SALES INVOICE / SHIPPING MANIFEST

		571	LLS II V O	ICL / L			, 1					
INVOICE/MANIFEST # SO7578					ACTUAL DATE AND TIME OF DEPARTURE 11/06/2019 03:31 PM							
ATTACH	HED PAGES	No		ESTIMATED DATE AND TIME OF ARRIVAL								
SHIPPER INFORMATION					RECEIVER INFORMATION							
STATE LICENSE # C11-0000224-LIC					STATE LICENSE #			C10-0000010-LIC				
TYPE OF LICENSE License			5		STATE LICENSE2 #		010 000	,0010	LIO			
BUSINESS NAME Oz Distribution, Inc.		nc	TYPE OF LICENSE			Retailer License						
BUSINESS ADDRESS 195 Harvey West Blvd			BUSINESS NAME			ALTERNATIVES A HEALTH COLLECTIVE						
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126					BUSINESS ADDRESS		1603 HAMPTON WAY Santa Rosa, CA 95407					
				CITY, STATE, ZIP CODE								
PHONE NUMBER (831) 600-7710					PHONE NUMBER			707-525-1420				
CONTACT NAME Miguel Felix				CONTACT NAME								
]	DISTRIBUTO	R INFORMATION							
QTATE I	LICENSE #	C11-0000224-LI	<u>^</u>		DRIVER'S NAME		Bradlov	Martii	207			
STATE LICENSE # BUSINESS NAME			Oz Distribution, Inc.		CA DRVR LIC #		Bradley Martinez B9489158					
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 O	F						
					HIPPED DETAILS / THE SHADED COLUMNS BEI	_OW						
							QTY UN				TOTAL RETAIL	
UID ITEM NAME			100 · · · TIIO				REC'IDO		TOTAL COST		VALUE	
[ED00019] Heavenly Sweet Edible Treats Berry Crunch 100mg THC								\$8.50				
[ED00033] Heavenly Sweet Edible Treats Chocolate 100mg THC [ED00009] Heavenly Sweet Edible Munchies Cinnful Buddies 100mg THC						20		\$8.50				
[ED00009] Heavenly Sweet Edible Munchles Clinital Buddles 100mg THC						3(\$8.50 \$8.50				
ED00030] Heavenly Sweet Edible Munchies Muddy Buddies 100mg THC						10		\$8.50				
		,	Ŭ									
				PRODUC [*]	T REJECTION							
	IF F	PRODUCTS ARE REJECTED P	LEASE CIRCLE THE	ITEMS BEIN	G REJECTED IN THE PRODUC	CT SHIPI	PED DET	AILS	SECTION ABO	VE		
REAS	ON FOR RECE	CTION										
					EIPT CONFIRMATION							
I agree	e to take custody roducts circled al	ents of this shipment match in wo of all items as inicated received bbove are rejected for delivery a	d above - and which a	re not circled.		as indica	ted in this	form	and all attached	d product	: detail	
N 1 A N 4 T	OF DEDOOM S	ECENTIALS AND OR					LIONE					
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER							
SIGNATURE OF PERSON RECEIVING AND/OR					DATE SIGNED							

REJECTING PRODUCT