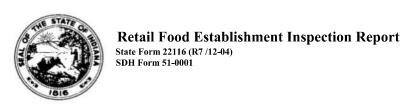


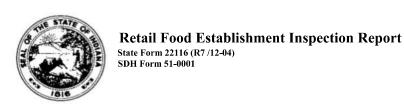
Establishm		11 F	Express @ Meijer	(204年8年がMmのN 22 (mm/dd/yr)			то# 13012
			mber and street, city, state, zip code)	(201-654-0422	01/22	/2020	13012
			5 Dr, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner Sushi	Maru	F۱	rpress Inc	Purpose:	Follow-up		se Date 01/2020
Owner's A		L/	Apress inc	√ Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td></td><td>of Violation</td><td></td></reda<>				Follow-up		of Violation	
Person in C				Complaint	1 1	NC_() ()
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>, R C</td></reda<>				Pre-Operational	C	NC_	, R C
Responsible			il	Temporary	Menu Tvr	se <i>(See add</i> i	tional page)
responsible	er erson s		•	НАССР	_		
Certified Fo		er		Other (list)	$1 \bigcirc 2$	\bigcirc_3	$)_4$ \bigcirc_5 \bigcirc
			NAMES OF THE OWN OWN OF THE OWN	A DYNED ((CII)	<u> </u>		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN				
• VIOLATIO			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
173	С		Food unprotected from cross	s contamination.		Со	rrected
Received by			printed):	Inspected by (name and title p < redacted>	rinted):		
Received by				Inspected by (signature):			
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Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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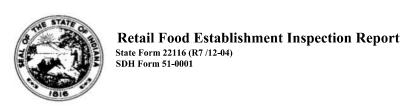
Establishm	_			Telephone Number	Date of Ins		ID#
Meije	r Sto	re	#287	812-647-2200	(mm/dd/yr)		13006
			mber and street, city, state, zip code)	(<redacted></redacted>	01/22	2020	
2622 I	<u>Mena</u>	rds	Drive, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	04		Li itad Danto analdo	Purpose:	Follow-up		se Date
		es	Limited Partnership	√ Routine	No	02/	01/2020
Owner's Ad				Follow-up	Summary	of Violation	as:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>c_2</td><td>(</td><td></td></reda<>				Complaint	c_2	(
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c___</td><td>NC_</td><td>r R C</td></reda<>				Pre-Operational	c_ _ _	NC_	r R C
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
			_	НАССР			
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}($	\bigcirc_3 \bigcirc	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	AARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		I	To Be Co	orrected By
129	С		Employee not washing wh				rrected
192	С		Food lacking proper d	•		Corrected	
102			1 ood laoking proper a	ato labol.			Toolog
D : 1:	<u> </u>		· (D	T / 11 / 1004	1		
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Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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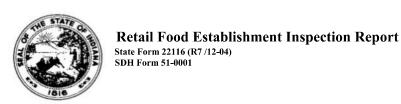
Establishm	ent Name				Telephone Number	Date of Inspe	ection	ID#
Pang	ea K	itcl	nen		812-401-2405	(mm/dd/yr) 01/21/2	2020	12480
			mber and street, city, state, zip c		() Owner .	0 1/2 1/2	2020	
111 S (Green	Ri۱	er Rd Ste E, Evan	sville, IN, 47715	' <redacted></redacted>			
Owner					Purpose:	Follow-up		e Date
Randy		sor	า		√ Routine	No	01/	31/2020
Owner's A					Follow-up	Summary of	f Violation	ns:
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Person in C				Pre-Operational	$_{ m C}$ U	NC ($\frac{0}{R}$	
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary				
Responsible	e Person's	E-ma	il		НАССР	Menu Type	(See addi	tional page)
C de la	1 77 11				Other (list)	.0.0		\bigcirc
Certified For		er				$1 \bigcirc 2 \bigcirc$	<u> </u>	<u> 405</u>
		EIDI	ENTERED IN THE CHECKY ICT AN	ND NADDATINE COLUMNICA	ADVED 4C"			
			ENTIFIED IN THE CHECKLIST AN					
	* *		FROM PREVIOUS INSPECTIONS		MMARY OF VIOLATIONS" AN			
Section#	C/NC	R		Narrative		7.	To Be Co	orrected By
				No noted violation	ons.			
Received by	(name and	title 1	printed):		Inspected by (name and title pr	rinted):		
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Received by					Inspected by (signature):			
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Establis	stablishment Name		ne Addre	ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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Establishm 1354 Owner Larry Owner's Ad <reda c<="" in="" person="" th=""><th>ent Addres E Divi Polloc ddress cted> Charge</th><th>isic ck,</th><th>a LLC mber and street, city, state, z on ST, Evansvil David Y.</th><th>Telephone Number (812-459-5556 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted></th><th>Follow-up NO Summary o</th><th>Release 02/</th><th>12277 12277 se Date 03/2020 ns:</th></reda>	ent Addres E Divi Polloc ddress cted> Charge	isic ck,	a LLC mber and street, city, state, z on ST, Evansvil David Y.	Telephone Number (812-459-5556 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Follow-up NO Summary o	Release 02/	12277 12277 se Date 03/2020 ns:	
<reda< td=""><td></td><td></td><td>il</td><td>Temporary</td><td>Menu Type</td><td>(See addi</td><td>tional page)</td></reda<>			il	Temporary	Menu Type	(See addi	tional page)	
Certified Fo		er			HACCP Other (list)	102	<u></u>	<u>4</u> _5
• CRITICAL	LITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST	Γ AND NARRATIVE COLUMNS M	AARKED "C"			
	* *		FROM PREVIOUS INSPECTION	ONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R		Narrative		'	To Be Co	orrected By
				No noted violation	ons.			
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Establis	stablishment Name		ne Addre	ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
Received	l By (Nan	ne &	Title)	Inspected By (Name & Title)	Pageof



Establishm	's Jei ent Addres Weiss	s (nu	Sales mber and street, city, state, z d, Evansville, I		**Telephone Number (812-459-0923 (<redacted> Purpose:</redacted>	Date of Insperiment (mm/dd/yr) O1/25/2 Follow-up	2020 Releas	12196 12196 se Date 04/2020	
Owner's Ad <reda <reda="" c="" in="" person="" responsible<="" td=""><td>ddress cted> Charge cted></td><td></td><td>il</td><td>✓ Routine Follow-up Complaint Pre-Operational Temporary</td><td>Summary o</td><td>f Violation</td><td>) _R 0</td></reda>	ddress cted> Charge cted>		il	✓ Routine Follow-up Complaint Pre-Operational Temporary	Summary o	f Violation) _R 0		
Certified F					HACCP Other (list)	1 <u>0</u> 2	$\sqrt{3}$	<u>)</u> 4 <u>0</u> 5 <u>0</u>	
• VIOLATIO	• 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"								
Section#	C/NC	R	N.	Narrative		-	To Be Co	orrected By	
				No noted violation	ons.				
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Establis	stablishment Name		ne Addre	ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
Received	l By (Nan	ne &	Title)	Inspected By (Name & Title)	Pageof



							_
	s Tim		Out Lounge & Grill	Telephone Number (812-437-9920 Date of Insper (mm/dd/yr) 01/22/2			11842
			mber and street, city, state, zip code) n Square Mall, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	01/22	12020	
Owner Kerry	Ches	ser	· Jr	Purpose: Routine	Follow-uj		se Date 01/2020
Owner's Ac				Follow-up	Summary	of Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>_</td><td>_</td><td>_</td></reda<>	cted>			Complaint	_	_	_
Person in C				Pre-Operational			$0_{\rm R}$
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		~ ~	
Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAL	ITEMS AF	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	- IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE N	ADDATINE	DELOWAC "D"
				WIMARY OF VIOLATIONS" AN	DINTHEN		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Establis	stablishment Name		ne Addre	ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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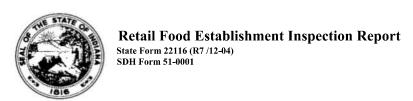
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Establishmo		G (CAT AF LLC)	Telephone Number	Date of Ins (mm/dd/yr		тр# 11778
			mber and street, city, state, zip code)	812-401-1201	01/21	/2020	11776
			town Rd, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-uj		se Date
Cory E	Edwa	<u>rds</u>		√ Routine	No	01/	31/2020
Owner's Ac				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td></td><td>))</td></reda<>				Complaint	\cap))
Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_4	$\frac{2}{R}$
Responsible			:1	Temporary	Monu Tra	o (Saa addi	itional nage)
Responsible	e Person's	rma	II	НАССР	wienu Typ	se (see aaai	tional page)
Certified Fo	ood Handle	er		Other (list)	1(),	\bigcirc_3 (\bullet	$)_4\bigcirc_5\bigcirc$
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• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	AARKED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
234	NC	R	Improper storage of knives in	between usage.		Со	rrected
295	NC	R	Drink dispenser nozzles in need	d of cleaning in bar		01/21/2020	
Received by				Inspected by (name and title p redacted>	rinted):		
Received by	(signature):		Inspected by (signature):			
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Establis	Establishment Name			ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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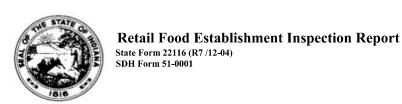
Establishm				Telephone Number	Date of Insp	ection	ID#
River	Ben	d P	Association, Inc.	812-422-3983	(mm/dd/yr) 01/21/	2020	11284
			mber and street, city, state, zip code) In St, EVANSVILLE, IN, 47712	(.) Owner	01/21/	2020	
Owner				Purpose:	Follow-up		se Date
		<u>ال</u> ا	ASSOCIATION, INC.	√ Routine	No	01/	31/2020
Owner's A				Follow-up	Summary of	of Violation	is:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) (</td></reda<>				Complaint	\cap	() (
Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	J _R U
Responsible			:1	Temporary	Monu Tun	(Saa addi	tional page)
Kesponsible	e rerson's	rma	ш	НАССР	Menu Type	s (See aaai	nonai page)
Certified F	ood Handle	er		Other (list)	$1 \bigcirc 2$	\bigcirc 3 \bigcirc	$)_4\bigcirc_5\bigcirc$
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• CRITICAL	LITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Establis	Establishment Name			ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
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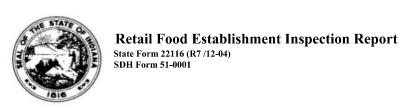
Establishm		امدا	, Country Club	Telephone Number	Date of Ins (mm/dd/yr		ID#
			V Country Club mber and street, city, state, zip code)	(812-867-1900	01/24	/2020	11233
			ng Rd, Evansville, IN, 47725	<pre><redacted></redacted></pre>			
Owner	0 1/-		Dienkenhensen	Purpose:	Follow-u		se Date
		rer	Blankenberger	√ Routine	No		03/2020
Owner's Ad				Follow-up	Summary	of Violation	
Person in C				Complaint	_ ()	NC_	1 _ 0
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td> C</td><td>NC</td><td><u>R</u></td></reda<>				Pre-Operational	C	NC	<u>R</u>
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe (See addi	tional page)
				HACCP			$\setminus \cap \cap$
Certified Fo		er		Other (list)	1 <u></u> 2		<u> 1405</u>
• CRITICAL	. ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
218	NC		Prep-table refrigerator in need	of repair/replaced.		01/3	31/2020
				· ·			
Received by	*	•	printed):	Inspected by (name and title precised>	rinted):		
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Establis	Establishment Name			ess	Inspection Date
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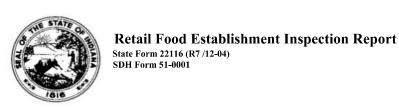
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Establishm				Telephone Number	Date of In (mm/dd/y)		ID#	
Clubh				812-425-5550	` •	2/2020	11161	
			mber and street, city, state, zip code)	' <redacted></redacted>	01/22	12020		
	_eisui	re i	Lane, Evansville, IN, 47720					
Owner	IDE I	1\ /1	NO	Purpose:	Follow-u		e Date	
LEISU		.IVI	<u>ING</u>	√ Routine	No	-	01/2020	
Owner's Ad				Follow-up	Summary	of Violation	ns:	
Person in C				Complaint	\cap		$\frac{2}{R}$	
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>- R -</td></reda<>				Pre-Operational	C	NC_	- R -	
Responsible			il	Temporary	Menu Ty	pe (See addi	tional page)	
•				НАССР				
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}$	\bigcirc_3)4050	
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• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative	The state of the s	2 1 1		orrected By	
177	NC	K		off of the floor		10 De Co	rrected by	
				Food not stored 6 inches off of the floor.				
218	NC		Dish machine leaking during washing	g at the front left co	orner.	01/3	30/2020	
Received by	(name and	title 1	orinted):	Inspected by (name and title pr	rinted):			
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Received by				Inspected by (signature):				
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Establis	Establishment Name			ess	Inspection Date
Item #	C/NC	R	·	REMARKS	TO BE CORRECTED BY
Received	l By (Nan	ne &	Title)	Inspected By (Name & Title)	Pageof



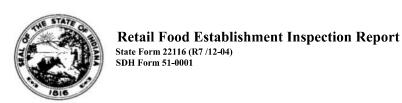
Establishment Name Life Choice				Telephone Number Date of Inspec (mm/dd/yr)		ection	ID#	
					812-428-3055	01/23/	2020	11088
			mber and street, city, state, z a St, EVANSV	rip code) VILLE, IN, 47712	() Owner	0 17207	2020	
Owner			•	•	Purpose:	Follow-up	Releas	se Date
LIFE (CHO	CE			√ Routine	No	02/	02/2020
Owner's A	ddress				Follow-up	Summary o	f Violation	ns:
					Complaint	^	_	_
Person in Charge					Pre-Operational	CU	NC	J b O
<reda< td=""><td>cted></td><td></td><td></td><td></td><td><u> </u></td><td>110</td><td></td></reda<>	cted>				<u> </u>	110		
Responsible	e Person's	E-ma	il		Temporary	Menu Type	(See addi	tional page)
					НАССР			
Certified Fo		er			Other (list)	1 <u>0</u> 2(<u></u>	<u> 14050</u>
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTI	ONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative		,	Го Ве Со	orrected By
				No noted violation	ons.			
Received by			printed):		Inspected by (name and title properties)	rinted):		
Received by	(signature):			Inspected by (signature):			
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Establis	Establishment Name			ess	Inspection Date
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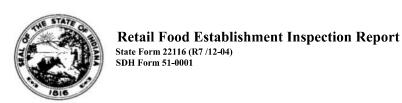
Establishm	ent Name				Telephone Number	Date of Inspe	ction	ID#
		erio	can Cookie Co		(812-471-1774	(mm/dd/yr)		10995
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		() Owner .	01/23/2	2020	
800 N	Gree	n F	River Rd, Evansville	e, IN, 4771 <u>5</u>	' <redacted></redacted>			
Owner					Purpose:	Follow-up		e Date
Agape		erie	es inc	√ Routine	No	02/	02/2020	
Owner's Ad				Follow-up	Summary of			
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Responsible			:i	Temporary	Menu Type	(See addi	tional nage)	
responsible	or erson s				НАССР	mena Type		
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Section#	C/NC	R		Narrative		7	o Be Co	orrected By
218	NC		Coo	ler in need of i	repair.		01/2	27/2020
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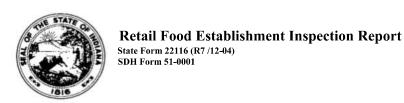
Establishme		ıρr	n of Evansville LLC	Telephone Number	Date of In (mm/dd/y		10880
			mber and street, city, state, zip code)	812-429-0055	01/21	/2020	10000
1015 N	V Fult	on	Ave, EVANSVILLE, IN, 47710	<pre>(<redacted></redacted></pre>			
Owner Bucks	Tave	rn	of Evansville LLC	Purpose:	Follow-u		se Date 31/2020
Owner's Ac				Follow-up	Summary	of Violation	
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				HACCP		\bigcirc	
Certified Fo		er		Other (list)	1 <u>0</u> 2	\bigcirc_3	<u> 1405</u>
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344	С	R	Hand sink obstruc	cted.		Col	rrected
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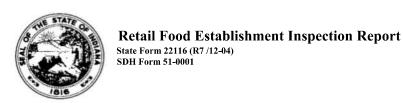
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Evan	sville	S	eafood LLC	812-401-2220	(mm/dd/yr)	2020	13992	
			mber and street, city, state, zip code)	() Owner	01/21/	2020		
420 S	Gree	n F	River Rd, Evansville, IN, 47715	' <redacted></redacted>				
Owner				Purpose:	Follow-up		se Date	
Tracy		าga	l	✓ Routine	No	01/	31/2020	
Owner's Ac				Follow-up	Summary o	f Violatio	as:	
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Person in C				Pre-Operational	C	NC_	I R I	
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Certified Fo	and Handle			Other (list)	$1 \cdot \bigcirc \cdot \bigcirc \cdot \bigcirc$	7,6),()_{=()}	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
	* *		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN				
Section#	C/NC	R	Narrative				orrected By	
173	С	R	Improper storage of raw m	neat in cooler.		Corrected		
310	NC		Hood vent in need of	cleaning.		01/24/2020		
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Establishm	ent Addres	s (nu	mber and street, city, state, zi	sville, IN, 47714	() Owner .	01/25/	2020	
Owner LaTon		avi	S	Purpose: Routine	Follow-up No		e Date 04/2020	
Owner's Ac				Follow-up	Summary o	f Violation	ns:	
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Person in C					Pre-Operational	$_{\rm C}$	NC_	\mathcal{L}_{R}
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Kesponsible	e reison s	E-ma	11		НАССР	Menu Type	(See aaai	uonui puge)
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Xpres				812-492-3200	01/21	/2020	14008
1601 l	N Firs	st A	nber and street, city, state, zip code) Ve, Evansville, IN, 47710	' <redacted></redacted>			
Owner				Purpose:	Follow-u		se Date
Amrin		Ka	ur	√ Routine	No	01/	31/2020
Owner's A				Follow-up	Summary	of Violation	is:
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Responsible	e i ci son s	L mai	•	НАССР	mena 1yı	(See dadi	nonui puge,
Certified F	ood Handl	er		Other (list)	$_{1}$ $_{2}$	\bigcirc_3 \bigcirc	$_{4}\bigcirc_{5}\bigcirc$
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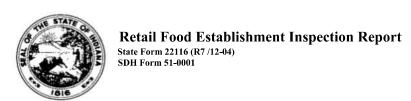


Retail Food Establishment Inspection Report

Vanderburgh County Department of Health Telephone 812-435-2400 opt 3 Fax 812-435-5871

Establishm		- ::-	_	Telephone Number	Date of In: (mm/dd/y)		ID#	
The T	aque	eria	<u>}</u>	618-518-1395	,	8/2020	14157	
			mber and street, city, state, zip code)	' <redacted></redacted>	01/20	72020		
800 N (Green	Rive	er Rd Ste 113, Evansville, IN, 47715	<re></re>				
Owner				Purpose:	Follow-u		se Date	
Adriar	า Gon	zal	ez	✓ Routine	No	02/	02/2020	
Owner's Ac				Follow-up	Summary	of Violation	ns:	
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Section#	C/NC	R	Narrative			To Be Co	orrected By	
Sectioniii	Circo		Aunturyo			TO BC CO	Arceted By	
470				-!		0-	4l	
173	С			Improper storage of raw animal product. Corrected				
234	NC		Improper storage of dispensing utensils.				01/23/2020	
347	NC		Hand drying provisions not provided at hand sink.				Corrected	
			<u> </u>					
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Hone	у Мо	on	Kitchen on Burkhardt	⁽ 812-297-2066	(mm/dd/yr) 01/22/		14177
			mber and street, city, state, zip code)	(<redacted></redacted>	01/22/	2020	
1211	Tutor	Ln	., Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	- D			Purpose:	Follow-up		se Date
Jessic		S0	ns	✓ Routine	No	02/	01/2020
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