Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
7/23/2026		920-785-7811

Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f)., DCF 252.41(1)(L) and (2)(k). Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and / or administrative rule. Public Schools may submit plans of correction however are not required to do so.

Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a licensed child care, post your copy of the noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. This request for a correction plan is not an order imposing a sanction or penalty pursuant to Wis. Stat. 48.715. If the department decides to apply a statutory sanction and / or penalty for facts arising from this finding or a future finding, you will be given a notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center	Provider Number / Facility ID Number
Kecamps-River Club Day Camp	6000587786 / 001 - 2001234

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
12400 N Ville Du Parc Dr Mequon WI 530922448	877-671-2267	7/8/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	252.41(1)(e)1. **Insurance Coverage - General Liability** Description: Based upon record review the insurance was expired.	Will have on site. Please see attached.	7/29/26	
2	252.42(1)(a)1. **Staff File - Personal Information** Description: Based upon record review staff files did not contain documentation of personal information Repeat violation: Previously cited on 7/9/2025, 7/15/2024	Staff files - will have on site. Looking into electronic files for 2027 (google)	2027 season	

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	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	252.42(1)(a)4. **Staff File - Pre-Camp Training** Description: Based upon record review the pre camp training was missing for counselors on premise. Repeat violation: Previously cited on 7/9/2025, 7/15/2024	will work with licensing Specialist to submit exception.	2027 Seasm	
4	252.42(3)(e) **Cardiopulmonary Resuscitation Training** Description: Based upon record review a counselor on premise did not have documentation of completion of the cardiopulmonary resuscitation training Repeat violation: Previously cited on 7/9/2025, 7/15/2024	Will have on site. Looking into electronic files for 2027. Please see attached CPR for all staff.	2027 Seasm	
5	252.44(6)(g)3.b. **Medical Log - Injuries In Care** Description: Based upon staff statement child injuries occurring during camp session are not being documented in the medical log book only on incident forms.	Spoke to Director. moving forward ALL incidents will be recorded in log book. Will also add to medication training & licensing video for 2027	2027 Seasm	

NAME - Agency Worker
Amanda Holz

Date Issued
7/9/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee
Kimberly Gruppo

Date Signed
7/29/26

CERTIFICATE OF INSURANCE

PRINT DATE: 5/8/2026

CERTIFICATE NUMBER: 202605061199290

AGENCY:

Edgewood Partners Insurance Center
5909 Peachtree Dunwoody Road, Suite 800
Atlanta, GA 30328
678-324-3300 (Phone), 678-324-3303 (Fax)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

NAMED INSURED:

KE East, LLC
174 Tamarack Cir
Skillman NJ 08558

INSURERS AFFORDING COVERAGE:

INSURER A: HDI Global Specialty SE NAIC#: 16131
INSURER B: Wesco Insurance Company NAIC#25011

EVENT INFORMATION:

KE Camps (6/15/2026 - 8/7/2026)

POLICY/COVERAGE INFORMATION:

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:	
A	GENERAL LIABILITY					
	X Occurrence X Participant Legal Liability X Sexual Abuse & Molestation	18LB8285	10/20/2025 12:01 AM	10/1/2026 12:01 AM	General Aggregate (Per Event) Each Occurrence Damage to Rented Premises (Each Occ.) Medical Expense (Any one person) Personal & Advertising Injury Products-Comp/Op Agg Abuse-Molestation (Each Occurrence) Abuse-Molestation (Annual Aggregate)	$2,000,000 $1,000,000 $1,000,000 $5,000 $1,000,000 $2,000,000 $1,000,000 $2,000,000
B	WORKERS' COMPENSATION & EMPLOYER'S LIABILITY					
		WWC3850799	3/1/2026 12:01 AM	3/1/2027 12:01 AM	Workers' Compensation E.L. Each Accident E.L. Disease - Each Employee E.L. Disease - Policy Limit	Per Statute $1,000,000 $1,000,000 $1,000,000
A	UMBRELLA/EXCESS LIABILITY					
	X Occurrence X Sexual Abuse & Molestation	18EX4551	10/20/2025 12:01 AM	10/1/2026 12:01 AM	Each Occurrence Aggregate (Applies Per Event)	$5,000,000 $5,000,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:

Certificate Holder is additional insured as per written agreement executed prior to the date of loss as per form CG2026 (04/13) - Additional Insured - Designated Person or Organization.

Coverage is available under a Participant Accident policy #US2172129 with United States Fire Insurance Company on file with the policyholder - Accident Medical Coverage
$50,000, deductible $500 - Accidental Death & Dismemberment $10,000. Policy effective date: October 1, 2025 / Policy expiration date: October 1, 2026.

CERTIFICATE HOLDER:

TLW Investments, LLC DBA The River Club of Mequon
12400 North Ville du Parc Drive
Mequon WI 53092

NOTICE OF CANCELLATION:

Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.

AUTHORIZED REPRESENTATIVE:



Certificate of Completion

kassanda smith

has completed the requirements for

Adult, Child and Baby First Aid/CPR/AED Online (Eligible for Skills Session within ' days)

conducted by:

American Red Cross

Date Completed: **07/08/2026**

Valid Until: **07/08/2028**

Certificate ID: **02BSSLU**

American Red Cross

Scan code or visit:

https://www.redcross.org/take-a-class/qrcode?certnumber=02BSSLU

Certificate of Completion

Inayah Khan

has completed the requirements for

Adult, Child and Baby First Aid/CPR/AED Online (Eligible for Skills Session within 5 days)

conducted by:

American Red Cross

Date Completed: **04/30/2026**

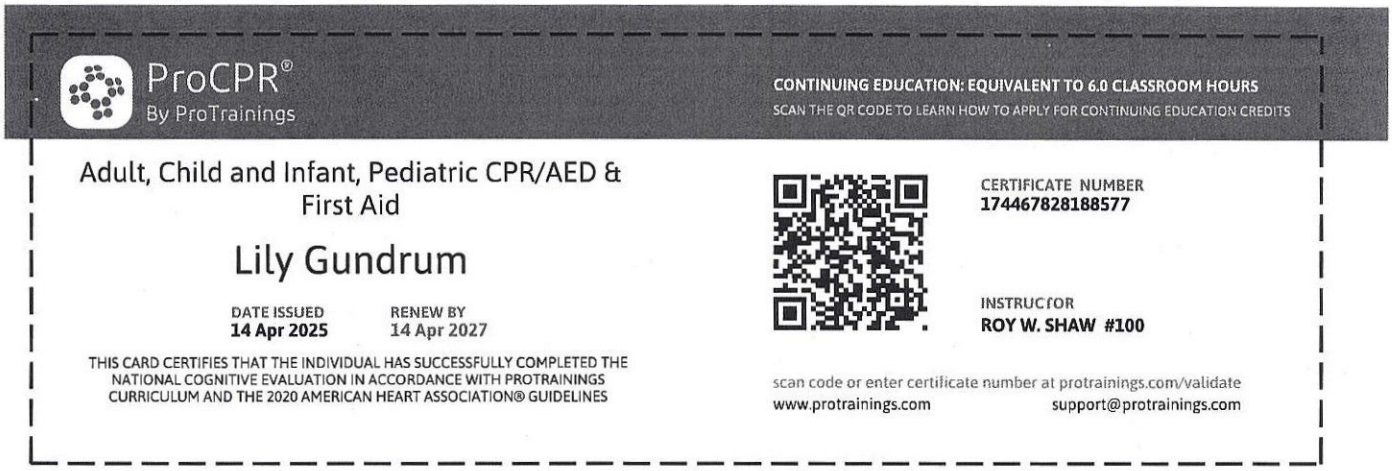
Valid Until: **04/30/2028**

Certificate ID: **029RUPU**

American Red Cross

Scan code or visit:

https://www.redcross.org/take-a-class/qrcode?certnumber=029RUPU



Dear Lily,

Your ProFirstAid certificate is printed above.

You can access this page anytime by logging into www.protrainings.com and clicking Print Certificate.

Now that you're certified, don't forget to add it to your LinkedIn Profile. Just click the link below and let us do the rest!

>>> Click here to add your certificate to LinkedIn <<<

ProCPR®
By ProTrainings

ProTrainings hereby certifies that

Shreena Alzubedi

has successfully completed the education in

Adult, Child and Infant, Pediatric CPR/AED & First Aid

This Certification includes the following objectives and is consistent with national consensus 2025 ECC/ILCOR and American Heart Association® Guidelines.

- Adult & Pediatric CPR
- AED
- Bleeding Control
- Musculoskeletal Injuries
- Poisoning
- Shock Management
- Breathing Emergencies
- Heart Attack
- Choking, Conscious and Unconscious
- Adult and Pediatric First Aid
- Universal Precautions
- Diabetic Emergencies
- Stroke
- Burns
- Bites and Stings
- Allergic Reactions
- Seizures
- Heat and Cold Emergencies

INSTRUCTOR
ROY W. SHAW #100

Roy W. Shaw

CERTIFICATE NUMBER
178149297461535

DATE ISSUED
14 Jun 2026

RENEW BY
15 Jun 2028

ProTrainings | 6452 E Fulton St. #1, Ada, MI 49301 | 888-406-7487 | support@protrainings.com | protrainings.com

Certificate of Completion

Joey Meyer

has completed the requirements for

Adult
Child and Baby First Aid/CPR/AED
Online (Eligible for Skills Session within 90 days)

conducted by

American Red Cross

Date Completed: **05/18/2026**

Valid Until: **05/18/2028**

Certificate ID: **02APQ9M**

American Red Cross

Scan code or visit:

https://www.redcross.org/take-a-class/qrcode?certnumber=02APQ9M