SALES INVOICE / SHIPPING MANIFEST

INVOICE	MANIFEST # SO	6902	ACTUAL DATE AND TIME OF DEPAR	RTURE 09/18/2019 03:27	' PM		
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL			
	SH	IPPER INFORMATION	R	RECEIVER INFORMATION			
STATE LICENSE # C11-0000224-LIC		C11-0000224-LIC	STATE LICENSE #	STATE LICENSE # C10-0000599			
	LICENSE	License	STATE LICENSE2#				
BUSINESS NAME Oz Distribution, Inc.		Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Lie	cense		
BUSINESS ADDRESS 195 Harvey West Blvd			BUSINESS NAME	Proper We	liness INC		
CITY, STATE, ZIP CODE Santa Cruz, CA		-	BUSINESS ADDRESS	0			
950602126		950602126	CITY, STATE, ZIP CODE	Eureka, C	Eureka, CA 95501		
PHONE NUMBER (831) 600-7710			PHONE NUMBER	(707) 630-	(707) 630-1142		
CONTACT NAME Miguel Felix			CONTACT NAME				
			DISTRIBUTOR INFORMATION				
STATE LI	CENSE #	C11-0000224-LIC	DRIVER'S NAME	Bradley Ma	artinez		
BUSINESS NAME Oz Distribu		Oz Distribution, Inc.	CA DRVR LIC #		B9489158		
BUSINESS ADDRESS 195 Harvey W		195 Harvey West Blvd	VEHICLE MAKE	Ford	Ford		
CITY, STATE, ZIP CODE Santa Cruz, CA		Santa Cruz, CA 950602126	VEHICLE MODEL	Transit	Transit		
PHONE NUMBER (831) 600-7710		(831) 600-7710	VEHICLE LIC. PLATE #	54269L2	54269L2		
CONTACT NAME Miguel Felix		Miguel Felix	ACTUAL DATE AND TIM	IE OF			
			ARRIVAL				
			PRODUCT SHIPPED DETAILS				
		RECEIVE!	R COMPLETES ONLY THE SHADED COLUMNS	RELOW.			
		REGEIVE	N COMIT LETES CIVET THE SHADED COLONING	BLLOW			
						UNIT	TOTAL
				QTY QTY UNIT			RETAIL
UID	ITEM NAME			ORD REC'IDOS	TOTAL COST	VALUE	VALUE
Royal Tree Indoor Flower Indica GG1 3.5g		Flower Indica GG1 3.5g		32 \$22	.00 \$704.00)	
Royal Tree Hybrid Indoor Flower Black Triangle OG 3.5g				16 \$22	.00 \$352.00)	
			PRODUCT REJECTION				
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SECT							
REASC	N FOR RECECTION						
			PRODUCT RECEIPT CONFIRMATION				
Lconfirm	n that the contents of	f this shipment match in weight and cou					
		items as inicated received above - and					
_	-		the custody of the distributor for return to the ship	per as indicated in this fo	rm and all attache	ed produc	t detail
sheet(s		,		•		•	
NAME OF PERSON RECEIVING AND/OR				PHONE			
REJECTIONG PRODUCT				NUMBER			
SIGNATURE OF PERSON RECEIVING AND/OR				DATE SIGNE)		
REJEC	TING PRODUCT						