

**Certified Naturally Grown  
PRODUCE SUMMARY INSPECTION REPORT**

Farmer/s: Karen Gess Farm name: MIDSOMMAR FARM LLC  
 Inspector: Hillary Banachowski Affiliation (farm name, extension...) Sacred Roots

Inspector is a:  CNG Farmer  Farmer using natural practices  Cert Organic Farmer  
 Sust Ag Educator  Extension Agent  Customer (1 of 3)

Date of the inspection: 6/14/23 How long did the inspection last?: 1 hour

Was this inspection carried out in person or via remote video?  In Person  Remote Video\*  
 \*Remote inspections are coordinated by CNG staff and must follow [www.naturallygrown.org/remote-inspections-policy](http://www.naturallygrown.org/remote-inspections-policy)

Based on my observations and interview with the producer(s), I feel confident in making the following declarations about the operation:


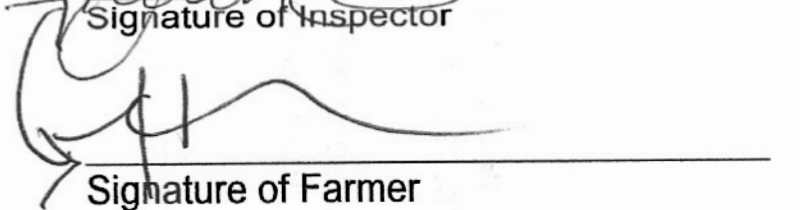
- The producer engages in sustainable agricultural practices that promote the long-term fertility of soils and conserve water resources on their farm. Agree / Disagree HB  
(Your initials)
- The farmer demonstrates a commitment to the protection of the air, soils, waters, and biodiversity of the surrounding land. Agree / Disagree HB  
(Your initials)
- I saw no evidence that prohibited insecticides, herbicides, fungicides, or chemical fertilizers were in use on the farm. Agree / Disagree HB  
(Your initials)
- The land under consideration looks to be surrounded by an adequate buffer to protect from chemical spray drift contamination. Agree / Disagree HB  
(Your initials)
- The farmer is careful to make sure that no genetically modified or chemically treated seeds are used on this acreage. Agree / Disagree HB  
(Your initials)

I feel confident in recommending that the above listed producer(s) and their farm...

**be included**

**not be included**

...in the Certified Naturally Grown program.

  
Signature of Inspector  
  
Signature of Farmer

06-14-2023  
Date  
6/14/23  
Date

Attended by these Community Observers (optional):

_____	_____	_____
Observer Signature	Date	Title or Role
_____	_____	_____
Observer Signature	Date	Title or Role