i>	
Certified Food Handler <i>Muna Bennie</i>	<i>6/28/22</i>		

• 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"

[illegible]

Received by (name and title printed): <i>Inez Sloan Inez Sloan</i>		Inspected by (name and title printed): <i>Inez Sloan Inez Sloan</i>	
Received by (signature):		Inspected by (signature): <i>[Signature]</i>	
cc:	cc:	cc:	