

Family Day Care Inspection Compliance Plan

Provider's Name: **Cheryl Stoesser**

City: **Fort Pierre**

Provider Number: **010280798**

Inspector: **Brenda Sharkey**

Date of Inspection: **01/24/2020**

Time of Inspection: **8:26 AM**

Provider was found to be in full compliance

Cheryl Stoesser

Provider Signature

01/24/2020

Date

Brenda Sharkey

Inspector Signature

01/24/2020

Date