

Family Day Care Inspection Compliance Plan

Provider's Name: **Peggy Hamann**

City: **Watertown**

Provider Number: **011515487**

Inspector: **Ambuer Jaacks**

Date of Inspection: **06/16/2022**

Time of Inspection: **12:17 PM**

Provider was found to be in full compliance

Peggy Hamann

Provider Signature

06/16/2022

Date

Ambuer Jaacks

Inspector Signature

06/16/2022

Date