



CABINET FOR HEALTH AND FAMILY SERVICES  
OFFICE OF INSPECTOR GENERAL

**Andy Beshear**  
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**Eric C. Friedlander**  
Secretary

**Adam Mather**  
Inspector General

**Inspection Report**

|  |                                 |                       |
|--|---------------------------------|-----------------------|
| <b>Provider Name:</b> Mansfield, Cristal Deneil                  | <b>Provider Information</b>     | <b>CLR No:</b> C71014 |
| <b>Provider Address:</b> 4306 Retreat Rd., Louisville, KY, 40219 | <b>Provider Type:</b> CERTIFIED | <b>Capacity:</b> 6    |

|   |   |                              |
|---|---|------------------------------|
| <b>Inspection Type:</b> Investigation     | <b>Inspection Information</b>             | <b>Inspection No:</b> 244864 |
| <b>Date Initiated:</b> 05/17/2018 1:30 PM | <b>Date Concluded:</b> 05/17/2018 2:21 PM |                              |
| <b>No. of Children Enrolled:</b> 5        | <b>No. of Children Present:</b> 5         |                              |

|                               |  |                      |
|-------------------------------|--|----------------------|
| <b>Inspection Report</b>      |  |                      |
| <b>General Administration</b> |  | <b>In Compliance</b> |

Signature of  
Provider/Representative

Title

Date