SALES INVOICE / SHIPPING MANIFEST

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INVOICE/MANIFEST # SO6494			ACTI	ACTUAL DATE AND TIME OF DEPARTURE 08/27/2019 07:29 AM								
ATTACHED PAGES No				ESTIMATED DATE AND TIME OF ARRIVAL								
	SH	HIPPER INFORM	ATION		RECI	EIVE	ΞR	INFOF	RMATION	٧		
STATE LICENSE # C11-0000224-LIC			C		STATE LICENSE #		A10-18-0000104-TEMP					
TYPE OF LICENSE License				STATE LICENSE2#								
BUSINESS NAME Oz Distribution, Ir			nc.		TYPE OF LICENSE		Retailer License					
BUSINESS ADDRESS 195 Harvey West			Blvd		BUSINESS NAME		Herbal Cruz					
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126				BUSINESS ADDRESS		1051 41st Avenue						
				CITY, STATE, ZIP CODE		Capitola, CA 95062						
PHONE NUMBER (831) 600-7710				PHONE NUMBER		831.212.1722						
CONTACT NAME Miguel Felix					CONTACT NAME	CONTACT NAME						
				DISTRIE	BUTOR INFORMATION							
STATEL	ICENSE #	C11-0000224-LI0	?		DRIVER'S NAME		Bran	ndon Sum:	andal			
	SS NAME		Oz Distribution, Inc.		CA DRVR LIC #		Brandon Sumandal D1309712					
BUSINESS ADDRESS		195 Harvey West			VEHICLE MAKE		Ford					
CITY, STATE, ZIP CODE		Santa Cruz, CA 9			VEHICLE MODEL	Transit						
PHONE NUMBER		(831) 600-7710			VEHICLE LIC. PLATE #							
CONTACT NAME		Miguel Felix			ACTUAL DATE AND TIME OF							
					ARRIVAL							
			DECEIVED COM		CT SHIPPED DETAILS ONLY THE SHADED COLUMNS BELO	NA/						
			RECEIVER	VII EETEO	ONET THE OTRIBED OCCUMING BEEC	, , ,						
						QTY	QTY	UNIT		UNIT RETAIL	TOTAL RETAIL	
UID ITEM NAME						ORD	REC	DOST	TOTAL COST	VALUE	VALUE	
	Kanebes Indica F	es Indica Flower Blue Zkittlez 3.5g.					3	\$12.00	\$1,536.00			
Elite Hybrid Preroll Alien OG 1g						32	2	\$0.01	\$0.32			
Please deliver ASAP. Customer is doing a Store-wide 25% off PAD this w				AD this we	eek. Prerolls are to support the PAD.	()	\$0.00	\$0.00			
				PRO	DDUCT REJECTION							
	IF PRO	DUCTS ARE REJECTED P	LEASE CIRCLE TI	HE ITEMS	BEING REJECTED IN THE PRODUCT	SHIPE	PED D	DETAILS S	SECTION ABO	VE		
REASC	ON FOR RECECTION	ON										
			D	PODLICT I	RECEIPT CONFIRMATION							
l confir	m that the contents	of this shipment match in we										
l agree	to take custody of a	all items as inicated received	above - and which	h are not ci		indicat	ted in	this form a	and all attache	d produc	t detail	
NAME OF PERSON RECEIVING AND/OR					PHONE							
REJECTIONG PRODUCT					NUMBER							
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT					DATE SIGNED							