



MISSISSIPPI STATE DEPARTMENT OF HEALTH

# Child Care Encounter

7-22-20

District 4

Date \_\_\_\_\_

Name	Children First	License No.	#7314
Address	2703 14th Ave Columbus Ms		
	Center/Organization/Individual		
Purpose	Six Month inspection wavier	Director	Curly Williams
Mileage Start		Mileage End	
County	lowndes	Telephone No.	
Time In		Time Out	
		Total Time	

## Findings/Comments

Received sign acknowledgment document by facility operator  
 assuring reviews of records, building complies with  
 MSDH Childcare Regulations, updated and free of hazards

Center Director/Designee/Individual

*Mary Hampton*  
 Child Care Representative

White Copy - Facility File  
 Yellow Copy - Operator