

98152

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

TTB ID: 08206-003-000003

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)		CT	OR
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) NY-I-15266		3. SOURCE OF PRODUCT (Required) <input type="checkbox"/> Domestic <input checked="" type="checkbox"/> Imported	
4. SERIAL NUMBER (Required) YEAR: 0 8 - 0 0 3 4		5. TYPE OF PRODUCT (Required) <input checked="" type="checkbox"/> WINE <input type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGES	
6. BRAND NAME (Required) MAGANA		7. FANCIFUL NAME (If any)	
9. EMAIL ADDRESS arodriguez@mhwltd.com		10. FORMULA/SOP NO. (If any)	
11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any)		18. TYPE OF APPLICATION (Check applicable box(es)) 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 type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID _____	
12. NET CONTENTS 1.500 L		13. ALCOHOL CONTENT 14.5%	
15. WINE VINTAGE DATE (If on label) 2005		16. PHONE NUMBER 914 740-4724	
17. FAX NUMBER 413 254-8923		14. WINE APPELLATION (If on label) Navarra	
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. BRAND NAME, PRODUCER NAME, AND GRAPHICS MAY REPEAT ON CAP, CAPSULE OR BOTTLE NECK.			

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 07/23/08	21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT <i>Alexandra Rodriguez</i>	22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Alexandra Rodriguez
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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 JUL 31 2008	24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU <i>Christina Jones</i>
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FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (If any)

AFFIX ()

MAGAÑA MERLOT

IMPORTED BY: OLE, NEW ROCHELLE, NY 10801
PATRICK MATA - ALBERTO ORTE

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.

CONTAINS SULFITES - PRODUCT OF SPAIN - RED WINE - 1.5L - ALC. 14.5% BY VOL.

NAVARRA DENOMINACION DE ORIGEN
MERLOT 100%

BOTTLED BY: BODEGAS VIÑA MAGAÑA S.L.
BARILLAS, ESPAÑA NRE-31/40336-NA

oral Instructions

TTB F 5100.31 (10/2007) PREVIOUS EDITIONS ARE OBSOLETE

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