## SALES INVOICE / SHIPPING MANIFEST

INIVOICE	/MANIEEST#	SO7411			ACTUAL	DATE AND TIME OF DEDAI	OTLIDE 10/	23/	2010 03:43 D	M			
INVOICE/MANIFEST # SO7411 ATTACHED PAGES No					ACTUAL DATE AND TIME OF DEPARTURE 10/23/2019 03:43 PM ESTIMATED DATE AND TIME OF ARRIVAL								
, (1 1 / (0) 11	LDTAGLO	110				LD BATTE AND THE OF ALL							
SHIPPER INFORMATION						RECEIVER INFORMATION							
STATE LICENSE #			C11-0000224-LIC			STATE LICENSE #		C11-0000415-LIC					
	LICENSE		License			STATE LICENSE2#							
			Oz Distribution, I	Inc.		TYPE OF LICENSE			Retailer License				
BUSINESS ADDRESS 195 Harvey West Blvd			t Blvd		BUSINESS NAME			Compassionate Heart Mutual Benefit Association					
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 PHONE NUMBER (831) 600-7710				<b>BUSINESS ADDRESS</b>			HITS 190 Kuki Lane #2						
					CITY, STATE, ZIP CODE		Ukiah, CA 95482						
			(831) 600-7710			PHONE NUMBER		707.462.5100					
CONTACT NAME Miguel Felix					CONTACT NAME								
				ĺ	DISTRIBUTO	OR INFORMATION							
STATE LICENSE #			C11-0000224-LIC			DRIVER'S NAME			Bradley Martinez				
BUSINESS NAME			Oz Distribution, I			CA DRVR LIC #			B9489158				
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 #			54269L2				
CONTACT NAME Miguel Felix						ACTUAL DATE AND TIME OF ARRIVAL							
				ı	PRODUCT S	HIPPED DETAILS							
				RECEIVER COMP	LETES ONL	Y THE SHADED COLUMNS	BELOW						
									OT) / I II II T		UNIT	TOTAL	
UID	ITEM NAME								QTY UNIT	TOTAL COST		RETAIL	
FL00328] Royal Tree Indoor Flower Indica Medcare Kush 3.5g			oh 2 Eq					REC'IDOST \$22.00	TOTAL COST \$704.00		VALUE		
[FL00325] Royal Tree Indoor Flower Indica Medicale Rush 3.5g				SII 3.5g		3			\$22.00				
[FL00582] Royal Tree Indoor Flower Sunshine OG Sativa 3.5g				ra 3 5 a					\$22.00				
[FL00319] Royal Tree Indoor Flower Hybrid Banjo 3.5g			a 5.5g					\$22.00					
FL00557] Royal Tree Indoor Flower Black Domina 3.5g									\$22.00				
						T REJECTION							
	IF I	PRODUCTS A	ARE REJECTED P	LEASE CIRCLE THE	ITEMS BEIN	IG REJECTED IN THE PRO	DUCT SHIF	PPE	ED DETAILS	SECTION ABC	VE		
REASO	N FOR RECE	CTION											
						EIPT CONFIRMATION							
			•	eight and count as ind									
The pro	ducts circled a			d above - and which a and remain in the custon		l. stributor for return to the ship	per as indic	ate	ed in this form	and all attache	d product	t detail	
sheet(s)	).												
NAME OF PERSON RECEIVING AND/OR						ı	PH	ONE					
REJECTIONG PRODUCT					NUMBER								
SIGNA	TURE OF PER	SON RECEIV	ING AND/OR		DATE SIGNED								

REJECTING PRODUCT