SALES INVOICE / SHIPPING MANIFEST

INIVOICE	MANIFEST # SO679	12	ACTUAL	DATE AND TIME OF DEDARTHE	00/10	/2010 03:45 D	M		
INVOICE/MANIFEST # SO6792 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 09/10/2019 03:45 PM ESTIMATED DATE AND TIME OF ARRIVAL					
	SHIP	PER INFORMATION		RECEIVER INFORMATION					
STATE LICENSE # C11-000		C11-0000224-LIC	IC STATE LICENSE #			C10-0000081	I-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		Delta 9 THC LLC				
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		824 E Anaheim St.				
950602126			CITY, STATE, ZIP CODE		Wilmington, CA 90744				
PHONE NUMBER (831) 600-7710			PHONE NUMBER		(310) 408-9621				
CONTACT NAME Miguel Felix				CONTACT NAME					
			DISTRIBUT	TOR INFORMATION					
STATE LICENSE # C11-0000224-LIC				DRIVER'S NAME Brandon Su			mandal		
BUSINESS NAME		Oz Distribution, Inc.		CA DRVR LIC #		D1309712			
BUSINESS ADDRESS		195 Harvey West Blvd		VEHICLE MAKE		Ford			
CITY, STATE, ZIP CODE		Santa Cruz, CA 950602126		VEHICLE MODEL		Transit			
PHONE NUMBER		(831) 600-7710		VEHICLE LIC. PLATE #		54269L2			
CONTACT NAME Miguel Felix				ACTUAL DATE AND TIME OF ARRIVAL					
			PRODUCT	SHIPPED DETAILS					
		RECEIVE	R COMPLETES ON	ILY THE SHADED COLUMNS BELO	W				
								UNIT	TOTAL
					QTY	QTY UNIT		RETAIL	RETAIL
UID ITEM NAME				ORD	REC'IDOST	TOTAL COST	VALUE	VALUE	
Summit Boys Crumble Mango Brulee 1g				15	\$12.00	\$180.00)		
	S -Summit Boys Crum	ble Mango Brulee 1g			1	\$0.01	\$0.01		
			PRODU	ICT REJECTION					
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS S								VE	
REASC	ON FOR RECECTION								
			DDODUOT DE	OFIDT CONFIDMATION					
Loonfire	m that the contents of th	is shipment metals in weight and so		CEIPT CONFIRMATION					
		is shipment match in weight and cou ms as inicated received above - and							
	oducts circled abbove ar			distributor for return to the shipper as	indicat	ed in this form	and all attache	ed produc	t detail
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT						HONE JMBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						ATE SIGNED			