



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 1Date 11-29-2021Name Lake City Kids License No. 0540Address 1515 Jackson Ave Grenada Ms 38901
*Center/Organization/Individual*Purpose Follow-up on playground Director Theresa Procella

Mileage Start _____ Mileage End _____

County Grenada Head Start Telephone No. _____

Time In _____ Time Out _____ Total Time _____

Findings/Comments Playground compliance. All required documents have been received and approved.

Center Director/Designee/Individual

Thelma Shegog
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator