SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO755	56	ACTUAL DATE AND TIME OF DEPARTURE	11/01/2019 03:48	R DM			
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL) I IVI			
SHIP	PER INFORMATION	RECEIVER INFORMATION					
STATE LICENSE #	C11-0000224-LIC	STATE LICENSE #	C10-0000496-LIC				
TYPE OF LICENSE	License	STATE LICENSE2 #					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Li	Retailer License			
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME	The Plant	The Plant			
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS	21759 Erw	21759 Erwin St			
	950602126	CITY, STATE, ZIP CODE	Woodland Hills, CA 91367				
PHONE NUMBER	(831) 600-7710			5-2013			
CONTACT NAME	Miguel Felix	CONTACT NAME					
		DISTRIBUTOR INFORMATION					
STATE LICENSE #	C11-0000224-LIC	DRIVER'S NAME	Angel Rodriguez				
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B9147506	B9147506			
BUSINESS ADDRESS	195 Harvey West Blvd	VEHICLE MAKE	Ford	Ford			
CITY, STATE, ZIP CODE	Santa Cruz, CA 950602126	VEHICLE MODEL	Transit				
PHONE NUMBER	(831) 600-7710	VEHICLE LIC. PLATE #	54269L2	54269L2			
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF					
		ARRIVAL					
	RECEIVER	PRODUCT SHIPPED DETAILS COMPLETES ONLY THE SHADED COLUMNS BELO	W				
	REGEIVER	OOMI EETES ONET THE SHADED COLOMING BEEC	VV				
					UNIT	TOTAL	
LUD ITEMANATE			QTY QTY UNIT			RETAIL	
UID ITEM NAME			ORD REC'IDOS			VALUE	
[CT00150] The Oz Hybrid Crumble Cherry Vortex 1g The Oz Shelf Support			36 \$13 1 -\$12				
The Oz Shell Support			-φ12	.00 -\$12.00	,		
		PRODUCT REJECTION					
IF PRODUC	TS ARE REJECTED PLEASE CIRCL	E THE ITEMS BEING REJECTED IN THE PRODUCT	SHIPPED DETAIL	S SECTION ABO	OVE		
REASON FOR RECECTION							
		PRODUCT RECEIPT CONFIRMATION					
I confirm that the contents of th	is shipment match in weight and coun	as indicated above.					
I agree to take custody of all ite	ms as inicated received above - and v	hich are not circled.					
The products circled abbove an sheet(s).	e rejected for delivery and remain in th	e custody of the distributor for return to the shipper as	indicated in this fo	rm and all attache	ed produc	t detail	
NAME OF PERSON RECEIVIN	NG AND/OR		PHONE				
REJECTIONG PRODUCT			NUMBER				
SIGNATURE OF PERSON REP REJECTING PRODUCT	CEIVING AND/OR		DATE SIGNE	D			