

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

This letter is an acknowledgement from the Mississippi State Health Child Care Licensure Division to the person(s) who will be held responsible for any violations that may be found while conducting any type of inspection.

I, Brenda Anderson (name), serve in the capacity of owner, director, or director designee of Nugent United Methodist C.D.C. (center name). I acknowledge that I was instructed to review my records and building to assure that all documents are current and up-to-date and that 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.

Brenda Anderson  
Director Signature

11-6-2020  
Date of Signature