## Please sign the acknowledgment below and send back to your licensing official.

This letter is an acknowledgment from the Mississippi State Health Child Care Licensure

Division to the	person(s) who will b	e held responsible for any	violations that may	be toding with
conducting any	type of inspection.			
2 2	1 14.100	( ) to the come	aity of onmer direct	or or director
1, Terry	France,	(name), serve in the capa	any or owner, unece	oden that I was

I, ferry from (name), serve in the capacity of owner, director, or director designee of from the facility is free of hazards. (name), serve in the capacity of owner, director, or director designee of from the facility is free of hazards.

I realize that by signing this document that I am agreeing that all required documents that are needed for a temporary, mid-year, and renewal inspection for a license are in place at this time.

Director Signature

Date of Signature