

Family Day Care Inspection Compliance Plan

Provider's Name: **Tanya Reszler**

City: **Aberdeen**

Provider Number: **010607104**

Inspector: **Clint Rux**

Date of Inspection: **10/17/2022**

Time of Inspection: **9:35 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:

**AB - Immunization Records
DT - Immunization Records**

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

11/17/2022

11/29/2022

Status: **Corrected**

Tanya Reszler

Provider Signature

10/17/2022

Date

Clint Rux

Inspector Signature

10/17/2022

Date