## SALES INVOICE / SHIPPING MANIFEST

INVOICE	MANUEEST # SO753	77	ACTUAL DATE AND TIME OF DEDARTURE	11/01	1/2010 03:52 D	M				
INVOICE/MANIFEST # SO7537 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 11/01/2019 03:52 PM ESTIMATED DATE AND TIME OF ARRIVAL						
7111710111	INOLO INO			ESTIMATED BATE AND TIME OF ARRIVAL						
SHIPPER INFORMATION				RECEIVER INFORMATION						
STATE LICENSE # C11-0000224-LIC			STATE LICENSE #		C10-0000420-LIC					
	YPE OF LICENSE License			STATE LICENSE2 #						
BUSINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE		Retailer License					
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME	JSINESS NAME SOCC					
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126			BUSINESS ADDRESS		5740 Lankers	him Blvd				
			CITY, STATE, ZIP CODE		North Hollywood, CA 91601					
PHONE NUMBER (831) 600-7710			PHONE NUMBER		0					
CONTACT NAME Miguel Felix				CONTACT NAME	CONTACT NAME					
			DIS	STRIBUTOR INFORMATION						
STATE LICENSE # C11-0000224-LIC			DRIVER'S NAME		Angel Rodriguez					
BUSINESS NAME Oz Distri		Oz Distribution, Inc.		CA DRVR LIC #		B9147506				
BUSINESS ADDRESS 195 Harvey West Blvd		195 Harvey West Blvd		VEHICLE MAKE		Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 9506021		Santa Cruz, CA 950602126		VEHICLE MODEL		Transit				
PHONE NUMBER (831) 600-7		(831) 600-7710		VEHICLE LIC. PLATE #		54269L2				
CONTACT NAME Miguel Felix				ACTUAL DATE AND TIME OF ARRIVAL						
		RECEIVER		ODUCT SHIPPED DETAILS TES ONLY THE SHADED COLUMNS BELOV	W					
UID	ITEM NAME					QTY UNIT	TOTAL COST		TOTAL RETAIL VALUE	
[CT00121] Summit Boys Crumble Mango Brulee 1g					12	2 \$12.50	\$150.00	)		
[CT00128] Summit Boys Private Reserve Live Resin Sauce 1g					(					
CT00140] Summit Boys Sour Dub Sauce 1g Summit Boys Shelf Support				12						
	Summit Boys Shell St	ірроп				2 -\$10.00	-\$32.00			
				PRODUCT REJECTION						
	IF PRODUC	TS ARE REJECTED PLEASE CIRC	LE THE ITE	EMS BEING REJECTED IN THE PRODUCT	SHIPF	PED DETAILS	SECTION ABO	VE		
REASO	N FOR RECECTION									
			PRODU	JCT RECEIPT CONFIRMATION						
		is shipment match in weight and cour								
_	ducts circled abbove ar	ms as inicated received above - and e rejected for delivery and remain in t		not circled.	indicat	ted in this form	and all attache	d produc	t detail	
NAME	OF DEDOON DEGEN (II	IC AND/OD			D.	IONE				
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER					
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					D	ATE SIGNED				