SALES INVOICE / SHIPPING MANIFEST

INVOICE/	MANIFEST # SO7441		ACTUAL I	DATE AND TIME OF DEPARTURE	10/25	5/2019	∩3·44 PI	М				
INVOICE/MANIFEST # SO7441 ATTACHED PAGES No				ED DATE AND TIME OF ARRIVAL		5/2010	00.1111	*1				
	SHIPP	ER INFORMATION		RECEIVER INFORMATION								
		C11-0000224-LIC			C12-0000080-LIC							
TYPE OF LICENSE License				STATE LICENSE2 #				2-0000080-LIC				
BUSINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE		Retailer License							
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME		Greenlight Discount Pharmacy						
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		15507 Cobalt St							
950602126			CITY, STATE, ZIP CODE		Sylmar, CA 91342							
PHONE NUMBER (831) 600-7710			PHONE NUMBER		818.256.1964							
CONTACT NAME Miguel Felix				CONTACT NAME								
			DISTRIBLITO	R INFORMATION								
			DISTRIBUTO	RINFORMATION								
STATE LICENSE #		C11-0000224-LIC		DRIVER'S NAME		Angel Rodriguez						
BUSINESS NAME		Oz Distribution, Inc.		CA DRVR LIC #		B9147506						
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		VEHICLE LIC. PLATE #	54269L2							
CONTAC	Г NAME	Miguel Felix		ACTUAL DATE AND TIME OF ARRIVAL								
		RECEIVER		HIPPED DETAILS Y THE SHADED COLUMNS BELO	W							
									UNIT	TOTAL		
=						QTY I				RETAIL		
UID ITEM NAME					REC'I		TOTAL COST		VALUE			
[FL00538] Kanebes Indica Flower Wedding Cake 3.5g				32		\$12.00	\$384.00					
	Kanebes Shelf Support					1	-\$12.00	-\$12.00				
			PRODUC	T REJECTION								
	IF PRODUCTS	ARE REJECTED PLEASE CIRC	LE THE ITEMS BEIN	G REJECTED IN THE PRODUCT	SHIPE	PED DE	TAILS	SECTION ABO	VE			
DEASO	N FOR RECECTION											
REAGO	N FOR RECECTION											
			PRODUCT RECE	EIPT CONFIRMATION								
I confirm	that the contents of this	shipment match in weight and cou	nt as indicated above									
_	ducts circled abbove are r	s as inicated received above - and ejected for delivery and remain in		tributor for return to the shipper as	indica	ted in th	nis form	and all attache	d produc	t detail		
	OF PERSON RECEIVING	AND/OR				HONE UMBEF	2					
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						ATE SI						