

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **Kidstop - Black Hawk**

City: **Black Hawk**

Provider Number: **016531196**

Inspector: **Lori Janssen**

Date of Inspection: **01/22/2020**

Time of Inspection: **3:05 PM**

**Provider was found to be in full compliance**

**Marla Shaw**

Provider Signature

**01/22/2020**

Date

**Lori Janssen**

Inspector Signature

**01/22/2020**

Date