SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7593 ATTACHED PAGES No			ACTUAL DATE AND TIME OF DEPARTURE 11/12/2019 03:33 PM ESTIMATED DATE AND TIME OF ARRIVAL								
SHIPPER INFORMATION				RECEIVER INFORMATION							
ATE LICENSE # C11-0000224-LIC		;		STATE LICENSE #		C10-0000095-LIC					
TYPE OF LICENSE	License			STATE LICENSE2#							
USINESS NAME Oz Distribution, Inc.				TYPE OF LICENSE Retailer License							
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME		The Vau	t				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710				BUSINESS ADDRESS	35871 Date Palm Dr Cathedral City,, CA 92234						
				CITY, STATE, ZIP CODE							
			PHONE NUMBER		+1 760-866-9660						
CONTACT NAME Miguel Felix				CONTACT NAME							
			DISTRIBUTOR	NFORMATION							
STATE LICENSE #	TE LICENSE # C11-0000224-LIC			DRIVER'S NAME			Rodel Jardeleza				
BUSINESS NAME	JSINESS NAME Oz Distribution, Inc.			CA DRVR LIC #			B82636677				
SUSINESS ADDRESS 195 Harvey West Blvd		Blvd		VEHICLE MAKE			Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 95060212		50602126		VEHICLE MODEL			Transit				
HONE NUMBER (831) 600-7710				VEHICLE LIC. PLATE #							
CONTACT NAME Miguel Felix				ACTUAL DATE AND TIME OF ARRIVAL							
		RECEIVER COM	PRODUCT SHIF	PPED DETAILS HE SHADED COLUMNS BEL	OW						
					OTY	QTY UNI	т		UNIT	TOTAL RETAIL	
IID ITEM NAME						REC'IDO		TOTAL COST			
FL00328] Royal Tree Indoor Flower Indica Medcare Kush 3.5g					0		23.00				
CT00127] Summit Boys Pacific Gas Live Resin Caviar Diamonds .5g					12		20.00				
FL00609] Kanebes Indica Flower Mendo Breath 3.5g. SMALLS					32	2	9.00	\$288.00			
FL00607] Kanebes Indica Flower Hollyweed 3.5g. SMALLS					32	2 9	9.00	\$288.00			
Royal Tree Shelf Support					1	-\$2	21.00	-\$21.00			
Summit Boys Shelf Support					1	-\$2	20.00	-\$20.00			
Kanebes Shelf Support					2	2 - 4	9.00	-\$18.00			
			PRODUCT F	REJECTION							
IF PRO	DUCTS ARE REJECTED PL	EASE CIRCLE TH	IE ITEMS BEING	REJECTED IN THE PRODUC	T SHIPP	PED DETA	ILS S	SECTION ABO	VE		
REASON FOR RECECTION	ON										
COM SINIEGEOTI											
				T CONFIRMATION							
I agree to take custody of	of this shipment match in we all items as inicated received we are rejected for delivery ar	above - and which	are not circled.	utor for return to the shipper a	s indicat	ed in this	form	and all attache	d produc	t detail	
	EN (INC. AND (C.)					10115					
NAME OF PERSON RECEIVING AND/OR						HONE JMBER					
REJECTIONG PRODUCT SIGNATURE OF PERSON RECEIVING AND/OR						INIDER					

REJECTING PRODUCT