SALES INVOICE / SHIPPING MANIFEST

INIVOICE/MANUEEST # SOCA	£7	ACTUAL DATE AND TIME OF	DEDARTURE 08/3	7/2010 11:41 A	M			
INVOICE/MANIFEST # SO6457 ATTACHED PAGES No		ESTIMATED DATE AND TIME OF		.7/2019 11.41 A	IVI			
			0.7					
SHIF	PPER INFORMATION		RECEIVER INFORMATION					
STATE LICENSE #	C11-0000224-LIC	STATE LICENSE	#	A12-18-0000071-TEMP				
TYPE OF LICENSE	License	STATE LICENSE	2 #					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENS	iΕ	Retailer License				
BUSINESS ADDRESS	RESS 195 Harvey West Blvd BUSINESS NAME		:	Greenlight Discount Pharmacy				
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS		15507 Cobalt St				
	950602126 CITY, STATE, ZIP CODE		, CODE	Sylmar, CA 91342				
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	t .	818.256.1964				
CONTACT NAME Miguel Felix		CONTACT NAME						
		DISTRIBUTOR INFORMATION						
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	VEHICLE LIC. PL	ATE #	54269L2				
CONTACT NAME Miguel Felix		ACTUAL DATE A	ND TIME OF					
		PRODUCT SHIPPED DETAILS						
	RECEIVE	R COMPLETES ONLY THE SHADED COL	LUMNS BELOW					
JID ITEM NAME				Y QTY UNIT	TOTAL COST		TOTAL RETAIL	
[CO00164] Heavenly Sweet Edible Cannabutter 1000mg THC 4oz				4 \$22.00			VALOE	
[ED0081] Heavenly Sweet Edible Munchies Ranch Crackers 100mg THC				10 \$8.50				
IE DPODIT	CTS ARE DE IECTED DI EASE CIR	PRODUCT REJECTION CLE THE ITEMS BEING REJECTED IN TH		DED DETAILS	SECTION ARO	\/E		
11 11000	OTOTIKE RESECTED FEEROL ONG	SEE THE HEMO BEING RESECTED IN TH	LT NODOOT OF III	T ED DE TAILO	OLO HOIV ADO	V L		
REASON FOR RECECTION								
		PRODUCT RECEIPT CONFIRMATIO	N					
I confirm that the contents of t	his shipment match in weight and co							
I agree to take custody of all it	ems as inicated received above - and		he shipper as indica	ated in this form	and all attache	d product	t detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT				PHONE NUMBER				
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT				DATE SIGNED				