## SALES INVOICE / SHIPPING MANIFEST

	SF	TES INVI	OICE / S		ILES	1					
INVOICE/MANIFEST # SO7809 ACT			ACTUAL D	TUAL DATE AND TIME OF DEPARTURE 11/16/2019 11:53 AM TIMATED DATE AND TIME OF ARRIVAL							
ATTACHED PAGES No EST			ESTIMATE								
SHIPPER INFORMATION				RECEIVER INFORMATION							
STATE LICENSE #	C11-0000224-L	IC		STATE LICENSE #							
TYPE OF LICENSE	License			STATE LICENSE2#							
BUSINESS NAME	Inc.		TYPE OF LICENSE Retailer License								
BUSINESS ADDRESS	st Blvd		BUSINESS NAME		Lit Co						
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126				BUSINESS ADDRESS		1323 South Flower Street					
				CITY, STATE, ZIP CODE		Los Angeles, CA 90015					
PHONE NUMBER (831) 600-7710				PHONE NUMBER		+1 213-536-5400					
CONTACT NAME	Miguel Felix		CONTA								
			DISTRIBUTO	R INFORMATION							
STATE LICENSE # C11-0000224-LIC		IC	DRIVER'S NAME			Angel Rodriguez					
				CA DRVR LIC #		Angel Rodriguez B9147506					
BUSINESS ADDRESS	Oz Distribution, 195 Harvey We					Ford					
CITY, STATE, ZIP CODE Santa Cruz, CA				VEHICLE MODEL	Transit						
PHONE NUMBER	(831) 600-7710			VEHICLE LIC. PLATE #		54269L2					
CONTACT NAME	Miguel Felix			ACTUAL DATE AND TIME OF	•						
				ARRIVAL							
			PRODUCT SI	HIPPED DETAILS							
		RECEIVER COM	MPLETES ONLY	THE SHADED COLUMNS BEL	OW						
									UNIT	TOTAL	
					QTY	QTY	UNIT		RETAIL	RETAIL	
UID ITEM NAME					ORD	REC	DOST	TOTAL COST	VALUE	VALUE	
[CT00234] Summit Boy	s Caviar Crumble Miss USA 1g		24	1	\$16.00	\$384.00					
[CT00129] Summit Boys Caviar Crumble Banjo 1g					24	1	\$16.00	\$384.00			
CT00127] Summit Boys Pacific Gas Live Resin Caviar Diamonds .5g					36	5	\$20.00	\$720.00			
			PRODUC'	Γ REJECTION							
IF	PRODUCTS ARE REJECTED I	PLEASE CIRCLE TH	HE ITEMS BEIN	G REJECTED IN THE PRODUC	T SHIPF	PED D	ETAILS S	SECTION ABO	VE		
REASON FOR RECE	ECTION										
		Dr		UDT CONFIDMATION							
I confirm that the con-	tents of this shipment match in w			IPT CONFIRMATION							
I agree to take custoo	ly of all items as inicated receive	d above - and which	are not circled.		s indicat	ted in	this form	and all attache	d produc	t detail	
NAME OF PERSON RECEIVING AND/OR				PHONE							
REJECTIONG PRODUCT				NUMBER							
SIGNATURE OF PER				DATE SIGNED							