OMB No. 1513-0020 (01/31/2009)

FOR TTB USE ONLY		DEPARTMENT OF THE TREASURY ALCOHOL AND TOBACCO TAX AND TRADE BUREAU		
TTB ID 08266001000028		APPI	LICATION FOR AND EXEMPTION OF LABEL/BOTTLE APPROVAL	
1. REP. ID. NO. (If any)	OR 906 33	(See Instructions and	Paperwork Reduction Act Notice on Back)	
PART I - APPLICATION				
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)	3. SOURCE OF PRODUCT (Required) Domestic	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 LABEL (Required)		
BR-NH-RED-1	Imported	REDHOOK ALE BREWERY, CRAFT BREWERS ALLIANCE, INC. 35 CORPORATE DR		
4. SERIAL NUMBER (Required)	5. TYPE OF PRODUCT (Required)	PORTSMOUTH NH 03801		
080111	WINE	KONA BREWERY (Used on label)		
	☐ DISTILLED SPIRITS			
	✓ MALT BEVERAGE			
6. BRAND NAME (Required) KONA BREWERY		8a. MAILING ADDRESS, IF DIFFERENT		
7. FANCIFUL NAME (If any) PIPELINE		_		
9. EMAIL ADDRESS NDEIBERT@WIDMER.COM (If any) 08-808-1		O. 11. LAB. NO. & DATE / PREIMPORT NO. & DATE (If any)	18. TYPE OF APPLICATION (Check applicable box(es)) a.	
12. NET CONTENTS	13. ALCOHOL	14. WINE APPELLATION	CERTIFICATE OF LABEL APPROVAL	
12 FL. OZ.	CONTENT 5.0	IF ON LABEL	b. CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in only" (Fill in State abbreviation.)	
15. WINE VINTAGE DATE ON LABEL	16. PHONE NUMBER (503) 331-7229	17. FAX NUMBER (503) 331-7264	C. DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount)	
			d. RESUBMISSION AFTER REJECTION TTB ID. NO	
19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celoseals, corks, etc.) OTHER THAN THE LABLES 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.				
PART II - APPLICANT'S CERTIFICATION				
and belief; and, that the re the content of the containe	presentations on the labels a ers to which these labels will	attached to this form, including s be applied. I also certify that I ha	ion are true and correct to the best of my knowledge supplemental documents, truly and correctly represent ave read, understood and complied with the the/Exemption of Label/Bottle Approval.	
20. DATE OF APPLICANT OR APPLICATION (Application was e-filed)		R AUTHORIZED AGENT	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT NANCY DEIBERT	
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 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU				
09/22/2008 Kent B. Mutu				
FOR TTB USE ONLY				

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QUALIFICATIONS	EXPIRATION DATE (If any)	
STATUS		
THE STATUS IS APPROVED.		
CLASS/TYPE DESCRIPTION		
MALT BEVERAGES SPECIALITIES - FLAVORED		

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AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Brand (front) Actual Dimensions: 4.72 inches W X 3.13 inches H

Actual Differsions, 4.72 filches W A 3.13 filches f



Image Type: Neck Actual Dimensions: 4.68 inches W X 1.23 inches H



TTB F 5100.31 (6/2006) PREVIOUS EDITIONS ARE OBSOLETE

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