

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER Kan-DO 11630 West 80th Street Lenexa, KS 66214 (913)752-2100 Industry Information: www.fda.gov/oc/industry	DATE(S) OF INSPECTION 05/24/2011
	FEI NUMBER 3008776472

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED  
TO: Eugene A. Torgens, Owner

FIRM NAME Sunny Yolk Egg Ranch, LLC	STREET ADDRESS 11762 S. 134th Road
CITY, STATE AND ZIP CODE Adams, NE 68301	TYPE OF ESTABLISHMENT INSPECTED Shell Egg Manufacturer

THIS DOCUMENT LISTS OBSERVATIONS MADE BY THE FDA REPRESENTATIVE(S) DURING THE INSPECTION OF YOUR FACILITY. THEY ARE INSPECTIONAL OBSERVATIONS; AND DO NOT REPRESENT A FINAL AGENCY DETERMINATION REGARDING YOUR COMPLIANCE. IF YOU HAVE AN OBJECTION REGARDING AN OBSERVATION, OR HAVE IMPLEMENTED, OR PLAN TO IMPLEMENT CORRECTIVE ACTION IN RESPONSE TO AN OBSERVATION, YOU MAY DISCUSS THE OBJECTION OR ACTION WITH THE FDA REPRESENTATIVE(S) DURING THE INSPECTION OR SUBMIT THIS INFORMATION TO FDA AT THE ADDRESS ABOVE. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT FDA AT THE PHONE NUMBER AND ADDRESS ABOVE.

DURING AN INSPECTION OF YOUR FIRM (I) (WE) OBSERVED:

- ① Your written SE prevention plan is not fully implemented and followed.  
Specifically, your plan states foot baths are to be placed in high traffic areas and between sections. We observed dry footbaths at the entrance to the office and the entrance to the processing plant only.
- ② You do not maintain practices to protect against cross contamination when employees and equipment are moved between poultry houses. Specifically, your SE prevention plan does not address biosecurity if a house was SE positive. No documentation is maintained for the foot powder; frequency for changing and criteria dictating powder change.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Monica M. Medun Lori A. Gioia	EMPLOYEE(S) NAME AND TITLE (Print or Type) Monica M. Medun, Investigator Lori A. Gioia, Investigator	DATE ISSUED 05/24/2011
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NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Mr. Eugene A. Jurgens, Owner		FEI NUMBER 3008776472
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DURING AN INSPECTION OF YOUR FIRM (I) (WE) OBSERVED:

- ③ Your written SE plan does not bear a date or carry the signature of the person(s) who administer the plan.
- ④ All required records do not have the signature or ~~date~~ <sup>5/24/11</sup> initials of the person performing the <sup>ham</sup> operation or creating the record. Specifically, your fly count sheets dated 7-18-10 - 5-20-11 do not contain initials of person recording fly count results.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Monica M Lori A. Gioia	EMPLOYEE(S) NAME AND TITLE (Print or Type) Monica M McClure, Investigator Lori A. Gioia, Investigator	DATE ISSUED 5/24/11
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