

**Certified Naturally Grown™
SUMMARY INSPECTION REPORT - Produce**

Farm Name Spring Hills Farm
Grower's Name Margaret Hull
Inspector Megan De Wolfe
Inspection Date 11/19/08 Total On-Farm Inspection Time: _____

To the best of my abilities and based on my observations and interview with the producer(s), I feel confident in making the following declarations about the farm the above grower wants to have listed as Certified Naturally Grown™ :

I saw no evidence of prohibited insecticides, herbicides, fungicides, prohibited chemical fertilizer, hormones or antibiotics use. Agree / Disagree MDW
(Your initials)

The farmer is not irrigating from a water source that I know or suspect to be chemically contaminated. Agree / Disagree MDW
(Your initials)

The fields and pasture under consideration look to be surrounded by an adequate buffer to protect from chemical or spray drift contamination. Agree / Disagree MDW
(Your initials)

The farmer is careful to make sure that no genetically modified or chemically treated seeds are used on this acreage. Agree / Disagree MDW
(Your initials)

The Grower(s) demonstrate a commitment to sustainable agricultural practices that seek to maintain and increase the long-term fertility of soils and protect and conserve water resources. Agree / Disagree MDW
(Your initials)

I certify that to the best of my abilities, observations, and based on my personal interview with the producer(s), I feel confident in recommending that the above listed producer(s) and their farm or ranch

be included **not be included** (please circle one)

in the Certified Naturally Grown™ program.

Megan D. Wolfe
Signature of Inspector

11/19/08
Date