SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO6316			ACTUAL	ACTUAL DATE AND TIME OF DEPARTURE 08/16/2019 12:16 PM						
ATTACHED PAGES No			ESTIMA	TED DATE AND TIME OF ARRIVAL	-					
	_			_		_		_		
SHIPPER INFORMATION				RECEIVER INFORMATION						
STATE LICENSE #		C11-0000224-LIC		STATE LICENSE #	ICENSE #					
TYPE OF LICENSE		License		STATE LICENSE2#	#					
BUSINESS NAME Oz [Oz Distribution, Inc.		TYPE OF LICENSE	PE OF LICENSE Retailer L		cense			
BUSINESS ADDRESS 195 Harvey West Blvd			BUSINESS NAME		Bare Dispensary					
CITY, STATE, ZIP CODE Santa Cruz, CA		Santa Cruz, CA		BUSINESS ADDRESS		690 Garnet Ave W				
950602126			CITY, STATE, ZIP CODE		Palm Springs, CA 92262					
PHONE NUMBER (831) 600-7710			PHONE NUMBER		(760) 673-7400					
CONTACT NAME		Miguel Felix		CONTACT NAME						
			DISTRIBUT	OR INFORMATION						
STATE LICENSE #		C11-0000224-LIC DRIVER'S NAME		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				
CONTAC	Г NAME	Miguel Felix		ACTUAL DATE AND TIME OF ARRIVAL						
		RECEIVE		SHIPPED DETAILS LY THE SHADED COLUMNS BELO	NA/					
		REGEIVE	ER GOIM LETEG OIN	ET THE OTIMBED GOLOWING BELO						
					QTY	QTY UNIT		UNIT RETAII	TOTAL RETAIL	
UID ITEM NAME						REC'IDOST	TOTAL CO	ST VALUE	VALUE	
[ED0100] Heavenly Sweet Edible Singles Butterscotch Blondie 10mg TH0		ng THC		10	\$2.5					
		reats Cookies & Cream 100mg			10					
			PRODU	CT REJECTION						
	IF PRODUCTS	ARE REJECTED PLEASE CIR	CLE THE ITEMS BEI	NG REJECTED IN THE PRODUCT	SHIPF	PED DETAILS	SECTION A	BOVE		
REASO	N FOR RECECTION									
				CEIPT CONFIRMATION						
		shipment match in weight and co								
_	ducts circled abbove are re	s as inicated received above - an- ejected for delivery and remain ir		d. istributor for return to the shipper as	indicat	ted in this forr	n and all attac	hed produ	ct detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT						HONE UMBER				
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					D/	ATE SIGNED				