

Establishm	ent Name			Telephone Number	Date of In		ID #		
Toky	o Jap	ban		(812-401-1020	(mm/dd/y	<i>`</i>	11694		
			per and street, city, state, zip code)	() Owner	06/12	2/2024			
3000	N Gre	en R	River Rd, Evansville, IN, 47715	(<redacted></redacted>					
Owner				Purpose:	Follow-u	L	se Date		
Xu Hu				✔ Routine	No	06/	22/2024		
Owner's A				Follow-up	Summary	of Violation	15:		
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Person in C				Pre-Operational			3_{R}		
Responsible				- Temporary	Manu Tu	pe (See addi	tional naga)		
Responsion	e i ci soli s	E-man		НАССР	wienu i y	pe (see aaaa			
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3\bigcirc$	$)_4 \odot_5 \bigcirc$		
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Section#	C/NC	R	Narrative	an calleal in reaf			orrected By		
218	NC		Walk-in in need of repair. Obse						
218	NC		Woman's restroom sink in	•			12/2024		
310	NC		Hood system in need o	of cleaning.		06/1	12/2024		
Received by	(name and	l title prii	nted):	Inspected by (name and title p	rinted):				
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Received by	(signature	e):		Inspected by (signature):					
cc:			cc:		cc:				



Establishm 4650 Owner Starbu Owner's Ad	ucks ent Addres First A ucks (ddress	ss (nu Ave Cof	offee Co #8693 mber and street, city, state, zip code) e, Evansville, IN, 47710 fee Co		21-0461 acted>	Date of Insy (mm/dd/yr) Follow-up NO Summary of	Releas	ID # 11496 se Date
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Person in C	0			Pre-Oper	ational	с <u></u> U	NC_	$\underline{)}_{R} \underline{0}$
Responsible			il	Tempora	ry	Menu Typ	e (See addi	tional page)
Certified Fo		er		HACCP Other (lis	t)	1 <u>0</u> 2	<u>•</u> 3C	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VI	DLATIONS" AN	D IN THE NA		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			Approved for re-o	pening.				
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cc:			cc:	•		cc:		



Establishm				Telephone Number	ID #		
			get Me Not Inn	(812-477-7500	(mm/dd/yr 06/11	/2024	11415
			mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47711	(<redacted></redacted>	00,11	,	
Owner	:/_ D:-			Purpose:	Follow-u		se Date
		ZZƏ	a Inc/Judie Turner	✔ Routine	No	06/	21/2024
Owner's Ad				Follow-up	Summary	of Violation	15:
Person in C				Complaint			
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Responsible			il	Temporary	Menu Tyj	be (See addi	tional page)
				НАССР	\square	$\sim c$	$\sim \sim$
Certified For		er		Other (list)	$1 \underline{\bigcirc} 2$	<u>3</u>	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAL	LITEMS AR	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	ARKED "C"	<u> </u>		
• VIOLATIC	DN(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
			No violations no	ted.			
Received by				Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			сс:		cc:		



Establishme 49 N E Owner	onald ent Address Burkh h E K Idress Cted> harge Cted> e Person's		JKK ENTERPRISES LLC) mber and street, city, state, zip code) at Rd, Evansville, IN, 47715 worthy III	Telephone Number (812-476-8422 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 3/2024 p Releas) _R _0
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS ! PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
		Ī	No noted violati	ons.			v
Received by	(name and	l title 1	printed):	Inspected by (name and title p	rinted):		
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Establishm	onald ent Addres Mt. P Carvaj ddress Cted> Cted> cted> cted> cted> cted> od Handle	es (nu Plea al	#20552 mber and street, city, state, zip code) asant Rd, Evansville, IN, 47725	(C) () () () () () () () () () (lephone Number 12-867-9003 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C) /2024 p Releas 06/ of Violation NC	
		E ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	 IARK	XED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
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Received by	(signature):		Insp	bected by (signature):			
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Establishm 20 N N Owner	nalds ent Addres Main S	ss (nu St,	1365 - Intenn Enterprises LLC ^{mber and street, city, state, zip code)} Evansville, IN, 47710 nerine Kenworthy	Telephone Number (812-425-0635 (<redacted> Purpose: Routine</redacted>	Date of In (mm/dd/y) 06/11 Follow-u NO	r) /2024 p Releas	ID # 11200 se Date 21/2024
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td></td></reda<>		1		Complaint	\cap	(
Person in C				Pre-Operational	с <u></u> О		
Responsible			ม	Temporary	Menu Ty	pe <i>(See addi</i>	tional page)
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Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	ARKED "C"			
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Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations to r	note.			
Received by			· · · · ·	Inspected by (name and title p <redacted></redacted>	rinted):		
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5412 Owner Karen Owner's Ad <reda Person in C <reda Responsible Certified F</reda </reda 	stick ent Addres E Indi Kunç ddress cted> Charge cted> e Person's	ss (nu an) E-ma	umber and street, city, state, zip code) a St, Evansville, IN, 47715		Alephone Number 12-473-5551 CPCCACTED> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C) /2024 P Releas 06/ of Violation NC	ID # 11151 e Date 21/2024 Is: B R 0 tional page) 24 5 0
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
138	NC	I.	Observed Food employee in kitchen not we	ari	ng effective hair re	straint		1/2024
177	NC		Food in walk-in stored impr		-	ou airtí	06/11/2024	
218	NC		Back door in need for repair open acc		1/2024			
210						nonto.	00/	1/2024
Received by				-	ected by (name and title pr edacted>	rinted):		
Received by	(signature):		Insp	ected by (signature):			
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100 S Owner	Renn ent Addres E Fou & Ma ddress cted>	rla	S mber and street, city, state, zip code) St, Evansville, IN, 47708 Rennie	(8 (Pu	Stephone Number 312-401-8098 <redacted> urpose: Routine Follow-up Complaint</redacted>	^{Follow-u} NO	r) 2/2024 p Releas	
<reda< td=""><td>cted></td><td>•</td><td></td><td></td><td>Pre-Operational Temporary</td><td>τ<u> </u></td><td>NC</td><td><u> </u></td></reda<>	cted>	•			Pre-Operational Temporary	τ <u> </u>	NC	<u> </u>
Responsible	e Person's	E-ma	il		HACCP	Menu Ty	pe (See addi	tional page)
Certified F		er		-	Other (list)	102	<u></u> 3	$)_4 O_5 O$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
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Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons	6			
Received by				-	redacted>	rinted):		
Received by	(signature):		Insp	bected by (signature):			
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Establishm		_			Telephone Number Date of Inspection ID # (mm/dd/yr) (mm/dd/yr)				
			Suites - Evan		(812-471-3400		., /2024	10934	
Establishm	ent Addre	ss (nu	mber and street, city, state, a	zip code)	() Owner	00/14	1/2024		
	ross P	o in	t Blvd., EVANS	VILLE, IN, 47715					
Owner	Untol		` orn		Purpose:	Follow-u			
Drury		IS C	Jorp		✔ Routine	No		24/2024	
Owner's A					Follow-up	Summary	of Violation	1S:	
Person in C		-			Complaint	0			
<reda< td=""><td>0</td><td>•</td><td></td><td></td><td>Pre-Operational</td><td>с<u> </u></td><td>NC_</td><td><u> </u></td></reda<>	0	•			Pre-Operational	с <u> </u>	NC_	<u> </u>	
Responsibl			il		Temporary	Menu Ty	pe (See addi	tional page)	
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Certified F		er			Other (list)	$1 \underline{\bigcirc} 2$		$\underline{)}_{4} \underline{\bigcirc}_{5} \underline{\bigcirc}$	
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				IONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R		Narrative			To Be Co	orrected By	
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Establishm 220 K Owner	ay In ent Address irkwo Hosp ddress cted> Charge	ital	Express mber and street, city, state, zip code) Dr., Evansville, IN, 47715 lity Group Circle II, LLC	Telephone Number (812-303-0050 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Follow-u NO Summary	p Releas 06/	ID # 13478 e Date 24/2024 hs: D R 0
Responsible Certified Fo	e Person's	E-ma	il	HACCP Other (list)		pe (See addi	tional page)
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• CRITICAL	LITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	IARKED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Establishm JUICY Establishm 865 N Owner Kailiar Owner's Ad <redat Person in C <redat Responsible</redat </redat 	Seat ent Addres Gree ng Lin ddress cted> Charge cted>	ss (nu en F	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	8 V Pur V I I	ephone Number 12-303-6871 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	r) h/2024 p Releas 06/ of Violation NC_	
Certified Fo	cted>		ENTIFIED IN THE CHECKLIST AND NADDATIVE COLUMNS A		Other (list)	1 <u>0</u> 2	<u></u> 3	<u>)</u> ₄ <u>O</u> 5 <u>O</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
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			No violations no	oted.				- C
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Received by					ected by (name and title pr edacted>	inted):		
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Establishm 2031 N Owner Casey Owner's Ac <reda Person in C <reda Responsible</reda </reda 	y's G ent Address N Cross ddress cted> Charge cted> e Person's	ss (nu SS Arke	neral Store #3877 Imber and street, city, state, zip code) Point Blvd, Evansville, IN, 47715 eting Company	(C) () Pu ()	lephone Number 12-475-8634 Content Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_	p Releas 06/ of Violation NC_	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
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Received by				-	ected by (name and title pr edacted>	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishment Name Agape Graze LLC Establishment Address (number and street, city, state, zip code) 1401 N. Boeke, Evansville, IN, 47711 Owner Jessica Mache Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS</redacted></redacted>					elephone Number 312-518-0008 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 1/2024 p Release 06/ of Violation NC		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S			D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
Sectional	0,110		No noted violat	iona	`		10 20 00	••••• D J	
				IONS	.				
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101 N Owner	's #32 ent Addres Cross a & Ba ddress cted> Charge cted> cted> cted> cted>	ss (nu S P Ayle E-ma	mber and street, city, state, zip code) ointe Blvd, Evansville, IN, 47715 ey, INC	Telephone Number (812-479-9461 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C_O	p Releas 06/ r of Violation NC	$ID # \\ 14553$ se Date 23/2024	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM		ND IN THE N	VARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
310	NC	N	Hood system not clean to s	sight or tough			13/2024	
310	INC			Signi of touch.		00/	13/2024	
		-						
							-	
Received by			· · · · ·	Inspected by (name and title printed):				
Received by	(signature):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm	ier R ent Addres High a Ha ddress cted> Charge cted> e Person's	rtig E-ma		Telephone Number (812-867-6786 (<redacted> Purpose:</redacted>	Follow-u NO Summary C	.))/2024 p Releas	20/2024 			
	• 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	Narrative			To Be Co	orrected By			
			No violations no	oted.			•			
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Received by	v (signature):		Inspected by (signature):						
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414 Je Owner Fronsl Owner's Ac <redae Person in C <redae Responsible</redae </redae 	s by ent Address efferso hea H Idress cted> harge cted> e Person's	s (nui ON IIIIN E-mai	mber and street, city, state, zip code) Ave, Evansville, IN, 47713 nan	Telephone Number (812-773-9472 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	p Releas 06/ of Violation	24/2024 	
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
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			No noted violation	DIS.				
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):			
Received by	(signature)):		Inspected by (signature):				
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Establishm JK M 2400 Owner JUN K Owner's Ad <reda Person in C <reda Responsible</reda </reda 	art In ent Addres Wash Guru ddress cted> Charge cted>	ss (nu ing		Telephone Number (812-550-5662 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	12-550-5662 (mm/dd/y 06/13) rpose: Follow-u Routine NO Follow-up Summary Complaint Pre-Operational Temporary Menu Ty				
Certified F		er		Other (list)	1 <u>0</u> 2	$1 \underline{\bigcirc} 2 \underline{\bigcirc} 3 \underline{\bigcirc} 4 \underline{\bigcirc} 5 \underline{\bigcirc}$			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
VIOLATIC Section#	ON(S) REPE	ATEE R	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP Narrative	MMARY OF VIOLATIONS" AN	D IN THE N				
297	NC	ĸ	Microwave next to drink sta	ation is soiled		To Be Corrected By 06/13/2024			
201						00/	0/2024		
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):				
Received by	(signature):		Inspected by (signature):					
cc:			cc:		cc:				



	dise 1 ent Addres Linco tt Jon ddress cted> Charge cted> cted> cted> cted>	es (nur ln A es E-ma	mber and street, city, state, zip code) Ave , Evansville, IN, 47714	Telephone Number (812-568-2112 (<redacted> Purpose: Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) 2024 P Releas 06/ of Violation NC_		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
Section	ente	T.				10 20 00	meeteu by	
			No noted violation	JNS.				
			1					
Received by		-		Inspected by (name and title printed):				
Received by	v (signature):		Inspected by (signature):				
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Establishm			R Oue and Soul Food LLC	Telephone Number	Date of Ins (mm/dd/yr		ID# 15030
			r B Que and Soul Food LLC mber and street, city, state, zip code)		00/13/202		
2403	Nash	ing	ton Ave, Evansville, IN, 47714	(<redacted></redacted>			
Owner Tomm		ch	ington	Purpose:	Follow-up NO		e Date 23/2024
I OIIIII Owner's Ac	_	1511	ington	✓ Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>				Follow-up	Summary	of Violation	
Person in C	harge			Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC_(
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td>C</td><td></td><td></td></reda<>				Temporary	C		
Responsible	e Person's	E-ma	11	НАССР	Menu Typ	e (See addi	tional page)
Certified F	heH boo	or		Other (list)		$\bigcap_2 \bigcap_2$	
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• CRITICAL	LITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIC	DN(S) REPE	CATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons.			
Received by		-	printed):	Inspected by (name and title p	rinted):		
Received by				Inspected by (signature):			
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	gan's ent Addres ain S Idress Idress harge	nber and street, city, state, zij Evansville, IN, 4				ephone Number) Establishment) Owner pose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Yes Summary C_) /2024 P Releas 06/ of Violation	21/2024 	
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Establishment Name The Cotton Shed Donuts Establishment Address (number and street, city, state, zip code) 300 Wilson Sq, Evansville, IN, 47715 Owner Lucas Zeien Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail</redacted></redacted>						rpose: Follow-up Complaint	Follow-u NO) /2024	24/2024
						Pre-Operational	с	NC_	
Responsible	e Person's	E-ma	il			Temporary	Menu Typ	e (See addii	ional page)
Certified Food Handler						HACCP Other (list)	1 <u>0</u> 2	<u>•</u> 3C	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
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