



**SANITATION OBSERVATION**

ESTABLISHMENT NAME <i>Freddie Go Ole Time</i>			
TELEPHONE NUMBER ( ) ( )		FAX NUMBER ( ) ( )	
MAILING ADDRESS <i>11264 State Hwy</i>		CITY <i>Dudley</i>	STATE <i>MO</i>
PHYSICAL ADDRESS		CITY	STATE
			ZIP CODE <i>63936</i>

DURING AN INSPECTION AND/OR EVALUATION OF YOUR *Pre opening* THE FOLLOWING CONDITIONS WERE OBSERVED AND MUST BE CORRECTED: *Bar area*

*Need splash guard - Handrest - Just -*

*Approved to open*

*Bar -*

INSPECTED BY <i>Sara Mitchell</i>		EPHS NUMBER <i>1539</i>	
AGENCY NAME <i>Stoddard Co Public Health</i>		TELEPHONE NUMBER <i>568-4293</i>	FAX NUMBER
AGENCY ADDRESS <i>1001 State Hwy 25</i>		CITY <i>Bloomfield</i>	STATE <i>Mo</i>
RECEIVED BY <i>[Signature]</i>			DATE <i>11-16-16</i>
ZIP CODE <i>63823</i>			