

ID **02065-000-000035**

CT **906** OR **07** AP

DEPARTMENT OF THE TREASURY
BUREAU OF ALCOHOL, TOBACCO AND FIREARMS *220*
APPLICATION FOR AND CERTIFICATION/EXEMPTION OF LABEL/BOTTLE APPROVAL
(See Instructions and Paperwork Reduction Act Notice on Back)

PART I - APPLICATION

| | | | |
|---|-----------------------------|--|---|
| 1. VENDOR CODE (Required) | 2. SERIAL NUMBER (Required) | 7. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT OR BREWER'S NOTICE (Required) | |
| 5 8 4 0 | YEAR 0 2 0 8 6 M | Miller Brewing Company TRADING AS Skyy Beverage Company Tumwater, WA & Albany, GA | |
| 3. BRAND NAME (Required) Skyy Blue | | 7a. MAILING ADDRESS, IF DIFFERENT Barbara A. Whitehead Miller Brewing Company 3939 West Highland Blvd. P. O. Box 482 Milwaukee, WI 53201-0482 | |
| 4. CLASS AND TYPE (Required) (Includes wine varietal designation, if applicable) Malt Beverage w Natural Flavor Containing Vodka | | 16. TYPE OF APPLICATION (Check applicable box) a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in only" (Fill in State abbreviation) c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE (Fill in amount) | |
| 5. FANCIFUL NAME (If any) Skyy Blue | | 11. PHONE NUMBER (414) 931-4962 | |
| 6. PLANT REGISTRY/BASIC PERMIT NO./BREWER'S NO. (Required) See #7 | | 15. FAX NUMBER (414) 931-6789 | |
| 8. FORMULA NO. (If any) <i>01346040012</i> | 9. LAB. NO./DATE | 10. NET CONTENTS 12 oz. | 17. 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) EMBOSSED ON THE CONTAINER. 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

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 appear on the reverse of an original ATF F 5100.31, Certificate/Exemption of Label/Bottle Approval.

18. DATE OF APPLICATION: **03/05/02**
 19. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: *Barbara A. Whitehead*
 20. TYPE NAME OF APPLICANT OR AUTHORIZED AGENT: **Barbara A. Whitehead**

PART III - ATF CERTIFICATE

21. DATE ISSUED: **MAR 08 2002**
 22. AUTHORIZED SIGNATURE, BUREAU OF ALCOHOL, TOBACCO AND FIREARMS: *Quinn M. Harrison*

FOR ATF USE ONLY

QUALIFICATIONS
When new labels are printed, the statement of composition must read: first line "Malt Beverage with" second line "Natural Flavors Containing Vodka".

NO MORE USE-UPS WILL BE GRANTED.

EXPIRATION DATE (If any)
9-8-02

AFFIX COMPLETE SET OF LABELS BELOW

12 oz. Bottle



Andy