SALES INVOICE / SHIPPING MANIFEST

INIVOICE/MANUEEST # SOC	774	ACTUAL DATE AND	TIME OF DEDARTURE	00/11/2010	02:57 D					
INVOICE/MANIFEST # SO6774 ATTACHED PAGES No			ACTUAL DATE AND TIME OF DEPARTURE 09/11/2019 02:57 PM ESTIMATED DATE AND TIME OF ARRIVAL							
SHI	PPER INFORMATION		RECEIVER INFORMATION							
STATE LICENSE #	TE LICENSE # C11-0000224-LIC		STATE LICENSE #		0000036	-LIC				
TYPE OF LICENSE	License	STATE I	LICENSE2#							
BUSINESS NAME	Oz Distribution, Inc.	TYPE O	F LICENSE	Reta	iler Licen	se				
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINE	BUSINESS NAME Sundial Collective JLJB LLo		ctive JLJB LLC					
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINE	SS ADDRESS	0						
	950602126	CITY, S	TATE, ZIP CODE	Shas	Shasta Lake City, CA 96019					
PHONE NUMBER (831) 600-7710		PHONE	NUMBER	0						
CONTACT NAME	Miguel Felix	CONTAC	CT NAME							
		DISTRIBUTOR INFORM	IATION							
STATE LICENSE #	C11-0000224-LIC	DRIVER	DRIVER'S NAME			Bradley Martinez				
BUSINESS NAME	Oz Distribution, Inc.		CA DRVR LIC #			B9489158				
BUSINESS ADDRESS	195 Harvey West Blvd		HICLE MAKE For							
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126			VEHICLE MODEL Transi							
HONE NUMBER (831) 600-7710			HICLE LIC. PLATE # 54269L2							
CONTACT NAME Miguel Felix		ACTUAL	DATE AND TIME OF							
		ARRIVA	L							
		DDODLICT CLUDDED D	TAIL C							
	RECEIVE	PRODUCT SHIPPED DE R COMPLETES ONLY THE SHA		M						
	REGEIVE	TOOMI ELTEGRALE THE OTHER	DED GOLGIVII VO BELOV							
							UNIT	TOTAL		
				QTY QTY	UNIT		RETAIL	RETAIL		
UID ITEM NAME				ORD REC'	DOST	TOTAL COST	VALUE	VALUE		
Royal Tree Indoor Flower Indica GMO Cookies 3.5g				32	\$23.00	\$736.00				
		PRODUCT REJECT	ION							
IF PRODU	JCTS ARE REJECTED PLEASE CIRC			SHIPPED D	ETAILS :	SECTION ABO	VE			
REASON FOR RECECTION										
		PRODUCT RECEIPT CONF	IRMATION							
I confirm that the contents of	this shipment match in weight and cou	unt as indicated above.								
I agree to take custody of all	items as inicated received above - and	d which are not circled.								
The products circled abbove sheet(s).	are rejected for delivery and remain in	the custody of the distributor for	return to the shipper as i	ndicated in	his form	and all attached	d produc	t detail		
NAME OF PERSON RECEIVING AND/OR				PHONE						
REJECTIONG PRODUCT				NUMBE						
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT				DATE S	IGNED					