OMB CONTROL NO.: 0584-0523 EXPIRATION DATE: 09/30/2019

Attachment B-1 Confidentiality Agreement

(name of contractor performing service) he	ereby agrees to keep confid	dential all information discussed
during the (Focus Group) held in (location Service.	, date, time) on behalf of	the USDA, Food and Nutrition
Signature of Authorized Personnel	 Date	
Name of Authorized Personnel		
[RESEARCH FACILITY] hereby agrees to (Interview/Focus Group) held in (location, da	•	
Signature of Authorized Personnel	 Date	
Name of Authorized Personnel		