

RECOMMENDATION ON
APPLICATION FOR INSPECTION

1. ESTABLISHMENT NO.

2. DISTRICT CODE

3 0 2 9 1 2

3. TYPE OF INSPECTION

MEAT

POULTRY

IMPORT

4. DATE OF SURVEY

11-17-98

5. NAME AND MAILING ADDRESS OF APPLICANT

RAWS NATURAL MEAT
2379S 260th ST.
GALLATIN, MO. 64640

6. LOCATION OF ESTABLISHMENT (If different from Item 5)

3 mi. EAST of GALLATIN MO.
Corner Hwy 6 & 260 St.

7. ADDRESS OF DISTRICT OFFICE

4920 WEST 15th ST.
Lawrence, Mo. 66049

8. DATE ESTABLISHMENT WILL BE READY FOR SERVICE

11-30-98

9. RECOMMEND FOR GRANTING INSPECTION SERVICE?

YES

NO

10. ASSIGNMENT WILL BE COVERED BY: (Number)

FULL-TIME INSPECTORS

PART-TIME INSPECTORS

1 PATROL

REMARKS (Use additional blank pages as necessary)

w/Est. 8695 98710



The above-named establishment was surveyed and found to be in compliance as indicated above. Service should be inaugurated as indicated in Item 8 above.

CIRCUIT SUPERVISOR'S SIGNATURE

DATE

[Handwritten Signature]

11-16-98