

FOR TTB USE ONLY
TTB ID: 09058-003-000045

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)

2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)
BR-NH-MAR-15000

3. SOURCE OF PRODUCT (Required)
 Domestic Imported

4. SERIAL NUMBER (Required)
YEAR: 09-0005

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

6. BRAND NAME (Required)
Manchester Brewing

7. FANCIFUL NAME (If any)
John Thomas Red

9. E-MAIL ADDRESS
kbloom23@yahoo.com

10. FORMULA/SOP NO. (If any)

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

12. NET CONTENTS
1 pint 6 cluidoury

13. ALCOHOL CONTENT
none stated

14. WINE APPELLATION (If on label)

15. WINE VINTAGE DATE (If on label)

16. PHONE NUMBER
603 617 2409

17. FAX NUMBER
none

PART I - APPLICATION

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)
Manchester Brewing LLC
119 Old Turnpike Road STE 36
Concord, Merrimack County, NH 03301

8a. MAILING ADDRESS, IF DIFFERENT

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.

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: 2-24-09

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT: *[Signature]*

22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT: Kevin Bloom

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: MAR 06 2009

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

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QUALIFICATIONS

When new labels are printed, the Government Warning Statement must appear in printing at least two (2) millimeters in size.

EXPIRATION DATE (If any)

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

