

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

<b>FOR TTB USE ONLY</b>			<b>DEPARTMENT OF THE TREASURY</b> <b>ALCOHOL AND TOBACCO TAX AND TRADE BUREAU</b>		
<b>TTB ID</b> 10154001000219			<b>APPLICATION FOR AND</b> <b>CERTIFICATION/EXEMPTION OF LABEL/BOTTLE</b> <b>APPROVAL</b>		
<b>1. REP. ID. NO. (If any)</b>	<b>CT</b> 906	<b>OR</b> 38	(See Instructions and Paperwork Reduction Act Notice on Back)		

**PART I - APPLICATION**

<b>2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)</b> BR-OR-ORG-1	<b>3. SOURCE OF PRODUCT (Required)</b> <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Imported	<b>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)</b>  BAY FRONT BREWERY & PUBLIC HOUSE, OREGON BREWING COMPANY 2320 SE OSU DR  NEWPORT OR 97365  ROGUE ALES (Used on label)
<b>4. SERIAL NUMBER (Required)</b> 100020	<b>5. TYPE OF PRODUCT (Required)</b> <input type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input checked="" type="checkbox"/> MALT BEVERAGE	

<b>6. BRAND NAME (Required)</b> ROGUE	<b>8a. MAILING ADDRESS, IF DIFFERENT</b>
<b>7. FANCIFUL NAME (If any)</b> EPOCH DAYS	

<b>9. EMAIL ADDRESS</b> BETH@ROGUE.COM	<b>10. FORMULA/SOP NO. (If any)</b> 1-2010	<b>11. LAB. NO. &amp; DATE / PREIMPORT NO. &amp; DATE (If any)</b>	<b>18. TYPE OF APPLICATION (Check applicable box(es))</b>  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)  d. <input checked="" type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID. NO. ___10154001000219___
<b>12. NET CONTENTS</b> 1 PT. 6 FL. OZ. (22 FL. OZ.)	<b>13. ALCOHOL CONTENT</b>	<b>14. WINE APPELLATION IF ON LABEL</b>	
<b>15. WINE VINTAGE DATE IF ON LABEL</b>	<b>16. PHONE NUMBER</b> (541) 265-7875	<b>17. FAX NUMBER</b> (541) 265-8655	

19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celoseals, 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.

<b>20. DATE OF APPLICATION</b> 06/03/2010	<b>21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT</b> (Application was e-filed)	<b>22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT</b> BETH JOHNSTON
--	--	---

**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

06/24/2010

## 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU



## FOR TTB USE ONLY

## QUALIFICATIONS

Other (THIS LABEL MAY NOT BE USED ON A PRODUCT THAT CONTAINS A CONTROLLED SUBSTANCE.)

Other (HEMP COMPONENT(S) MUST BE TESTED IN THE U.S. FOR THE PRESENCE OF CONTROLLED SUBSTANCE(S) EACH TIME COMPONENT IS IMPORTED AND RESULTS MUST BE MAINTAINED ON YOUR PREMISES FOR INSPECTION.)

Other (A DETAILED DESCRIPTION OF THE METHOD OF ANALYSIS USED BY THE U.S. LAB TO TEST FOR CONTROLLED SUBSTANCE MUST BE MAINTAINED ON YOUR PREMISES FOR INSPECTIONS.)

## EXPIRATION DATE (if any)

## STATUS

THE STATUS IS APPROVED.

## CLASS/TYPE DESCRIPTION

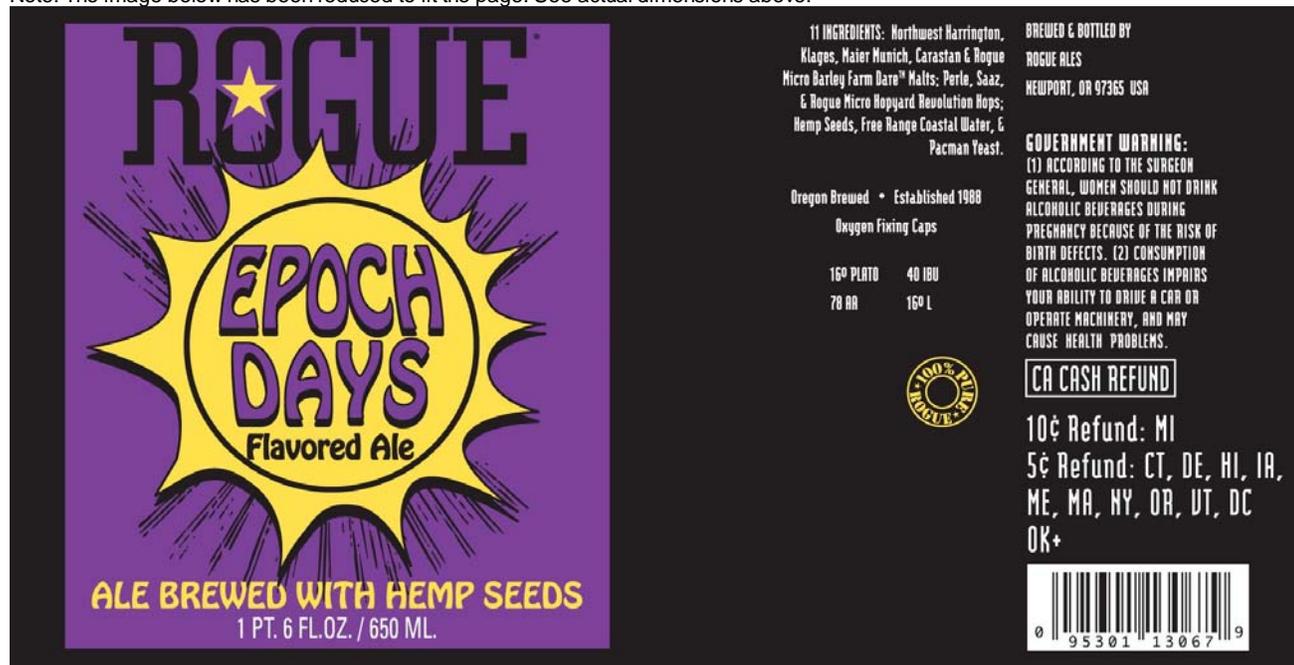
MALT BEVERAGES SPECIALITIES - FLAVORED

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Brand (front)

Actual Dimensions: 9 inches W X 4.62 inches H

Note: The image below has been reduced to fit the page. See actual dimensions above.



**ROGUE**

**EPOCH DAYS**  
Flavored Ale

**ALE BREWED WITH HEMP SEEDS**  
1 PT. 6 FL.OZ. / 650 ML.

11 INGREDIENTS: Northwest Harrington, Klages, Maier Munich, Carastan & Rogue Micro Bartley Farm Dare™ Malts; Perle, Saaz, & Rogue Micro Hopyard Revolution Hops; Hemp Seeds, Free Range Coastal Water, & Pacman Yeast.

BREWED & BOTTLED BY  
ROGUE ALES  
NEWPORT, OR 97365 USA

Oregon Brewed • Established 1988  
Oxygen Fixing Caps

15° PLATO 40 IBU  
70 AA 160 L

**GOVERNMENT WARNING:**  
(1) ACCORDING TO THE SURGEON GENERAL, WOMEN SHOULD NOT DRINK ALCOHOLIC BEVERAGES DURING PREGNANCY BECAUSE OF THE RISK OF BIRTH DEFECTS. (2) CONSUMPTION OF ALCOHOLIC BEVERAGES IMPAIRS YOUR ABILITY TO DRIVE A CAR OR OPERATE MACHINERY, AND MAY CAUSE HEALTH PROBLEMS.

**CA CASH REFUND**

10¢ Refund: MI  
5¢ Refund: CT, DE, HI, IA, ME, MA, NY, OR, VT, DC  
OK+

0 95301 13067 9

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