SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7443 ATTACHED PAGES No			ACTUAL DATE AND TIME OF DEPARTURE 10/30/2019 02:53 PM ESTIMATED DATE AND TIME OF ARRIVAL						
ATTACHED PAGES NO			ESTIMATED DATE AND TIME OF ARRIVA	\L					
SH	IIPPER INFORMAT	RECEIVER INFORMATION							
STATE LICENSE # C11-0000224-LIC			STATE LICENSE #		C10-0000485-LIC				
TYPE OF LICENSE	License		STATE LICENSE2 #		010 0000400	LIO			
BUSINESS NAME	Oz Distribution, Inc.		TYPE OF LICENSE		Retailer Licen	se			
BUSINESS ADDRESS 195 Harvey West Blvd			BUSINESS NAME		Redwood Herbal Alliance				
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		5270 AERO E)R			
950602126			CITY, STATE, ZIP CODE	DDE Santa Rosa, CA 95403					
PHONE NUMBER (831) 600-7710			PHONE NUMBER		707-528-3632				
CONTACT NAME	Miguel Felix		CONTACT NAME						
			DISTRIBUTOR INFORMATION						
STATE LICENSE #	C11-0000224-LIC		DRIVER'S NAME		Podol Jardolo	70			
ISINESS NAME Oz Distribution, Inc.			CA DRVR LIC #		Rodel Jardeleza B82636677				
BUSINESS NAME			VEHICLE MAKE		Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126			VEHICLE MODEL		Transit				
PHONE NUMBER (831) 600-7710		502 120	VEHICLE LIC. PLATE #		54269L2				
CONTACT NAME	Miguel Felix		ACTUAL DATE AND TIME OF	:					
	, ,		ARRIVAL						
	R		PRODUCT SHIPPED DETAILS PLETES ONLY THE SHADED COLUMNS BEL	OW					
							UNIT	TOTAL	
				QTY	QTY UNIT		RETAIL	RETAIL	
UID ITEM NAME					REC'IDOST	TOTAL COST	VALUE	VALUE	
[ED00017] Dollar Dose - lozenge - Sativa Hibiscus - 5mg					\$0.50				
[ED00018] Dollar Dose - lozenge - Sativa Watermelon - 5mg					\$0.50				
[ED00118] Dollar Dose - lozenge - Indica Apple - 5mg					\$0.50				
[ED00120] Dollar Dose - lozenge - Indica Rootbeer - 5mg					\$0.50				
[ED00142] Dreamers Edible 2-PK Capsules Indica 50mg					2 \$6.50 2 \$8.50				
[ED00154] Dreamers Edible Chocolate Apricot Indica 100mg [ED00150] Dreamers Edible Chocolate Indica 100mg					2 \$8.50 2 \$8.50				
			PRODUCT REJECTION						
IF PROI	DUCTS ARE REJECTED PLEA	SE CIRCLE THE	TITEMS BEING REJECTED IN THE PRODUC	T SHIPP	PED DETAILS	SECTION ABO	VE		
REASON FOR RECECTIO	N								
			201107 0505107 00115111511						
Loonfirm that the sector to	of this chiamont match in		ODUCT RECEIPT CONFIRMATION						
	of this shipment match in weight Il items as inicated received abo								
-			tody of the distributor for return to the shipper a	s indicat	ted in this form	and all attache	d produc	t detail	
NAME OF PERSON RECE	IVING AND/OR			PH	HONE				
REJECTIONG PRODUCT					UMBER				
SIGNATURE OF PERSON	RECEIVING AND/OR			D/	ATE SIGNED				

REJECTING PRODUCT