



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN 10:21A	TIME OUT 11:11A
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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Salem Livestock Restaurant	OWNER: Allen + Judy Thompson	PERSON IN CHARGE: Emily Inman
ADDRESS: P.O. Box 1252 Hwy 32 West	CITY/ZIP: Salem 65560	COUNTY: Dent
PHONE: 724-8880	FAX:	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L

ESTABLISHMENT TYPE	<input type="checkbox"/> BAKERY	<input type="checkbox"/> C. STORE	<input type="checkbox"/> CATERER	<input type="checkbox"/> DELI	<input type="checkbox"/> GROCERY STORE	<input type="checkbox"/> INSTITUTION	<input type="checkbox"/> MOBILE VENDORS
	<input checked="" type="checkbox"/> RESTAURANT	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> SUMMER F.P.	<input type="checkbox"/> TAVERN	<input type="checkbox"/> TEMP. FOOD	

PURPOSE
 Pre-opening Routine Follow-up Complaint Other

FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input checked="" type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input checked="" type="checkbox"/> PRIVATE Date Sampled _____ Results _____
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RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	Employee Health			IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
	Good Hygienic Practices			IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use	✓		IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated	✓			Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination						
IN OUT N/A	Food separated and protected						
IN OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

The letter to the left of each item indicates that item's status at the time of the inspection.
 IN = in compliance OUT = not in compliance
 N/A = not applicable N/O = not observed
 COS = Corrected On Site R = Repeat Item

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
		Pasteurized eggs used where required			✓		In-use utensils: properly stored		
✓		Water and ice from approved source				✓	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control				✓	Single-use/single-service articles: properly stored, used		
	✓	Adequate equipment for temperature control				✓	Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
✓		Thermometers provided and accurate				✓	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification				✓	Warewashing facilities: installed, maintained, used; test strips used		
	✓	Food properly labeled; original container	✓			✓	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
	✓	Insects, rodents, and animals not present				✓	Hot and cold water available; adequate pressure		
	✓	Contamination prevented during food preparation, storage and display				✓	Plumbing installed; proper backflow devices		
✓		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry				✓	Sewage and wastewater properly disposed		
✓		Wiping cloths: properly used and stored				✓	Toilet facilities: properly constructed, supplied, cleaned		
✓		Fruits and vegetables washed before use				✓	Garbage/refuse properly disposed; facilities maintained		
						✓	Physical facilities installed, maintained, and clean		

Person in Charge / Title: Emily Inman	Date: 5-19-2025
Inspector: Goma Jones EPHS II	Telephone No.: 724-3106 X106
EPHS No.: 1168	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Follow-up Date:



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ESTABLISHMENT NAME Salem Livestock Restaurant		ADDRESS P.O. Box 1252 Hwy 32 West		CITY Salem	ZIP 65560
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
Amer Cheese Slice Whirlpool		43°			
Bacon "		50°			
raw hamb "		53°			
Soda 3door Fridge		47°-53°			

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
2-102.11	Obs: Person in charge lacks knowledge of food safety and does not have a Food Handlers Certificate.	6-2-25	ET
4-601.11A	Obs: chest freezer needs defrosted.	6-2-25	
2-401.11	Obs: open can of soda in Whirlpool Fridge.	COS	
3-701.11	Obs: bologna with mold on it. > voluntarily discarded	COS	
3-501.17	Obs: bologna not date labeled.		
3-201.11	Obs: glass jar with white milky substance in it in the big fridge in dining room area. Voluntarily discarded	COS	
6-501.11C	Obs: mouse droppings in cabinet.	6-2-25	
3-501.16A	Obs: temp of meats in refrigerator above 41° - PIC states they had been brought in from store before L arrived. MOVED TO FREEZER	COS	ET

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
6-301.14	Obs: no hand signage, hand sink or womens restroom.	6-2-25	ET
4-101.16	Obs: sponge in 3 vat sink	COS	
6-501.18	Obs: hand sink dirty	COS	
4-302.14	Obs: no test strips for sanitizer.	COS 6-2-25	
5-205.15(B)	Obs: hot water not reaching all 3 vats of 3 vat sink.	6-2-25	
6-202.15D	Obs: door to facility standing open.	5-19-25	
6-501.14	Obs: equipment on floor and under stainless steel table.	COS 6-2-25	
4-501.11	Obs: inside of Whirlpool refrigerator with broken shelves.	6-9-25	ET

EDUCATION PROVIDED OR COMMENTS
Facility is open on Monday only -

Person in Charge / Title: _____ Date: 5-19-2025
 Inspector: Sandra Jones EPHS II Telephone No. 729-3106 x106 EPHS No. 1168
 Follow-up: Yes No
 Follow-up Date: _____



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Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
4-202.11	Obs: a huge chunk missing from the crock of the crock pot.	COS	ET
3-30.11	Obs: employee fixing sandwich not wearing gloves	5-19-25	
1-206.12	Obs: Obs: open bait station ie: mouse trap.	COS	
1-202.11	Obs: paint stored with dishes back cabinet.	COS	6-2-25
4-601.11A	Obs: inside of whirlpool fridge and 3 door fridge dirty with debris	6-2-25	
4-601.11A	Obs: inside fryer with caked on grease	6-2-25	ET

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
6-501.12A	Obs: dirty walls, floors, outside of equipment dirty to sight and touch.	6-6-25	ET
4-903.11	Obs: styrofoam trays stored on floor.	COS	
4-501.11	Obs: oven dirty and doesn't work - replace or remove.	6-9-25	
4-602.12B	Obs: inside of microwave dirty with debris	COS	
4-501.11	Obs: chipping paint inside microwave.	6-2-25	
6-202.14	Obs: doors to both mens and womens restrooms not self closing.	6-2-25	
6-304.11	Obs: ventilation fans in both mens and womens restrooms not working.	6-2-25	ET

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: _____ Date: 5-19-2025

Inspector: Norma Jones EPHS II Telephone No: 721-3106x1106 EPHS No: 1168

Follow-up: Yes No
 Follow-up Date: _____