SALES INVOICE / SHIPPING MANIFEST

		571	ELD II (O	CL / L		LO.	1				
INVOICE/MANIFEST # SO7516				ACTUAL DATE AND TIME OF DEPARTURE 10/29/2019 05:41 PM							
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION					RECEIVER INFORMATION						
STATE LI	CENSE #	C11-0000224-LI0	0		STATE LICENSE #	(C10-0000402-	-LIC			
TYPE OF	LICENSE	License			STATE LICENSE2#						
BUSINESS NAME Oz Distributio		Oz Distribution, I	Inc.		TYPE OF LICENSE	F	Retailer License				
BUSINESS ADDRESS 195 Harvey West Blvd			t Blvd	d BUSINESS NAME		Super Clinik Yale					
CITY, STATE, ZIP CODE Santa Cruz, CA					BUSINESS ADDRESS	BUSINESS ADDRESS 2110 Yale ST S					
950		950602126			CITY, STATE, ZIP CODE	5	Santa Ana, CA 92704				
		(831) 600-7710	0		PHONE NUMBER	((714) 717-9896				
CONTACT NAME Miguel Felix		Miguel Felix			CONTACT NAME						
			D	ISTRIBUTO	R INFORMATION						
STATE LICENSE #		C11-0000224-LIC			DRIVER'S NAME		Brandon Sumandal				
BUSINESS NAME		Oz Distribution, Inc.			CA DRVR LIC #		D1309712				
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				
CONTAC	T NAME	Miguel Felix			ACTUAL DATE AND TIME OF ARRIVAL						
					HIPPED DETAILS 7 THE SHADED COLUMNS BELOV	W					
						OTY C	QTY UNIT		UNIT RETAIL	TOTAL RETAIL	
UID	ITEM NAME							TOTAL COST			
[FL00546]	L00546] Kanebes Hybrid Flower Mimosa Smalls 1g					25	\$3.50	\$87.50			
[FL00535] Kanebes Indica Flower Skywalker Smalls 3.5g					0	\$9.00	\$0.00				
[FL00492] Kanebes Hybrid Flower 76 kush 3.5g SMALLS				0 \$12		\$12.00	\$0.00				
[FL00538] Kanebes Indica Flower Wedding Cake 3.5g						64	\$12.00	\$768.00			
[FL00584] Kanebes Indica Flower Strawberry Cheesecake 3.5g			ke 3.5g				\$12.00	\$768.00			
[FL00583]	FL00583] Kanebes Indica Flower Blackberry Fire 3.5g					64	\$12.00	\$768.00			
				PRODUC	T REJECTION						
	IF PRODUCTS	S ARE REJECTED P	LEASE CIRCLE THE I	TEMS BEIN	G REJECTED IN THE PRODUCT	SHIPPE	D DETAILS S	SECTION ABO	VΕ		
REASO	N FOR RECECTION										
					IPT CONFIRMATION						
I agree	n that the contents of this to take custody of all items ducts circled abbove are r	s as inicated received	d above - and which are	e not circled.		indicate	d in this form	and all attache	d produc	t detail	
sheet(s)											
NAME OF PERSON RECEIVING AND/OR						PHONE					
REJECTIONG PRODUCT							MBER				
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						DAT	TE SIGNED				