SALES INVOICE / SHIPPING MANIFEST

INVOICE	/MANIFEST # SO4963		Δ	ACTUAL DATE AND TIME OF DEPARTURE 05/10/2019 08:36 AM								
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL								
SHIPPER INFORMATION				RECEIVER INFORMATION								
STATE LICENSE # A11-18-0000248-TEMP			STATE LICEN		TATE LICENSE #			A10-18-000	104-TEMP			
TYPE OF LICENSE Adult-Use Distribution Tem		emporary Licence		STATE LICENSE2 #								
BUSINESS NAME Oz Distribution, Inc.		,	TYPE OF LICENSE			Retailer License						
BUSINESS ADDRESS 195 Harvey West Blvd				В	BUSINESS NAME Herbal Cruz							
CITY, STATE, ZIP CODE Santa Cruz, CA					BUSINESS ADDRESS			1051 41st Avenue				
		950602126		CITY, STATE, ZIP CODE		E	Capitola, CA 95062					
PHONE NUMBER (8		(831) 600-7710	-7710		HONE NUMBER 831.212.1722			2				
CONTACT NAME Miguel F		Miguel Felix			ONTACT NAME							
			DIS	TRIBUTOR IN	FORMATION							
STATE	CENSE #	A11-18-0000248-TEMP		D	DRIVER'S NAME		Art Danner					
BUSINESS NAME		Oz Distribution, Inc.			CA DRVR LIC #			C3745415				
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		V	VEHICLE LIC. PLATE #			54269L2				
CONTAC	T NAME	Miguel Felix	guel Felix		ACTUAL DATE AND TIME OF ARRIVAL							
			PRC	ODUCT SHIPF	PED DETAILS							
		RECEIVE			E SHADED COLUMN	S BELOW						
										UNIT	TOTAL	
							TY C	TINU YTÇ		RETAIL	RETAIL	
UID						ORD REC'IDOST		TOTAL COST	VALUE	VALUE		
[FL0069]	L0069] Elite Indica GG4 3.5g				128 \$9.0			\$1,152.00)			
[FL0069] Elite Indica GG4 3.5g				1 \$0.0			1 \$0.01					
[FL0069] Elite Indica GG4 3.5g							\$0.0					
[FL0069] Elite Indica GG4 3.5g					1 \$0.0				1 \$0.01			
			F	PRODUCT RE	JECTION							
	IF PRODUCT	S ARE REJECTED PLEASE CIR	CLE THE ITE	EMS BEING R	EJECTED IN THE PRO	ODUCT SHI	IPPE	D DETAILS	SECTION ABO	VE		
REASC	N FOR RECECTION											
					CONFIRMATION							
		shipment match in weight and cons as inicated received above - and										
	ducts circled abbove are	rejected for delivery and remain ir			tor for return to the shi	pper as indi	cate	d in this forr	and all attache	ed produc	t detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER							
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						DATE SIGNED						