

Family Day Care Inspection Compliance Plan

Provider's Name: **Linda Puthoff**

City: **Sioux Falls**

Provider Number: **018033316**

Inspector: **Dwight Johnson**

Date of Inspection: **09/02/2020**

Time of Inspection: **8:00 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

B. Record Keeping/Fire Safety & Emergency Weather Drills

30. Does each child's record contain all required information? 67:42:16:13

Corrections To Be Made:

VC - Immunization Records
AS - Immunization Records

Agency Action:

Compliance Plan

Suggested
Completion
Date:

10/02/2020

Actual
Completion
Date:

09/15/2020

Status: **Corrected**

Linda Puthoff

Provider Signature

09/02/2020

Date

Dwight Johnson

Inspector Signature

09/02/2020

Date