



NORTH AMERICAN PHARMACAL Inc.

www.4yourtype.com

November 16, 2004

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Office of Nutritional Products, Labeling and Dietary Supplement (HFS-800)
Center for Food Safety and Applied Nutrition
Food and Drug Administration
5100 Paint Branch Parkway
College Park, MD 20740-3835

DEC - 2 2004

Madam:

In order to comply with Park 101 Food Labeling, Subpart F Specific Requirements for Descriptive Claims that are Neither Nutrient Content nor Health Claims, I am submitting the following;

The name and address of the distributor of the dietary supplement that bears the statement is:

North American Pharmacal, Inc.
12 High Street
Norwalk, CT 06851

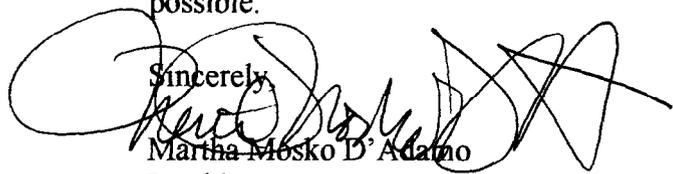
The text of the statement that is being made is:

Hawthorn Plus™
Designed by Dr. Peter D'Adamo to support cardiovascular health.

Directions: One capsule 2 (two) to 4 (four) times daily, or as directed by physician

The name of the dietary supplement is: The Blood Type Diet®, Hawthorn Plus™

I certify that the information contained in this notice is complete and accurate and that North American Pharmacal, Inc has substantiation that the statement is truthful and not misleading. If there is additional information required, please let me know as soon as possible.

Sincerely,

Martha Mosko D'Adamo
President

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