FACILITY VISIT

Date: 05/17/2022	Time: <u>08:30</u>
Certificate #: <u>016915</u>	Phone: <u>307-514-1300</u>
City: Cheyenne	
	Certificate #: <u>016915</u>

Facility Type: ____ FCCH ____ FCCC X CCC

Comments/TA Provided:

Unannounced visit completed on this date with DFS employee Renee and Sanitation Supervisor Tiffany. Checked ratios - in compliance at the time of the visit. Interviewed Director Jen Parker. Requested attendance records and time sheets for 4 previous Thursdays and 1 week after 3pm by tomorrow. Received all current staff members phone number. Additional concerns were noted by sanitation, and sanitation will follow up with a written report to both Director Jen and and Licensing.

Childcare Licensor:			Date: 05/17/2022
Dicrector/Providor:).	\mathcal{I}	Date: <u>05/17/2022</u>