SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO5006					ACTUAL DATE AND TIME OF DEPARTURE 05/15/2019 01:38 PM						
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL							
	SHIPPER INFORMATION ICENSE # A11-18-0000248-TEMP F LICENSE Adult-Use Distribution Temporary Licence SS NAME Oz Distribution, Inc. SS ADDRESS 195 Harvey West Blvd SATE, ZIP CODE Santa Cruz, CA 950602126				RECEIVER INFORMATION						
					STATE LICENSE # A10-18-000						
				orary Licence	STATE LICENSE2#	7110	10 0000	ST7 TEIVII			
			·	o.a., <u>2.00.100</u>	TYPE OF LICENSE	Reta	ailer Licer	ise			
					BUSINESS NAME		Horizon 1841				
-			•		BUSINESS ADDRESS		0				
					CITY, STATE, ZIP CODE		0, CA 0				
			(831) 600-7710		PHONE NUMBER	0					
CONTAC	T NAME		Miguel Felix		CONTACT NAME						
				DISTRIBUT	OR INFORMATION						
STATE LI	CENSE #	,	A11-18-0000248-TEMP		DRIVER'S NAME	Ang	el Rodrig	ez			
BUSINES			Oz Distribution, Inc.		CA DRVR LIC #		B9147506				
BUSINESS ADDRESS			195 Harvey West Blvd		VEHICLE MAKE		Ford				
CITY. STA	ATE, ZIP CODE		Santa Cruz, CA 950602126		VEHICLE MODEL	Trar					
PHONE NUMBER			(831) 600-7710		VEHICLE LIC. PLATE #	54269L2					
CONTACT NAME			Miguel Felix		ACTUAL DATE AND TIME OF						
					ARRIVAL						
					SHIPPED DETAILS						
			RECEIVE	ER COMPLETES ON	LY THE SHADED COLUMNS BELO	W					
									UNIT	TOTAL	
						QTY QTY	UNIT		RETAIL	RETAIL	
UID	ITEM NAME					ORD REC	DOST	TOTAL COST	VALUE	VALUE	
	The Oz Sativa I	Kief 1g				50	\$8.00	\$400.00			
	JE 00	0011070 40	- DE JEOTED DI EAGE OID			01110000		05071011.450			
	IF PR	RODUCISAR	E REJECTED PLEASE CIR	CLE THE ITEMS BEI	NG REJECTED IN THE PRODUCT	SHIPPED L	DETAILS	SECTION ABO	VE		
REASO	N FOR RECECT	ΓΙΟΝ									
		PRODUCT REJECTION IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SECTION ABOVE OR RECECTION PRODUCT RECEIPT CONFIRMATION									
			ment match in weight and co								
_	•		inicated received above - and ted for delivery and remain in		d. istributor for return to the shipper as i	indicated in	this form	and all attache	d produc	t detail	
sheet(s)											
NAME (OF PERSON RE	CEIVING AND	D/OR			PHONE					
	TIONG PRODUC					NUMBE	R				
SIGNAT	URE OF PERSO	ON RECEIVIN	IG AND/OR			DATE S	SIGNED				
REJECTING PRODUCT											