SALES INVOICE / SHIPPING MANIFEST

	E/MANIFEST # SO66 HED PAGES No	93		ACTUAL DATE AND TIME OF DEPARTURE 09/04/2019 03:40 PM ESTIMATED DATE AND TIME OF ARRIVAL								
	SHIF	PPER INFORMATION		RECEIVER INFORMATION								
STATE LICENSE # C11-0000224-LIC			STATE	STATE LICENSE #			C10-0000380-LIC					
	F LICENSE	License		LICENSE #		C10-0000	30U	-LIC				
BUSINESS NAME Oz Distribution, Inc.			F LICENSE		Retailer L	cen	92					
BUSINESS ADDRESS 195 Harvey West Blvd			SS NAME	Mount Shasta Patient Collective								
		Santa Cruz, CA		SS ADDRESS		408 S Mt.			.100			
950602126				TATE, ZIP CODE		Mt. Shasta, CA 96067						
PHONE NUMBER (831) 600-7710			PHONE NUMBER (530) 926-633									
	CT NAME	Miguel Felix		CT NAME		(000) 000						
			DISTRIBUTOR INFORM	MATION								
STATE LICENSE #		C11-0000224-LIC	DDIVE	R'S NAME		Bradley Martinez						
BUSINESS NAME		Oz Distribution, Inc.		/R LIC #		B9489158						
BUSINESS ADDRESS		195 Harvey West Blvd		E MAKE		Ford						
CITY, STATE, ZIP CODE		Santa Cruz, CA 950602126		E MODEL		Transit						
PHONE NUMBER		(831) 600-7710		E LIC. PLATE #		54269L2						
	CT NAME	Miguel Felix	ACTUA	ACTUAL DATE AND TIME OF ARRIVAL								
		RECEIVER	PRODUCT SHIPPED D R COMPLETES ONLY THE SHA		W							
					QTY	QTY UNIT			UNIT RETAIL	TOTAL RETAIL		
UID	ITEM NAME				ORD	REC'DOS	Т	TOTAL COST	VALUE	VALUE		
	Summit Boys Live Re	esin Caviar Crumble Sundae Driver 1g)		4	\$25	5.00	\$100.00				
Summit Boys Caviar Sugar Cali Girl 1g					4	\$25	5.00	\$100.00				
			PRODUCT REJECT									
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS								SECTION ABO	VE			
REAS	ON FOR RECECTION											
			PRODUCT RECEIPT CONF	FIRMATION								
I agree	e to take custody of all it oducts circled abbove a	his shipment match in weight and cou ems as inicated received above - and re rejected for delivery and remain in	which are not circled.	return to the shipper as	indicat	ted in this fo	orm	and all attache	d produc	t detail		
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT						HONE UMBER						
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					D	ATE SIGNE	D					