

Family Day Care Inspection Compliance Plan

Provider's Name: **Mindee Johnson**

City: **Brandon**

Provider Number: **018029478**

Inspector: **Kelly Gnat**

Date of Inspection: **11/03/2020**

Time of Inspection: **7:48 AM**

Provider was found to be in full compliance

Mindee Johnson

Provider Signature

11/03/2020

Date

Kelly Gnat

Inspector Signature

11/03/2020

Date