SALES INVOICE / SHIPPING MANIFEST

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INVOICE/MANIFEST # SO6429			ACTUA	ACTUAL DATE AND TIME OF DEPARTURE 08/22/2019 02:16 PM								
ATTACHE	ED PAGES	No		ESTIMATED DATE AND TIME OF ARRIVAL								
	C	HIDDED INEODM	ATION		DEC	_I\/E	- D I	INIEOE		.1		
SHIPPER INFORMATION					RECEIVER INFORMATION							
		C11-0000224-LI0	IC		STATE LICENSE #		C10-0000264-LIC					
TYPE OF LICENSE License				STATE LICENSE2 #								
BUSINESS NAME Oz Distribution, Ir				TYPE OF LICENSE		Retailer License						
BUSINESS ADDRESS 195 Harvey West		i Blvd		BUSINESS NAME		Green Dragon Palm Springs						
CITY, STATE, ZIP CODE Santa Cruz, CA				BUSINESS ADDRESS		353 S Palm Canyon Dr						
950602126				CITY, STATE, ZIP CODE		Palm Springs, CA 92262						
		(831) 600-7710			PHONE NUMBER		+1 760-438-9333					
CONTAC	I NAME	Miguel Felix			CONTACT NAME							
				DISTRIBU	ITOR INFORMATION							
STATE LICENSE # C11-0000224-L				DRIVER'S NAME		Brandon Sumandal						
BUSINESS NAME		Oz Distribution, li			CA DRVR LIC #			D1309712				
BUSINESS ADDRESS		195 Harvey West			VEHICLE MAKE Ford							
CITY, STATE, ZIP CODE		Santa Cruz, CA 9			VEHICLE MODEL	Transit						
PHONE NUMBER		(831) 600-7710			VEHICLE LIC. PLATE #							
CONTACT NAME		Miguel Felix			ACTUAL DATE AND TIME OF							
					ARRIVAL							
				PRODUC	T SHIPPED DETAILS							
			RECEIVER COM	IPLETES O	NLY THE SHADED COLUMNS BEL	OW						
										UNIT	TOTAL	
								UNIT			RETAIL	
UID ITEM NAME								DOST	TOTAL COST	VALUE	VALUE	
		ninant Preroll Dream Walker 1	g		31		\$3.50	\$108.50				
Elite Hybrid Preroll El Cucuy 1g						30		\$3.50				
	Elite Hybrid Pre	roll Alien OG 1g				30)	\$3.50	\$105.00			
				PROD	UCT REJECTION							
	IF PR	ODUCTS ARE REJECTED P	LEASE CIRCLE TH	IE ITEMS BI	EING REJECTED IN THE PRODUC	T SHIPF	PED D	ETAILS S	SECTION ABO	VE		
REASO	N FOR RECECT	TION										
			PR	RODUCT RE	ECEIPT CONFIRMATION							
I confirm	n that the content	s of this shipment match in we										
I agree	to take custody o ducts circled abb	f all items as inicated received	above - and which	are not circ		s indicat	ted in	this form	and all attache	d produc	t detail	
NAME OF PERSON RECEIVING AND/OR					PHONE							
REJECTIONG PRODUCT					NUMBER							
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT								SIGNED				