

Program Inspection Compliance Plan

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

City: **Madison**

Provider Number: **011517206**

Inspector: **Ambuer Jaacks**

Date of Inspection: **07/20/2022**

Time of Inspection: **10:00 AM**

Provider was found to be in full compliance

Joyce Harmon

Provider Signature

07/20/2022

Date

Ambuer Jaacks

Inspector Signature

07/20/2022

Date