



Retail Food Establishment Inspection Report

Establishment Information	
Facility Name V F W	Facility Type Special Organization
Facility ID # HSAT-7QX78D	Facility Telephone # 608 785-1530
Facility Address 630 6TH STREET S LA CROSSE , WI 54601	
Licensee Name V F W	Licensee Address 630 6TH STREET S LA CROSSE , WI 54601

Inspection Information		
Inspection Type Routine	Inspection Date June 29, 2018	Total Time Spent

Equipment Temperatures	
Description walk in cooler	Temperature (Fahrenheit) 36

Warewashing Info					
Machine Name	Sanitization Method	Thermo Label	PPM	Sanitizer Name	Sanitizer Type
dish machine	chemical		50	chlorine	

Certified Manager		
Name JOSE M LEON	Certificate # CJEY-9VSLY8	Certificate Expiration 9/22/2019

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Comments:
Menu review and risk assessment conducted.

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Jose M. Leon Jr.

Sanitarian

Aron Newberry
(608) 785-9730