## SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7358			ACTUAL DATE AND TIME OF DEPARTURE 10/22/2019 04:39 PM						
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION			RECEIVER INFORMATION						
STATE LICENSE # C11-0000224-LIC			STATE LICENSE # C12-0000204-LIC						
TYPE OF LICENSE	License		STATE LICENSE2 #	C	12-0000204	-LIC			
BUSINESS NAME Oz Distribution, Inc.  BUSINESS ADDRESS 195 Harvey West Blvd CITY, STATE, ZIP CODE Santa Cruz, CA 950602126  PHONE NUMBER (831) 600-7710  CONTACT NAME Miguel Felix		TYPE OF LICENSE		Retailer License					
			BUSINESS NAME		DESERT S FINEST PATIENTS COOPERATIVE IN				
			BUSINESS ADDRESS CITY, STATE, ZIP CODE	12	12106 Palm Dr Desert Hot Springs, CA 92240				
				D					
			PHONE NUMBER	(8	33) 438-587	74			
		CONTACT NAME							
		DISTRIBUT	FOR INFORMATION						
STATE LICENSE #	C11-0000224-LIC		DRIVER'S NAME	Ві	andon Sum	andal			
BUSINESS NAME			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						
	RECEIVER		SHIPPED DETAILS ILY THE SHADED COLUMNS BEI	LOW					
							UNIT	TOTAL	
				QTY Q	TY UNIT			RETAIL	
UID ITEM NAME				ORD RE	C'DOST	TOTAL COST	VALUE	VALUE	
[CT00210] Summit Boys Caviar Crumble Forbidden Fruit 1G					\$17.50				
[CT00208] Summit Boys Caviar Crumble Gelato 1g				12	\$16.00				
[CT00109] Summit Boys Caviar Crumble Double Scotts OG 1g				12	\$16.00				
[CT00140] Summit Boys Sour Dub Sauce 1g				12	\$12.00				
[CT00128] Summit Boys Private Reserve Live Resin Sauce 1g				12	\$12.00	\$144.00			
[CT00207] S -Summit Boys Cavia [CT00209] S -Summit Boys Cavia		0	\$0.01 \$0.01	\$0.00 \$0.00					
		₽₽∩N	JCT REJECTION						
IF PRODUC	CTS ARE REJECTED PLEASE CIRC			CT SHIPPED	DETAILS S	SECTION ABO	VE		
REASON FOR RECECTION									
		DDOD!!OT	OFIDT OONEIDMATION						
Loopfirm that the asstants of the	io chinmont motch in weight and		CEIPT CONFIRMATION						
I agree to take custody of all ite	is shipment match in weight and cou ems as inicated received above - and re rejected for delivery and remain in	which are not circle	ed.	as indicated	in this form	and all attache	d produc	t detail	
NAME OF PERSON RECEIVIN	NG AND/OR			PHO	NE BER				
REJECTIONG PRODUCT									

DATE SIGNED

SIGNATURE OF PERSON RECEIVING AND/OR

REJECTING PRODUCT