## SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7	760	ACTUAL DATE AND TIME OF DEPARTUR	E 11/14/2019 02:20 E	DNA			
INVOICE/MANIFEST # SO7760 ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL		IVI			
			_				
SHI	PPER INFORMATION	REC	RECEIVER INFORMATION				
STATE LICENSE #	SE# C11-0000224-LIC STATE LICEN		C10-000049	0-LIC			
TYPE OF LICENSE	License	STATE LICENSE2 #					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Lice	Retailer License			
BUSINESS ADDRESS	195 Harvey West Blvd						
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		BUSINESS ADDRESS	1933 Mission st San Francisco, CA 94103				
		CITY, STATE, ZIP CODE					
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	(415) 562-63	(415) 562-6334			
CONTACT NAME	Miguel Felix	CONTACT NAME					
		DISTRIBUTOR INFORMATION					
STATE LICENSE #	C11-0000224-LIC	DRIVER'S NAME	Rodel Jardel	Rodel Jardeleza			
BUSINESS NAME	Oz Distribution, Inc.	CA DRVR LIC #	B82636677				
BUSINESS ADDRESS	195 Harvey West Blvd	VEHICLE MAKE					
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		VEHICLE MODEL	Transit	Transit			
PHONE NUMBER	(831) 600-7710	VEHICLE LIC. PLATE #	CLE LIC. PLATE # 54269L2				
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF ARRIVAL					
	RECEIVE	PRODUCT SHIPPED DETAILS R COMPLETES ONLY THE SHADED COLUMNS BELO	DW				
			QTY QTY UNIT		UNIT	TOTAL RETAIL	
UID ITEM NAME			ORD REC'IDOST	TOTAL COST			
-	ndoor Flower Black Triangle OG 3.5g		96 \$21.5			VALUE	
Royal Tree Shelf Su	* *		3 -\$21.5	. ,			
rtoyal 1100 Olloll Co	pport		Φ21.0	φο 1.00			
		PRODUCT REJECTION					
IF PRODU	JCTS ARE REJECTED PLEASE CIRC	LE THE ITEMS BEING REJECTED IN THE PRODUCT	SHIPPED DETAILS	SECTION ABO	VE		
REASON FOR RECECTION							
		PRODUCT RECEIPT CONFIRMATION					
I confirm that the contents of	this shipment match in weight and cou	nt as indicated above.					
	items as inicated received above - and are rejected for delivery and remain in	which are not circled. the custody of the distributor for return to the shipper as	s indicated in this form	n and all attache	d produc	t detail	
0.1001(0).							
NAME OF PERSON RECEIVE	/ING AND/OR		PHONE NUMBER				
SIGNATURE OF PERSON R REJECTING PRODUCT	RECEIVING AND/OR		DATE SIGNED				