

# Family Day Care Inspection Compliance Plan

Provider's Name: **Brittany Johnson**

City: **Webster**

Provider Number: **017511317**

Inspector: **Julie Hermansen**

Date of Inspection: **04/09/2019**

Time of Inspection: **11:03 AM**

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

**Brittany Johnson**

Provider Signature

**04/09/2019**

Date

**Julie Hermansen**

Inspector Signature

**04/09/2019**

Date