## SALES INVOICE / SHIPPING MANIFEST

|  |  | SA   | TES III V                | OICI  | E / Sr                             | IIPPING MAN                               | IIFES                     | ) [                                      |                 |          |          |  |
|--|--|--|--------------------------|---|------------------------------------|---|---------------------------|--|-----------------|----------|----------|--|
| INVOICE/MANIFEST # SO7844  |  |  |                          | ACTUAL DATE AND TIME OF DEPARTURE 11/22/2019 04:07 PM |                                    |   |                           |  |                 |          |          |  |
| ATTACHED PAGES No  |  |  |                          |   | ESTIMATED DATE AND TIME OF ARRIVAL |   |                           |  |                 |          |          |  |
|  |  |  |                          |   |                                    |   |                           |  |                 |          |          |  |
| SHIPPER INFORMATION  |  |  |                          |   |                                    | RECEIVER INFO                             |                           |  | RMATIO          | V        |          |  |
| STATE LICENSE # C11-0000224-LIC                                  |  |  | C                        |   | 5                                  | STATE LICENSE #                           |                           | C10-0000236                              | S-LIC           |          |          |  |
| YPE OF LICENSE License   |  |  |                          | 5   | STATE LICENSE2#                    |   |                           |  |                 |          |          |  |
| BUSINESS NAME Oz Distribution, Inc.                              |  |  | nc.                      |   | TYPE OF LICENSE                    |   |                           | Retailer License                         |                 |          |          |  |
| BUSINESS ADDRESS 195 Harvey West Blvd                            |  | t Blvd   |                          |   | BUSINESS NAME                      |   | Coast to Coast Collective |  |                 |          |          |  |
| CITY, STATE, ZIP CODE Santa Cruz, CA                             |  |  |                          |   |                                    | BUSINESS ADDRESS<br>CITY, STATE, ZIP CODE |                           | 7127 Canoga Ave<br>Canoga Park, CA 91303 |                 |          |          |  |
| 950602126  |  |  |                          |   |                                    |   |                           |  |                 |          |          |  |
| PHONE NUMBER (831) 600-7710                                      |  |  |                          |   | F                                  | PHONE NUMBER (818) 712-0535 I             |                           |  | 35 Mark         |          |          |  |
| CONTACT NAME Miguel Felix  |  |  |                          |   | (                                  | CONTACT NAME                              |                           |  |                 |          |          |  |
|  |  |  |                          | DIOTO   |                                    | JEODMATION                                |                           |  |                 |          |          |  |
|  |  |  |                          | DISTR   | KIBUTOK II                         | NFORMATION                                |                           |  |                 |          |          |  |
| STATE LI   | CENSE #                                      | C11-0000224-LI0  | 0                        |   |                                    | DRIVER'S NAME                             |                           | Angel Rodriguez                          |                 |          |          |  |
| BUSINESS NAME  |  | Oz Distribution, I                                     | Oz Distribution, Inc.    |   | (                                  | CA DRVR LIC #                             |                           | B9147506                                 |                 |          |          |  |
| BUSINESS ADDRESS   |  | 195 Harvey West Blvd                                   |                          |   | \                                  | VEHICLE MAKE                              |                           | Ford                                     |                 |          |          |  |
| CITY, STATE, ZIP CODE  |  | Santa Cruz, CA 9                                       | Santa Cruz, CA 950602126 |   | \                                  | VEHICLE MODEL                             |                           | Transit                                  |                 |          |          |  |
| PHONE NUMBER (831) 6   |  | (831) 600-7710   |                          |   | \                                  | 'EHICLE LIC. PLATE #                      |                           | 54269L2                                  |                 |          |          |  |
| CONTACT NAME Miguel Felix  |  |  |                          |   |                                    | ACTUAL DATE AND TIME OF ARRIVAL           |                           |  |                 |          |          |  |
|  |  |  | RECEIVER COM             | MPLETES   | S ONLY TI                          | HE SHADED COLUMNS BE                      | LOW                       |  |                 | UNIT     | TOTAL    |  |
| UID  | ITEM NAME                                    |  |                          |   |                                    |   |                           | QTY UNIT                                 | TOTAL COST      | RETAIL   | RETAIL   |  |
| CT00129  | CT00129] Summit Boys Caviar Crumble Banjo 1g |  |                          |   |                                    | 24  | \$17.50                   | \$420.00                                 | )               |          |          |  |
| [CT00229] Summit Boys Caviar Crumble Forbidden Sunset 1g         |  |  |                          |   |                                    | 24  | \$17.50                   | \$420.00                                 | )               |          |          |  |
| [CT00127] Summit Boys Pacific Gas Live Resin Caviar Diamonds .5g |  |  |                          |   |                                    | 36  | \$20.00                   | \$720.00                                 | )               |          |          |  |
| CT00216] Summit Boys Caviar Gorilla Glue 1g                      |  |  |                          |   |                                    | 24  | \$17.50                   | \$420.00                                 | )               |          |          |  |
| Summit Boys Shelf Support  |  |  |                          |   |                                    | 3   | -\$17.50                  | -\$52.50                                 | )               |          |          |  |
|  | Summit Boys Shelf Su                         | upport   |                          |   |                                    |   | 1                         | 1 -\$20.00                               | -\$20.00        | )        |          |  |
|  |  |  |                          | PR  | RODUCT R                           | EJECTION                                  |                           |  |                 |          |          |  |
|  | IF PRODUC                                    | CTS ARE REJECTED P                                     | LEASE CIRCLE TH          | HE ITEMS  | IS BEING F                         | REJECTED IN THE PRODU                     | CT SHIPF                  | PED DETAILS                              | SECTION ABO     | VE       |          |  |
| REASO  | N FOR RECECTION                              |  |                          |   |                                    |   |                           |  |                 |          |          |  |
|  |  |  |                          |   |                                    |   |                           |  |                 |          |          |  |
|  |  |  |                          |   |                                    | CONFIRMATION                              |                           |  |                 |          |          |  |
|  |  | is shipment match in we                                |                          |   |                                    |   |                           |  |                 |          |          |  |
|  | ducts circled abbove a                       | ems as inicated received<br>re rejected for delivery a |                          |   |                                    | utor for return to the shipper            | as indicat                | ted in this form                         | and all attache | d produc | t detail |  |
|  |  |  |                          |   |                                    |   |                           |  |                 |          |          |  |
| NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT               |  |  |                          |   |                                    |   |                           | HONE<br>UMBER                            |                 |          |          |  |
| SIGNATURE OF PERSON RECEIVING AND/OR                             |  |  |                          |   |                                    |   | D                         | ATE SIGNED                               |                 |          |          |  |

REJECTING PRODUCT