



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Commodore, Margaret Ann	Provider Information	CLR No: C6305
Provider Address: 2324 Joyce Avenue, Newport, KY, 41071	Provider Type: CERTIFIED	Capacity: 6

Inspection Type: Investigation	Inspection Information	Inspection No: 319519
Date Initiated: 11/15/2021 12:00 PM	Date Concluded: 11/15/2021 12:35 PM	
No. of Children Enrolled: 19	No. of Children Present: 5	

Inspection Report		
Supervision	In Compliance	
General Administration	In Compliance	

Signature of Provider/Representative

Title

Date