

Compliance Statement
Certified Family / In-Home Child Care

TO FILE A COMPLAINT, CALL: (262) 657-2142

Use of Form This form is used by the certification work to indicate to certified family / in-home child care programs that there were no violations of the administrative rules observed during the certification visit.

Instructions The certification worker checks the administrative code topic areas that were observed to have no rule violations. If the certification work is not able to review all the rules under a topic area of the administration rule (as listed below), the worker shall indicate the specific rules monitored

Name - Certified Operator Judith Neu	Address - Program (Street, City, State, Zip Code) 3321 24Th ST UNITC Kenohsa, WI 53144	Telephone Number (262) 287-4410	Provider No. 7000579437 / 002
---	---	------------------------------------	----------------------------------

NO ADMINISTRATIVE CODE VIOLATIONS WERE OBSERVED DURING THIS CERTIFICATION VISIT.

The following checked items indicate the topic areas and/or partial topic areas of administrative code that were monitored on this visit.

<input type="checkbox"/> Activities	<input checked="" type="checkbox"/> Confidentiality/CAN 1 of 3 rules monitored.	<input type="checkbox"/> Discrimination Prohibited
<input checked="" type="checkbox"/> Emergencies All rules monitored.	<input type="checkbox"/> Equipment and Furnishings	<input type="checkbox"/> Group Size
<input checked="" type="checkbox"/> Health 10 of 17 rules monitored.	<input type="checkbox"/> Meals and Snacks	<input checked="" type="checkbox"/> Operational Req/Home 35 of 63 rules monitored.
<input checked="" type="checkbox"/> Provider Communication 1 of 10 rules monitored.	<input type="checkbox"/> Provider Interactions	<input checked="" type="checkbox"/> Provider Qualifications 7 of 12 rules monitored.
<input checked="" type="checkbox"/> Rest All rules monitored.	<input checked="" type="checkbox"/> Supervision 1 of 9 rules monitored.	<input checked="" type="checkbox"/> Transportation 11/35 rules monitored.

Certification Worker Name Andria Connolly-Meyers	Visit Date 6/1/2026	Issue Date 6/1/2026
---	------------------------	------------------------