Division of Health Service Regulation

MHL092-916 Name of Provider or Supplier Street Address, City, State, Zip code 450 Bull.Ding Futures Circle RALEIGH, NC 27610	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE COMF	(X3) DATE SURVEY COMPLETED	
LEARNING SERVICES CORPORATION-CEDAR 450 BUILDING FUTURES CIRCLE RALEIGH, NC 27610 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) V 000 INITIAL COMMENTS An annual survey was completed on June 28, 2019. No deficiencies were cited. The facility is licensed for the following service category: NCAC 27G .2100 Specialized			MHL092-916		B. WING		06/2	28/2019	
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Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE (X6) DATE