

Family Day Care Inspection Compliance Plan

Provider's Name: **Krystal Schuler**

City: **Rapid City**

Provider Number: **016597893**

Inspector: **Lori Janssen**

Date of Inspection: **08/10/2018**

Time of Inspection: **1:37 PM**

Provider was found to be in full compliance

Krystal Schuler

Provider Signature

08/10/2018

Date

Lori Janssen

Inspector Signature

08/10/2018

Date