

ATTACHMENT 3

DESIGNATED POINT OF CONTACT
ORGANIZATION
STREET ADDRESS
CITY, STATE ZIP
REFERENCE NUMBER

DATE

Dear NAME:

Thank you for providing the information requested in our letter of DATE. This information is sufficient to allow us to continue our evaluation of your request for approval of a State Organic Program for STATE.

Our anticipated date for providing you with a decision on your request CONTINUES TO BE/IS NOW DATE.

If you have any questions, please e-mail Bob Pooler at bob.pooler@usda.gov or call him at 202-720-3252.

Sincerely,

RICHARD H. MATHEWS
Program Manager
National Organic Program

March 11, 2002