FACILITY VISIT

Facility Name: <u>CARLA'S DAY CARE</u>

Date: <u>04/07/2021</u>

Time: <u>03:05</u>

Provider: _____

Certificate #: <u>001917</u>

Phone: <u>307-640-7014</u>

Address: 2842 Olive Drive

City: Cheyenne

Facility Type: X_FCCH ___ FCCC ___ CCC

Comments/TA Provided:

Monitoring visit done to follow up on the compliance for the WY C.R.s. Three children present, 1-1 year, 1-3 year old, 1-5 year old. Carla has 2 new dogs, Vaccination records checked.

Dicrector/Providor:

Date: <u>04/07/2021</u>

Childcare Licensor:

cavachous

Date: <u>04/07/2021</u>