SALES INVOICE / SHIPPING MANIFEST

INIVOICE/M	ANIFEST # SO6371		ACTUAL DATE AND TIME OF DEPARTUR	RE 08/21/2010 01:00 PM	<u> </u>		
INVOICE/MANIFEST # SO6371 ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL			
	SHIPPE	R INFORMATION	REC	RECEIVER INFORMATION			
STATE LICE	TATE LICENSE # C11-0000224-LIC		STATE LICENSE #	C9-0000184-LIC			
TYPE OF LI	CENSE	License	STATE LICENSE2#				
BUSINESS NAME Oz Distribution, Inc.		TYPE OF LICENSE	Retailer Licens	e			
BUSINESS ADDRESS 195 Harvey West Blvd		BUSINESS NAME	Humble OZ LL	Humble OZ LLC			
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710		Santa Cruz, CA	BUSINESS ADDRESS	920 52nd Ave	920 52nd Ave		
		950602126	CITY, STATE, ZIP CODE	OAKLAND, CA	94601		
		PHONE NUMBER	+1 510-421-61	+1 510-421-6135			
CONTACT NAME Miguel Felix			CONTACT NAME	CONTACT NAME			
			DISTRIBUTOR INFORMATION				
OTATE LICE	NOT #	C44 0000224 LIC	DDIVED'S NAME	Angel Dedrigue	~~		
STATE LICENSE # BUSINESS NAME		C11-0000224-LIC	DRIVER'S NAME CA DRVR LIC #	Angel Rodrigue	B9147506		
BUSINESS NAME BUSINESS ADDRESS		Oz Distribution, Inc. 195 Harvey West Blvd	VEHICLE MAKE		Ford		
-		Santa Cruz, CA 950602126	VEHICLE MARE VEHICLE MODEL		Transit		
		(831) 600-7710	VEHICLE LIC. PLATE #	54269L2			
		Miguel Felix	ACTUAL DATE AND TIME OF		U-12001L2		
CONTACT	VAIVIL	wilguer i enx	ARRIVAL				
			PRODUCT SHIPPED DETAILS				
		RECEIVER	COMPLETES ONLY THE SHADED COLUMNS BEL	LOW			
					UNIT	TOTAL	
				QTY QTY UNIT	RETAIL		
UID ITEM NAME			ORD REC'IDOST	TOTAL COST VALUE	VALUE		
Kanebes Hybrid Flower Strawberry Banana SMALLS 14g				16 \$35.00	\$560.00		
			PRODUCT REJECTION				
	IF PRODUCTS /	ARE REJECTED PLEASE CIRC	LE THE ITEMS BEING REJECTED IN THE PRODUC	CT SHIPPED DETAILS S	ECTION ABOVE		
REASON	FOR RECECTION						
			PRODUCT RECEIPT CONFIRMATION				
L confirm t	hat the contents of this sh	ipment match in weight and cour					
		as inicated received above - and					
_			he custody of the distributor for return to the shipper a	as indicated in this form a	and all attached product	detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT				PHONE NUMBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT				DATE SIGNED			