## SALES INVOICE / SHIPPING MANIFEST

INIVOICE	MANIFEST # SO6417	7	٨٥٦١٨١	DATE AND TIME OF DEDARTI DE	08/22/	2010 10:20 A	M		
INVOICE/MANIFEST # SO6417 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 08/22/2019 10:29 AM ESTIMATED DATE AND TIME OF ARRIVAL					
	SHIPI	PER INFORMATION		RECEIVER INFORMATION					
STATE LICENSE # C11-0000224-LIC		C11-0000224-LIC		STATE LICENSE #		A12-18-0000	071-TEMP		
TYPE OF	LICENSE	License		STATE LICENSE2 #					
BUSINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE		Retailer Licer	ise			
BUSINESS ADDRESS 195 Harvey West Blvd			BUSINESS NAME		Greenlight Discount Pharmacy				
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		15507 Cobalt St				
950602126			CITY, STATE, ZIP CODE		Sylmar, CA 91342				
PHONE NUMBER (831) 600-7710			PHONE NUMBER		818.256.1964				
CONTACT NAME Miguel Felix				CONTACT NAME					
			DISTRIBUT	OR 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					
			PRODUCT	SHIPPED DETAILS					
		RECEIVE	ER COMPLETES ON	LY THE SHADED COLUMNS BELO	W				
								UNIT	TOTAL
					QTY (	QTY UNIT			RETAIL
UID	ITEM NAME				ORD I	REC'DOST	TOTAL COST	VALUE	VALUE
Kanebes Hybrid Flower Whitezilla 3.5g				64	\$12.00	\$768.00			
	S - Kanebes Hybrid Flo	ower Whitezilla 3.5g			1	\$0.01	\$0.01		
			PRODU	CT REJECTION					
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN THE PRODUCT SHIPPED DETAILS SE								VE	
REASC	ON FOR RECECTION								
				CEIPT CONFIRMATION					
		s shipment match in weight and co							
	oducts circled abbove are	ms as inicated received above - and remain in a rejected for delivery and remain in		d. istributor for return to the shipper as	indicate	ed in this form	and all attache	d produc	t detail
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT						ONE MBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						TE SIGNED			