

Appendix E1. Endorsement Letter (English)



OMB Number: XXXX-XXXX
Expiration Date: XX/XX/20XX

PLACEHOLDER FOR
LOCAL COUNTY
ORGANIZATION'S
LOGO



Dear Community Member,

I'm writing to let you know that our community has been selected for an important study by the U.S. Department of Agriculture's Food and Nutrition Service (FNS). It is called the **Study of Food and Well-Being**. FNS is the agency that oversees [Food Stamp / LOCAL SNAP NAME] benefits and the national school breakfast and lunch programs.

The goal of this study is to understand how to better help families access affordable food and to improve programs that aim to reduce hunger. The [SNAP agency/community organization] supports this effort.

We believe this study could have a positive impact on programs and food access in our community. We fully encourage your household to participate.

To conduct the study, FNS is working with a company called Mathematica. Mathematica is reaching out to households like yours to complete a survey online or over the phone. [Mathematica will send a letter and brochure with more details about the survey and the types of questions they will ask.] **You will receive a \$35 gift card after you complete the survey.**

Participation in the study is voluntary and your responses are confidential. Your participation will not affect any nutrition assistance or other services that you or your household may receive. This study gives us all a chance to help these programs best serve the needs of households in our community.

Let your voice be heard.

If you have any questions about the study, please contact the study team directly at (XXX) XXX-XXXX or XXXXX@mathematica-mpr.com.

Sincerely,

NAME

ADDRESS | PHONE | FAX | WEBSITE

This information is being collected to assist the Food and Nutrition Service (FNS) in understanding the interrelated factors that affect food insecurity and poverty. This is a voluntary collection and FNS will use the information to aid in the administration of the Supplemental Nutrition Assistance Program. This collection does request personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-[xxxx]. The time required to complete this information collection is estimated to average 2 minutes (0.0334 hours) per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

ORGANIZATION