



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Receipt

16-51-1693319

16-BID-7317747

Group Care - Private Charter School

Issued To: KIPP Jacksonville Elementary School  
2525 W 1st Street  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$100.00  
Date Paid: 09/23/2024  
Issue Date: 10/01/2024  
**Expires On: 09/30/2025**

Mail To: Attention: Tom Majdanics  
QALICB2  
2525 W 1st Street  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: QALICB2

(904) 253-1280

Capacity (Max): 156.00

Original Customer: KIPP Jacksonville Elementary School (NON-TRANSFERABLE)



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DEPARTMENT OF HEALTH  
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Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: QALICB2

(904) 253-1280



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Sanitation Certificate

16-48-1693314

16-BID-7317073

Food Hygiene - School (9 months or less)

Issued To: KIPP Jacksonville Elementary School  
2525 W 1st Street  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$170.00  
Date Paid: 09/23/2024  
Issue Date: 10/01/2024

Expires On: 09/30/2025

Mail To: Attention: Tom Majdanics  
McDuff QALICB2  
2525 W 1st Street  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: McDuff QALICB2

(904) 253-1280

Food Type: Full Service      Seating Capacity (Max): 156.00

Food Hygiene Restrictions (if applicable)

Original Customer: KIPP Jacksonville Elementary School (NON-TRANSFERABLE)

DISPLAY CERTIFICATE IN A CONSPICUOUS PLACE



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Sanitation Certificate

16-48-1693314

16-BID-7317073

Food Hygiene - School (9 months or less)

Issued To: KIPP Jacksonville Elementary School  
2525 W 1st Street  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$170.00  
Date Paid: 09/23/2024  
Issue Date: 10/01/2024

Permit Expires On: 09/30/2025

Mail To: Attention: Tom Majdanics  
McDuff QALICB2  
2525 W 1st Street  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: McDuff QALICB2

(904) 253-1280

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT



**Facility Information**

RESULT: **Satisfactory**

Permit Number: 16-48-1693314  
 Name of Facility: **KIPP Jacksonville Elementary School**  
 Address: **2525 W 1st Street**  
 City, Zip: Jacksonville 32254

Type: School (9 months or less)  
 Owner: McDuff QALICB2  
 Person In Charge: Carletha Wooden      Phone: 904.683.6643  
 PIC Email: c.wooden@slamgmt.com

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 12:10 PM
Inspection Date: <b>9/19/2024</b>	Number of Repeat Violations (1-57 R): 0	End Time: 01:00 PM
Correct By: None	Facility Grade: N/A	
Re-Inspection Date: None	Stop Sale: No	

Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection

**FoodBorne Illness Risk Factors And Public Health Interventions**

<b>SUPERVISION</b>	IN 15. Food-contact surfaces; cleaned & sanitized
IN 1. Demonstration of Knowledge/Training	IN 17. Proper disposal of unsafe food
IN 2. Certified Manager/Person in charge present	<b>TIME/TEMPERATURE CONTROL FOR SAFETY</b>
<b>EMPLOYEE HEALTH</b>	IN 18. Cooking time & temperatures
IN 3. Knowledge, responsibilities and reporting	IN 19. Reheating procedures for hot holding
IN 4. Proper use of restriction and exclusion	IN 20. Cooling time and temperature
IN 5. Responding to vomiting & diarrheal events	IN 21. Hot holding temperatures
<b>GOOD HYGIENIC PRACTICES</b>	IN 22. Cold holding temperatures
IN 6. Proper eating, tasting, drinking, or tobacco use	IN 23. Date marking and disposition
IN 7. No discharge from eyes, nose, and mouth	NA 24. Time as PHC; procedures & records
<b>PREVENTING CONTAMINATION BY HANDS</b>	<b>CONSUMER ADVISORY</b>
IN 8. Hands clean & properly washed	NA 25. Advisory for raw/undercooked food
IN 9. No bare hand contact with RTE food	<b>HIGHLY SUSCEPTIBLE POPULATIONS</b>
IN 10. Handwashing sinks, accessible & supplies	NA 26. Pasteurized foods used; No prohibited foods
<b>APPROVED SOURCE</b>	<b>ADDITIVES AND TOXIC SUBSTANCES</b>
IN 11. Food obtained from approved source	NA 27. Food additives; approved & properly used
NO 12. Food received at proper temperature	IN 28. Toxic substances identified, stored, & used
IN 13. Food in good condition, safe, & unadulterated	<b>APPROVED PROCEDURES</b>
NA 14. Shellstock tags & parasite destruction	NA 29. Variance/specialized process/HACCP
<b>PROTECTION FROM CONTAMINATION</b>	
IN 15. Food separated & protected; Single-use gloves	

Inspector Signature:

*Sam Wood*

Client Signature:

*And in dem*

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT



Good Retail Practices

**SAFE FOOD AND WATER**

NA 30. Pasteurized eggs used where required

IN 31. Water & ice from approved source

NA 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

IN 33. Proper cooling methods; adequate equipment

IN 34. Plant food properly cooked for hot holding

IN 35. Approved thawing methods

IN 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

IN 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

IN 38. Insects, rodents, & animals not present

IN 39. No Contamination (preparation, storage, display)

IN 40. Personal cleanliness

IN 41. Wiping cloths: properly used & stored

IN 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

IN 43. In-use utensils: properly stored

IN 44. Equipment & linens: stored, dried, & handled

IN 45. Single-use/single-service articles: stored & used

IN 46. Slash resistant/cloth gloves used properly

**UTENSILS, EQUIPMENT AND VENDING**

IN 47. Food & non-food contact surfaces

IN 48. Ware washing: installed, maintained, & used; test strips

IN 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

IN 50. Hot & cold water available; adequate pressure

IN 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleaned

IN 54. Garbage & refuse disposal

IN 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

IN 57. Permit: Fees: Application: Plans

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.

Violations Comments

No Violation Comments Available

General Comments

Certified food manager: Carletha Wooden 03/2025  
Staff aware of major foodborne illnesses and their symptoms  
Handwashing sinks stocked and have adequate water pressure/temperature  
Staff restrooms stocked and have proper signage  
Reach in cooler: 37F, 41F  
Walk in cooler: 36F  
Reach in freezer: 0F, 0F  
Walk in freezer: 0F  
All TCS foods appear visibly frozen  
Temperature logs observed  
Hot holding: Black beans 146F, Hot dogs 140F, 145F, 147F  
Cold holding: juices 32F, milk 37F, 36F  
No signs of pests observed  
All food related items are date marked, labeled and stored 6 inches off the floor

Overall conditions are satisfactory

Email Address(es): c.wooden@slamgmt.com

Inspector Signature:

*Sam Wood*

Client Signature:

*Carletha Wooden*

Form Number: DH 4023 03/13

16-43-1693314 KIPP Jacksonville Elementary School

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT



Inspection Conducted By: Jaren Wood (49176)  
Inspector Contact Number: Work: (904) 253-1280 ex.  
Print Client Name:  
Date: 9/19/2024

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Inspector Signature:

*Jaren Wood*

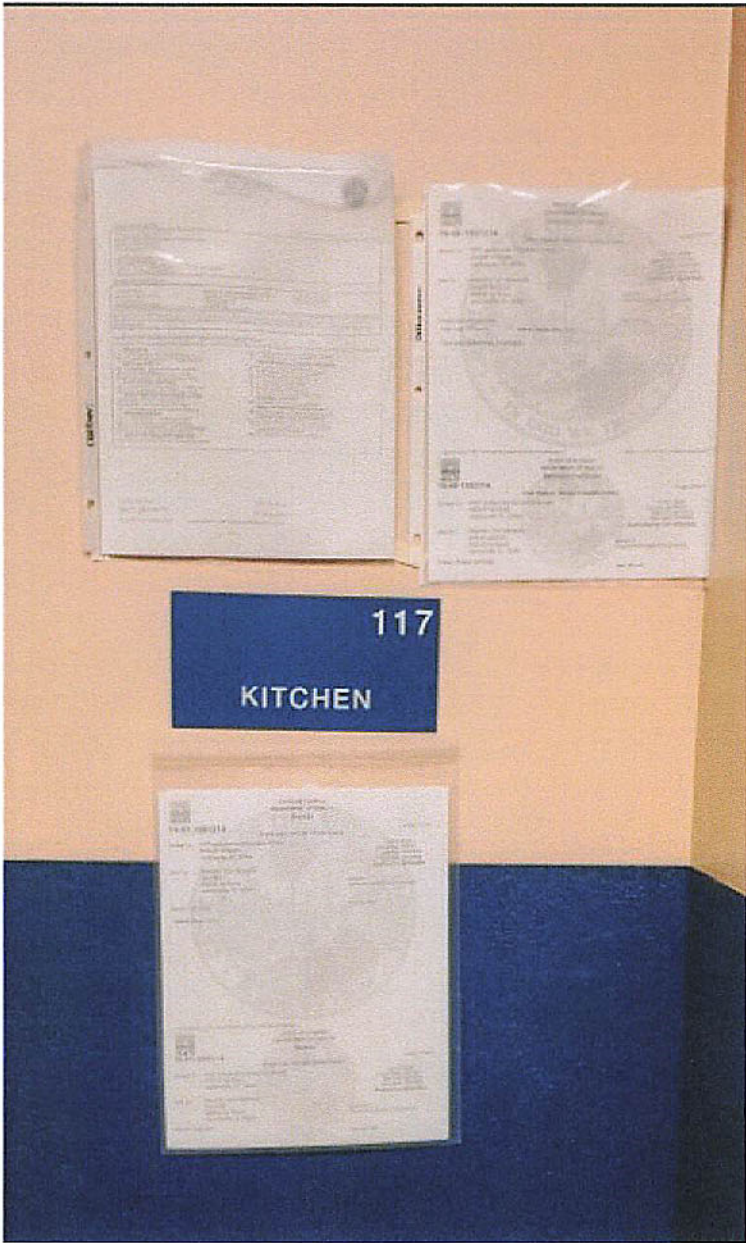
Client Signature:

*Amelia Chen*

Form Number: DH 4023 03/18

16-48-1693314 KIPP Jacksonville Elementary School





Document 1 (Top Left): A form with a circular diagram at the top. The text is mostly illegible but appears to be a checklist or a set of instructions. There is a small circular stamp or logo at the top right of the document.

Document 2 (Top Right): A form with a circular diagram in the center. The text is arranged in columns around the diagram. It appears to be a technical drawing or a set of instructions related to a circular object.

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KITCHEN

Document 3 (Bottom): A form with a circular diagram at the top. The text is mostly illegible but appears to be a checklist or a set of instructions. It is positioned on the dark blue lower portion of the door.



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Sanitation Certificate

16-48-1198779

16-BID-7317069

Food Hygiene - School (9 months or less)

Issued To: KIPP Jacksonville  
1440 McDuff Avenue N  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$170.00  
Date Paid: 08/29/2024  
Issue Date: 10/01/2024  
**Expires On: 09/30/2025**

Mail To: Attention: Attention: Owner/Operator  
KIPP Jacksonville Inc  
1440 N McDuff Avenue  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: KIPP Jacksonville Inc

(904) 253-1280

Food Type: Full Service      Seating Capacity (Max): 0.00

Food Hygiene Restrictions (if applicable)

Original Customer: KIPP Jacksonville (NON-TRANSFERABLE)

DISPLAY CERTIFICATE IN A CONSPICUOUS PLACE



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Sanitation Certificate

16-48-1198779

16-BID-7317069

Food Hygiene - School (9 months or less)

Issued To: KIPP Jacksonville  
1440 McDuff Avenue N  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$170.00  
Date Paid: 08/29/2024  
Issue Date: 10/01/2024  
**Permit Expires On: 09/30/2025**

Mail To: Attention: Attention: Owner/Operator  
KIPP Jacksonville Inc  
1440 N McDuff Avenue  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: KIPP Jacksonville Inc

(904) 253-1280



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Receipt

16-51-1198781

16-BID-7317745

Group Care - Private Charter School

Issued To: KIPP Jacksonville, Inc.  
1440 McDuff Avenue N  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$100.00  
Date Paid: 08/29/2024  
Issue Date: 10/01/2024

**Expires On: 09/30/2025**

Mail To: Attention: Attention: Owner/Operator  
KIPP Jacksonville Inc  
1440 N McDuff Avenue  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: KIPP Jacksonville Inc

(904) 253-1280

Capacity (Max): 90.00

Original Customer: KIPP Jacksonville, Inc. (NON-TRANSFERABLE)



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
Receipt

16-51-1198781

16-BID-7317745

Group Care - Private Charter School

Issued To: KIPP Jacksonville, Inc.  
1440 McDuff Avenue N  
Jacksonville, FL 32254

County: Duval  
Amount Paid: \$100.00  
Date Paid: 08/29/2024  
Issue Date: 10/01/2024

**Expires On: 09/30/2025**

Mail To: Attention: Attention: Owner/Operator  
KIPP Jacksonville Inc  
1440 N McDuff Avenue  
Jacksonville, FL 32254

Issued By:  
Department of Health in Duval County

Owner: KIPP Jacksonville Inc

(904) 253-1280



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 16-48-1198779  
 Name of Facility: KIPP Jacksonville  
 Address: 1440 McDuff Avenue N  
 City, Zip: Jacksonville 32254  
  
 Type: School (9 months or less)  
 Owner: KIPP Jacksonville Inc  
 Person In Charge: Donna Schlosser Phone: 904.738.4145  
 PIC Email: d.schlosser@slamgmt.com

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 10:00 AM
Inspection Date: 9/19/2024	Number of Repeat Violations (1-57 R): 0	End Time: 10:45 AM
Correct By: None	Facility Grade: N/A	
Re-Inspection Date: None	Stop Sale: No	

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**FoodBorne Illness Risk Factors And Public Health Interventions**

**SUPERVISION**

- IN 1. Demonstration of Knowledge/Training
- IN 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- IN 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- IN 6. Proper eating, tasting, drinking, or tobacco use
- IN 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- IN 8. Hands clean & properly washed
- IN 9. No bare hand contact with RTE food

OUT 10. Handwashing sinks, accessible & supplies (COS)

**APPROVED SOURCE**

- IN 11. Food obtained from approved source
- IN 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- NA 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- IN 15. Food separated & protected; Single-use gloves

IN 16. Food-contact surfaces; cleaned & sanitized

IN 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- IN 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- IN 21. Hot holding temperatures
- IN 22. Cold holding temperatures
- IN 23. Date marking and disposition

NA 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

NA 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

NA 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- NA 27. Food additives: approved & properly used
- IN 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

NA 29. Variance/specialized process/HACCP

Inspector Signature:

*John Wood*

Client Signature:

*Donna Schlosser*

Form Number: DH 4023 03/18

16-48-1198779 KIPP Jacksonville

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT



**Good Retail Practices**

**SAFE FOOD AND WATER**

NA 30. Pasteurized eggs used where required

IN 31. Water & ice from approved source

IN 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

IN 33. Proper cooling methods; adequate equipment

IN 34. Plant food properly cooked for hot holding

IN 35. Approved thawing methods

IN 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

IN 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

IN 38. Insects, rodents, & animals not present

IN 39. No Contamination (preparation, storage, display)

IN 40. Personal cleanliness

IN 41. Wiping cloths: properly used & stored

IN 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

IN 43. In-use utensils: properly stored

IN 44. Equipment & linens: stored, dried, & handled

IN 45. Single-use/single-service articles: stored & used

IN 46. Slash resistant/cloth gloves used properly

**UTENSILS, EQUIPMENT AND VENDING**

IN 47. Food & non-food contact surfaces

IN 48. Ware washing: installed, maintained, & used; test strips

IN 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

IN 50. Hot & cold water available; adequate pressure

IN 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleaned

IN 54. Garbage & refuse disposal

IN 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

IN 57. Permit; Fees; Application; Plans

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**Violations Comments**

Violation #10: Handwashing sinks, accessible & supplies

At time of inspection, handwashing sink was holding dirty dishes. Handwashing sinks must be clean and clear allowing for staff to wash hands. Items were removed. Corrected on site

CODE REFERENCE: 64E-11.003(5)(d). Handwashing sinks are properly equipped with hand soap, individual disposable towels or hand drying device, and signage; and conveniently located.

Inspector Signature:

*Joan Wood*

Client Signature:

*Donna Schlosser*

Form Number: DH 4023 03/18

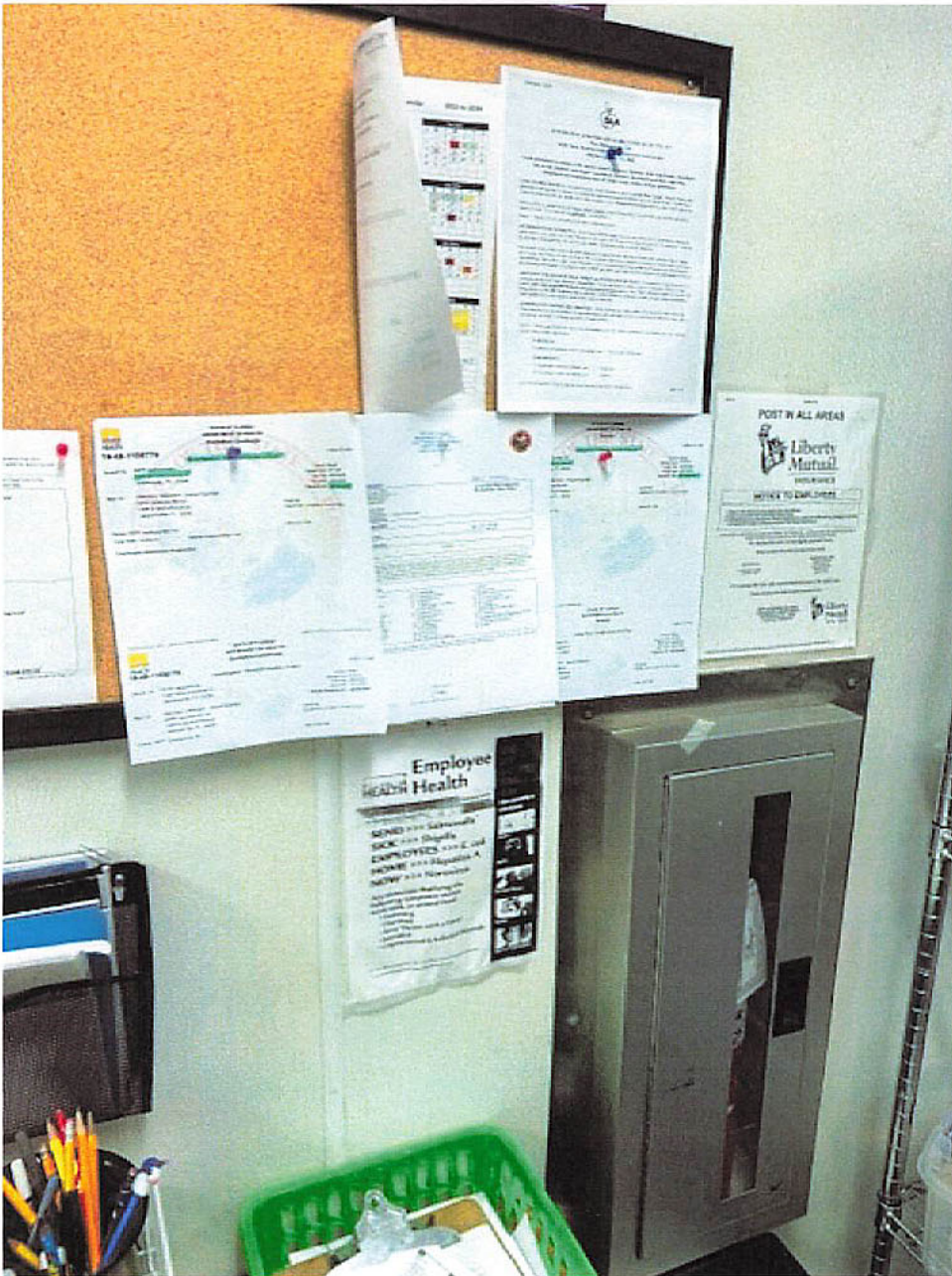
16-48-1198779 KIPP Jacksonville

**Bold health post**

From Katrease Yahoo <trease2323@yahoo.com>

Date Mon 11/4/2024 11:42 AM

To Katrease Sharavolli <KSharavolli@kipjax.org>



Sent from my iPhone