

FACILITY VISIT

Facility Name: Family-Tree House

Date: 05/11/2021

Time: 10:50

Provider: _____

Certificate #: 017042

Phone: 307-763-3500

Address: 501 Sioux

City: Sheridan

Facility Type: ___ FCCH FCCC ___ CCC

Comments/TA Provided:

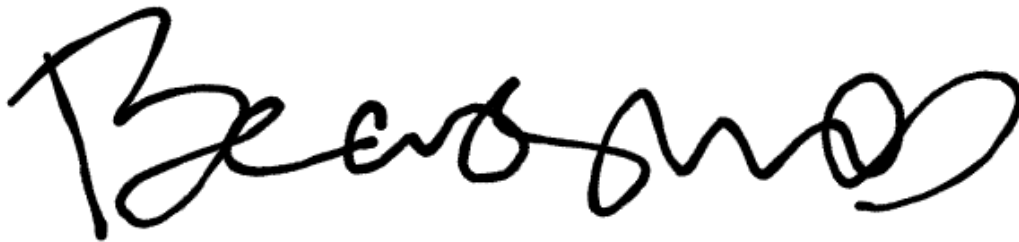
Stopped to drop off fingerprint cards. Licenser emailed labels needed to put on fingerprint cards. 1-1yr old, 6-2yrs, 5-3yrs, 1-4yr old with 2 staff. No changes or questions.

Director/Provider:



Date: 05/11/2021

Childcare Licensor:



Date: 05/11/2021