SALES INVOICE / SHIPPING MANIFEST

		STILLS	111101	ICL / D	HIPPING MAIN		, 1				
INVOICE/MANIFEST # SO6353 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 08/19/2019 10:19 AM ESTIMATED DATE AND TIME OF ARRIVAL							
STATE LICENSE # C11-0000224-LIC					STATE LICENSE #		M10-17-0000	110-TEMP			
TYPE OF LICENSE License				STATE LICENSE2#							
BUSINESS NAME Oz Distribution, Inc.				TYPE OF LICENSE			Retailer License				
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME			Golden State Patient Care				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710 CONTACT NAME Miguel Felix					BUSINESS ADDRESS		233 CA-174				
					CITY, STATE, ZIP CODE		Colfax, CA 95713				
					PHONE NUMBER		(530) 512-5183				
				CONTACT NAME							
				NOTDIDLITO	NINFORMATION						
			D	JISTRIBUTO!	RINFORMATION						
STATE LICENSE # C11-0000224-LIC				DRIVER'S NAME		Bradley Martinez					
BUSINESS NAME Oz Distribution, Inc.			CA DRVR LIC #			B9489158					
BUSINESS ADDRESS 195 Harvey West Blvd		195 Harvey West Blvd			VEHICLE MAKE		Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		26	VEHICLE MODEL			Transit					
PHONE NUMBER		(831) 600-7710	10		VEHICLE LIC. PLATE #	54269L2					
CONTA	CT NAME	Miguel Felix			ACTUAL DATE AND TIME OF ARRIVAL						
		RECEI			IIPPED DETAILS THE SHADED COLUMNS BEL	.OW					
UID	ITEM NAME						QTY UNIT	TOTAL COST		TOTAL RETAIL VALUE	
	Royal Tree Indoor Flower Sativa Jungle Juice 3.5g					32	2 \$21.50	\$688.00			
	Royal Tree Indoor Flower Indica Medcare Kush 3.5g					32	2 \$21.50	\$688.00			
Dreamers Edible Oil Syringe Satvia 1G Dreamers Edible Oil Syringe Indica 1G Kanebes Indica Flower Blueberry Muffin SMALLS 7g.						12	\$20.00	\$240.00			
						12	2 \$20.00	\$240.00			
						32	2 \$17.00	\$544.00			
Royal Tree Hybrid Indoor Flower Papaya 3.5g						32 \$21.50		\$688.00			
				PRODUCT	REJECTION						
	IF PRODUC	CTS ARE REJECTED PLEASE C	IRCLE THE I	ITEMS BEING	G REJECTED IN THE PRODUC	T SHIPF	PED DETAILS S	SECTION ABO	VE		
REAS	SON FOR RECECTION										
			DD∩r	DUCT RECE	IPT CONFIRMATION						
l conf	irm that the contents of the	nis shipment match in weight and			II I CON INWATION						
		ems as inicated received above -									
_	roducts circled abbove a	re rejected for delivery and remain			ributor for return to the shipper a	as indicat	ted in this form	and all attache	d produc	t detail	
N1 A 5 C	- OF DEDOOM SECE!" "	ALC AND/OD				F.	IONE				
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT							HONE UMBER				
SIGNATURE OF PERSON RECEIVING AND/OR							ATE SIGNED				

REJECTING PRODUCT