



AGRICULTURAL SCIENCES DIVISION
 PO Box 200201
 Helena, MT 59620-0201
 (406) 444-7804 – agrorganic@mt.gov

Business Name:	License:	County:	State:	Received Date:	Approved By:
				Approved Date:	Label Rec'd:

Product Name(s): List names exactly as they appear on the label(s). List ALL brand names associated with the formulation.
--

1. List all ingredients and additives contained in this product (including water and salt.)											
Ingredient <small>List Names exactly as they appear on supplier documentation and receipts.</small>	Manufacturer or Producer Name	Supplier or Distributor Name <small>May be the same as the manufacturer or producer of the ingredient.</small>	Organic ONLY: Weight or Volume of Ingredient <small>Note the measuring unit used</small>	Agency that issued organic certificate for ingredient	Non-Organic ONLY: Weight or Volume of Ingredient <small>Note the measuring unit used</small>	Is the non-organic ingredient on the National List (205.605 or 606)?	Do you have documentation that the non-organic ingredient was not produced using:			% of ingredient in finished product	Office Use
							Excluded Methods (GMOs)	Sewage Sludge	Ionizing Radiation		
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
A. Weight of Organic Ingredients:		0	B. Total Weight of Formula - Do NOT include water and salt:			0	C. % of Organic Ingredients (A/B)x100:			#DIV/0!	

2. List all processing aids used in the manufacturing of this product.							
Processing Aid <small>Include generic material name and brand name.</small>	Non-Organic ✓	Organic ✓	Is the substance on the National List (205.605 or 606)?	Manufacturer or Producer Name	Supplier or Distributor <small>May be the same as the manufacturer.</small>	Purpose	Office Use
1							
2							
3							
4							
5							

Formulas are kept confidential and exempt from public inspection and copying.