

TTB ID 07179-000-000124

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)

1. REP. ID. NO. (If any) 1003

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) DSP-KY-414

4. SERIAL NUMBER (Required)

YEAR				
0	7	-	1	2 2

6. BRAND NAME (Required) Bols

7. FANCIFUL NAME (If any) Candy Cane

9. EMAIL ADDRESS Denise_Dillard@b-f.com

12. NET CONTENTS 1.0L

15. WINE VINTAGE DATE (If on label) n/a

3. SOURCE OF PRODUCT (Required) Domestic Imported

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

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)
Brown-Forman Corporation
d/b/a Lucas Bols
1908 Howard Street
Louisville, KY 40210

8a. MAILING ADDRESS, IF DIFFERENT

10. FORMULA/SOP NO. (If any) 501

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

13. ALCOHOL CONTENT 24%

14. WINE APPELLATION (If on label) n/a

16. PHONE NUMBER 502-774-7324

17. FAX NUMBER 502-774-7188

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.

State/deposit information may be added, changed and/or deleted from labels or containers as required.
Net contents and Lucas Bols are blown into bottle.

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 7/27/07

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT *Mary Denise Dillard*

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Mary Denise Dillard, Attorney-in-Fact

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 JUL 17 2007

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

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (If any)

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

