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Appendix I-3 PARENT THANK YOU



<Date>

USDA Food and Nutrition Service
Office of Policy Support
3101 Park Center Drive, Room 1000
Alexandria, VA 22302

RE: Summer Food Service Program (SFSP) Participant Characteristics Study (AG-3198-C-13-0016)

Dear <Participant name>:

Thank you for participating in the *Summer Food Service Program (SFSP) Participant Characteristics Study*. The information you provided during your interview will help the USDA improve the program's outreach and services to make sure those who need this valuable program know about it and have access to it.

Enclosed with this letter, you will find a \$25 prepaid Visa gift card as a token of our appreciation.

If you have any questions or concerns about your participation in this study, please contact Optimal at 877-776-8501 or SFSP@optimalsolutionsgroup.com.

For more information about the Summer Foods Service Program (SFSP), please visit www.fns.usda.gov/sfsp/summer-food-service-program-sfsp.

Thank you again for your time and cooperation.

Sincerely,

A handwritten signature in blue ink, appearing to read "Mark Turner". The signature is fluid and cursive, with a long horizontal stroke at the end.

Dr. Mark Turner
Project Director