**Delaware County Health Department**
**100 West Main Street, Room 207**
**Muncie, Indiana 47305**
**Phone (765)747-7721**
**Fax (765)747-7747**
**email - dchealth@co.delaware.in.us**

**CERTIFIED FOOD HANDLER**

LYNN MARSHALL # 5109570 Expire _____

| Date of Inspection | Release Date | Follow Up (Yes - No) |
|---|---|---|
| 11/15/10 | 11/25/10 | NO |

# RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Based on an inspection this day, the item(s) noted below identify violation(s) 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: PANERA BREAD BAKERY / CAFÉ #1074
Telephone Number: (765) 286-5452
Establishment Address (number and street, city, state, ZIP code): 813 E MCGALLIARD RD MUNCIE IN 47303
E-Mail Address: AMANDA.RILEY@PANERABREAD.COM
Owner's Name: PANERA, LLC LICENSE MANAGER
Owner's Address (city, state, ZIP code): 6710 CLAYTON RD RICHMOND HEIGHTS MO 63117
Name of Person In Charge: PANERA, LLC

| Establishment Identification Number | County | District |
|---|---|---|
| 397 | 1 8 | CDS |

Purpose: 1 - ROUTINE
Menu Type: 2 - LIMITED MENU

SUMMARY OF VIOLATIONS:
CRITICAL / NON-CRITICAL / REPEAT
C _____ NC _____ R _____

* Critical items are identified in the narrative columns marked "C" ("NC" Non-Critical)
* Violation(s) repeated from previous inspections are denoted in the "SUMMARY OF VIOLATIONS" and in the narrative below as "R"

ORIGINAL

| Annex Key | C / NC | R | Section # | Narrative | Corrected By Date |
|---|---|---|---|---|---|
| | | | | NO VIOLATIONS FOUND AT THIS INSPECTION | |
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COMPLETED

Received By (Name and Title Printed): Lynn Marshall Mgr
Received By: (Signature)
Inspected By: CHRISTINE DELY-STINSON, REHS
Inspector Signature:
Page 1 of 1

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