

**Certified Naturally Grown™  
SUMMARY INSPECTION REPORT**

**Farm Name:** Lone Oak Farms  
**Grower(s) Name:** Susan West  
**Inspector:** Pam Dunn  
**Inspection Date:** 4/30/2006 **Total On-Farm Inspection Time:** 2 1/2 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 and interview with the grower(s), I feel confident in making the following declarations about the farm acreage the above grower wants to have listed as Certified Naturally Grown™:

- I saw no evidence of prohibited insecticides, herbicides, fungicides or prohibited chemical fertilizer use:  Agree / Disagree PD
- The farmer is not irrigating from a water source that I know to be chemically contaminated:  Agree / Disagree PD
- The acreage under consideration looks to be surrounded by an adequate buffer to protect from chemical/spray drift contamination:  Agree / Disagree PD
- Farmer is careful to make sure that no genetically modified or chemically treated seeds are used on this acreage:  Agree / Disagree PD
- 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 PD

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.

Pamela J. Dunn  
Signature of Inspector

4/30/2006  
Date