EOD T	TR USE ONLY				OMB	No. 1513-0020	(01/31/2009)
07089-000-000002			DEPARTMENT OF THE TREASURY ALCOHOL AND TOBACCO TAX AND TRADE BUREAU APPLICATION FOR AND CERTIFICATION/EXEMPTION OF				
1. REP. ID. NO. (If any) 1007	206	082			BOTTLE APPROV aperwork Reduction Act I		
2. PLANT REGISTRY/BASIC	3. SOURCE OF	PRODUCT	PART I - APPLICATION				
PERMIT/BREWER'S NO. (Required BR-NY-MAT-1	uired) (Required) Domestic	Imported	 NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT, OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON THE LABEL (Required) 				
4. SERIAL NUMBER (Required) 5. TYPE OF PRODUCT			MATT BREWING CO	,			
YEAR (Required)			811 EDWARD STREET UTICA, NY 13502 DBA INTEGRATED BEVERAGE GROUP				
O 7 O 0 2 L WINE DISTILLED SPIRITS MALT BEVERAGES							
6. BRAND NAME (Required) FREAKY ICE			8a. MAILING ADDRESS, IF DIFFERENT				
7. FANCIFUL NAME (If a	ny)		-				
LEMON STINGER							
9. EMAIL ADDRESS		ULA/SOP NO.	11. LAB. NO. & DATE/PRE-		 18. TYPE OF APPLICATION (Check applicable box(es)) a. ☐ CERTIFICATE OF LABEL APPROVAL b. ☐ CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL 		
rclehrman@bevlaw.com	(If any))D 5	IMPORT NO. & DATE (II	, ,			
12. NET CONTENTS	T CONTENTS 13, ALCOHOL 14, WIN		E APPELLATION (If on label)			EMPTION FROM LA only" (Fill in State	
	CONTENT		c. DISTINCTIVE LIQUOR BOTTLE			,	
8.5 FL. OZ.	4.2%				BOTTLE CAPACITY B	EFORE CLOSURE	
15. WINE VINTAGE DATE (If on label) 16. PHONE NUMBER 202-449-3739		MBER			RESUBMISSION AFTE		
			202-478-5189 TTB ID_6767				
BELOW, OR (b) BLOWN,	BRANDED OR EMBO ELS AFFIXED BELOW	SSED ON THE C . ALSO, PROVID	Y AFFIXED TO THE CONTAINER (CONTAINER (e.g., net contents, etc.) E TRANSLATIONS OF FOREIGN LEK/SEAL/RIBBON.	.). THIS WO	ORDING MUST BE NOTED	HERE EVEN IF IT	
		PAR	T II - APPLICANT'S CERTIFIC	CATION		· · · · · · · · · · · · · · · · · · ·	
and, that the representation	ons on the labels at labels will be applie	tached to this f ed. I also certi	appearing on this application orm, including supplemental d fy that I have read, understood n of Label/Bottle Approval.	locuments	s, truly and correctly rep	resent the conte	ent of the
20. DATE OF APPLICATION 21. SIGNATURE OF APPLICANT			OR AUTHORIZED AGENT 22. PRINT NAME OF APPLICANT OR AUTHORIZED		ZED AGENT		
3/29/2007	/			ROBERT C. LEHRMAN, ATTORNEY			ΞY
4007(1	-		PART III - TTB CERTIFICAT	E			
This certificate	e is issued subject t	o applicable la	ws, regulations and conditions	s as set fo	rth in the instructions po	ortion of this for	m.
23. DATE ISSUED	400	IZED SIGNATU	JRE, ALCOHOL AND TOBAC	CO TAX A	AND TRADE BUREAU		
APR 1 3 2007	Kant	- R 7	1				
		- 7	FOR TTB USE ONLY				
QUALIFICATIONS							
	W	hen new lal	bels are printed, the				
			nust be stated as				
"Flavored Bee			,				
1 lavoied Bee			•			EXPIRATION D	ATE (If any)
AFFIX COMPLETE SET OF LABELS BELOW (See General Instructions 4, 6 and 7)					SEE BACK OF F	ORM FOR ENLAR	GEMENT(S)

lemonstinger

50%

Bar Code