

Program Inspection Compliance Plan

Provider's Name: **M&M Day Care**

City: **Huron**

Provider Number: **000097080**

Inspector: **Sarah Deakins**

Date of Inspection: **06/27/2024**

Time of Inspection: **10:04 AM**

Provider was found to be in full compliance

Marianne Freng

Provider Signature

06/27/2024

Date

Sarah Deakins

Inspector Signature

08/15/2024

Date