SALES INVOICE / SHIPPING MANIFEST

		57 12		CD / D			•			
INVOICE/MANIFEST # SO8062 AC			ACTUAL D	ACTUAL DATE AND TIME OF DEPARTURE 12/03/2019 05:16 PM						
ATTACHED PAGES No			ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION					RECEIVER INFORMATION					
STATE L	ICENSE #	C11-0000224-LIC			STATE LICENSE #	(C10-0000472	-LIC		
TYPE OF LICENSE License				STATE LICENSE2#						
BUSINESS NAME Oz Distribution, Inc.					TYPE OF LICENSE	ı	Retailer Licen	se		
BUSINESS ADDRESS 195 Harvey West Blvd		rd .	BUSINESS NAME		(Colombia Care				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126				BUSINESS ADDRESS	4	4645 De Soto St.				
				CITY, STATE, ZIP CODE		San Diego, CA 92109				
PHONE NUMBER (831) 600-7710		PH		PHONE NUMBER	(0				
CONTACT NAME Miguel Felix			С		CONTACT NAME					
			D	ISTRIBUTO	R INFORMATION					
	ICENSE #	C11-0000224-LIC			DRIVER'S NAME		lan John Sternberger			
BUSINESS NAME		Oz Distribution, Inc.			CA DRVR LIC #		B9920672			
BUSINESS ADDRESS		195 Harvey West Blvd			VEHICLE MAKE					
CITY, STATE, ZIP CODE		Santa Cruz, CA 950602126			VEHICLE MODEL	Transit				
PHONE NUMBER		(831) 600-7710			VEHICLE LIC. PLATE #		54269L2			
CONTAC	CINAME	Miguel Felix			ACTUAL DATE AND TIME OF ARRIVAL	F				
					IIPPED DETAILS	0144				
		R	ECEIVER COMPL	ETES ONLY	THE SHADED COLUMNS BEL	LOW				
						OTV (QTY UNIT		UNIT	TOTAL RETAIL
UID	ITEM NAME							TOTAL COST		
Summit Boys Lemon Sugar Caviar Sugar 1g						\$17.50			VALUE	
[CT00215] Summit Boys Caviar Crumble Pac USA 1g					12 12	\$17.50				
	CT00134] Summit Boys Caviar Crumble Sherbert x GG 1g					12	\$17.50			
				DD OD LIGT	DE JEOTION					
	IF PRODUC	CTS ARE REJECTED PLEA	SE CIRCLE THE I		REJECTION REJECTED IN THE PRODUC	T SHIPPE	D DETAILS	SECTION ABO	VE	
DEAGG	ON FOR RECECTION									
REASC	ON FOR RECECTION									
					IPT CONFIRMATION					
		nis shipment match in weight								
	oducts circled abbove a	ems as inicated received abore rejected for delivery and re			ributor for return to the shipper a	as indicate	d in this form	and all attache	d product	t detail
NAME	OF PERSON RECEIVI	NG AND/OR				DH	ONE			
REJECTIONG PRODUCT							MBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT							TE SIGNED			