

Program Inspection Compliance Plan

Provider's Name: **Inter-Lakes Community Action
Partnership**

City: **Madison**

Provider Number: **011517206**

Inspector: **Ambuer Jaacks**

Date of Inspection: **04/25/2023**

Time of Inspection: **1:00 PM**

Provider was found to be in full compliance

Ashley Jensen

Provider Signature

04/25/2023

Date

Ambuer Jaacks

Inspector Signature

04/25/2023

Date