



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District IIDate 12-2-2020

Name <u>Harrisburg CASA</u>	License No. <u>7437</u>	
Address <u>532 South Church St. Tupelo, MS</u> Center/Organization/Individual		
Purpose <u>Mid Year</u>	Director <u>April Nunnallee</u>	
Mileage Start _____	Mileage End _____	
County <u>Lee</u>	Telephone No. <u>662-842-3887</u>	
Time In _____	Time Out _____	Total Time _____

Findings/Comments The signed Mid-Year waiver has been received

Center Director/Designee/Individual

Kimberly Clark
Child Care RepresentativeWhite Copy - Facility File
Yellow Copy - Operator