

Family Day Care Inspection Compliance Plan

Provider's Name: **Wanda Stirling**

City: **Parkston**

Provider Number: **019507791**

Inspector: **Renee Strong**

Date of Inspection: **02/28/2024**

Time of Inspection: **11:41 AM**

Provider was found to be in full compliance

Wanda Stirling

Provider Signature

02/28/2024

Date

Renee Strong

Inspector Signature

02/28/2024

Date