



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 1Date 4-30-2020

Name YMCA Walls Elementary License No. 5906
 Address 6131 Delta View Rd Walls MS 38680
Center/Organization/Individual
 Purpose Mid Year Inspection Director _____
 Mileage Start _____ Mileage End _____
 County De Soto Telephone No. 662-562-7059
 Time In _____ Time Out _____ Total Time _____

Findings/Comments

Received mid year waiver acknowledgment
signed by Mandy Smith, via email.

Center Director/Designee/Individual

Shirley Shaw
 Child Care Representative

White Copy - Facility File
 Yellow Copy - Operator

Mississippi State Department of Health

Revised 6-24-09

Form No. 28