SALES INVOICE / SHIPPING MANIFEST

		SA	LES INVO	ICE / S	MIPPING MAIN	II L) 1					
INVOICE/MANIFEST # SO6601				ACTUAL DATE AND TIME OF DEPARTURE 08/30/2019 08:13 AM								
ATTACH	ED PAGES No			ESTIMATED DATE AND TIME OF ARRIVAL								
	SHIF	PPER INFORM	ATION		RFO	CEIVE	FR I	NFOF	RMATION	J		
								141 01	(101) (11101	•		
	CENSE #	C11-0000224-LIC	,		STATE LICENSE #							
	LICENSE	License			STATE LICENSE2 #							
BUSINESS NAME Oz Distribution, Inc.				TYPE OF LICENSE			Retailer License					
		195 Harvey West	Blvd		BUSINESS NAME		Flor 2	X				
		Santa Cruz, CA	950602126		BUSINESS ADDRESS CITY, STATE, ZIP CODE		0 0, CA 0					
		(831) 600-7710			PHONE NUMBER		0					
CONTACT NAME Miguel Felix		CONTACT NAME		CONTACT NAME								
				NCTDIDLITO	R INFORMATION							
				JISTRIBUTUI	RINFORMATION							
STATE L	CENSE #	C11-0000224-LIC	;		DRIVER'S NAME			Francisco Maldorado				
BUSINESS NAME		Oz Distribution, Inc.			CA DRVR LIC #			F2095173				
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				
CONTACT NAME Miguel Felix					ACTUAL DATE AND TIME OF ARRIVAL							
					HIPPED DETAILS THE SHADED COLUMNS BEL	_OW						
										UNIT	TOTAL	
						QTY	QTY	UNIT		RETAIL	RETAIL	
UID	ITEM NAME					ORD	REC'	DOST	TOTAL COST	VALUE	VALUE	
ED0009] Cosmo D's Edible Chocolate Bar Hazy Hazelnut 100mg		ut 100mg			30	0	\$6.50	\$195.00				
ED00100] Cosmo D's Edible Chocolate Bar Cosmic Berry Crunch 100mg								\$6.50	\$195.00			
ED0011] Cosmo D's Edible Chocolate Bar Extra Toasted Coconut 100mg			•			30	0	\$6.50				
		ocolate Bar Vegan Cruml	-			30		\$6.50				
ED00167] Cosmo D's Edible Rice Crispy Treat Snickerdoodle 100mg						40	0	\$7.49	,			
	-	ar Crumble Banjo X OG 1	1g			,		\$0.01	\$0.01			
S-Dreamers Edible Chocolate Indica 100mg							1	\$0.01	\$0.01			
				PRODUCT	REJECTION							
	IF PRODUC	CTS ARE REJECTED PL	EASE CIRCLE THE I	ITEMS BEING	G REJECTED IN THE PRODUC	CT SHIPE	PED D	ETAILS S	SECTION ABO	VE		
DEVSC	N FOR RECECTION											
REASC	IN FOR RECECTION											
			PROI	DUCT RECE	IPT CONFIRMATION							
I confirm	n that the contents of th	nis shipment match in wei	ight and count as indi	icated above.								
	ducts circled abbove a	ems as inicated received re rejected for delivery an			ributor for return to the shipper a	as indica	ted in t	his form	and all attached	d produc	t detail	
, -												
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT							PHONE NUMBER					

DATE SIGNED

SIGNATURE OF PERSON RECEIVING AND/OR

REJECTING PRODUCT