**FOOD SAFETY EVALUATION REPORT**

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>A &amp; M MARKET</th>
</tr>
</thead>
<tbody>
<tr>
<td>BUSINESS PHONE:</td>
<td>(559) 212-5481</td>
</tr>
<tr>
<td>RECORD ID#:</td>
<td>PR0000377</td>
</tr>
<tr>
<td>DATE:</td>
<td>January 26, 2022</td>
</tr>
<tr>
<td>FACILITY SITE ADDRESS:</td>
<td>20510 MAIN ST</td>
</tr>
<tr>
<td>CITY:</td>
<td>STRATFORD</td>
</tr>
<tr>
<td>ZIP CODE:</td>
<td>93266</td>
</tr>
<tr>
<td>INSPECTION TYPE:</td>
<td>ROUTINE INSPECTION</td>
</tr>
<tr>
<td>OWNER NAME:</td>
<td>MAHMOD A ALRAHIMI</td>
</tr>
<tr>
<td>CERTIFIED FOOD MANAGER:</td>
<td>Not Specified</td>
</tr>
<tr>
<td>EXP DATE:</td>
<td></td>
</tr>
<tr>
<td>INSPECTOR:</td>
<td>Luis Flores - REHS</td>
</tr>
</tbody>
</table>

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

**Violation:** FOODS & EQUIPMENT NOT PROTECTED FROM CONTAMINATION

[HSC 113980, 114025-114027]

**Description/Corrective Action:** Numerous food packages and containers on general store shelving was noted with dust accumulation. Dust off all products as discussed during the inspection.

**General Comments:**

Work on the listed deficiency.

**RESULTS OF EVALUATION:**

- [ ] PASS
- [X] NEEDS IMPROVEMENT
- [ ] FAIL

**Reinspection Required:**

- [ ] Yes
- [X] No

**Reinspection Date (on or after):** N/A

**Potential Food Safety All Star:**

- [ ] Yes

**Received By:**

**Agency Representative:**

Luis Flores - REHS

**NOTE:** This report must be made available to the public on request.
FOOD SAFETY EVALUATION REPORT

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>BUSINESS PHONE:</th>
<th>RECORD ID#:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A &amp; M MARKET</td>
<td>(559) 463-5033</td>
<td>PR0000377</td>
<td>March 08, 2021</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FACILITY SITE ADDRESS:</th>
<th>CITY:</th>
<th>ZIP CODE:</th>
<th>INSPECTION TYPE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>20510 MAIN ST</td>
<td>STRATFORD</td>
<td>93266</td>
<td>ROUTINE INSPECTION</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OWNER NAME:</th>
<th>CERTIFIED FOOD MANAGER:</th>
<th>EXP DATE:</th>
<th>INSPECTOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAHMOD A ALRAHIM</td>
<td>Not Specified</td>
<td></td>
<td>Paven Batth</td>
</tr>
</tbody>
</table>

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

<table>
<thead>
<tr>
<th>Violation:</th>
<th>Description/Corrective Action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESTROOM FACILITIES NOT MAINTAINED</td>
<td>Proper hand soap was not observed in the employee restroom. Remove and replace dish soap with a proper hand washing soap to ensure proper hand washing procedures are taking place.</td>
</tr>
<tr>
<td>IMPROPER MAINTENANCE OF FACILITY OR EQUIPMENT</td>
<td>Walk-in refrigerator was noted to be cluttered. Accumulated beverage boxes and additional retail food boxes were noted all around the walk-in refrigerator, which prevented proper walkway access. Remove, organize, and properly store such products to allow proper pathway inside the walk-in refrigerator.</td>
</tr>
</tbody>
</table>

General Comments:

All food products stored at this facility are prepackaged. No hot holding is occurring or permitted at this facility.

In order to help mitigate the spread of COVID-19 (i.e., increase the risk of exposure), a signature was not obtained. The inspection report will be mailed to the facility's point of contact.

Results of Evaluation:

- [ ] PASS
- [X] NEEDS IMPROVEMENT
- [ ] FAIL

Reinspection Required: [ ] Yes: [X] No:

Reinspection Date (on or after): N/A

[ ] Potential Food Safety All Star:

Paven Batth
Agency Representative

NOTE: This report must be made available to the public on request
FOOD SAFETY EVALUATION REPORT

OWNER NAME: MAHMOD A ALRAHIMI
FACILITY NAME: A & M MARKET
FACILITY SITE ADDRESS: 20510 MAIN ST
CITY: STRATFORD
ZIP CODE: 93266
RECORD ID#: PR0000377
DATE: September 29, 2020
BUSINESS PHONE: (559) 947-3644
INSPECTOR: Paven Batth
INSPECTION TYPE: ROUTINE INSPECTION

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation. One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: RESTROOM FACILITIES NOT MAINTAINED
[HSC 114250 & 114276]
Description/Corrective Action: The restroom was observed to be unsanitary. Maintain the restroom to a sanitary condition. Clean the restroom on a daily basis.

Violation: SPOILED OR ADULTERATED FOOD PRODUCTS Displayed
[HSC 113980 & 114055]
Description/Corrective Action: 3 dented cans were observed from the general sales area. Remove all bulging or dented canned goods from sales. [Product: La Costena Green Pickled Jalapeno Peppers] Corrective Action: The facility manager removed the 3 dented cans from the general sales area. Violation was corrected on site.

General Comments:
Temperature Control: The walk-in cooler was noted below 41F.
General Sales: No hot foods are prepared by this facility.
Other Comments: In response to the COVID-19 pandemic, please implement the State (CDPH) guidelines (i.e., maintain a physical distance of 6 feet between individuals, use EPA-approved disinfectants, etc) with your business.

RESULTS OF EVALUATION: ☑️ PASS ☑️ NEEDS IMPROVEMENT ☑️ FAIL
Reinspection Required: ☑️ Yes ☑️ No ☑️ Reinspection Date (on or after): N/A
Potential Food Safety All Star: ☑️

Paven Batth
Agency Representative

NOTE: This report must be made available to the public on request