

Comment Sheet: <u>Exor</u>	tic Fruit Fly Regu	ılatory Respon	se Manual		
Description of proble	m(s) (errors, inco	nsistencies, mi	ssing, or insuffic	cient informa	ition, etc.)
Description of improv	ements or recom	mended chang	es (add attachm	ents if necess	sary)
Reasons for improver	nents or changes:	:			
Date of Submission:			-		
Name (optional): Address:					
Phone/Fax: E-mail:					