**Business Name:**  **Cert No:**

Your input material list should be a complete list of all materials you plan to use in the coming year. List materials you intend to use below, renewing operations do not need to list materials approved for them in the previous year.

|  |  |  |  |
| --- | --- | --- | --- |
| Complete input name | Company name as listed on input label or responsible for input registration | Intended purpose of the material *(fertilizer, sanitizer, etc.)* | How you ensure this material meets any organic restrictions or requirements *(soil tests are maintained to demonstrate deficiency, followed by a potable water rinse, etc.)* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Attach additional pages if needed, alternative records may be used provided they include all applicable information.