

Family Day Care Inspection Compliance Plan

Provider's Name: **Jami Dobesh**

City: **Brookings**

Provider Number: **010605136**

Inspector: **Ambuer Jaacks**

Date of Inspection: **06/29/2023**

Time of Inspection: **9:15 AM**

Provider was found to be in full compliance

Jami Dobesh

Provider Signature

06/29/2023

Date

Ambuer Jaacks

Inspector Signature

06/29/2023

Date