INVOICE/MANIFEST # SO6229 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 08/20/2019 04:38 PM ESTIMATED DATE AND TIME OF ARRIVAL						
ATTACH	ED PAGES No		E	STIMATED DATE AND TIME OF ARRIVA	AL					
	SHIPF	PER INFORMATION	REC	RECEIVER INFORMATION						
STATE LICENSE #		C11-0000224-LIC		STATE LICENSE #	C1	C10-18-0000037-TEMP				
TYPE OF	LICENSE	License		STATE LICENSE2#						
BUSINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE	Re	tailer Licen	se				
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME	BUSINESS NAME NHS Collective					
CITY, STATE, ZIP CODE Santa Cruz, CA				BUSINESS ADDRESS	1901 Atlantic Ave.					
		950602126		CITY, STATE, ZIP CODE	Lo	Long Beach , CA 90806				
PHONE NUMBER		(831) 600-7710		PHONE NUMBER	(562) 528-8810					
CONTAC	T NAME	Miguel Felix		CONTACT NAME						
			DIST	RIBUTOR INFORMATION						
STATE LICENSE #		C11-0000224-LIC		DRIVER'S NAME	Bra	Brandon Sumandal				
BUSINESS NAME		Oz Distribution, Inc.		CA DRVR LIC #	D1	D1309712				
BUSINESS ADDRESS		195 Harvey West Blvd		VEHICLE MAKE	Ford					
CITY, STATE, ZIP CODE		Santa Cruz, CA 950602126		VEHICLE MODEL	Tra	Transit				
PHONE NUMBER		(831) 600-7710		VEHICLE LIC. PLATE #	542	269L2				
CONTACT NAME		Miguel Felix		ACTUAL DATE AND TIME OF	=					
				ARRIVAL						
JID	ITEM NAME Kanebes Hybrid Flower Kanebes Hybrid Flower Kanebes Hybrid Flower Kanebes Sativa Flower Kanebes Sativa Flower	1g. Request 1g. Request 1g. Request 1g. Request			25 25 25 25 25 25	\$3.50 \$3.50 \$3.50 \$3.50 \$3.50 \$3.50	\$87.50 \$87.50 \$87.50 \$87.50	VALUE	TOTAL RETAIL VALUE	
Kanebes Sativa Flower 1g. Request Kanebes Indica Flower 1g. Request		•			25	\$3.50				
	Kanebes Indica Flower	* .			25 25	\$3.50 \$3.50				
	Kanebes Indica Flower	• .			25	\$3.50				
Kanebes Hybrid Flower Alien Rock 1g SMALLS				32	\$3.50					
	Kanebes Sativa Flower	*			32	\$3.50				
		r Black Berry Kush 1g smalls			32	\$3.50				
				RODUCT REJECTION						
	IF PRODUCT	S ARE REJECTED PLEASE CIRCL	LE THE ITEN	MS BEING REJECTED IN THE PRODUC	T SHIPPED	DETAILS S	SECTION ABO	VE		
REASC	ON FOR RECECTION									
			PRODUC	CT RECEIPT CONFIRMATION						
		shipment match in weight and count								
_	oducts circled abbove are	ns as inicated received above - and verejected for delivery and remain in the		ot circled. of the distributor for return to the shipper a	s indicated i	n this form	and all attache	d product	detail	
NAME	OF PERSON RECEIVING	S AND/OR			PHON	IF.				

NUMBER

DATE SIGNED

REJECTIONG PRODUCT

REJECTING PRODUCT

SIGNATURE OF PERSON RECEIVING AND/OR