



# 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>Golden Eagle Charter School GEMS 2.0</b>  | Permit # <b>000621</b>   |
| Address: <b>845 4th St., Yreka, CA 96097</b>                |  |
| Permit Holder: <b>Golden Eagle Charters School GEMS 2.0</b> | Permit To Operate:<br><input checked="" type="checkbox"/> Valid <input type="checkbox"/> Not Valid |
| Phone: <b>530-926-5800 ext. 812</b>                         | E-mail: <b>schoolnutritionprogam@gecs.org</b>  |
| Food Safety Certified Employee: <b>Mary Mathus</b>          | Expiration Date: <b>06/2027</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: 20px;">ROUTINE INSPECTION CONDUCTED THIS DATE</p> <p>13) Observed no single-use paper towel inside towel dispensers, at all handwashing stations. Ensure paper towels are accessible for use and dispenses from dispensers at all times. Correct immediately.</p> |
|                       | 2  | Prep./ Service    |     |     |   |
|                       | 3  | Storage/ Disp.    |     |     |   |
|                       | 4  | Frozen Food       |     |     |   |
|                       | 5  | Pure Food         |     |     |   |
|                       | 6  | Reused Food       |     |     |   |
|                       | 7  | Transportation    |     |     |   |
| Food Storage          | 8  | Storage Fac.      |     |     |   |
|                       | 9  | Refrig. Units     |     |     |   |
|                       | 10 | Thermometer       |     |     |   |
|                       | 11 | Hazardous Mat.    |     |     |   |
|                       | 12 | Spoils            |     |     |   |
| Uten./Equip.          | 13 | Wash/ Sanitize    | X   |     |   |
|                       | 14 | Equip. Condition  |     |     |   |
|                       | 15 | Utensil Condition |     |     |   |
|                       | 16 | Storage           |     |     |   |
| Employee              | 17 | Handwashing       |     |     |   |
|                       | 18 | Employee Hygiene  |     |     |   |
|                       | 19 | Employee Habits   |     |     |   |
|                       | 20 | Food Cert./ Card  |     |     |   |
| Water                 | 21 | Water             |     |     |   |
|                       | 22 | Cross Con.        |     |     |   |
| Waste                 | 23 | Liquid Waste      |     |     |   |
|                       | 24 | Refuse            |     |     |   |
| Vermin                | 25 | Rodents/ Insects  |     |     |   |
|                       | 26 | Animal/ Fowl      |     |     |   |
| Facilities            | 27 | Ventilation       |     |     |   |
|                       | 28 | Doors             |     |     |   |
|                       | 29 | Floors            |     |     |   |
|                       | 30 | Walls - Ceilings  |     |     |   |
|                       | 31 | Toilet Fac.       |     |     |   |
|                       | 32 | Janitorial Fac.   |     |     |   |
|                       | 33 | Lighting          |     |     |   |
| Misc.                 | 34 | Clothing - Linen  |     |     |   |
|                       | 35 | Signs             |     |     |   |
|                       | 36 | Misc.             |     |     |   |

|   |  |
|---|--|
| MAJ = Major violation    OUT = Out of compliance    COS = Corrected on-site |  |
| Received By (Print): <b>Macey DeMartini</b>                                 | Received by (Signature): _____ Date: <b>07/23/2024</b> |
| REHS (Print): <b>Chalyn Dewey</b>   | REHS (Signature): _____ Phone: <b>530-841-2112</b>     |

**Facility Name:** Golden Eagle Charter School GEMS 2.0

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print):  
Maicey DeMartini

Received by (Signature):

Date:  
07/23/2024

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112

**Facility Name:** Golden Eagle Charter School GEMS 2.0

The marked items represent Health Code violations and must be corrected as follows:

*(This area is currently blank, intended for listing health code violations and their corrections.)*

|   |                          |                            |
|---|--------------------------|----------------------------|
| Received By (Print):<br><b>Maicey DeMartini</b> | Received by (Signature): | Date:<br><b>07/23/2024</b> |
|---|--------------------------|----------------------------|

|                                      |                   |                               |
|--------------------------------------|-------------------|-------------------------------|
| REHS (Print):<br><b>Chalyn Dewey</b> | REHS (Signature): | Phone:<br><b>530-841-2112</b> |
|--------------------------------------|-------------------|-------------------------------|

**Facility Name:** Golden Eagle Charter School GEMS 2.0

The marked items represent Health Code violations and must be corrected as follows:

Received By (Print):  
Maicey DeMartini

Received by (Signature):

Date:  
07/23/2024

REHS (Print):  
Chalyn Dewey

REHS (Signature):

Phone:  
530-841-2112