

ADMINISTRATIVE SERVICES DIVISION **Child Care Encounter**

Date: **7-15-2020**

Number	1		
Name	Viken		
Address	6583 Horn Lake Rd, Horn Lake, MS 38632		
Project	Mid Year Inspection		
Inspector	Dawn Wilson		
Message Short	Message End		
Client	De Soto		
Telephone No.	662-4562-2097		
From	Group	Child	Total Time

Findings Comments

Received mid year acknowledgment sent via email and signed by Hardy Smith.

Center Director Signature (Initial)

Hardy Smith
 Child Care Representative

Director Copy
 Nathan (Copy) [Signature]

Administrative Services Division of Health

Revised 6-24-201

Form No. 303