

FACILITY VISIT

Facility Name: Sublette BEEP

Date: 04/20/2022

Time: 11:30

Provider: _____

Certificate #: 002477

Phone: (307) 367-5505

Address: 665 N. Tyler

City: Pinedale

Facility Type: ___ FCCH ___ FCCC X CCC

Comments/TA Provided:

Investigation visit. CCL-301 was hand delivered and staff interviews were conducted.

Childcare Licensors:



Date: 04/20/2022

Director/Provider:



Date: 04/20/2022