Operation Name: _____ AI Client # (if applicable): _____

Date of Application: _____ Primary Authorized Rep. Responsible for this App: _____

Name of Product: _____ Label Claim Applied For: ☐ 100% Organic ☐ Organic ☐ Made with Organic

This Product Contains: (select each that apply)

☐ 100% Organic Ingredients ☐ Organic Ingredients ☐ Non-Organic Ingredients* ☐ Processing Aids/Additives ☐ Non-Agricultural Ingredients**

List all ingredients and processing aids used in the product (including water and salt.) Complete all fields. To calculate the percentage of organic ingredients, divide the total net weight or volume of combined organic ingredients (excluding water and salt) by the total weight or volume of all ingredients (excluding water and salt.) If you have questions about completing this form, please contact the AI office.

Category I=Ingredient P=Processing Aid	Status O=Organic NOA=Nonorganic Agricultural NA=Nonagricultural	Description	Supplier and Certifying Agent for Supplier	% of Finished Product
			TOTAL % Organic Ingredients:	

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