SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7	7558	ACTUAL DATE AND TIME OF DEPARTURE 10	0/31/2010 01·44 PM	
INVOICE/MANIFEST # SO7558 ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL		
SHIPPER INFORMATION		RECEI	VER INFORMATION	
STATE LICENSE #	C11-0000224-LIC	STATE LICENSE #	C10-0000307-LIC	
TYPE OF LICENSE	License	STATE LICENSE2#		
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer License	
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME	Foothill Health and Wellness	
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS	3830 Dividend Dr Suite A	
	950602126	CITY, STATE, ZIP CODE	Shingle Springs, CA 95382	
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	530-676-4532	
CONTACT NAME	Miguel Felix	CONTACT NAME		
		DISTRIBUTOR INFORMATION		
CTATE LICENICE #	C11-0000224-LIC	DDIVEDIO NAME	Angel Dedrigues	
STATE LICENSE # BUSINESS NAME		DRIVER'S NAME CA DRVR LIC #	Angel Rodriguez B9147506	
BUSINESS ADDRESS	Oz Distribution, Inc. 195 Harvey West Blvd	VEHICLE MAKE	Ford	
CITY, STATE, ZIP CODE	Santa Cruz, CA 950602126	VEHICLE MODEL	Transit	
PHONE NUMBER	(831) 600-7710	VEHICLE MODEL VEHICLE LIC. PLATE #	54269L2	
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF	34209L2	
CONTACTIVABLE	Iviiguei i elix	ARRIVAL		
	DEOEN/E	PRODUCT SHIPPED DETAILS		
	RECEIVE	R COMPLETES ONLY THE SHADED COLUMNS BELOW		
			UNIT TOTAL	
		Q	TY QTY UNIT RETAIL RETAIL	
UID ITEM NAME		0	RD REC'DOST TOTAL COST VALUE VALUE	
[CT00128] Summit Boys Private Reserve Live Resin Sauce 1g			75 \$9.00 \$675.00	
		DDODLIGT DE JECTION		
IF PRODU	UCTS ARE REJECTED PLEASE CIR	PRODUCT REJECTION CLE THE ITEMS BEING REJECTED IN THE PRODUCT SH	IIPPED DETAILS SECTION ABOVE	
REASON FOR RECECTION				
		PRODUCT RECEIPT CONFIRMATION		
I confirm that the contents of	this shipment match in weight and co	unt as indicated above.		
	items as inicated received above - and are rejected for delivery and remain in	d which are not circled. the custody of the distributor for return to the shipper as ind	icated in this form 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	