



# Marion County Public Health Department

A DIVISION OF THE HEALTH AND HOSPITAL CORPORATION OF MARION COUNTY

## Department of Food and Consumer Safety

HEREBY ISSUES THIS LICENSE

TO: GROUNDED MUSHROOMS  
CORY SAMPSON  
MADE IN HOUSE LLC  
403 MAIN ST  
BEECH GROVE, IN 46107

**LICENSE NO: SKU-APP23-00078**

IN ACCORDANCE WITH THE CODE, CHAPTER \*\* EIGHT \*\*, OF THE HEALTH AND HOSPITAL CORPORATION OF MARION COUNTY, INDIANA.



REVOCATION OF LICENSE: Any license may be revoked by the Health Officer upon the violation by the holder of any of the terms of the above mentioned Ordinance.

TRANSFER OF LICENSE PROHIBITED: No license shall be sold, assigned, loaned or transferred.

2/28/2024

Expiration Date

12/12/2023

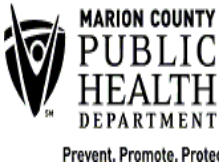
Date Issued

Virginia Caine, M.D.

Director

Marion County Public Health Department

**NOTICE: The licensed premises are subject to sanitary inspection by Marion County Public Health Department. LICENSE FEE IS NON-REFUNDABLE**



**LICENSE NO: SKU-APP23-00078**

GROUNDED MUSHROOMS  
CORY SAMPSON  
MADE IN HOUSE LLC  
103 DELBRICK LANE  
INDIANAPOLIS, IN 46229



**MARION COUNTY  
PUBLIC  
HEALTH  
DEPARTMENT**

Prevent. Promote. Protect.

Receipt No.: **1533608**

Receipt Date: **12/12/2023**

4701 North Keystone Avenue Suite 500

Indianapolis, IN 46205

# RECEIPT

## RECORD & PAYER INFORMATION

Record ID: SKU-APP23-00078  
 Record Type: Shared Kitchen User Application  
 Establishment: Grounded Mushrooms  
 Property Address: 403 MAIN ST, BEECH GROVE, IN 46107  
 Payer: GROUNDED MUSHROOMS SHARED KITCHEN  
 Applicant:

## PAYMENT DETAIL

Date	Payment Method	Reference	Cashier	Comments	Amount
12/12/2023	Check	829132586	AKINSLOW		\$60.00

## FEE DETAIL

Fee Description	Invoice #	Quantity	Fee Amount	Current Paid
Shared Kitchen User License Fee	2353416	1	60.00	60.00
				\$60.00