## FACILITY VISIT

Facility Name: Precious Ones

Provider:

Address: <u>1771 West D St.</u>

Date: <u>09/01/2021</u> Certificate #: <u>002453</u> City: <u>Torrington</u> Time: <u>03:40</u> Phone: <u>307-532-5689</u>

## Facility Type: X\_FCCH \_\_\_ FCCC \_\_\_ CCC

## Comments/TA Provided:

Thelma has 1 child with her this day. 2 will be coming after school today. Thelma will send a copy of her new driver's license when she gets it.

Childcare Licensor:

Date: <u>09/01/2021</u>

Dicrector/Providor:



Date: 09/01/2021