

FACILITY VISIT

Facility Name: KIM NORMAN

Date: 05/06/2022

Time: 10:00

Provider: \_\_\_\_\_

Certificate #: 001841

Phone: 307-684-5356

Address: 757 KLONDIKE DR.

City: Buffalo

Facility Type: \_\_\_ FCCH ☒ FCCC \_\_\_ CCC

Comments/TA Provided:

1yr, 0, 2yr, 1yr, 1yr, 3yr, 4yr, 4yr Eating at the time of the visit. Delivered rule book. No compliance due.

Childcare Licensor:



Date: 05/06/2022

Director/Providor:



Date: 05/06/2022