

Appendix K1. Thank You Letter (English)



OMB Number: 0584-XXXX

The Study of
**Food and
Well-Being**



Bolivar County

[NAME]
[ADDRESS]
[CITY], [ST] [ZIP]

Dear [NAME]:

Thank you for participating in the Study of Food and Well-Being. We are grateful for the time you took to complete the survey, as the information you provided during your interview is very valuable. Enclosed is a \$35 Visa gift card in appreciation of your time. You may use this gift card at any store that accepts Visa. If you have any problems using your gift card, please call 1-XXX-XXX-XXXX and ask for XXXX XXXXXXXX.

Sincerely,

---insert signature image here---

Kim McDonald
Survey Director

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 1 minute (0.0167 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.