

Family Day Care Inspection Compliance Plan

Provider's Name: **Megan Darger**

City: **Rapid City**

Provider Number: **016598594**

Inspector: **Robert Weig**

Date of Inspection: **08/30/2023**

Time of Inspection: **8:07 AM**

Provider was found to be in full compliance

Megan Darger

Provider Signature

08/30/2023

Date

Robert Weig

Inspector Signature

08/30/2023

Date