State of Wyoming Department of Family Services

FACILITY VISIT

Facility Name: <u>Jennifers Child Care</u>

Date: <u>07/14/2020</u>

Time: <u>02:33</u>

Provider: _____

Certificate #: <u>001587</u>

Phone: <u>307-234-3062</u>

Address: 242 SOUTH LENNOX

City: Casper

Facility Type: X_FCCH ___ FCCC ___ CCC

Comments/TA Provided:

4 kids today 1-infant 1-2yr. 2-3yr. w/Jennifer. Discussed health recommendations.

Dicrector/Providor:

Date: <u>07/14/2020</u>

Childcare Licensor:

Date: <u>07/14/2020</u>