

TTB ID 10069-003-000030

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) *1271* CT *649* OR *06*

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) DSP-MI-15002

3. SOURCE OF PRODUCT (Required) Domestic Imported

4. SERIAL NUMBER (Required)

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)
Temperance Distilling Company
Exclusively for Kingfish Spirits
7312 Express Road
Temperance, MI 48182

8a. MAILING ADDRESS, IF DIFFERENT

6. BRAND NAME (Required) Cream

7. FANCIFUL NAME (If any) Chocolate Alcohol Infused Whipped Cream

9. E-MAIL ADDRESS elaine@temperancedistilling.com

10. FORMULA/SOP NO. (If any) CREAM-012810-CHO

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

12. NET CONTENTS 375mL

13. ALCOHOL CONTENT 15%

14. WINE APPELLATION (If on label)

15. WINE VINTAGE DATE (If on label)

16. PHONE NUMBER (734) 847-5262

17. FAX NUMBER (734) 847-5282

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, cellophane, 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.
Label is applied to aerosol can (sample provided). Label on front of application is printed at 55% of full size. For 100% label, please see reverse side of application.

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 02/11/2010

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT *Elaine M. Korenich*

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Elaine M. Korenich

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 3-10-2010

24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU *Shelia Miller*

FOR TTB USE ONLY

QUALIFICATIONS
Approval pending results of laboratory analysis and further review of label information and claims.

Approval is granted for 900 cases only

EXPIRATION DATE (If any) 6-10-2010

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



Printed at 55% of Full Size

3-10-10 approval granted per upper fragment. (KTF + 129) *PM*