

MISSISSIPPI STATE DEPARTMENT OF HEALTH

District _____

Date 10-13-2020

Name Braelyn Brax License No. 39107
Address 532 South Church St. Tupelo, MS 38804
Center/Organization/Individual
Purpose Follow up/Poc Director Michelle Floyd
Mileage Start _____ Mileage End _____
County Lee Telephone No. 662-620-6330
Time In — Time Out — Total Time —

Findings/Comments: Renewal application and renewal fee received on October 13, 2020.

Center Director/Designee/Individual

Kimberly Clark
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator