

Family Day Care Inspection Compliance Plan

Provider's Name: **Savannah Dickelman**

City: **Sioux Falls**

Provider Number: **018042675**

Inspector: **Kelly Gnat**

Date of Inspection: **06/26/2018**

Time of Inspection: **9:23 AM**

Provider was found to be in full compliance

Savannah Dickelman

Provider Signature

06/26/2018

Date

Kelly Gnat

Inspector Signature

06/26/2018

Date