

FACILITY VISIT

Facility Name: Lala's Littles

Date: 10/26/2022

Time: 09:22

Provider: _____

Certificate #: 014878

Phone: 307-630-5406

Address: 740 Everglade

City: Cheyenne

Facility Type: ___ FCCH ☒ FCCC ___ CCC

Comments/TA Provided:


Facility visit completed on this date. Director is not present during visit. 11 children to include 3 infants: 2 staff present. One staff on a Variance is present with one qualified staff.

Childcare Licensor:



Date: 10/26/2022

Director/Provider:



Date: 10/26/2022