SALES INVOICE / SHIPPING MANIFEST

		SA	LES INVO			II L	1						
INVOICE/MANIFEST # SO7407			ACTUAL D	ACTUAL DATE AND TIME OF DEPARTURE 10/24/2019 04:09 PM									
ATTACHE	ED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL										
	SHIPP	ER INFORM	ATION		REG	CEIVE	ER II	NFOF	RMATION	1			
STATE LICENSE # C11-0000224-LIC			3		STATE LICENSE #		A10-17-0000066-TEMP						
TYPE OF LICENSE License					STATE LICENSE2#								
BUSINESS NAME Oz Distribution, Ir			nc.		TYPE OF LICENSE		Retailer License						
BUSINESS ADDRESS 195 Harvey West			i Blvd		BUSINESS NAME		ALL ABOUT WELLNESS						
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126				BUSINESS ADDRESS 1900 19th St									
				CITY, STATE, ZIP CODE		Sacramento, CA 95815							
PHONE NUMBER (831) 600-7710				PHONE NUMBER		916-454-4327							
CONTACT NAME Miguel Felix					CONTACT NAME								
			D	ISTRIBUTO	R INFORMATION								
QTATE I I	CENSE #	C11-0000224-LIC			DRIVER'S NAME		Brand	on Sum	andal				
		Oz Distribution, In			CA DRVR LIC #			Brandon Sumandal					
BUSINESS ADDRESS		195 Harvey West			VEHICLE MAKE			D1309712 Ford					
		Santa Cruz, CA 95			VEHICLE MODEL Transit			+					
PHONE NUMBER		(831) 600-7710	30002120		VEHICLE LIC. PLATE # 54269L2								
CONTACT NAME		Miguel Felix			ACTUAL DATE AND TIME O								
00111710	TTOTAL	Wilguel I Clix			ARRIVAL	′1							
					HIPPED DETAILS								
			RECEIVER COMPL	ETES ONLY	THE SHADED COLUMNS BE	LOW							
										UNIT	TOTAL		
						QTY	QTY L	JNIT		RETAIL	RETAIL		
UID	D ITEM NAME				OF			OST	TOTAL COST	VALUE	VALUE		
	FL00194] Kanebes Hybrid Flower Whitezilla 1g Smalls				0			\$3.50	\$0.00				
FL00546] Kanebes Hybrid Flower Mimosa Smalls 1g					5			\$3.50	\$175.00				
[FL00569]	FL00569] Kanebes Indica Flower White Tahoe 1g smalls					50)	\$3.50	\$175.00				
				PRODUCT	REJECTION								
	IF PRODUCTS	S ARE REJECTED PL	EASE CIRCLE THE I	TEMS BEING	G REJECTED IN THE PRODUC	CT SHIPF	PED DE	TAILS S	SECTION ABO	VE			
REASO	N FOR RECECTION												
Loonfirm	n that the contents of this	shinment match in wei			IPT CONFIRMATION								
I agree	to take custody of all item ducts circled abbove are i	s as inicated received	above - and which are	e not circled.	ributor for return to the shipper	as indicat	ted in th	is form	and all attache	d produc	t detail		
NAME OF PERSON RECEIVING AND/OR						PI	HONE						
REJECTIONG PRODUCT					NUMBER								
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					DATE SIGNED								