CCL-300 10/07

FACILITY VISIT

Facility Name: Powell Christian Preschool

Provider: _____

Address: 532 East Madison Street, Suite B

Facility Type: FCCH FCCC X CCC

Comments/TA Provided:

New director visit completed on this date.

Date: <u>10/07/2021</u> Certificate #: <u>001677</u> City: Powell

Time: 02:53 Phone: <u>307-202-3317</u>

Childcare Licensor:

Date: 10/07/2021

Dicrector/Providor:

my Barnort Date: <u>10/07/2021</u>