



**DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
CERTIFICATE OF TAXPAID ALCOHOL**

1. CERTIFICATION NUMBER

Mail this form to: National Revenue Center, 550 Main Street, Suite 8002, Cincinnati, OH 45202.

2. TO: DIRECTOR OF CUSTOMS AND BORDER PROTECTION

PORT OF

SERIAL NO. OF PACKAGE (a)	TAX PAID AT DISTILLED SPIRITS PLANT		PROOF GALLONS (d)	PROOF (e)	AMOUNT OF TAX (f)		DATE WITHDRAWN (g)
	NO. (b)	OPERATED BY (c)					

3. I certify that no other certificate covering the above-described alcohol has been issued.

This certificate is issued at the request of _____

to be used at the port of _____ on account of

drawback on certain flavoring extracts, and/or medicinal or toilet preparations claimed to have been manufactured by _____ with the use of the above-described alcohol.

4. DATE

5. SIGNATURE OF APPROPRIATE TTB OFFICIAL

PAPERWORK REDUCTION ACT NOTICE

This information collection request is in accordance with the Paperwork Reduction Act of 1995. The purpose of this information collection is for the protection of Federal excise taxes. The information will be used to determine compliance with requirements governing drawback of tax on the exportation of nonbeverage commodities. The information required is voluntary.

The estimated average burden associated with this collection of information is 30 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to the Reports Management Officer, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau, 1310 G Street, NW., Box 12, Washington, DC 20005.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current, valid OMB control number.