State of Wyoming Department of Family Services

FACILITY VISIT

Facility Name: <u>Tots in Motion</u>

Date: 12/16/2021

Provider: _____

Certificate #: <u>002381</u>

Phone: <u>307-760-7336</u>

Time: <u>12:30</u>

Address: 1514 Barratt

City: Laramie

Facility Type: ___ FCCH X_FCCC ___ CCC

Comments/TA Provided:

Unannounced visit completed on this date. No hazards or violations observed. Reviewed your staff records - all are in compliance. 1:7 (I, I, 1, 2, 2, 2, 5) - ratios in compliance.

Childcare Licensor:

Date: 12/16/2021

Dicrector/Providor:

Date: <u>12/16/2021</u>