		SA	LES INVO	ICE / S	HIPPING MANI	FEST	Γ				
INVOICE/MANIFEST # SO6418				ACTUAL DATE AND TIME OF DEPARTURE 08/27/2019 11:41 AM							
ATTACHE	ED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL								
	SHIPF	PER INFORM	ATION		REC	EIVEI	R INFOF	NOITAMS	1		
STATE LICENSE # C11-0000224-LIC			;		STATE LICENSE # A12-18-0000071-TEMP						
TYPE OF LICENSE License				STATE LICENSE2#							
BUSINESS NAME Oz Distribution, Inc.			nc.		TYPE OF LICENSE	F	Retailer Licens	e			
BUSINESS ADDRESS 195 Harvey West Blvd			Blvd		BUSINESS NAME	(Greenlight Dis	reenlight Discount Pharmacy			
CITY, STATE, ZIP CODE Santa Cruz, CA				BUSINESS ADDRESS		15507 Cobalt St					
950602126				CITY, STATE, ZIP CODE		Sylmar, CA 91342					
PHONE NUMBER (831) 600-7710					PHONE NUMBER	818.256.1964					
CONTAC	T NAME	Miguel Felix			CONTACT NAME						
			С	DISTRIBUTOR	RINFORMATION						
CTATE I I	CENSE #	C11 0000224 LIC	`		DRIVER'S NAME	,	Angol Podrigu	0.7			
			C11-0000224-LIC Oz Distribution, Inc.		CA DRVR LIC #	Angel Rodrigue B9147506		62			
BUSINESS ADDRESS			195 Harvey West Blvd		VEHICLE MAKE		Ford				
CITY, STATE, ZIP CODE		-	Santa Cruz, CA 950602126		VEHICLE MODEL	Transit					
· · · · · · · · · · · · · · · · · · ·		(831) 600-7710			VEHICLE LIC. PLATE #	54269L2					
CONTACT NAME Miguel Felix				ACTUAL DATE AND TIME OF							
					ARRIVAL						
					IPPED DETAILS						
			RECEIVER COMPL	LETES ONLY	THE SHADED COLUMNS BELC	OW					
									UNIT	TOTAL	
LUD TEMANAME					TY UNIT			RETAIL			
UID ITEM NAME		-II-					TOTAL COST		VALUE		
Kanebes Indica Flower Blue Zkittlez 3.5g. s Kanebes Sativa Flower Tangie 3.5g Smalls		-	IdiiS			64 64	\$9.00 \$9.00	\$576.00 \$576.00			
Kanebes Sativa Flower Lemon Banana 3.5g smalls			malls			64	\$9.00	\$576.00			
S-Kanebes Sativa Flower Tangie 3.5g Smalls					1	\$0.01	\$0.01				
S-Kanebes Hybrid Flower Lemon Banana 3.5g smalls					1	\$0.01	\$0.01				
S - Kanebes Indica Flower Blue Zkittlez 3.5g						1	\$0.01	\$0.01			
				PRODUCT	REJECTION						
	IF PRODUCT	S ARE REJECTED PL	EASE CIRCLE THE		REJECTED IN THE PRODUCT	SHIPPE	D DETAILS S	ECTION ABO	VE		
REASO	N FOR RECECTION										
1127100											
					PT CONFIRMATION						
	n that the contents of this										
_					ibutor for return to the shipper as	indicated	d in this form a	and all attache	d produc	t detail	
5/1661(5)	,.										
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT						PHO	ONE MBER				

DATE SIGNED

SIGNATURE OF PERSON RECEIVING AND/OR

REJECTING PRODUCT