## SALES INVOICE / SHIPPING MANIFEST

| INVOICE/MANIFEST # SO72                                  | 84   | ACTUAL DATE AND TIME OF DEPARTURE                           | 10/17/2019 05:3                         | 0 PM              |            |                 |  |
|--|--|---|---|-------------------|------------|-----------------|--|
| ATTACHED PAGES No  |  | ESTIMATED DATE AND TIME OF ARRIVAL                          |   | O I W             |            |                 |  |
|  |  |   |   |                   |            |                 |  |
| SHIF   | PPER INFORMATION                               | RECE  | RECEIVER INFORMATION                    |                   |            |                 |  |
| STATE LICENSE #  | C11-0000224-LIC STATE LICENSE # C9-0000220-LIC |   |   |                   |            |                 |  |
| TYPE OF LICENSE  | License  | STATE LICENSE2#   |   |                   |            |                 |  |
| BUSINESS NAME  | Oz Distribution, Inc.                          | TYPE OF LICENSE   | Retailer L                              | Retailer License  |            |                 |  |
| BUSINESS ADDRESS   | 195 Harvey West Blvd                           |   |   |                   |            |                 |  |
| CITY, STATE, ZIP CODE Santa Cruz, CA 950602126           |  | BUSINESS ADDRESS  | 6690 Bancroft Ave<br>Oakland, CA 946065 |                   |            |                 |  |
|  |  | CITY, STATE, ZIP CODE                                       |   |                   |            |                 |  |
| HONE NUMBER (831) 600-7710 PHONE NUMBER                  |  |   | 925-219-6733                            |                   |            |                 |  |
| CONTACT NAME   | Miguel Felix                                   | CONTACT NAME  |   |                   |            |                 |  |
|  |  |   |   |                   |            |                 |  |
|  |  | DISTRIBUTOR INFORMATION                                     |   |                   |            |                 |  |
| OTATE   105NOF #   | 044 000004 110                                 | DDIVEDIO MANE   | 5                                       |                   |            |                 |  |
| STATE LICENSE # C11-0000224-LIC                          |  | DRIVER'S NAME   |   | Rodel Jardeleza   |            |                 |  |
| BUSINESS NAME Oz Distribution, Inc.                      |  | CA DRVR LIC #   |   | B82636677         |            |                 |  |
| 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                                 | 54269L2           |            |                 |  |
| CONTACT NAME   | Miguel Felix                                   | ACTUAL DATE AND TIME OF ARRIVAL                             |   |                   |            |                 |  |
|  |  |   |   |                   |            |                 |  |
|  |  |   |   |                   |            |                 |  |
|  | DEOEN/E  | PRODUCT SHIPPED DETAILS                                     |   |                   |            |                 |  |
|  | RECEIVE  | R COMPLETES ONLY THE SHADED COLUMNS BELO                    | VV                                      |                   |            |                 |  |
|  |  |   |   |                   | UNIT       | TOTAL           |  |
|  |  |   | QTY QTY UNIT                            | -                 |            | TOTAL<br>RETAIL |  |
| UID ITEM NAME  |  |   | ORD REC'IDOS                            |                   |            |                 |  |
| [FL00538] Kanebes Indica Flower Wedding Cake 3.5g        |  |   |   | 2.00 \$768        |            | VALUE           |  |
| [FL00221] Kanebes Indica Flower Chocolate Hashberry 3.5g |  |   |   | 2.00 \$768        |            |                 |  |
| . 200221]  | o. ccomate : laczoy c.log                      |   | ψ                                       | φ, σσ             |            |                 |  |
|  |  | PRODUCT REJECTION   |   |                   |            |                 |  |
| IF PRODU   | CTS ARE REJECTED PLEASE CIRC                   | LE THE ITEMS BEING REJECTED IN THE PRODUCT                  | SHIPPED DETAI                           | LS SECTION A      | BOVE       |                 |  |
| DE LOON FOR RECEDION                                     |  |   |   |                   |            |                 |  |
| REASON FOR RECECTION                                     |  |   |   |                   |            |                 |  |
|  |  | PRODUCT RECEIPT CONFIRMATION                                |   |                   |            |                 |  |
| I confirm that the contents of the                       | his shipment match in weight and cou           | nt as indicated above.                                      |   |                   |            |                 |  |
| I agree to take custody of all it                        | ems as inicated received above - and           | which are not circled.                                      |   |                   |            |                 |  |
| The products circled abbove a sheet(s).                  | re rejected for delivery and remain in         | the custody of the distributor for return to the shipper as | indicated in this fo                    | orm and all attac | hed produc | t detail        |  |
| NAME OF PERSON RECEIVI                                   | NG AND/OR                                      |   | PHONE                                   |                   |            |                 |  |
| REJECTIONG PRODUCT                                       |  |   | NUMBER                                  |                   |            |                 |  |
| SIGNATURE OF PERSON RE                                   | ECEIVING AND/OR                                |   | DATE SIGNE                              | D                 |            |                 |  |
| REJECTING PRODUCT  |  |   |   |                   |            |                 |  |