## SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7326			ACTUAL DATE AND TIME OF DEPARTURE 10/16/2019 10:47 AM							
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL								
SHIPPER INFORMATION			RECEIVER INFORMATION							
STATE LICENSE #	C11-0000224-LIC			STATE LICENSE #		C10-0000338	B-LIC			
TYPE OF LICENSE	License			STATE LICENSE2 #						
BUSINESS NAME	Oz Distribution, Inc.			TYPE OF LICENSE		Retailer Licer	nse			
BUSINESS ADDRESS	195 Harvey West Blvd			BUSINESS NAME		Calma Weho LLC Calma Weho LLC 1155 N. La Brea Ave				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710				BUSINESS ADDRESS						
				CITY, STATE, ZIP CODE		West Hollywood, CA 90038				
			PHONE NUMBER		0					
CONTACT NAME Miguel Felix			CONTACT NAME							
		DIS	STRIBUTOR	INFORMATION						
STATE LICENSE #	C11-0000224-LIC			DRIVER'S NAME		Brendan Mad	:Mahon			
BUSINESS NAME Oz Distribution, Inc.				CA DRVR LIC #		D3508719				
BUSINESS ADDRESS 195 Harvey West Blvd				VEHICLE MAKE		Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126			VEHICLE MODEL			Transit				
HONE NUMBER (831) 600-7710				VEHICLE LIC. PLATE #	54269L2					
CONTACT NAME Miguel Felix			ACTUAL DATE AND TIME OF ARRIVAL							
	RECEIVE	R COMPLET	TES ONLY	THE SHADED COLUMNS BEI	_OW					
					OTV	OTV LINIT		UNIT	TOTAL	
IID ITEM NAME						QTY UNIT	TOTAL COST		RETAIL	
UID ITEM NAME					OKD (				VALUE	
[CT00016] S -Summit Boys Caviar Sugar Cali Girl 1g [CT00069] S - Summit Boys Cured Caviar Sugar Chem 4 1g										
[CT00009] S - Summit Boys Cured Cavial Sugar Chem 4 1g										
[CT00009] S - Summit Boys Cavial Crumble Bouble Scotts OG1g						\$0.01				
[CT00209] S -Summit Boys Caviar Crumble Forbidden Fruit 1G					1	\$0.01				
		ı	PRODUCT	REJECTION						
IF PRODU	CTS ARE REJECTED PLEASE CIRC	CLE THE ITE	EMS BEING	REJECTED IN THE PRODUC	CT SHIPE	PED DETAILS	SECTION ABO	VE		
REASON FOR RECECTION										
		DDODU	ICT DECE	DT CONFIDMATION						
Loonfirm that the contents of the	nis shipment match in weight and cou			PT CONFIRMATION						
	ems as inicated received above - and									
	re rejected for delivery and remain in			ibutor for return to the shipper :	as indicat	ed in this form	and all attache	d produc	t detail	
sheet(s).	josta is. doirrory and remain in	oddiody	. 2. 110 GISH				dii didone	produc		
NAME OF PERSON RECEIVING AND/OR					PI	HONE				
REJECTIONG PRODUCT					N	JMBER				
SIGNATURE OF PERSON RE	ECEIVING AND/OR				D	ATE SIGNED				
DE JECTINO DEODUICT										

REJECTING PRODUCT