

Family Day Care Inspection Compliance Plan

Provider's Name: **Sandra Styles**

City: **Rapid City**

Provider Number: **016598593**

Inspector: **Robert Weig**

Date of Inspection: **08/24/2020**

Time of Inspection: **2:32 PM**

Provider was found to be in full compliance

Sandra Styles

Provider Signature

08/24/2020

Date

Robert Weig

Inspector Signature

08/24/2020

Date