

OMB NO. 1570-0047

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 on Back)

TTB ID: **04247-002-000027**

1. REP. ID. NO. (If any) **CT 1079 OR 20**

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)
DSP-MASS.-NO. 18

3. SERIAL NUMBER (Required)
 YEAR: **04-0344**

4. TYPE OF PRODUCT (Required)
 WINE
 DISTILLED SPIRITS
 MALT BEVERAGE

7. 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).
M.S. WALKER, INC.
20 THIRD AVE.
SOMERVILLE, MA 02143-4450
D/B/A - BUBBLE GUM BOTTLING CO. Somerville MA

7a. MAILING ADDRESS, IF DIFFERENT **Attn: JOSEPH AIELLO**

5. BRAND NAME (Required)
Bubble Gum Liqueur

6. FANCIFUL NAME (If any)

8. EMAIL ADDRESS
www.MSWALKER.com

9. FORMULA/SOP NO. (If any)
461

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

11. NET CONTENTS
1.75 L / 1.0 L / 750 mL

12. ALCOHOL CONTENT
15%

13. WINE APPELLATION (If on label)

14. WINE VINTAGE DATE (If on label)

15. PHONE NUMBER
(617) 776-6700

16. FAX NUMBER
(617) 776-5808

17. 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 _____

18. 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.
 CONTENTS IS BLOWN ON CONTAINER. GOVERNMENT WARNING STATEMENT COVERS PRODUCTS BOTTLED IN CONTAINERS OF 3 LITERS AND LESS IN SIZE.

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.

19. DATE OF APPLICATION **8/05/04**

20. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT *[Signature]*

21. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT **KENNETH G. ANDERSON P/A**

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.

22. DATE ISSUED **SEP 16 2004**

23. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU *[Signature]*

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (If any)

