



### 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 Name: <b>American Legion Hall</b>	Permit # <b>000094</b>
Address: <b>P.O. BOX 315, McCloud, CA</b>	
Permit Holder: <b>Steve Manning</b>	Permit To Operate: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid
Phone: <b>530-964-2030</b>	E-mail: <b>cheulapost92commander@gmail.com</b>
Food Safety Certified Employee: <b>Timothy W Clark</b>	Expiration Date: <b>11/2030</b>

		MAJ	OUT	COS	
					The marked items represent Health Code violations and must be corrected as follows:
Protection Time/ Temp.	1	Food Temp.			<p style="text-align: center; font-weight: bold; margin-bottom: 10px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>2) Observed an ice scoop stored directly on a wet wash towel on the ice machine. Store ice scoop in a container that is washed, cleaned, and sanitized daily or in the ice bin with handles above the ice. Corrected onsite.</p>
	2	Prep./ Service		X	
	3	Storage/ Disp.		X	
	4	Frozen Food			
	5	Pure Food			
	6	Reused Food			
	7	Transportation			
Food Storage	8	Storage Fac.			
	9	Refrig. Units			
	10	Thermometer			
	11	Hazardous Mat.			
Uten./Equip.	12	Spoils			
	13	Wash/ Sanitize			
	14	Equip. Condition			
Employee	15	Utensil Condition			
	16	Storage			
	17	Handwashing			
Water	18	Employee Hygiene			
	19	Employee Habits			
	20	Food Cert./ Card			
Waste	21	Water			
	22	Cross Con.			
Vermin	23	Liquid Waste			
	24	Refuse			
Facilities	25	Rodents/ Insects			
	26	Animal/ Fowl			
	27	Ventilation			
	28	Doors			
	29	Floors			
	30	Walls - Ceilings			
Misc.	31	Toilet Fac.			
	32	Janitorial Fac.			
	33	Lighting			
	34	Clothing - Linen			
	35	Signs			
	36	Misc.			

MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site	
Received By (Print): <b>Lynn Clark</b>	Received by (Signature): _____ Date: <b>12/18/2025</b>
REHS (Print): <b>Chalyn Dewey</b>	REHS (Signature): _____ Phone: <b>530-841-2112</b>

**Facility Name:** American Legion Hall

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Received by (Signature):

Date:  
12/18/2025

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[Empty area for listing health code violations and correction details]

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