Certified Naturally Grown SUMMARY INSPECTION REPORT

Farm Name: GARDEN PATCH FARM Grower(s) Name: The LEONALD Inspector: Inspection Date: Z-Z3-06 Total On-Farm Inspection Time: Z/Z hRS Please circle YES or NO and Initial the line next to the question.			
		To the best of my abilities and based on my observations grower(s), I feel confident in making the following declar the above grower wants to have listed as Certified Natura	ations about the farm acreage
		I saw no evidence of prohibited insecticides, herbicides, fungicides or prohibited chemical fertilizer use:	Agree / Disagree PM
The farmer is not irrigating from a water source that I know to be chemically contaminated:	Agree / Disagree		
The acreage under consideration looks to be surrounded by an adequate buffer to protect from chemical/spray drift contamination:	Agree / Disagree PM		
Farmer is careful to make sure that no genetically modified or chemically treated seeds are used on this acreage:	Agree Disagree PM		
The Grower(s) demonstrates 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 PM		

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

be included not be included (please circle one)

in the Certified Naturally Grown™ program.

Signature of Inspector

2-23-06

Date