

FACILITY VISIT

Facility Name: Shelby Thatcher

Date: 05/04/2021

Time: 11:30

Provider: _____

Certificate #: 001460

Phone: 307-723-0513

Address: 1513 Canyon Road

City: Kemmerer

Facility Type: ___ FCCH ☒ FCCC ___ CCC

Comments/TA Provided:

5 children with Shelby today, children are finishing lunch. Staff files are current. The facility is compliant at the time of the visit.

Director/Provider:



Date: 05/04/2021

Childcare Licensur:



Date: 05/04/2021