## SALES INVOICE / SHIPPING MANIFEST

INVOICE	MANIFEST # SO7848		ACTUAL	DATE AND TIME OF DEPARTURE	E 11/20	n/2019 03·20	) DI	1				
INVOICE/MANIFEST # SO7848 ATTACHED PAGES No				ED DATE AND TIME OF ARRIVAL		0/2019 03.20	<i>)</i> [ [	/1				
	SHIPP	ER INFORMATION		RECEIVER INFORMATION								
STATE LICENSE #		C11-0000224-LIC		STATE LICENSE # C1			C10-0000314-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		Revolution Emporium							
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		3081 N. State St.							
950602126			CITY, STATE, ZIP CODE		Ukiah, CA 95482							
PHONE NUMBER (831) 600-7710			PHONE NUMBER		(707) 696-0666							
CONTACT NAME Miguel Felix				CONTACT NAME								
			DISTRIBUTO	DR INFORMATION								
STATE LICENSE # C11-0000224-LIC		C11-0000224-LIC		DRIVER'S NAME	'S NAME Brac			adley Martinez				
BUSINESS NAME		Oz Distribution, Inc.		CA DRVR LIC #	B9489158							
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							
CONTAC	T NAME	Miguel Felix		ACTUAL DATE AND TIME OF ARRIVAL								
		DECENT		SHIPPED DETAILS	214/							
		RECEIVE	R COMPLETES ONL	Y THE SHADED COLUMNS BELC	JVV							
						QTY UNIT				TOTAL RETAIL		
UID ITEM NAME					REC'IDOST		TOTAL COST	VALUE	VALUE			
[FL00627] Royal Gems Hyrbid Flower Gelato 3.5g				32			\$448.00					
FL00628] Royal Gems Hyrbid Flower Peanut Butter Breath 3.5g					32	2 \$14.	.00	\$448.00				
			PRODUC	CT REJECTION								
	IF PRODUCTS	ARE REJECTED PLEASE CIRC	CLE THE ITEMS BEIN	NG REJECTED IN THE PRODUCT	SHIPE	PED DETAIL	S S	SECTION ABO	VE			
REASO	N FOR RECECTION											
				EIPT CONFIRMATION								
		shipment match in weight and cou										
_	ducts circled abbove are r	s as inicated received above - and ejected for delivery and remain in		n. stributor for return to the shipper as	indica	ted in this fo	rm a	and all attache	d produc	t detail		
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER							
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						ATE SIGNEI	D					