



Missouri Department of Public Safety  
Division of Alcohol and Tobacco Control

**ATTESTATION OF INTOXICATING LIQUOR – LAB ANALYSIS**

Licensee Name: \_\_\_\_\_ License Number: \_\_\_\_\_

Licensee Address: \_\_\_\_\_

Product Name: \_\_\_\_\_ Alcohol Content: \_\_\_\_\_  
(Include flavor, if applicable)

I hereby attest, under the penalty of false statement, that in my capacity as \_\_\_\_\_ (title), I have the authority to make the attestation on behalf of the entity listed above. I have examined the above-named product. Based on that review, the product listed above complies with and qualifies as: **(SELECT ONE)**

- ☐ Intoxicating malt liquor as define in Section 311.490, RSMo for on premise sales only
- ☐ Cider containing less than 7 percent alcohol by volume that does not require a TTB COLA/Exemption
- ☐ Low alcohol content wine containing less than 7 percent alcohol by volume that does not require a TTB COLA/Exemption
- ☐ IRC beer that is produced from malt or malt substitutes, does not contain hops, and contains one-half of one percent or more of alcohol by volume
- ☐ Alcohol-infused product containing more than 5% alcohol by weight.

Furthermore, the product will continue to comply with and qualify as the above.

**DECLARATION UNDER PENALTY OF SECTION 575.060, RSMo**

I declare that all statements or representations contained in or attained to this form are made under oath or affirmation and are true and correct to my best knowledge and belief under penalty of Section 575.060, RSMo, which specifies that anyone who makes a false statement in writing with intent to mislead a public official in the performance of his official duties is guilty of a class B misdemeanor.

DISCLAIMER: By typing your name below, you are signing this application electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this application.

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date