



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District II

Date 2-26-2020

Name <u>Color My World 2</u>	License No. <u>7502</u>
Address <u>532 South Church St., Type 6</u>	<u>38804</u>
Center/Organization/Individual	
Purpose <u>Follow up POC</u>	Director <u>Lacey Clements</u>
Mileage Start _____	Mileage End _____
County <u>Lee</u>	Telephone No. <u>662-269-2488</u>
Time In _____	Time Out _____
Total Time _____	

Findings/Comments. The plan of correction on child care encounter dated February 12, 2020 required the facility to submit two (2) updated MSDH Form #121 for children. Requested documents received on February 26, 2020.

Upon review the plan of correction was followed and the violation was corrected.

Center Director/Designee/Individual

Kimberly Clark
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator