

FACILITY VISIT

Facility Name: Happy Heroes

Date: 05/24/2021

Time: 11:20

Provider: _____

Certificate #: 017156

Phone: (307) 871-8928

Address: 520 Wilkes Drive #2

City: Green River

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Children were dancing to a variety of songs. Lunch will be served soon. 9 children with 2 staff today. Things are looking good. Facility was complaint at the time of the visit.

Director/Provider:



Date: 05/24/2021

Childcare Licensor:



Date: 05/24/2021