Name of Foster Parents (s): <u>MELEGRITO, Ronald & Roselle</u> Date of Inspection: 6/25/21

Department of Health Developmental Disabilities Division Adult Foster Home Corrective Action Report

□□No deficiencies. Home Inspection after COVID-19 Emergency.

SECTION	PLAN CORRECTION (To be completed by the caregiver)	Completion Date
	(To be completed by the caregiver)	