SALES INVOICE / SHIPPING MANIFEST

		TILLS II V O	ICL / D		I LOI					
INVOICE/MANIFEST # SO7489			ACTUAL D	ACTUAL DATE AND TIME OF DEPARTURE 10/26/2019 01:21 PM						
ATTACHED PAGES No			ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION				RECEIVER INFORMATION						
STATE LICENSE #	C11-0000224	-LIC		STATE LICENSE #	C1	10-0000198	-LIC			
TYPE OF LICENSE				STATE LICENSE2#						
BUSINESS NAME	USINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE	Re	etailer Licen	se			
BUSINESS ADDRESS 195 Harvey West Blvd		est Blvd		BUSINESS NAME	K	K U S H Pharm				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		A		BUSINESS ADDRESS	16	16770 Stagg St				
				CITY, STATE, ZIP CODE	Va	Van Nuys, CA 91406				
PHONE NUMBER (831) 600-7710		0		PHONE NUMBER	0	0				
CONTACT NAME Miguel Felix				CONTACT NAME						
			DISTRIBUTOI	R INFORMATION						
STATE LICENSE # C11-0000224		-LIC		DRIVER'S NAME	Br	Bradley Martinez				
BUSINESS NAME	Oz Distribution	Oz Distribution, Inc.		CA DRVR LIC #		B9489158				
BUSINESS ADDRE	SS 195 Harvey W	195 Harvey West Blvd		VEHICLE MAKE	Fo	Ford				
CITY, STATE, ZIP C	CODE Santa Cruz, C	Santa Cruz, CA 950602126		VEHICLE MODEL	Tra	Transit				
PHONE NUMBER	(831) 600-771	(831) 600-7710		VEHICLE LIC. PLATE #	54	54269L2				
CONTACT NAME	Miguel Felix			ACTUAL DATE AND TIME OF						
				ARRIVAL						
				HIPPED DETAILS	0144					
		RECEIVER COMP	LETES ONLY	THE SHADED COLUMNS BELC	OVV					
UID ITEM NA	ME				QTY QT ORD RE		TOTAL COST		TOTAL RETAIL VALUE	
CT00214] Summit Boys Caviar Crumble Pac Glue 1g					12	\$16.00	\$192.00			
CT00216] Summit Boys Caviar Gorilla Glue 1g					12	\$16.00	\$192.00			
Summit Boys Shelf Support					1	-\$16.00	-\$16.00			
			PRODUCT	REJECTION						
	IF PRODUCTS ARE REJECTED	PLEASE CIRCLE THE	ITEMS BEING	G REJECTED IN THE PRODUC	T SHIPPED	DETAILS S	SECTION ABO	VE		
REASON FOR RE	ECECTION									
		PRC	DDUCT RECE	IPT CONFIRMATION						
I confirm that the	contents of this shipment match in	weight and count as ind	licated above.							
_	stody of all items as inicated received abbove are rejected for deliver			ributor for return to the shipper as	s indicated	in this form	and all attache	d produc	t detail	
NAME OF PERSON RECEIVING AND/OR				PHONE						
REJECTIONG PR					NUME					
SIGNATURE OF I	PERSON RECEIVING AND/OR DDUCT				DATE	SIGNED				