SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO504	41 ACTI	JAL DATE AND TIME OF DEPARTURE	= 05/15/2010 01:40 P	M		
INVOICE/MANIFEST # SO5041 ATTACHED PAGES No		MATED DATE AND TIME OF ARRIVAL		IVI		
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SHIPPER INFORMATION		RECEIVER INFORMATION				
STATE LICENSE #	A11-18-0000248-TEMP	STATE LICENSE #	A10-18-0000	A10-18-0000350-TEMP		
TYPE OF LICENSE	Adult-Use Distribution Temporary Licence	STATE LICENSE2 #				
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Licer	Retailer License		
BUSINESS ADDRESS	JSINESS ADDRESS 195 Harvey West Blvd BUSINESS NAME		La Florista			
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS	242 Main Street Weed, CA 96094			
	950602126	CITY, STATE, ZIP CODE				
PHONE NUMBER	(831) 600-7710	PHONE NUMBER (530) 408-0420				
CONTACT NAME	Miguel Felix	CONTACT NAME				
	DISTRIB	UTOR INFORMATION				
STATE LICENSE #	A11-18-0000248-TEMP	DRIVER'S NAME	Prodley Morti	207		
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B9489158	Bradley Martinez		
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				
		CT SHIPPED DETAILS	MA/			
	RECEIVER COMPLETES	ONLY THE SHADED COLUMNS BELC)VV			
JID ITEM NAME			QTY QTY UNIT	TOTAL COST		TOTAL RETAIL
-	le Cannabutter 1000mg THC 4oz		6 \$22.00			VALUE
[CO00165] Heavenly Sweet Edible Cannabutter 2000mg THC 4 oz			6 \$33.00			
	<u> </u>		V	,		
.=		DUCT REJECTION				
IF PRODUC	CTS ARE REJECTED PLEASE CIRCLE THE ITEMS I	BEING REJECTED IN THE PRODUCT	SHIPPED DETAILS	SECTION ABO	VE	
REASON FOR RECECTION						
	PRODUCT 6	RECEIPT CONFIRMATION				
I confirm that the contents of the	nis shipment match in weight and count as indicated al					
I agree to take custody of all ite	re rejected for delivery and remain in the custody of th	rcled.	indicated in this form	and all attache	d produc	t detail
NAME OF PERSON RECEIVII REJECTIONG PRODUCT	NG AND/OR		PHONE NUMBER			
SIGNATURE OF PERSON RE REJECTING PRODUCT	CEIVING AND/OR		DATE SIGNED			