SALES INVOICE / SHIPPING MANIFEST

INIVOIC	E/MANIFEST # SO6217	•		ACTUAL D	ATE AND TIME OF DE	DADTLIDE	09/1/1	/2010	02:40 DN	A			
INVOICE/MANIFEST # SO6217 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 08/14/2019 02:18 PM ESTIMATED DATE AND TIME OF ARRIVAL									
SHIPPER INFORMATION				RECEIVER INFORMATION									
STATE LICENSE # C11-0000224-LIC			>		STATE LICENSE #			A10-18-0000101-TEMP					
TYPE OF LICENSE		License			STATE LICENSE2#								
BUSINESS NAME		Oz Distribution, In	ution, Inc.		TYPE OF LICENSE			Retailer License					
BUSINESS ADDRESS 195 Harvey West Blvd		Blvd		BUSINESS NAME			Flavors						
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126			BUSINESS ADDRESS		S	2213 Patterson Rd							
		950602126			CITY, STATE, ZIP CODE		Riverbank, CA 95367						
		(831) 600-7710			PHONE NUMBER		(209) 554-0801						
CONTA	CT NAME	Miguel Felix			CONTACT NAME								
				DISTRIBUTOF	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	(831) 600-7710		VEHICLE LIC. PLATE #			54269L2					
CONTACT NAME		Miguel Felix			ACTUAL DATE AND TIME OF								
		, ,			ARRIVAL								
UID (CO0046	The Oz Hybrid Banana Cream Crumble 1g The Oz Indica OG Sherbet Crumble 1g The Oz - True OG - Indica Crumble - 1g The Oz Hybrid Gorilla Cake Crumble 1g The Oz Indica Wedding Cake Crumble 1g Dreamers Edible Chocolate Sativa 100mg Dreamers Edible Chocolate Hybrid 100mg						33 40 40 40 40 10	RECI	\$12.00 \$12.00 \$12.00 \$12.00 \$12.00 \$12.00 \$8.00 \$8.00	TOTAL COST \$396.00 \$480.00 \$480.00 \$480.00 \$480.00 \$80.00	VALUE	TOTAL RETAIL VALUE	
	Dreamers Edible Choco	plate Indica 100mg					10		\$8.00	\$80.00			
	IF PRODUCT	S ARE REJECTED PI	LEASE CIRCLE THE		REJECTION REJECTED IN THE P	RODUCT	SHIPP	ED DE	ETAILS S	SECTION ABO	VE		
REAS	ON FOR RECECTION												
			pp(ODLICT RECEI	PT CONFIRMATION								
Lconfi	irm that the contents of this	shipment match in we			1 1 JOIN INWATION								
	e to take custody of all item	•	•										
_	roducts circled abbove are				ributor for return to the s	shipper as i	ndicate	ed in tl	his form a	and all attache	d produc	t detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER								
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					DATE SIGNED								