SALES INVOICE / SHIPPING MANIFEST

| | | ST ILL | 20 11 1 7 0 | JICE / D | | 1717 11 (1) | LDI | | | | | | |
|--|---------------|---|--------------------------|--|--------------------------------|----------------------|--------------|------------------|-----------------|----------------|-----------------|--|--|
| INVOICE/MANIFEST # SO7004 ATTACHED PAGES No | | | | ACTUAL DATE AND TIME OF DEPARTURE 09/24/2019 02:54 PM ESTIMATED DATE AND TIME OF ARRIVAL | | | | | | | | | |
| | | | | | | | | | | | | | |
| | SHIF | PPER INFORMAT | ION | | | RECI | EIVER | INFOF | RMATIO | ٧ | | | |
| STATE LICENSE # C11-0000224-LIC | | | | | STATE LICENSE | | | | | | | | |
| YPE OF LICENSE | | License | | | STATE LICENSE2 # | | | | | | | | |
| BUSINESS NAME | | Oz Distribution, Inc. | Oz Distribution, Inc. | | TYPE OF LICENSE | | | Retailer License | | | | | |
| BUSINESS ADDRESS 195 Harvey West Blvd | | I | BUSINESS NAME | | | Rani John | | | | | | | |
| 9506 | | Santa Cruz, CA | | | BUSINESS ADDRESS | | 0 | | | | | | |
| | | 950602126 | | | CITY, STATE, ZIP CODE | | 0, C | 0, CA 0 | | | | | |
| | | (831) 600-7710 | (831) 600-7710 | | PHONE NUMBER | | 702 | 702-556-9672 | | | | | |
| ONTACT NAME Miguel Felix | | | CO | | CONTACT NAME | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | DISTRIBUTOR | RINFORMATION | | | | | | | | |
| TATE LICENSE # | | C11-0000224-LIC | C11-0000224-LIC | | DRIVER'S NAME | | | Angel Rodriguez | | | | | |
| USINESS 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 | | | | |
| HONE NUMBER | | (831) 600-7710 | | | | VEHICLE LIC. PLATE # | | | 54269L2 | | | | |
| ONTACT NAME | | Miguel Felix | Miguel Felix | | ACTUAL DATE AND TIME OF | | | | | | | | |
| | | | | | ARRIVAL | | | | | | | | |
| | | RE | CEIVER COM | | IPPED DETAILS THE SHADED CO | LUMNS BELO |)W | | | | | | |
| | | | | | | | QTY QTY | UNIT | | UNIT RETAIL | TOTAL RETAIL | | |
| ID ITEM NA | ME | | | | | | ORD REC | COST | TOTAL COST | VALUE | VALUE | | |
| S -Summit Boys Caviar Crumble Double Scotts OG1g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S - Summit Boys Cured Caviar Sugar Chem 4 1g | | | | | | | 1 | \$0.01 | \$0.01 | | | | |
| S -Summit Boys Caviar Sugar Cali Girl 1g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S -Summit Boys Pacific Gas Live Resin Caviar Diamonds .5g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S -Summit Boys Caviar Crumble Peanut Butter Breath 1g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S - Royal Tree Indoor Flower Indica Grape Pie Cookies 3.5g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S -Royal Tree Indoor Flower Hybrid Banjo 3.5g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S -Royal Tree Indoor Flower Indica GG1 3.5g | | | | | | | | \$0.01 | \$0.01 | | | | |
| S -Royal Tree Indoor Flower Indica Banana Punch 3.5g | | | | | | | 1 | \$0.01 | \$0.01 | | | | |
| S -Sticky | lcky Indoor | Flower Hybrid Sonoma Cake | 3.5g | | | | 1 | \$0.01 | \$0.01 | | | | |
| | | | | | REJECTION | | | | | | | | |
| | IF PRODU | CTS ARE REJECTED PLEAS | SE CIRCLE THE | E ITEMS BEING | REJECTED IN TH | HE PRODUCT | SHIPPED | DETAILS S | SECTION ABO | VE | | | |
| REASON FOR R | ECECTION | | | | | | | | | | | | |
| | | | PR | ODUCT RECEI | PT CONFIRMATIO | DN | | | | | | | |
| I confirm that the | contents of t | his shipment match in weight | and count as in | dicated above. | | | | | | | | | |
| | • | tems as inicated received abour are rejected for delivery and re | | | ibutor for return to t | the shipper as | indicated in | this form | and all attache | d produc | t detail | | |
| NAME OF PERS | ON RECEIVI | ING AND/OR | | | | | PHONE | <u> </u> | | | | | |
| REJECTIONG PRODUCT | | | | | NUMBER | | | | | | | | |
| SIGNATURE OF PERSON RECEIVING AND/OR | | | | | DATE SIGNED | | | | | | | | |

REJECTING PRODUCT