

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

|                          |    |    |  |  |  |
|--------------------------|----|----|--|--|--|
| <b>FOR TTB USE ONLY</b>  |    |    | <b>DEPARTMENT OF THE TREASURY</b><br><b>ALCOHOL AND TOBACCO TAX AND TRADE BUREAU</b><br><b>APPLICATION FOR AND</b><br><b>CERTIFICATION/EXEMPTION OF LABEL/BOTTLE</b><br><b>APPROVAL</b><br><br>(See Instructions and Paperwork Reduction Act Notice on Back) |  |  |
| TTB ID<br>11172001000482 |    |    |  |  |  |
| 1. REP. ID. NO. (If any) | CT | OR |  |  |  |
|                          | 88 | 01 |  |  |  |

**PART I - APPLICATION**

|  |  |   |                                   |   |  |
|--|--|---|-----------------------------------|---|--|
| 2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required)<br>BWN-CA-15065 |  | 3. SOURCE OF PRODUCT (Required)<br><input checked="" type="checkbox"/> Domestic<br><input type="checkbox"/> Imported  |                                   | 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)<br><br>ROBERT FOLEY WINERY, ROBERT FOLEY, LLC<br>1300 SUMMIT LAKE DR<br><br>ANGWIN CA 94508<br><br>ROBERT FOLEY VINEYARDS (Used on label) |  |
| 4. SERIAL NUMBER (Required)<br>110015                                  |  | 5. TYPE OF PRODUCT (Required)<br><input checked="" type="checkbox"/> WINE<br><input type="checkbox"/> DISTILLED SPIRITS<br><input type="checkbox"/> MALT BEVERAGE |                                   |   |  |
| 6. BRAND NAME (Required)<br>ROBERT FOLEY VINEYARDS                     |  |   | 8a. MAILING ADDRESS, IF DIFFERENT |   |  |
| 7. FANCIFUL NAME (If any)  |  |   |                                   |   |  |


|  |  |                                    |   |   |  |
|--|--|------------------------------------|---|---|--|
| 9. EMAIL ADDRESS<br>BOB@ROBERTFOLEYVINEYARDS.COM                     |  | 10. GRAPE VARIETAL(S) (If any)     | 11. FORMULA                                     | 18. TYPE OF APPLICATION (Check applicable box(es))  |  |
| 12. NET CONTENTS<br>1.5 LITERS<br>750 MILLILITERS<br>375 MILLILITERS |  | 13. ALCOHOL CONTENT<br>15.1        | 14. WINE APPELLATION IF ON LABEL<br>NAPA VALLEY | a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL  |  |
| 15. WINE VINTAGE DATE IF ON LABEL<br>2009                            |  | 16. PHONE NUMBER<br>(707) 965-2669 | 17. FAX NUMBER<br>(707) 965-0969                | 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. NO. _____  |  |

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.

|             |  |                                |
|-------------|--|--------------------------------|
| 20. DATE OF | 21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT | 22. PRINT NAME OF APPLICANT OR |
|-------------|--|--------------------------------|

|  |  |   |
|--|--|---|
| <b>APPLICATION</b><br>06/21/2011   | (Application was e-filed)  | <b>AUTHORIZED AGENT</b><br>ROBERT FOLEY |
| <b>PART III - TTB CERTIFICATE</b>  |  |   |
| This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form. |  |   |
| <b>23. DATE ISSUED</b><br>07/22/2011   | <b>24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU</b><br> |   |

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|---|--|
| <b>FOR TTB USE ONLY</b>   |  |
| <p><b>QUALIFICATIONS</b></p> <p>TTB has not reviewed this label for type size, characters per inch or contrasting background. The responsible industry member must continue to ensure that the mandatory information on the actual labels is displayed in the correct type size, number of characters per inch, and on a contrasting background in accordance with the TTB labeling regulations, 27 CFR parts 4, 5, 7, and 16, as applicable.</p> <p><b>STATUS</b></p> <p>THE STATUS IS APPROVED.</p> <p><b>CLASS/TYPE DESCRIPTION</b></p> <p>DESSERT /PORT/SHERRY/(COOKING) WINE</p> | <p><b>EXPIRATION DATE (If any)</b></p> |

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Brand (front)

Actual Dimensions: 4 inches W X 3.5 inches H

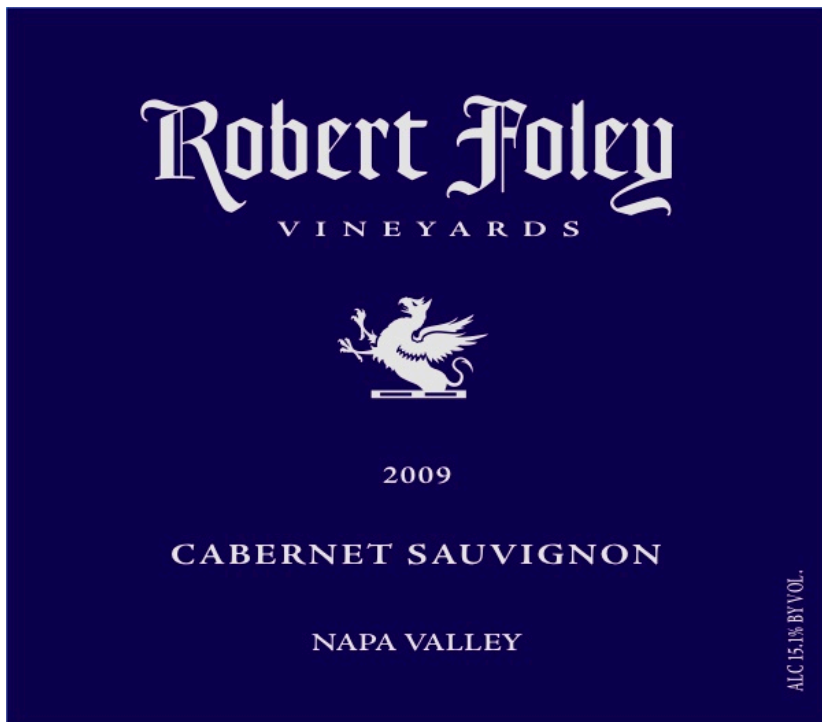
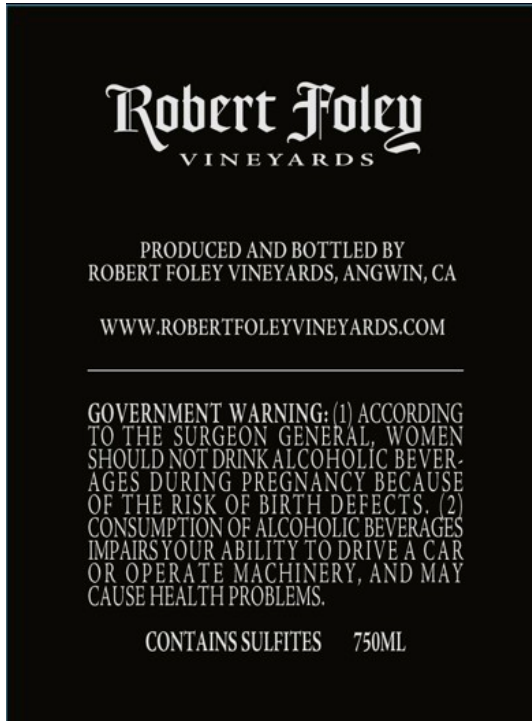


Image Type: Back

Actual Dimensions: 2.6 inches W X 3.5 inches H



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**TTB F 5100.31** (5/2011) PREVIOUS EDITIONS ARE OBSOLETE