

Family Day Care Inspection Compliance Plan

Provider's Name: **Jennifer Bruce**

City: **Aberdeen**

Provider Number: **011102477**

Inspector: **Clint Rux**

Date of Inspection: **11/02/2020**

Time of Inspection: **9:15 AM**

Provider was found to be in full compliance

Jennifer Bruce

Provider Signature

11/02/2020

Date

Clint Rux

Inspector Signature

11/02/2020

Date