SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO6236 ACTUAL DATE AND TIME ATTACHED PAGES No ESTIMATED DATE AND T SHIPPER INFORMATION		'2019 02:40 PM	Л		
SHIPPER INFORMATION	RECEIVE		STIMATED DATE AND TIME OF ARRIVAL		
		R INFO	RMATION	٧	
STATE LICENSE # C11-0000224-LIC STATE LICEN	NSE#	A10-17-00000	066-TEMP		
TYPE OF LICENSE License STATE LICEN					
BUSINESS NAME Oz Distribution, Inc. TYPE OF LIC	ENSE	Retailer Licen	se		
BUSINESS ADDRESS 195 Harvey West Blvd BUSINESS NAME		ALL ABOUT V	VELLNESS		
CITY, STATE, ZIP CODE Santa Cruz, CA BUSINESS AI	DDRESS	1900 19th St			
950602126 CITY, STATE, ZIP CODE		Sacramento, CA 95815			
PHONE NUMBER (831) 600-7710 PHONE NUM	BER	916-454-4327			
NTACT NAME Miguel Felix CONTACT NAME					
DISTRIBUTOR INFORMATIO	NI.				
DISTRIBUTOR INFORMATIO	IN .				
STATE LICENSE # C11-0000224-LIC DRIVER'S NA	ME	Rodel Jardeleza			
BUSINESS NAME Oz Distribution, Inc. CA DRVR LIC	; #	B82636677			
BUSINESS ADDRESS 195 Harvey West Blvd VEHICLE MA	KE	Ford			
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126 VEHICLE MO	DEL	Transit			
PHONE NUMBER (831) 600-7710 VEHICLE LIC	. PLATE #	54269L2			
CONTACT NAME Miguel Felix ACTUAL DAT ARRIVAL	E AND TIME OF				
PRODUCT SHIPPED DETAIL RECEIVER COMPLETES ONLY THE SHADED					
UID ITEM NAME		QTY UNIT	TOTAL COST		TOTAL RETAIL VALUE
The Oz Indica OG Sherbet Crumble 1g	20	\$13.00	\$260.00		
The Oz Indica Wedding Cake Crumble 1g		\$13.00	\$260.00		
The Oz Hybrid Gorilla Cake Crumble 1g		\$13.00			
Fleur D'Elite Hybrid Chem 4 Hash Rosin 1g	20	\$20.00	\$400.00		
PRODUCT REJECTION					
IF PRODUCTS ARE REJECTED PLEASE CIRCLE THE ITEMS BEING REJECTED IN	N THE PRODUCT SHIPPI	ED DETAILS S	SECTION ABO	VE	
REASON FOR RECECTION					
PRODUCT RECEIPT CONFIRMA	TION				
I confirm that the contents of this shipment match in weight and count as indicated above.					
I agree to take custody of all items as inicated received above - and which are not circled.					
The products circled abbove are rejected for delivery and remain in the custody of the distributor for return sheet(s).	to the shipper as indicate	ed in this form	and all attache	d product	detail
NAME OF PERSON RECEIVING AND/OR	DU	ONE			
REJECTIONG PRODUCT	NUMBER				
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT	DA	TE SIGNED			