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Non-Organic Yeast Affidavit
v. 030924

This form will need to be completed annually for EACH non-organic yeast used. Certified organic yeast must be used if commercially available. The manufacturer completes Part A.
The certified organic operation using the yeast must complete Part B.

Part A: To be completed by the manufacturer:

Name of Supplier/Manufacturer:
Name of Authorized Rep Completing this Form:
Non-Organic Yeast Identified by Product Name and SKU:

I confirm that this yeast is not produced using a petrochemical substrate or sulfite waste liquor. Yes No
I confirm that none of the substrates, ingredients, or microorganisms (e.g. yeast) that contain or are Genetically Modified Organisms (GMOs), Yes No
I confirm that this yeast is produced without the use of biosolids or irradiation. Yes No

Attestation: I Affirm Under Penalties of Perjury That the Information Contained in this Affidavit is True and Correct:

Signature of Authorized Representative:
Date Signed:

Part B: To be completed by the certified operation seeking to use the non-organic yeast:

Note: Commercial availability refers to the ability to obtain an organic version of a material in an appropriate form, quality, or quantity, in order to fulfill an essential function in the production of an organic crop or product. Cost is not a valid criteria in making commercial availability determinations. In order to use any non-organic color derived from the specific color sources listed in 205,606(d), it is your responsibility to conduct annually a search for the color in organic form.

Did you conduct a search for an organic variety of this yeast within the last year? Yes

Details of Search:

Date Search Conducted	Supplier Contacted	Results of Discussion	Explain your answer in the previous column
	1st Supplier Name:	Not available at all in organic form. Not available in required quantity Not available in required form Not available in required quality	
	2nd Supplier Name:	Not available at all in organic form. Not available in required quantity Not available in required form Not available in required quality	
	3rd Supplier Name:	Not available at all in organic form. Not available in required quantity Not available in required form Not available in required quality	

Attestation
Operation: Authorized Representative Completing this Affidavit:
I Affirm Under Penalties of Perjury That the Information Contained in this Affidavit is True and Correct
Signature : Date Signed: