



NOTIFICATION PURSUANT TO SECTION 6 OF DSHEA AND 21 CFR §101.93

This notification is being filed on behalf of Wind River Herbs which is the manufacturer of the product(s) which bear the statements identified in this notification. Its business address is: Lincoln County Rd. 108 #32 P.O. Box 3637 Alpine WY 83128. This notification is being made pursuant to Section 6 of DSHEA and Rule 21 C.F.R. §101.93. The dietary supplement product on whose label or labeling the statements appear is St. Johns Wort.

The text of each structure-function statement for which notification is now being given is:

- (Statement 1): Positive mood support.
(Statement 2):
(Statement 3):

The following summary identifies the dietary ingredient(s) or supplement(s) for which a statement has been made:

Table with 2 columns: Statement Number, Identity of Dietary Ingredient(s) or Supplement that is the Subject of the Statement. Row 1: 1. St. Johns Wort.

The following identifies the brand name of each supplement for which a statement is made:

Table with 3 columns: Statement Number, Brand Name, Label or Labeling?. Row 1: 1. St. Johns Wort.

I, Judy Hennessy, am authorized to certify this Notification on behalf of Wind River Herbs. I certify that the information presented and contained in this Notification is complete and accurate, and that Wind River Herbs has substantiation that each structure-function statement is truthful and not misleading.

Date Signed: June 6, 2000

By: Judy Hennessy (Signature) [Name] [Title]

978 0162

LET 5716