

# Program Inspection Before & After School Center Compliance Plan

Provider's Name: **Kids Inc. - Garfield**

City: **Sioux Falls**

Provider Number: **018042546**

Inspector: **Stacie Ugofsky**

Date of Inspection: **03/27/2019**

Time of Inspection: **2:25 PM**

**Provider was found to be in full compliance**

**Teah Clifford**

Provider Signature

**03/27/2019**

Date

**Stacie Ugofsky**

Inspector Signature

**03/27/2019**

Date