

SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST #	SO871	ACTUAL DATE AND TIME OF DEPARTURE	08/20/2018 03:39 PM
ATTACHED PAGES"	YES NO	ESTIMATED DATE AND TIME OF ARRIVAL	

SHIPPER INFORMATION		RECEIVER INFORMATION	
STATE LICENSE #	A11-18-0000248-TEMP	STATE LICENSE #	0
TYPE OF LICENSE	Adult-Use Distribution Temporary Licence	TYPE OF LICENSE	Retailer License
BUSINESS NAME	Oz Distribution, Inc.	BUSINESS NAME	Chad
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS ADDRESS	0
CITY, STATE, ZIP CODE	Santa Cruz, CA 950602126	CITY, STATE, ZIP CODE	0, CA 0
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	0
CONTACT NAME	Jakob Laggner	CONTACT NAME	

DISTRIBUTOR INFORMATION

STATE LICENSE #	A11-18-0000248-TEMP	DRIVER'S NAME	Brandon Sumandal
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	D1309712
BUSINESS ADDRESS	195 Harvey West Blvd	VEHICLE MAKE	Ford
CITY, STATE, ZIP CODE	Santa Cruz, CA 950602126	VEHICLE MODEL	Transit
PHONE NUMBER	(831) 600-7710	VEHICLE LIC. PLATE #	54269L2
CONTACT NAME	Jakob Laggner	ACTUAL DATE AND TIME OF ARRIVAL	

PRODUCT SHIPPED DETAILS
RECEIVER COMPLETES ONLY THE SHADED COLUMNS BELOW

UID	ITEM NAME	QTY ORD	QTY REC	UNIT COST	TOTAL COST	UNIT RETAIL VALUE	TOTAL RETAIL VALUE
FL0075	Gold Coast - Prepackaged Greenhouse Flower - Prerolls 5 pack - Black Jack - 2.5g	1		\$12.00	\$12.00		

PRODUCT REJECTION
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SECTION ABOVE

REASON FOR RECECTION

PRODUCT RECEIPT CONFIRMATION
I confirm that the contents of this shipment match in weight and count as indicated above.
I agree to take custody of all items as inicated received above - and which are not circled.
The products circled above are rejected for delivery and remain in the custody of the distributor for return to the shipper as indicated in this form and all attached product detail sheet(s).

NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT	PHONE NUMBER
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT	DATE SIGNED