SALES INVOICE / SHIPPING MANIFEST

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INVOICE/MANIFEST # SO8043 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 12/03/2019 06:30 PM ESTIMATED DATE AND TIME OF ARRIVAL						
ATTACHI	ED PAGES	No		ESTIMATE	ED DATE AND TIME OF ARRIVAL	-				
SHIPPER INFORMATION					RECEIVER INFORMATION					
STATE LICENSE # C11-0000224-LIC						C12-0000132-				
	LICENSE	License	C		STATE LICENSE2 #		C12-0000132-	LIC		
BUSINESS NAME Oz Distribution		nc		TYPE OF LICENSE		Retailer License				
BUSINESS ADDRESS 195 Harvey West Blvd					BUSINESS NAME		Phytologie Oa			
CITY, STATE, ZIP CODE Santa Cruz, CA			it bivu		BUSINESS ADDRESS		8440 Enterprise way			
950602126				CITY, STATE, ZIP CODE		Oakland , CA 94621				
PHONE NUMBER (831) 600-7710					PHONE NUMBER		0			
CONTACT NAME Miguel Felix					CONTACT NAME		o a constant of the constant o			
CONTAC	TIVAME	ivliguei i elix			CONTACT NAIVIL					
				DISTRIBUTO	R INFORMATION					
STATELL	CENSE #	C11-0000224-LI	C.		DRIVER'S NAME		Rodel Jardele	72		
BUSINESS NAME			Oz Distribution, Inc.		CA DRVR LIC #		B82636677			
BUSINESS ADDRESS			195 Harvey West Blvd				Ford			
CITY, STATE, ZIP CODE		-			VEHICLE MODEL		Transit			
PHONE NUMBER			(831) 600-7710		VEHICLE LIC. PLATE #		54269L2			
CONTACT NAME		Miguel Felix			ACTUAL DATE AND TIME OF		O ILOULE			
00111710	1 TO TIVIL	Wilguel 1 Clix			ARRIVAL					
				PRODUCT S	HIPPED DETAILS					
			RECEIVER CO	MPLETES ONLY	THE SHADED COLUMNS BELO	W				
						QTY	QTY UNIT		UNIT RETAIL	TOTAL RETAIL
UID ITEM NAME					ORD REC'IDOST			TOTAL COST	VALUE	VALUE
[CT00219] Summit Boys Live Resin Caviar Sugar Tangie .5g					24	\$12.50	\$300.00			
[CT00150] The Oz Hybrid Crumble Cherry Vortex 1g				36			\$450.00			
[CT00170] The Oz Indica Crumble Purple Punch 1g						36	\$12.50	\$450.00		
				PRODUC	T REJECTION					
	IF P	RODUCTS ARE REJECTED P	LEASE CIRCLE T	HE ITEMS BEIN	G REJECTED IN THE PRODUCT	SHIPP	ED DETAILS S	SECTION ABO	VE	
REASO	N FOR RECEC	TION								
					TIDT CONFIDMATION					
Lconfirm	n that the conte	nts of this shipment match in w			EIPT CONFIRMATION					
		of all items as inicated received	-							
	ducts circled ab				tributor for return to the shipper as	indicate	ed in this form	and all attache	d product	t detail
NAME OF PERSON RECEIVING AND/OR						PH	IONE			
REJECTIONG PRODUCT						NL	JMBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						DA	TE SIGNED			