FACILITY VISIT

Facility Name: Jenn's Daycare

Provider: ____

Address: 7103 Greensburgh Ave.

Date: <u>11/09/2021</u> Certificate #: <u>017203</u> City: <u>Gillette</u> Time: <u>01:30</u> Phone: <u>307-696-7910</u>

Facility Type: X_FCCH ___ FCCC ___ CCC

Comments/TA Provided:

Unannounced visit conducted. 3 total children present - 3yr, 4yr, & 11yr & 1 staff. No changes made to the facility & no questions at this time.

