AMERICAN E-LIQUID MANUFACTURING STANDARDS ASSOCIATION

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Via Electronic Submission (http://www.regulations.gov)

Division of Dockets Management (HFA-305)
Food and Drug Administration
5630 Fishers Lane, RM. 1061
Rockville, Maryland 20852

Re: AEMSA Comments to Notice of Proposed Rulemaking: Clarification of When Products Made or Derived From Tobacco Are Regulated as Drugs, Devices, or Combination Products; Amendments to Regulations Regarding "Intended Uses"; Docket No. ID: FDA–2015–N–2002

The American E-Liquid Manufacturing Standards Association (AEMSA) appreciates this opportunity to respond to the request by the Food and Drug Administration (FDA or Agency) for comments in conjunction with its notice of proposed rulemaking (NPRM) intended to clarify when products made or derived from tobacco are regulated as drugs, devices or combinations products, as announced in Docket No. ID: FDA–2015–N–2002.[1]

I. Background on AEMSA

AEMSA is the first and only manufacturers' trade association completely dedicated to creating responsible and sustainable standards for the manufacturing of e-liquids used in e-vapors. AEMSA is an all-volunteer 501(c)(6) organization, formed by U.S. manufacturers of e-liquids, to promote safety and responsibility through self-regulation. Our Members believe we have a responsibility to self-regulate the e-liquid manufacturing process using professional criteria. One of AEMSA's primary goals is to provide consumers and government regulators with confidence that our members' products are manufactured in a professionally responsible and safe manner until such time as FDA promulgates Good Manufacturing Practices (GMPs) for e-liquids. In this regard, AEMSA has developed manufacturing standards for of e-liquids which may be downloaded from our website at: http://www.aemsa.org/standards/. AEMSA supports reasonable, responsible and science-based regulation of e-vapor products, including open-system refillable personal vaporizers and the e-liquids used in those products.

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[1] *See* 80 Fed. Reg. 57756 (Sept. 25, 2015), available online at: http://www.gpo.gov/fdsys/pkg/FR-2015-09-25/pdf/2015-24313.pdf.

We note that although e-liquid and e-vapor products manufactured by AEMSA's Member companies may have the corollary benefit of helping tobacco cigarette smokers quit smoking or nicotine use altogether, these products are not intended to be smoking cessation devices or nicotine replacement therapies (NRTs) (and are not marketed as such), but rather are recreational use products. Although the available evidence demonstrates that most current e-vapor users are using these products as an aid to help them quit or cut down on their use of traditional cigarettes, no claims to this effect are being made by AEMSA or any of its Member companies about their products.

AEMSA is providing these comments to FDA on behalf of its e-liquid manufacturing Members.

II. FDA's Notice of Proposed Rulemaking

The e-vapor device (commonly referred to as the e-cigarette) is a revolutionary technology that has the ability to greatly benefit the public health, as it provides the first viable recreational alternative to tobacco for cigarette smokers. First and foremost, AEMSA's position is that e-vapor products are technology products, not tobacco products, and that Congress should consider separate legislation specifically giving FDA authority over such products separate from the Agency's tobacco and drug authorities under the Food, Drug and Cosmetic Act (FDCA), as amended by the Family Smoking Prevention and Tobacco Control Act (Tobacco Control Act). We believe that attempting to force the FDCA requirements onto these products is not an effective regulatory strategy, and one that could actually harm the public health, as e-vapor products have proven to be an effective tool for tobacco harm reduction. Nevertheless, for purposes of these comments, we assume, *arguendo*, that e-vapor devices and their e-liquid components will be subject to the FDCA either as drugs or tobacco products, once FDA finalizes the so-called "Deeming Regulation" (FDA Docket No. FDA-2014-N-0189).

Through this proposed rule FDA seeks to clarify the jurisdictional lines between tobacco products and medical products (*e.g.*, drugs, devices, and drug/device combinations). This will directly impact whether e-vapor products will be regulated as drug-delivery devices or tobacco products once FDA finalizes its Deeming Regulation. More specifically, under the current statutory scheme, a product that contains tobacco or tobacco-derived components may be regulated either as a recreational-use tobacco product or a therapeutic-use medical product depending on its "intended use". By way of background, a drug is defined in the FDCA, in pertinent part, as (1) a substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease (the "disease benefit" prong) or (2) a substance (other than food) intended to affect the structure or any function of the body (the "structure/function" prong). The proposed rule attempts to clarify the types of claims, in FDA's view, that would fall under each of these prongs and cause a tobacco product to be a drug (medical product).

Specifically, with respect to the structure/function prong, FDA states that any claim that a product has an impact on the structure/function of the body that is *different* from the way that tobacco companies commonly marketed the effects of nicotine in cigarette and smokeless tobacco advertising prior to March 21, 2000, the date of the Supreme Court decision in *Food & Drug Admin. v. Brown & Williamson Tobacco Corp.*, 529 U.S. 120 (2000), would cause such product to be a medical product. In other words, if the proposed rule were to become effective as drafted, an e-vapor product would be considered a medical product even without therapeutic/disease claims if the manufacturer advertises any impact on the body that the tobacco companies did not normally advertise about *their* products prior to March 21, 2000. Specifically, as detailed below, e-vapor products would be limited, according to FDA, to marketing claims of "smoking pleasure" and "smoking satisfaction" since that is how traditional tobacco products were "customarily marketed" prior to March 21, 2000.

For the reasons set forth below, if this proposed rule becomes effective as drafted, the vast majority of e-vapor products that contain nicotine derived from tobacco would be forced to either deceptively market their products as traditional tobacco products did prior to March 21, 2000, or be forced off the market as unapproved medical products. This is contrary to Congressional intent and will completely eviscerate the growing e-vapor industry.

III. The Proposed Rule Will Fuel Misperception That E-Vapor Products Are As Harmful as Tobacco-Combusting Products

If this proposed rule is allowed to become effective, e-vapor products, which are not intended as smoking cessation tools, would be forced to market their products in ways that make no sense and would completely confuse consumers. As stated in the proposed rule, "FDA believes that the appropriate inquiry in determining whether a particular product made or derived from tobacco is 'customarily marketed' – and therefore outside of FDA's drug/device jurisdiction – is to determine whether any claims related to the structure/function relate to effects of nicotine that were commonly and legally claimed in the marketing of cigarettes and smokeless tobacco products prior to the date of the Supreme Court's decision in *Brown & Williamson* (March 21, 2000)." 80 Fed. Reg. at 57760.

FDA goes on to note that neither claims (1) related to tobacco "satisfaction, pleasure, enjoyment and refreshment" or (2) suggesting that a product provides an alternative way of obtaining the effects of nicotine or another tobacco product, such as "satisfying smoking alternative," "provides all the pleasure of smoking," "get your nicotine fix," or "provides smokers the same delight, physical and emotional feelings," would fall within its drug and device regulatory authority. **However, limiting e-vapor companies to these types of claims which are directly related to *tobacco* and *smoking* will have the unintended consequence of**

confusing consumers, drastically impacting the e-vapor industry and ultimately harming the public health.

a. E-Vapor Products Are Significantly Less Harmful Than Tobacco Leaf Products and Were Not Commercially Available Prior to March 21, 2000

While we appreciate that e-vapor products may fall under the broad definition of "tobacco product" in the FDCA if they contain tobacco-derived components (*e.g.*, nicotine) and are not otherwise intended to be drug/devices, for purposes of this comment, it is critical for FDA to distinguish between tobacco products that actually contain tobacco-leaf and those that only contain tobacco-derived substances. The vast majority of e-vapor products, **which did not exist prior to March 21, 2000**, are simply not intended for *smoking* pleasure or *tobacco* satisfaction. Indeed, the term "smoking" implies that these products are harmful, tobacco-combusting products, which could not be further from reality. Although e-vapor products may not be completely "harmless," and should only be used by adults, there is no doubt that compared to tobacco-leaf products, and especially those that are combusted, e-vapor devices and the e-liquids used in them are dramatically less harmful for individual tobacco users, especially cigarette smokers. To require these novel technology products which, again, did not exist prior to March 21, 2000, to be marketed in the same manner as completely different agricultural-based tobacco products were marketed over 15 years ago would be intentionally deceptive advertising.

As set forth in AEMSA's comments to the NPRM for the Deeming Regulation[2], tobacco leaf-containing products, especially those that are combusted, are the most harmful and dangerous products on the "continuum of risk" of nicotine products. The continuum of risk of nicotine-containing products is a way to visualize the risk disparity between different categories of products. The product that poses the greatest harm and risk of tobacco-related disease (*i.e.*, the traditional, combustible cigarette) is on one end of the continuum, and new product forms (such as e-vapor) that do not contain or combust tobacco leaf are on the other end:

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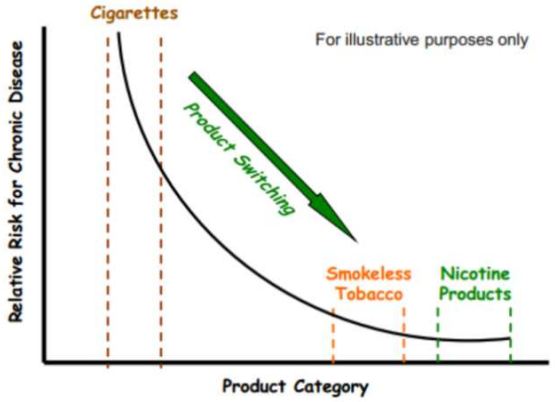
[2] *See* Comment ID FDA-2014-N-0189-81140 and tracking number 1jy-8dol-z5ml, available online at: http://www.regulations.gov/#!documentDetail;D=FDA-2014-N-0189-81140.



Public health organizations recognizing pronounced *continuum of risk*, potential for harm reduction with product switching (e.g., LN-SLT)

- **Institute of Medicine (2001)**
- **American Council on Science and Health (2006)**
- **Royal College of Physicians (2002, 2007)**
- **Scientific Committee on Emerging and Newly Identified Health Risks (2007)**
- **Life Sciences Research Office (2008)**
- **American Association of Public Health Physicians (2008)**
- **World Health Organization (2008)**
- **Strategic Dialogue on Tobacco Harm Reduction Group (2009)**

Tobacco-combusting products are the most harmful and dangerous products on the continuum and should be treated as such. It is well established, for example, that the more pyrolyzed tobacco constituents a user inhales from a combustible tobacco product, such as a cigarette, the greater the risk of tobacco-related disease that product poses.[3] Of the approximately 5,300 chemicals identified in tobacco smoke, at least 60 are known human carcinogens, including polycyclic aromatic hydrocarbons (PAHs) and tobacco-specific nitrosamines (TSNAs).[4] Even if e-vapor products contain nicotine derived from tobacco, these products are far less risky to individual users than combustible cigarettes because they do not result in the inhalation of pyrolyzed chemicals. The substantially lower risk profile of e-vapor products compared to tobacco-leaf product alone is justification for FDA treating these products differently with respect to how they are permitted to be marketed.

When considering the types of claims that e-vapor products will be allowed to make without being considered medical products, FDA should distinguish between e-vapor and other products that only contained tobacco-derived substances from products that actually contain tobacco leaf and that were commercially available prior to March 21, 2000.

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[3] *See* R.R. Baker, et al., The pyrolysis of tobacco ingredients, 71 J. Anal. Appl. Pyrolysis 223-311 (2004).

[4] *See* Rodgman, A. and Perfetti, T.A., The Chemical Components of Tobacco and Tobacco Smoke, Boca Raton, FL: CRC Press (2009).

b. Growing Misperception About E-Vapor Products Will Harm the Public Health

One of the reasons for proposing this rule, according to FDA, is to "reduce confusion among consumers" who are "particularly susceptible to confusion where products made or derived from tobacco that otherwise appear to be products intended for recreational use make claims related to quitting smoking." 80 Fed. Reg. at 57759. This is in line with one of the stated purposes of the Tobacco Control Act to ensure that "consumers are better informed". Section 3, Tobacco Control Act. However, what FDA apparently fails to grasp is that forcing e-vapor companies to market their products in the same manner that tobacco products were customarily marketed decades ago would, ironically, likely confuse consumers and cause more of them to wrongfully believe that e-vapor products contain and combust tobacco. It would seem that the proposed rule would accomplish exactly the opposite and preclude venders and/or manufacturers from ensuring "consumers are better informed," thereby effectively forcing consumers to be less-informed (by regulatory mandate).

This would further play into the growing misperception that e-vapor products are just as harmful as traditional tobacco products, despite their position on the continuum of risk described above. According to a recent poll conducted by the Action on Smoking Health (Ash), a growing number of smokers are failing to understand the relative risks of cigarette smoking versus vaping and may, as a result, put off switching to e-vapor products. Specifically, between 2013 and 2015, the proportion of respondents to the Ash survey who believe e-vapor products were as harmful as regulated, tobacco-combusting cigarettes, increased from 6% to 20%.[5] This is a staggering result that will have grave consequences for the public health, as smokers will be less likely to switch to vaping if they believe them to be just as harmful as cigarettes.

It is clear that if e-vapor products can only be marketed in the same manner that tobacco products were customarily marketed prior to March 21, 2000, consumers will be prevented from learning about the potential benefits these products offer, and will be lead to believe that e-vapor products are just another form of harmful "smoking".

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[5] Public Health England, *E-Cigarettes: an evidence update,* available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/457102/Ecigarettes_an_evidence_update_A_report_commissioned_by_Public_Health_England_FINAL.pdf.

IV. The Proposed Rule Would Make It Impossible For E-Vapor Manufacturers and Retailers to Truthfully Discuss the Benefits of Flavors with their Adult Consumers

As noted above, e-vapor products and the e-liquids used in them have very little in common with tobacco-leaf products. One major distinction is that e-liquids, particularly those used in refillable "open-system" devices, come in a variety of flavors. Flavor variety is critical for consumers not simply for pleasure or enjoyment, but because the flavors are one of the main reasons why smokers transition to vaping. Despite the negative connotations often associated with flavored e-liquid in the media, more and more data is being developed supporting that these products actually provide a public health *benefit*. Studies have shown that one of the primary reasons that consumers of open-system vaporizers are much less likely to engage in "dual use" with cigarettes, or revert back to smoking, is the fact that these products may be used in conjunction with refillable e-liquids that come in a variety of flavors, allowing adult consumers[6] to tailor their vaping experience to fit their tastes and needs.

Recent survey results published in the journal *Addiction*, for example, demonstrated that among vape store customers in the U.S., those who used newer-generation e-vapor devices with non-tobacco and non-menthol flavored e-liquid appear to be associated with higher rates of smoking cessation.[7]

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[6] AEMSA agrees that in order to minimize any potential harm, preventing adolescents from accessing these products is paramount, and supports banning sales of these products to minors. Specifically, manufacturers should market their flavored products in a responsible manner by, for example, (1) making clear that such products are not intended for use by anyone under the legal smoking age, (2) preventing the products and any marketing materials from being accessed by minors either online or in vape shops, and (3) using responsible product names that are not more likely to attract youth. Specifically, manufacturers should implement robust online age-verification systems that will verify the age of online purchasers using either official government identification or verification through a reputable credit agency. AEMSA also encourages brick-and-mortar e-liquid vendors to ensure that the age of any in-person purchasers under the age of 26 is properly verified.

[7] *See* Tackett, Alayna P., *et al*., *Biochemically verified smoking cessation and vaping beliefs among vape store customers*, Addiction, Vol. 110, Issue 5, pgs. 868-874 (May 2015); abstract available online at: http://onlinelibrary.wiley.com/doi/10.1111/add.12878/abstract;jsessionid=44D796BE1B7F583A51E5B392CA541785.f03t02#.VkPghXUVqkU.twitter

A more comprehensive survey was conducted by a research team led by Dr. Konstantinos Farsalinos of the Onassis Cardiac Surgery Center in Athens, Greece to better understand the impact that flavors have on e-vapor users. The research team conducted a survey of 4,618 dedicated vapers.[8] Of the 4,515 participants that reported their current cigarette smoking status, the overwhelming majority (91.1%) were former smokers (*i.e.*, vapers who have transitioned completely to e-vapors from combustible cigarettes). Of the remaining current smokers (*i.e.*, vapers that continue to smoke cigarettes), they had, on average, reduced their cigarette consumption from 20 to 4 units per day. Both subgroups (former smokers and current smokers) had a median smoking history of 22 years and had been using e-vapors for 12 months. On average, the participants were using three different types of e-liquid flavors on a regular basis, with former smokers switching between flavors more frequently, compared to current smokers.

Specifically, 69.2% of the former smokers reported using different e-liquid flavors on a daily basis or during the day. Fruit flavors were more popular at the time of participation, while tobacco flavors were more popular at initiation of e-vapor use. In other words, smokers making the transition to vaping were like to initially make the switch using tobacco flavored e-liquids, but then began enjoying other flavors. On a scale from 1 (not at all important) to 5 (extremely important) participants answered that variability of flavors was "very important" (score = 4) in their effort to reduce or quit smoking. The majority reported that restricting flavor variability will make e-vapors less enjoyable and more boring, while 48.5% mentioned that it would increase craving for combustible cigarettes. Nearly 40% said that it would have been less likely for them to reduce or quit smoking if not for flavored e-liquids. The number of flavors used was independently associated with smoking cessation.[9]

This public health benefit of e-liquid flavors was also reinforced by a survey of 10,000 vapers conducted by the Electronic Cigarette Forum (ECF).[10] When asked which e-liquid flavor

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[8] *See* Farsalinos, K., *et al*. *Impact of Flavour Variability on Electronic Cigarette Use Experience: An Internet Survey*, 10(12) Int. J. Environ. Res. Public Health 7272-7282 (2013), available online at: http://www.mdpi.com/1660-4601/10/12/7272.

[9] Of course, as noted above, none of the e-liquids produced by AEMSA Members are marketed for use in smoking cessation or as NRTs, but rather only for recreational use by adults. Any smoking cessation or reduced cigarette consumption resulting from the use of e-liquids or e-cigarettes generally is a corollary benefit of these products.

[10] *See* Mclaren, Neil, *Vaping.com Big Survey 2014 - Initial Findings General*, (2014), available http://vaping.com/data/vaping-survey-2014-initial-findings. This survey was conducted in late June and early July 2014. Of the more than 10,000 members of E-Cigarette

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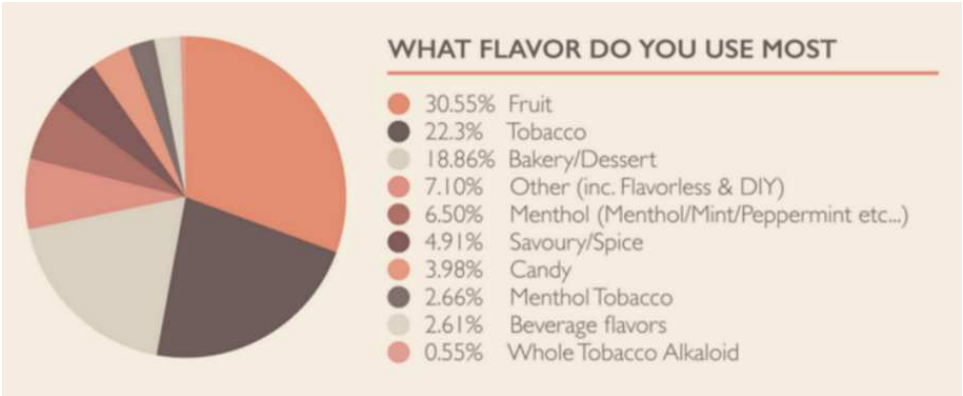
they used most, only about 25% of the participants indicated tobacco or menthol tobacco. This means that three-quarters of the adult e-vapor users surveyed actually prefer flavors *other* than tobacco, including fruit (31 percent), bakery/dessert (19 percent), and savory/spice (5 percent)[11]:



Approximately 65.5% of the former smokers surveyed consider e-liquid flavors important in helping them transition completely to vaping and away from smoking.

Although e-vapor products are recreational use products and not intended to be smoking cessation devices, the same principle applies to these products. Non-tobacco e-liquid flavors assist e-vapor users to associate their nicotine fix and/or smoking "habit" with a new taste, helping them transition away from smoking and creating an additional barrier to relapse, as returning to combustible cigarettes would mean getting used to the burning flavor of tobacco smoke again**. Moreover, different flavors may have different impacts on the body (*e.g.*, chest hit vs. throat hit) which e-vapor manufactures and retailers need to be able to communicate to their consumers (adult smokers) to help them find the flavor and device combination that will best allow them to switch from smoking, and maintain vaping without reverting to cigarettes or becoming a dual user**.

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Forum, 78 percent of whom live in the United States. Their ages ranged from 18 to "65 and over," with 74 percent between 22 and 54.

[11] *See Vaping.com Big survey 2014 - initial findings general*, available online at: http://vaping.com/data/vaping-survey-2014-initial-findings. *See also Survey Shows Adults Who Use E-Cigarettes To Quit Smoking Prefer Supposedly Juvenile Flavors*, Forbes.com, (2014), available online at: http://www.forbes.com/sites/jacobsullum/2014/07/17/survey-shows-adults-who-use-e-cigarettes-to-quit-smoking-prefer-allegedly-juvenile-flavors/.

Indeed, when switching to vaping[12], many smokers may initially try tobacco-flavored e-liquids because they are looking for a close replacement to mimic the cigarette they have always used. But as their olfactory and sense of taste return as their cigarette consumption decreases, new vapers often experiment with more pleasant and enjoyable e-liquid flavors which, in turn, keep them from reverting to cigarettes.

For these reasons, e-vapor manufacturers and retailers must be able to truthfully market and discuss the potential benefits and bodily impact of flavors to consumers without the fear of being categorized as an unapproved medical product. **Because different flavors may have different impacts on the body, manufactures and retailers need to be able to communicate those potential impacts to their consumers in order to help those consumers identify the flavor and device combination that allows them to switch completely from smoking.** But, because traditional tobacco products were not customarily marketed with such flavors prior to March 21, 2000, e-vapor products would be prevented from such marketing by this proposed rule. We believe that tying e-vapor product manufacturer and retailer hands in this manner will have a drastic adverse public health impact resulting in fewer smokers permanently switching to vaping.

V. The Proposed Rule Would Result in a Tantamount Ban of E-Vapor Products, Which Would be Forced Off the Market as Unapproved Medical Products

As the proposed rule is drafted, e-vapor manufacturers and retailers that market their products in any way that goes beyond how tobacco companies customarily marketed cigarettes and smokeless tobacco products decades ago would be considered marketing unapproved medical products, and would be forced to remove their products from interstate commerce. This would be tantamount to a ban of these products, which Congress never intended.

As detailed in AEMSA's comments to the NPRM for the Deeming Regulation, the primary purpose of the Tobacco Control Act is to reduce tobacco-related disease and death. It is

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[12] The proposed rule would also prevent e-vapor product manufacturers and retailers from discussing the potential benefits of "switching" from smoking to vaping (*e.g.*, increased lung capacity, return of olfactory senses, better ability to taste, etc.). Because these structure/function impacts on the body were not how tobacco companies customarily marketed their products, the proposed rule would consider these unapproved drug claims as well. Truthfully marketing the benefits of switching or transitioning to e-vapor products is not inherently a smoking cessation claim, as the purpose is not to stop the use of nicotine-containing products altogether but rather to encourage switching or transitioning from one recreational use product to another recreational use product with a lower risk profile.

clear from its legislative history that, because of these well-known health consequences of tobacco use, the Tobacco Control Act was truly intended to apply to products that actually contain tobacco leaf, and to make it very difficult for the tobacco industry to bring such new products to the market.

Congress, however, did not intend the implementation of the Tobacco Control Act to effectively ban products that have the potential to greatly reduce the burden on society of tobacco-related disease. When Congress passed the Tobacco Control Act it set out ten purposes underlying the legislation. These purposes include not only reducing "the social costs associated with tobacco-related diseases" and ensuring "that consumers are better informed"—but also continuing "to permit the sale of tobacco products to adults" and providing effective oversight of the "industry's efforts to develop, introduce, and promote less harmful tobacco products." Section 3, Tobacco Control Act. If this proposed rule is implemented as drafted, many e-vapor products will be considered unapproved medical products and forced off the market because of the way they might promote switching from smoking to vaping or the potential benefits of flavors. This would clearly go against Congress' intent to reduce not only harm from tobacco-related disease through the promotion of less harmful products, but consumer confusion about the health impact of products.

Requiring e-vapor companies to deceptively market their products as tobacco products were marketed for smoking and tobacco pleasure prior to March 21, 2000 or risk being categorized as unapproved medical products and forced off the market flies in the face of the Tobacco Control Act's requirement to ensure that consumers are better informed and to reduce the costs associated with tobacco-related disease and death.

VI. The Proposed Rule Would Violate E-Vapor Companies' First Amendment Commercial Free Speech Rights

The proposed rule would require the e-vapor industry to either make misleading marketing claims about their products, or run the risk of being categorized as an unapproved medical product. **This position runs contrary to e-liquid and e-vapor product manufacturers' First Amendment commercial speech rights.** If commercial speech is neither misleading nor related to unlawful activity, the government's power to restrict speech is limited.

Specifically, the government must advance a substantial interest in restricting speech, and must restrict the speech in a way that advances the interest in a direct and narrowly tailored manner.[13] In this case, it is not misleading for e-vapor products to discuss the truthful potential

[13] *Cent. Hudson Gas & Elec. Corp. v. Public Serv. Comm'n*, 447 U.S. 557, 564 (1980) (holding a restriction on non-misleading commercial speech concerning lawful activity is valid

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benefits of "switching" or "transitioning" to e-vapor products from other, much more harmful tobacco-containing products, or to discuss the potential impact of e-liquid flavors on consumers' bodies. It is also not misleading to present e-vapor products as recreational alternative to more harmful combustible or smokeless tobacco products. On the other hand, restricting e-vapor products to claims related to tobacco and smoking would be misleading, as e-vapor products do not contain tobacco and are not combustible and, therefore, are significantly less harmful, as noted above. If FDA's goal is to avoid consumer confusion, requiring e-vapor products to only make the types of claims made by combustible and smokeless tobacco products prior to March 21, 2000 does not achieve this end.

In the absence of smoking cessation claims, e-vapor products must be permitted to make truthful, non-misleading statements about their use as recreational products in accordance with the First Amendment, as requiring these products to carry misleading marketing claims that do not fit the profile of these products is not a valid means to avoid consumer confusion.

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when the government's asserted interest in restricting the speech is substantial, the means used to restrict the speech directly advance this substantial interest, and the means are not more extensive than necessary to achieve the substantial government interest).

AEMSA appreciates the opportunity to submit these comments to FDA, and would be glad to discuss these comments at its earliest convenience.

Respectfully Submitted,

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On behalf of:

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1. 180 Vape – Travis Pharr
2. Chuckin' Clouds – Trishcia Braden
3. Ecigcharleston – Joe Atwell
4. EC Blend – Carol Williams
5. Eclipse Liquids – Steve Mazurek
6. Firebrand – Brian Gage
7. Hot Vapes – Tim Roche
8. J Vapes – Jourdan Wheeler
9. Madvapes – Scott Church
10. Mister E-Liquid – Dan Lawitzke
11. Molecule Labs – Michael Guasch
12. Mountain Oak Vapors – Steve Nair
13. NicVape – Richard Henning
14. NicQuid – Adam Knudsen
15. Purilum – Bianca Iodice
16. Tampa Vapor – John Synychak
17. Texas Select Vapor – Brett Coppolo
18. The Vapor Bar – Schell Hammel
19. The Vaper's Knoll – Richard Gue
20. Two Peas in a Pod – Orlan Johnson
21. VaporHQ – Adam Black
22. VaporShark – Brandon Leidel
23. Virgin Vapor – Annette Rogers

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