SALES INVOICE / SHIPPING MANIFEST

		571	ELS HVVOI	ICD / L			L				
INVOICE/MANIFEST # SO7465				ACTUAL DATE AND TIME OF DEPARTURE 10/29/2019 10:27 AM							
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION					RECEIVER INFORMATION						
STATE LIC	:FNSF #	C11-0000224-LI0			STATE LICENSE #						
TYPE OF L		License			STATE LICENSE2 #						
BUSINESS		Oz Distribution, I	nc.		TYPE OF LICENSE	F	Retailer Licen	se			
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME		Chai Castroville					
CITY, STATE, ZIP CODE Santa Cruz, CA				BUSINES		1	10665 Merritt St.				
950		950602126			CITY, STATE, ZIP CODE	(Castroville, CA 95012				
PHONE NUMBER (831)		(831) 600-7710	-7710		PHONE NUMBER	C	0				
CONTACT NAME Miguel		Miguel Felix			CONTACT NAME						
			D	ISTRIBUTO	R INFORMATION						
STATE LICENSE #		C11-0000224-LIC			DRIVER'S NAME		Brandon Sumandal				
BUSINESS NAME		Oz Distribution, Inc.			CA DRVR LIC #		D1309712				
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						
			Pl	RODUCT SI	HIPPED DETAILS						
			RECEIVER COMPL	ETES ONLY	THE SHADED COLUMNS BELOV	W					
						OTV 0	T) /		UNIT	TOTAL	
UID	ITEM NAME						TY UNIT	TOTAL COST		RETAIL	
[CT00216] Summit Boys Caviar Gorilla Glue 1g						20	\$16.00			VALUE	
[CT00210] Summit Boys Caviar Gorilla Glue 1g [CT00210] Summit Boys Caviar Crumble Forbidden Fruit 1G						20	\$16.00				
[CT00210] Summit Boys Caviar Crumble Porolidgen Fruit 1G						20	\$16.00				
[CT00215] Summit Boys Caviar Grumble Fac USA 1g						20 \$16.00					
[CT00121] Summit Boys Crumble Mango Brulee 1g							\$12.50				
	CT00127] Summit Boys Pacific Gas Live Resin Caviar Diamonds .5g				30 \$						
				PRODUC	T REJECTION						
	IF PRODUCTS	ARE REJECTED P	LEASE CIRCLE THE I	TEMS BEIN	G REJECTED IN THE PRODUCT	SHIPPE	D DETAILS S	SECTION ABO	VE		
REASON	FOR RECECTION										
					IPT CONFIRMATION						
	that the contents of this s	•	•								
_	o take custody of all items ucts circled abbove are re				tributor for return to the shipper as i	indicated	d in this form	and all attache	d product	t detail	
	NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT				PHONE NUMBER						
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						DAT	E SIGNED				