SALES INVOICE / SHIPPING MANIFEST

	BALLS	IVVOI		SHIPPING MANI	TLO	1				
INVOICE/MANIFEST # SO5034 ATTACHED PAGES No			ACTUAL DATE AND TIME OF DEPARTURE 05/15/2019 02:12 PM ESTIMATED DATE AND TIME OF ARRIVAL							
										SHIPF
STATE LICENSE # A11-18-0000248-TEMP				STATE LICENSE # C10-18-0000137-TEMP						
TYPE OF LICENSE	Adult-Use Distribution Tempo	orary Licenc	ce	STATE LICENSE2 #						
BUSINESS NAME	Oz Distribution, Inc.	,		TYPE OF LICENSE	Retailer License					
BUSINESS ADDRESS 195 Harvey West Blvd CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710 CONTACT NAME Miguel Felix				BUSINESS NAME		Red Door Remedies				
				BUSINESS ADDRESS	1215 Cloverdale Blvd South Unit A Cloverdale, CA 95425					
				CITY, STATE, ZIP CODE						
				PHONE NUMBER		0				
			CONTACT NAME							
		DI	STRIBUTO	DR INFORMATION						
STATE LICENSE # A11-18-0000248-TEMP			DRIVER'S NAME			Francisco Maldorado				
BUSINESS NAME Oz Distribution, Inc.			CA DRVR LIC #			F2095173				
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			ACTUAL DATE AND TIME OF ARRIVAL							
	RECEIVE			SHIPPED DETAILS Y THE SHADED COLUMNS BELO	OW					
UID ITEM NAME						QTY UNIT REC'IDOST	TOTAL COST		TOTAL RETAIL VALUE	
[CO00410] The Oz Indica Mango Brule Crumble 1g					1	\$0.00	\$0.00			
[CO00410]The Oz Indica Mango Brule Crumble 1g					1	\$0.00				
[CO00410] The Oz Indica Mango Brule Crumble 1g					1	\$0.00				
[CO00410] The Oz Indica Mango Brule Crumble 1g					1	\$0.01	\$0.01			
[CO00410]The Oz Indica Mango Brule Crumble 1g [CO00410]The Oz Indica Mango Brule Crumble 1g					1	\$0.01	\$0.01			
[CO00410] The Oz indica Mango Bi	die Crumbie 1g					\$0.01	\$0.01			
			PRODUC	CT REJECTION						
IF PRODUCT	S ARE REJECTED PLEASE CIRC	CLE THE IT	TEMS BEIN	NG REJECTED IN THE PRODUCT	T SHIPP	PED DETAILS S	SECTION ABO	VE		
REASON FOR RECECTION										
		PROD	NICT REC	EIPT CONFIRMATION						
I confirm that the contents of this	shipment match in weight and cou									
	s as inicated received above - and									
,				stributor for return to the shipper as	s indicat	ed in this form	and all attached	d product	detail	
NAME OF DEDOON BEGEN IN	AND/OD				Б.	IONE				
NAME OF PERSON RECEIVING REJECTIONG PRODUCT	ANU/UK					HONE JMBER				
SIGNATURE OF PERSON RECE	FIVING AND/OR					ATE SIGNED				

REJECTING PRODUCT