SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST #	SO6296	ACTUAL DATE AND TIME OF DEPARTURE 08/27/2019 11:49 AM
ATTACHED PAGES	1 pages	ESTIMATED DATE AND TIME OF ARRIVAL

SHIPPER INFORMATION		RECEIVER INFORMATION				
STATE LICENSE #	C11-0000224-LIC	STATE LICENSE #	Retailer License			
TYPE OF LICENSE	License	STATE LICENSE2#				
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer License			
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME	Haven LB			
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS	3401 Norwalk Blvd			
	950602126	CITY, STATE, ZIP CODE	Long Beach, CA 90808			
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	0			
CONTACT NAME	Miguel Felix	CONTACT NAME				

DISTRIBUTOR INFORMATION

STATE LICENSE #	C11-0000224-LIC	DRIVER'S NAME	Angel Rodriguez
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B9147506
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	

PRODUCT SHIPPED DETAILS RECEIVER COMPLETES ONLY THE SHADED COLUMNS BELOW

		QTY	QTY	UNIT		UNIT RETAIL	TOTAL RETAIL
UID	ITEM NAME				TOTAL COST		
[CO0060]	Allegiance Wellness Tincture 1:1 Ratio Relief Formula 15ml	C)	\$26.00	\$0.00		
[CO0065]	Allegiance Wellness Tincture 1:2 Ratio Digestion Formula 15ml	3	3	\$26.00	\$78.00		
[CO0067]	Allegiance Wellness Tincture 1:8 Ratio Stress Formula 15ml	()	\$26.00	\$0.00		
[CO0066]	Allegiance Wellness Tincture 1:4 Ratio Anxiety Formula 15ml	5	5	\$26.00	\$130.00		
[CO0064]	Allegiance Wellness Tincture 20:1 Ratio Relax/Focus Formula 15ml	()	\$26.00	\$0.00		
[CO0071]	Allegiance Wellness Tincture 750mg CBD 30ml	()	\$58.50	\$0.00		
[CO0063]	Allegiance Wellness Tincture 8:1 Ratio Neurology Formula 15ml	()	\$26.00	\$0.00		
[CO0069]	Allegiance Wellness Tincture Awake Tincture 15ml	5	5	\$26.00	\$130.00		
[CO0076]	Allegiance Wellness Tincture Balanced CBD:THC Ratio 1:1 15ml	5	5	\$65.00	\$325.00		
[CO0070]	Allegiance Wellness Tincture Calm Tinctrue 15ml	3	3	\$31.20	\$93.60		
[CO0068]	Allegiance Wellness Tincture Sleep Formula 15ml	5	5	\$26.00	\$130.00		
[CO0072]	Allegiance Wellness Tincture Rick Simpson Method THC 250mg	5	5	\$26.00	\$130.00		
[CO0073]	Allegiance Wellness Tincture Rick Simpson Method THC 500mg	4	ŀ	\$45.50	\$182.00		
[CO0075]	Allegiance Wellness Tincture Rick Simpson Method THC 2000mg	5	5	\$162.50	\$812.50		
[ED0100]	Heavenly Sweet Edible Singles Butterscotch Blondie 10mg THC	10)	\$2.50	\$25.00		
[ED00301]	Heavenly Sweet Edible Singles Dark Chocolate Orange 10mg THC	10)	\$2.50	\$25.00		
[ED00302]	Heavenly Sweet Edible Singles Milk Chocolate Mint 10mg THC	10)	\$2.50	\$25.00		
[CO00164]	Heavenly Sweet Edible Cannabutter 1000mg THC 4oz	5	5	\$22.00	\$110.00		
[ED0069]	Heavenly Sweet Edible Squookie Chocolate chip 100mg THC	10)	\$7.50	\$75.00		
[ED0071]	Heavenly Sweet Edible Squookie Rainbow 100mg THC	10)	\$7.50	\$75.00		
[ED0089]	Heavenly Sweet Edible Squookies Snickerdoodle 100mg THC	10)	\$7.50	\$75.00		
[ED0083]	Heavenly Sweet Edible Treats Chocolate 100mg THC	10)	\$7.50	\$75.00		

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PRODUCT DETAIL ATTACHMENT PAGE

INVOICE/MANIFEST NUMBER	SO6296	ATTACHED PAGE	1	OF	1	TOTAL	PAGES
ATTACHED TO #							
		PRODUCT SHIPPED DETAILS					
	RECEIVER CO	OMPLETES ONLY THE SHADED COLUMN	NS BELOW				
						UNIT	TOTAL
			QTY	QTY UNIT		RETAIL	RETAIL
JID ITEM NAME			ORD	REC'DOST	TOTAL COST	VALUE	VALUE
ED0084] Heavenly Sweet Edible	Treats Classic 100mg THC		10	\$7.50	\$75.00		
ED0068] Heavenly Sweet Edible	Treats Rocky Road 100mg THC		10	\$7.50	\$75.00		
		PRODUCT REJECTION					
IF PRODUCTS	ARE REJECTED PLEASE CIRCLE	THE ITEMS BEING REJECTED IN THE PR	RODUCT SHIP	PED DETAILS	SECTION AB	OVE	
REASON FOR RECECTION							
		PRODUCT RECEIPT CONFIRMATION					
I confirm that the contents of this	s shipment match in weight and count	as indicated above.					
	ns as inicated received above - and w						
The products circled abbove are	rejected for delivery and remain in th	ne custody of the distributor for return to the	shipper as ind	icated in this fo	orm and all atta	ched pro	duct detail
sheet(s).							
NAME OF PERSON RECEIVING	G AND/OR		Pl	HONE			
REJECTIONG PRODUCT			N	UMBER			
SIGNATURE OF PERSON REC			_	ATE SIGNED			

REJECTING PRODUCT