SALES INVOICE / SHIPPING MANIFEST

INVOICE/	MANIFEST # SO7934		ACTUAL	DATE AND TIME OF DEPARTURE	11/2	2/2019 0	⊿·21 PI	M			
INVOICE/MANIFEST # SO7934 ATTACHED PAGES No				ED DATE AND TIME OF ARRIVAL		2/2010 0	7.2111	VI			
	SHIPF	PER INFORMATION		RECEIVER INFORMATION							
STATE LICENSE # C11-0		C11-0000224-LIC		STATE LICENSE #		C10-0000321-LIC					
TYPE OF LICENSE License		License		STATE LICENSE2#	C10-00003			21-LIC			
BUSINESS NAME Oz Distribution, Inc.			TYPE OF LICENSE		Retailer License						
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME		IVTHC CV Wellness					
CITY, STATE, ZIP CODE Santa Cruz, CA			BUSINESS ADDRESS		11555 Palm Dr						
950602126			CITY, STATE, ZIP CODE		Desert Hot Springs, CA 92240						
PHONE NUMBER (831) 600-7710			PHONE NUMBER		0						
CONTACT NAME Miguel Felix				CONTACT NAME							
			DISTRIBUTO	DR INFORMATION							
			Dio i i i i i i i i i i i i i i i i i i								
STATE LICENSE #		C11-0000224-LIC		DRIVER'S NAME		Rodel Jardeleza					
BUSINESS NAME		Oz Distribution, Inc.		CA DRVR LIC #		B82636677					
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						
CONTAC	T NAME	Miguel Felix		ACTUAL DATE AND TIME OF ARRIVAL							
			PRODUCT S	SHIPPED DETAILS							
		RECEIVE	R COMPLETES ONL	Y THE SHADED COLUMNS BELO	W						
					OTV	OTVIII	INIIT		UNIT	TOTAL RETAIL	
UID ITEM NAME							QTY QTY UNIT			VALUE	
[FL00609] Kanebes Indica Flower Mendo Breath 3.5g. SMALLS					32 \$9.00			\$288.00		VALUE	
Kanebes Shelf Support						1	-\$9.00				
			2202110	AT DE JEOTION							
	IF PRODUCT	S ARE REJECTED PLEASE CIRC		T REJECTION NG REJECTED IN THE PRODUCT	SHIPI	PED DE	TAILS S	SECTION ABO	VE		
REASO	N FOR RECECTION										
			PRODUCT RECI	EIPT CONFIRMATION							
I confirm	that the contents of this	shipment match in weight and cou	unt as indicated above	. .							
_	ducts circled abbove are	ns as inicated received above - and rejected for delivery and remain in		I. stributor for return to the shipper as	indica	ted in th	is form	and all attache	d produc	t detail	
	OF PERSON RECEIVING	G AND/OR				HONE UMBER					
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT						ATE SIG					