

Family Day Care Inspection Compliance Plan

Provider's Name: **Deonna Nilson**

City: **Beresford**

Provider Number: **019506193**

Inspector: **Shannon Terhark**

Date of Inspection: **07/29/2020**

Time of Inspection: **10:12 AM**

Provider was found to be in full compliance

Deonna Nilson

Provider Signature

07/29/2020

Date

Shannon Terhark

Inspector Signature

07/29/2020

Date