

CERTIFICATION OF COMPLIANCE
WITH CPSIA REGULATORY STANDARDS

Date Issued:

1. Identification of the product covered by this certificate:

Style(s):
Color(s):
Description:
PO Number(s):
Invoice Number(s):

2. The product is compliant with the CPSIA product safety regulation(s) that is(are) selected below (see attached matrix for requirements; check all that apply):

- Standard for the Flammability of Clothing Textiles (16 CFR Part 1610)
****Applicable for all apparel*
- Standard for the Flammability of Children's Sleepwear (16 CFR Parts 1615 and 1616)
****Applicable for all children's sleepwear and loungewear*
- Standard for the Flammability of Solids (16 CFR Part 1500.44)
Small Parts in Children's Products (16 CFR Part 1501)
Sharp Points in Children's Products (16 CFR Part 1500.48-49(Mod)/ASTM F963)
- Use and Abuse in Children's Products (16 CFR Part 1500.51-53 (Mod)/ASTM F963-04,
- Section 4.6-4.7 and 4.9)
- Attachment Strength in Children's Products (buttons)(16 CFR Part 1500/S-102)

- Childrenswear drawstrings (16 CFR Part 1120.3(b)/ASTM F1816-97)
- Lead in surface coatings (16 CFR 1303/ASTME1613/E1645)
- Lead substrates (15 USC § 1278a or Sec. 101 of CPSIA)
Phthalates (16 CFR Part 1307)

<p><i>(U.S. Importer of Record or U.S. Manufacturer)</i></p> <p>Company Name: Address: City/State/Zip: Phone:</p>	<p><i>(Vince)</i> Contact information for the individual at V Opco, LLC (f/k/a Vince, LLC) that is maintaining records of test results:</p> <p>Production Manager: Address: City/State/Zip: Phone: Email:</p>
<p><i>(Manufacturer) Date and place where the product was manufactured</i></p> <p>Date (MM/YY)*: MID Code: City: Country: <i>*Can be start date of production</i></p>	
<p>Complete one of the following boxes:</p> <p><input type="checkbox"/> Exempt from testing (Non-apparel/non-textile)</p> <p><input type="checkbox"/> Exempt from testing (Other reason): Reason for exemption:</p> <p><input type="checkbox"/> Not exempt from testing (<i>*If not exempt from testing, please complete below section.</i>)</p>	
<p>Date and place where this product was tested for compliance with the regulation(s) cited above:</p> <p>Date (MM/YY): City/State/Zip: Country:</p>	<p>Identification of third-party laboratory testing for certification and Test Report #</p> <p>Name: Address: City/State/Zip: Phone: Test Report #</p>

1 copy must be included with the Shipping Documents

MID Code: Manufacturer's ID code using U.S. Customs methodology