

Family Day Care Inspection Compliance Plan

Provider's Name: **Jennifer Podzimek**

City: **Wagner**

Provider Number: **018041775**

Inspector: **Kenneth
Anderson**

Date of Inspection: **03/20/2019**

Time of Inspection: **8:36 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:	Agency Action:
JA - Immunization Records	Compliance Plan
KS - Immunization Records	Suggested Completion Date:
ST - Immunization Records	Actual Completion Date:
	04/01/2019 03/28/2019
	Status: Corrected

Jennifer Podzimek

Provider Signature

03/20/2019

Date

Kenneth Anderson

Inspector Signature

03/20/2019

Date