SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO73	56	ACTUAL DATE AND TIME OF DEPARTURE	E 11/14/2019 02:21 F	M			
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL		141			
SHIF	PER INFORMATION	REC	RECEIVER INFORMATION				
STATE LICENSE #	C11-0000224-LIC STATE LICENSE # C10-0000306-LIC			S-LIC			
TYPE OF LICENSE	License	STATE LICENSE2#					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Lice	Retailer License			
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME	We Are Hem	We Are Hemp			
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 BUSINESS ADDRESS CITY, STATE, ZIP CODE			WELLING BLV	'D			
		CITY, STATE, ZIP CODE	Hayward, CA 95451				
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	(510) 276-2628				
CONTACT NAME	Miguel Felix	CONTACT NAME					
		DISTRIBUTOR INFORMATION					
STATE LICENSE #	C11-0000224-LIC	DRIVER'S NAME	Rodel Jardel	Rodel Jardeleza			
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B82636677				
BUSINESS ADDRESS	195 Harvey West Blvd	VEHICLE MAKE	AKE Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		VEHICLE MODEL	Transit	Transit			
PHONE NUMBER	(831) 600-7710	VEHICLE LIC. PLATE #	54269L2	54269L2			
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF					
		ARRIVAL					
	RECEIVE	PRODUCT SHIPPED DETAILS R COMPLETES ONLY THE SHADED COLUMNS BELC	DW.				
	KLOLIVLI	COOM LETES ONET THE SHADED COLUMNS DELC	, v				
			QTY QTY UNIT		UNIT RETAIL	TOTAL RETAIL	
UID ITEM NAME			ORD REC'IDOST	TOTAL COST	VALUE	VALUE	
[CT00210] Summit Boys Caviar Crumble Forbidden Fruit 1G			96 \$16.00	\$1,536.00			
[CT00208] Summit Boys Caviar Crumble Gelato 1g			96 \$16.00	\$1,536.00			
		PRODUCT REJECTION					
IF PRODUC	CTS ARE REJECTED PLEASE CIRC	LE THE ITEMS BEING REJECTED IN THE PRODUCT	SHIPPED DETAILS	SECTION ABO	VE		
REASON FOR RECECTION							
NEXION FOR NEGLECTION							
		PRODUCT RECEIPT CONFIRMATION					
	is shipment match in weight and cou						
	ems as inicated received above - and re rejected for delivery and remain in	which are not circled. the custody of the distributor for return to the shipper as	indicated in this form	and all attache	d produc	t detail	
NAME OF PERSON RECEIVII REJECTIONG PRODUCT	NG AND/OR		PHONE NUMBER				
SIGNATURE OF PERSON RE REJECTING PRODUCT	CEIVING AND/OR		DATE SIGNED				