## Food Program Official Inspection Report



Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

phone: (530) 841-2100, fax: (530) 841-4076

Facility	Facility Name: Golden Eagle Charter School K-8								
Addres	SS:		_			Shasta, CA, 96067			
Permit Holder:  Golden Eagle Charter School  Permit To Operate:  O Valid  Not Valid									
Phone: 530-926-5800 ext. 810 E-mail: schoolnutritionprogram@gecs.org									
Food Safety Certified Employee: Maicey DeMartini Expiration Date: 11/2027									
				OUT		The marked items represent Health Code violations and mus			
Protection Time/ Temp.	1	Food Temp.	1717 10	001	000	·			
	2	Prep./ Service				ROUTINE INSPECTION CONDUCTED TH	IIS DATE		
	3	Storage/ Disp.							
	4	Frozen Food							
	5	Pure Food				17) Observed single-use paper towels at the hand-washin	g station sitting on the counter.		
	6	Reused Food				Ensure these paper towels are in a dispenser. Correct as	ap.		
	7	Transportation							
4	8	Storage Fac.							
Food Storage	9	Refrig. Units							
Sto	10	Thermometer							
poc	11	Hazardous Mat.							
Ľ.	12	Spoils							
Uten./Equip.	13	Wash/ Sanitize							
	14	Equip. Condition							
en./	15	Utensil Condition							
Ţ	16	Storage							
o)	17	Handwashing		X					
oye	18	Employee Hygiene							
Employee	19	Employee Habits							
	20	Food Cert./ Card							
Water	21	Water							
W	22	Cross Con.							
Waste		Liquid Waste							
Ň	24	Refuse							
rmin		Rodents/ Insects							
Vermin	26	Animal/ Fowl							
	27	Ventilation							
es	28	Doors							
-acilities		Floors							
Fa	30	Walls - Ceilings							
		Toilet Fac.							
		Janitorial Fac.							
		Lighting		{					
Misc.		Clothing - Linen							
		Signs							
ΜΔΙ-		Misc. or violation (	JUT -	Out o	f com	apliance COS = Corrected on-site			
		/ (Print):	/U I =	Jul 0	COII	Received by (Signature):	Date:		
Dora Russ 11/08/2023									
REHS (Print): Rick Florendo						REHS (Signature):	Phone: 530-841-2114		

Facility Name: Golder	n Eagle Charter School K-8	
The	marked items represent Health Code violations and must be corr	rected as follows:
Received By (Print): Dora Russ	Received by (Signature):	Date: 11/08/2023
REHS (Print): Rick Florendo	REHS (Signature):	Phone: 530-841-2114

Facility Name:	Golden Eagle Charter S	chool K-8	
	The marked items repres	sent Health Code violations and must be correcte	ed as follows:
Received By (Print):		Received by (Signature):	Date:
Dora	Russ		11/08/2023
REHS (Print):		REHS (Signature):	Phone:
Rick Flor	endo		530-841-2114

530-841-2114

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530-841-2114