

Family Day Care Inspection Compliance Plan

Provider's Name: **Cynthia Widman**

City: **Sioux Falls**

Provider Number: **018033712**

Inspector: **Rita Trager**

Date of Inspection: **01/22/2019**

Time of Inspection: **9:01 AM**

Provider was found to be in full compliance

Cyndee Widman

Provider Signature

01/22/2019

Date

Rita Trager

Inspector Signature

01/22/2019

Date