

FOR TTB USE ONLY

TTB ID: 07310-000-000156

1. REP. ID. NO. (If any): 1007 CT: 301 OR: 03

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required): DSP-NJ-1

3. SOURCE OF PRODUCT (Required): Domestic Imported

4. SERIAL NUMBER (Required): YEAR 07005D

5. TYPE OF PRODUCT (Required): WINE DISTILLED SPIRITS MALT BEVERAGES

6. BRAND NAME (Required): VALOR

7. FANCIFUL NAME (If any):

9. EMAIL ADDRESS: rclehrman@bevlaw.com

10. FORMULA/SOP NO. (If any): 42

11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any):

12. NET CONTENTS: 750 ML., 1 L.

13. ALCOHOL CONTENT: 40%

14. WINE APPELLATION (If on label):

15. WINE VINTAGE DATE (If on label):

16. PHONE NUMBER: 202-449-3739

17. FAX NUMBER: 202-478-5189

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF LABEL/BOTTLE APPROVAL
(See Instructions and Paperwork Reduction Act Notice Below)

PART I - APPLICATION

8. 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): LAIRD & COMPANY, 1 LAIRD ROAD, SCOBEEVILLE, NJ 07724, DBA BRAVE SPIRITS

8a. MAILING ADDRESS, IF DIFFERENT:

18. TYPE OF APPLICATION (Check applicable box(es)):
 a. CERTIFICATE OF LABEL APPROVAL
 b. CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in _____ only" (Fill in State abbreviation)
 c. DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)
 d. RESUBMISSION AFTER REJECTION TTB ID: _____

19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celloseals, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., net contents, etc.). THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.
 BRAND NAME AND GRAPHICS MAY REPEAT ON CAP/CORK/SEAL/RIBBON. ~~ORANGES MAY CHANGE TO CITRUS.~~

PART II - APPLICANT'S CERTIFICATION

Under the penalties of perjury, I declare: that all statements appearing on this application are true and correct to the best of my knowledge and belief; and, that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent the content of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the conditions and instructions which are attached to an original TTB F 5100.31, Certificate/Exemption of Label/Bottle Approval.

20. DATE OF APPLICATION: 11/6/2007

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: *Robert C. Lehrman*

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT: ROBERT C. LEHRMAN, ATTORNEY

PART III - TTB CERTIFICATE

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

23. DATE ISSUED: NOV 21 2007

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU: *Barbara Johnson*

FOR TTB USE ONLY

QUALIFICATIONS:

EXPIRATION DATE (If any):

AFFIX COMPLETE SET OF LABELS BELOW (See General Instructions 4, 6 and 7) FRONT

SEE BACK OF FORM FOR PHOTO(S) / IMAGE(S)

BELOW LABELS AT 60%, SEE 100% ON BACK OF FORM

