FACILITY VISIT

Facility Name: <u>Daytyme Day Care Center and Preschool</u>

Date: <u>10/20/2020</u>

Time: <u>11:00</u>

Provider: ____

Certificate #: <u>002427</u>

Phone: <u>307-875-7888</u>

Date: 10/20/2020

Address: 489 EAST 5TH SOUTH

City: <u>Green River</u>

Facility Type: ____ FCCH ___ FCCC X_CCC

Comments/TA Provided:

There are 19 children in attendance at the time of the visit with three staff members, Theresa, Sherry, Kristie (4 - 1 years old, 6 - 3 years old, 9 - 4/5 years old. The children and staff are all playing together out on the playground at the time of the visit and one staff person is changing a child in the bathroom. Facility is all in compliance at the time of the visit. Provider will send over current CPR/FA certificate for Christi since it is due to expire the end of October. Love the younger toddlers and infant space set up in the front classroom of the facility.

Dicrector/Providor:

Day of

Childcare Licensor:

Date: 10/20/2020