



**TEXAS ALCOHOLIC BEVERAGE COMMISSION
CERTIFICATE OF APPROVAL OF LABELS FOR
WINE**

Date: 10/28/2010

Label Certificate Number: 760645

Pursuant to the application of : VAROZZA VINEYARDS

Holder of permit/license number : S758108

**Brand : VAROZZA VINEYARDS ESTATE GROWN 931
Class : RED WINE
Vintage :
Appellation : NAPA VALLEY ST.HELENA
Style : N/A
Size(s) : 750 ML
Container Type : BOTTLE
Container Material : GLASS
Stated Alc. Content : 14.4%
Tested Alc. Content : N/A
TTB Number : 09356000000033**

are hereby approved with the same conditions and restrictions as the Federal Certificate of Label Approval (COLA) issued by the Department of Treasury (TTB). If label changes require a new Federal COLA(s) to be obtained, new Texas label approval will also be required.

This certificate shall not operate to relieve any person from liability for any violation of the Federal Alcohol Administration Act, the Texas Alcoholic Beverage Code, or any Rules and Regulations thereunder, resulting from the failure of any container bearing the labels herein approved, or the contents of such container, to conform to the statements and representations made on such labels.

Label Approval Section

Tax Division

Label.Approval@tabc.state.tx.us

**c/o VAROZZA VINEYARDS
514 PRATT AVE
SAINT HELENA, CA 94574-1055**



TEXAS ALCOHOLIC BEVERAGE COMMISSION

OMB No. 1513-0020 (01/31/2006)

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)

PART I - APPLICATION

NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT, OR BREWER'S NOTICE. INCLUDE APPROVED DEA OR TRADENAME IF USED ON THE LABEL. (Required)		
VAROZZA VINEYARDS 514 PRATT AVENUE ST. HELENA, CA 94574		
MAILING ADDRESS, IF DIFFERENT SAME		
10. FORMULA/SOP NO. (if any)	11. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (if any)	12. TYPE OF APPLICATION (Check applicable box(es))
		a. ☐ CERTIFICATE OF LABEL APPROVAL
		b. ☐ CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL
		c. ☐ DISTINCTIVE LIQUOR BOTTLE APPROVAL TOTAL BOTTLE CAPACITY BEFORE CLOSURE (fill in amount)
		d. ☐ RESUBMISSION AFTER REJECTION
		TTB ID: _____
13. ALCOHOL CONTENT 14.4%	14. WINE APPELLATION (If on label) NAPA VALLEY ST. HELENA	
15. WINE VINTAGE DATE (If on label) NV	16. PHONE NUMBER 707 963 0331	17. FAX NUMBER 707 963 0331
19. SHOW ANY WORDING (A) APPEARING ON MATERIALS FIRMLY ATTACHED TO THE CONTAINER (e.g., caps, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (B) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., cap corks, 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 reduced by 15%

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 11/01/09 21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT *Dianna Varozza* 22. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT DIANNA VAROZZA, OWNER

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.

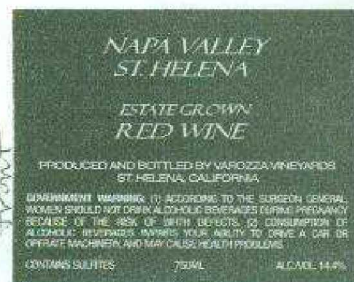
23. DATE ISSUED 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (if any)

AFFIX COMPLETE SET OF LABELS HEREON (See General Instructions 4, 5 and 7)



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