FACILITY VISIT

Facility Name: Country Cottage Childcare

Provider:

Address: 243 W Main St.

Date: <u>07/20/2021</u> Certificate #: <u>017024</u> City: <u>Lovel1</u> Time: <u>11:46</u> Phone: <u>307-272-7145</u>

Facility Type: ____ FCCH X_FCCC ___ CCC

Comments/TA Provided:

Facility visit on this date to follow up on complaint regarding debris in outdoor play space and supervision. Misty and staff present during visit.

Childcare Licensor:



Dicrector/Providor:

why

Date: 07/20/2021