SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST #	SO7251	ACTUAL DATE AND TIME OF DEPARTURE	= 10/23/2010 03:48	DM			
ATTACHED PAGES No		ESTIMATED DATE AND TIME OF ARRIVAL		FIVI			
			-				
S	SHIPPER INFORMATION	REC	RECEIVER INFORMATION				
STATE LICENSE # C11-0000224-LIC		STATE LICENSE #	C10-0000326-LIC				
TYPE OF LICENSE	License	STATE LICENSE2 #					
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Lic	Retailer License			
BUSINESS ADDRESS 195 Harvey West Blvd		BUSINESS NAME	La Florista	La Florista			
CITY, STATE, ZIP CODE	Santa Cruz, CA	BUSINESS ADDRESS	242 Main S	treet			
	950602126	CITY, STATE, ZIP CODE	Weed, CA 96094				
HONE NUMBER (831) 600-7710		PHONE NUMBER	(530) 408-0	(530) 408-0420			
CONTACT NAME	Miguel Felix	CONTACT NAME					
		DISTRIBUTOR INFORMATION					
OTATE LIGENIOE "	044 0000004 10	DDIVEDIO NAME	Dog Hay Ma				
STATE LICENSE # BUSINESS NAME	C11-0000224-LIC	DRIVER'S NAME CA DRVR LIC #	-	Bradley Martinez B9489158			
BUSINESS NAME BUSINESS ADDRESS	Oz Distribution, Inc. 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				
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF	34209L2	34209L2			
SONTAGT NAME	Iviiguei i elix	ARRIVAL					
		PRODUCT SHIPPED DETAILS					
	RECEIVER C	COMPLETES ONLY THE SHADED COLUMNS BELC	W				
					UNIT	TOTAL	
			QTY QTY UNIT			. RETAIL	
UID ITEM NAME			ORD REC'IDOST			VALUE	
-	Flower Wedding Cake 3.5g		32 \$12.				
FL00534] Kanebes Hybrid	d Flower Lemon Meringue 3.5g		32 \$12.	00 \$384.00)		
		PRODUCT REJECTION					
IF PR	CODUCTS ARE REJECTED PLEASE CIRCLE	THE ITEMS BEING REJECTED IN THE PRODUCT	SHIPPED DETAIL	S SECTION ABO	OVE		
REASON FOR RECECT	TION						
		PRODUCT RECEIPT CONFIRMATION					
I confirm that the content	ts of this shipment match in weight and count						
	of all items as inicated received above - and wh						
The products circled abbasheet(s).	oove are rejected for delivery and remain in the	e custody of the distributor for return to the shipper as	indicated in this for	m and all attache	ed produc	t detail	
NAME OF PERSON RE			PHONE				
REJECTIONG PRODUCT SIGNATURE OF PERSON RECEIVING AND/OR			NUMBER DATE SIGNED)			
REJECTING PRODUCT							