CHILD PLACEMENT AGENCY REPORT

Provider Organization: Pressley Ridge, Inc.

Licensing Agency: DHS

Name of Chief Administrator: Damon Thompson

License Type: TFC

Contracting Agency(s): DHS, DJS

Email: DEThompson@pressleyridge.org

Type of Inspection: Quarterly

<table>
<thead>
<tr>
<th>Name and Address of CPA Office</th>
<th>License Capacity</th>
<th>DHS Contract Limit</th>
<th>Census by Placing Agency</th>
<th>License#/ Exp. date</th>
<th>Date of site Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pressley Ridge- Cumberland</td>
<td>Unlimited</td>
<td>107 (Total for both TFC sites)</td>
<td>15</td>
<td>#00390 04/15/2019</td>
<td>NA</td>
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<tr>
<td>327 Beall Street, Cumberland, MD 21502</td>
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<tr>
<td>Pressley Ridge- Baltimore (TFC)</td>
<td>Unlimited</td>
<td>45 (Parent/Child)</td>
<td>24 (Parent/Child) 30 TFC</td>
<td>#00441 04/15/2019</td>
<td>07/16/2018</td>
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<tr>
<td>25 N. Caroline Street, Baltimore, MD 21204</td>
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Inspection Summary

Number of Records Reviewed: Youth 5 Staff 0 Foster Parent 4 Adoptive Parent NA

Number of Interviews: Youth 0 Staff 0 Foster Parent 0

CPA Office Inspection: Continued

Number of ILP Apartments Inspected: NA

Number of Foster Homes Inspected: 0

Current COMAR Violation: Yes X No

If Yes, list Cited Violation(s) below:

<table>
<thead>
<tr>
<th>Violation(s)</th>
<th>Findings</th>
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</thead>
</table>

Corrective Action Plan: Yes X No

If yes, date of CAP:

Any Violations During Mid or Re-Licensure Periods: Yes X No

If Yes See Report (s) Date(s):

Complaint Outcome: NA

Current Status of License: Continued

Licensing Coordinator: Sherlema Ferguson Date: 8/20/18 Email: sherlema.ferguson@maryland.gov

Program Manager: Richard Berger Date: 8/20/18 Email: richard.berger@maryland.gov