## SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7966		ACTUAL DATE AND TIME OF DEPARTUR	ACTUAL DATE AND TIME OF DEPARTURE 11/27/2019 03:33 PM				
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVA					
SH	IPPER INFORMATION	REC	RECEIVER INFORMATION				
STATE LICENSE #	C11-0000224-LIC	C11-0000224-LIC STATE LICENSE # C10-0000355-LIC					
TYPE OF LICENSE	License	STATE LICENSE2 #					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Lice	Retailer License			
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME	Valley Herba	Valley Herbal Center VHC			
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		BUSINESS ADDRESS	14522 Victory Blvd Van Nuys, CA 91405				
		CITY, STATE, ZIP CODE					
PHONE NUMBER	(831) 600-7710						
CONTACT NAME	Miguel Felix	CONTACT NAME					
		DISTRIBUTOR INFORMATION					
STATE LICENSE #	C11-0000224-LIC	DRIVER'S NAME		Angel Rodriguez			
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B9147506				
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					
		ARRIVAL					
		PRODUCT SHIPPED DETAILS					
	RECEIVE	R COMPLETES ONLY THE SHADED COLUMNS BELC	WC				
					UNIT	TOTAL	
			QTY QTY UNIT	TOTAL 000T		RETAIL	
UID ITEM NAME		ORD REC'IDOST	TOTAL COST		VALUE		
[FL00634] Kanebes Indica Flower Hollyweed 3.5g.			64 \$10.0				
[FL00425] Kanebes Shelf Sup	pport		1 -\$10.0	0 -\$10.00	)		
		PRODUCT REJECTION					
IF PROD	LICTS ARE REJECTED PLEASE CIRC	CLE THE ITEMS BEING REJECTED IN THE PRODUCT	T SHIPPED DETAILS	SECTION ABO	)\/F		
II TROB		SEE THE HEIMS BEING RESESTED IN THE FROSTON		020110117120			
REASON FOR RECECTION	N .						
		PRODUCT RECEIPT CONFIRMATION					
	f this shipment match in weight and cou						
	litems as inicated received above - and are rejected for delivery and remain in	the custody of the distributor for return to the shipper as	s indicated in this form	n and all attache	ed produc	t detail	
NAME OF PERSON RECEIVING AND/OR			PHONE				
REJECTIONG PRODUCT			NUMBER				
SIGNATURE OF PERSON I	RECEIVING AND/OR		DATE SIGNED				
REJECTING PRODUCT							