SALES INVOICE / SHIPPING MANIFEST

| INVOICE/MANIFEST # SO7 | 711 | ACTUAL DATE AND TIME OF DEPARTU | IIDE 11/13 | /2010 03:31 D | M | | | |
|--|---|--|-----------------------|------------------|-----------------|-----------|--------------------------|--|
| INVOICE/MANIFEST # SO7714 ATTACHED PAGES No | | ESTIMATED DATE AND TIME OF ARRIV | | /2019 03.31 F | IVI | | | |
| | | | | | | | | |
| SHI | PPER INFORMATION | RE | RECEIVER INFORMATION | | | | | |
| STATE LICENSE # C11-0000224-LIC | | STATE LICENSE # | STATE LICENSE # C10-0 | | G-LIC | | | |
| TYPE OF LICENSE | License | STATE LICENSE2# | | | | | | |
| BUSINESS NAME | Oz Distribution, Inc. | TYPE OF LICENSE | | Retailer License | | | | |
| BUSINESS ADDRESS | 195 Harvey West Blvd | BUSINESS NAME | | La Florista | | | | |
| CITY, STATE, ZIP CODE | Santa Cruz, CA | BUSINESS ADDRESS | | 242 Main Street | | | | |
| | 950602126 | CITY, STATE, ZIP CODE | | Weed, CA 96094 | | | | |
| PHONE NUMBER | (831) 600-7710 | PHONE NUMBER | | (530) 408-0420 | | | | |
| CONTACT NAME | Miguel Felix | CONTACT NAME | | | | | | |
| | | DISTRIBUTOR INFORMATION | | | | | | |
| STATE LICENSE # | C11-0000224-LIC | DRIVER'S NAME | | Bradley Martinez | | | | |
| BUSINESS NAME | Oz Distribution, Inc. | CA DRVR LIC # | | | B9489158 | | | |
| 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 O | OF | | | | | |
| | | PRODUCT SHIPPED DETAILS | | | | | | |
| | RECEIVE | R COMPLETES ONLY THE SHADED COLUMNS BE | ELOW | | | | | |
| UID ITEM NAME | | | | QTY UNIT | TOTAL COST | | TOTAL RETAIL VALUE | |
| [FL00308] Royal Tree Hybrid F | lower 1:1 CBD/THC Ratio Harlequin x | Grand Daddy Purple 3.5g | 32 | \$22.00 | \$704.00 |) | | |
| [FL00582] Royal Tree Indoor F | lower Sunshine OG Sativa 3.5g | | 32 | \$22.00 | \$704.00 |) | | |
| | | PRODUCT REJECTION | | | | | | |
| IF PRODU | JCTS ARE REJECTED PLEASE CIRC | CLE THE ITEMS BEING REJECTED IN THE PRODU | JCT SHIPP | ED DETAILS | SECTION ABO | VE | | |
| REASON FOR RECECTION | | | | | | | | |
| | | | | | | | | |
| | | PRODUCT RECEIPT CONFIRMATION | | | | | | |
| | this shipment match in weight and cou items as inicated received above - and | | | | | | | |
| , | | the custody of the distributor for return to the shipper | r as indicate | ed in this form | and all attache | ed produc | t detail | |
| NAME OF PERSON RECEIV | ING AND/OR | | | IONE JMBER | | | | |
| SIGNATURE OF PERSON R REJECTING PRODUCT | ECEIVING AND/OR | | DA | ATE SIGNED | | | | |