



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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SECRETARY

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Adam Mather
INSPECTOR GENERAL

Inspection Report

Provider Name: Jenkins, Samantha Renee	Provider Information Provider Type: CERTIFIED	CLR No: C71019
Provider Address: 3522 River Park Drive, Lexington, KY, 40517		Capacity: 6

Inspection Type: Investigation	Inspection Information	Inspection No: 289994
Date Initiated: 06/03/2019 10:40 AM	Date Concluded: 06/03/2019 11:08 AM	
No. of Children Enrolled: 6	No. of Children Present: 6	

Inspection Report		
Supervision	In Compliance	
General Administration	In Compliance	
Provider Records	In Compliance	

Signature of Provider/Representative

Title

Date