SALES INVOICE / SHIPPING MANIFEST

INIVOICE	/MAANIEEST # SO773	6		ACTUAL DA	ATE AND TIME OF DEDARTUR	- 11/1	2/2010 02:26	DM			
INVOICE/MANIFEST # SO7726 ATTACHED PAGES No				ACTUAL DATE AND TIME OF DEPARTURE 11/13/2019 03:26 PM ESTIMATED DATE AND TIME OF ARRIVAL							
ATTACIT	LD FAGES NO			LOTIMATE	DATE AND TIME OF ARRIVAL	-					
	SHIP	PER INFORMATIO	N		REC	EIVI	ER INFO	RMATIO	V		
STATE LICENSE # C11-0000224-LIC				STATE LICENSE #			C10-0000380-LIC				
	TYPE OF LICENSE License				STATE LICENSE2#		010 00000	70 2.10			
BUSINESS NAME Oz Distribution, Inc.				TYPE OF LICENSE Retailer License			ense				
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME			Mount Shasta Patient Collective				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126				BUSINESS ADDRESS			408 S Mt. Shasta Blvd				
					CITY, STATE, ZIP CODE		Mt. Shasta, CA 96067				
PHONE NUMBER (831) 600-7710			PHONE NUMBER			(530) 926-6337					
CONTACT NAME Miguel Felix				CONTACT NAME							
			DI	DISTRIBUTOR	INFORMATION						
STATE LICENSE # C11-0000224-LIC				DRIVER'S NAME		Bradley Martinez					
BUSINESS NAME Oz Distribution, Inc.				CA DRVR LIC #		B9489158					
BUSINESS ADDRESS 195 Harvey West Blvd				VEHICLE MAKE		Ford					
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		26		VEHICLE MODEL		Transit					
PHONE NUMBER (831) 600-7710				VEHICLE LIC. PLATE #		54269L2					
CONTACT NAME Miguel Felix				ACTUAL DATE AND TIME OF ARRIVAL							
		RECEI			IPPED DETAILS THE SHADED COLUMNS BELC)W					
UID	ITEM NAME						QTY UNIT	TOTAL COST		TOTAL RETAIL VALUE	
[ED00018] Dollar Dose - lozenge - Sativa Watermelon - 5mg					50	0 \$0.5	\$25.00)			
[ED00118] Dollar Dose - lozenge - Indica Apple - 5mg						50					
ED00120] Dollar Dose - lozenge - Indica Rootbeer - 5mg CT00191] Heavenly Sweet Edible Cannabutter 2000mg THC 4 oz						50	0 \$0.5 5 \$33.0				
[0100101	Throaverny eweet Earst	o camabattor 2000mg 1110 1 02	_				φου.	ψ100.00			
	IF PRODUC	TS ARE REJECTED PLEASE C	IRCLE THE I		REJECTION REJECTED IN THE PRODUCT	SHIPI	PED DETAILS	S SECTION ABO)\/F		
		TO THE NEGLECTES TELLOS	mrole iiie i	TEMO BENVO	TRESCOTES IN THE FROSCOT	Or iii	. 25 52 17 (12)	020110111120	,,,,		
REASC	ON FOR RECECTION										
					PT CONFIRMATION						
I agree The pro	to take custody of all ite oducts circled abbove are	s shipment match in weight and or ms as inicated received above - a e rejected for delivery and remain	and which are	e not circled.	butor for return to the shipper as	indica	ated in this for	m and all attache	ed produc	t detail	
sheet(s).										
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT					PHONE NUMBER						
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT							ATE SIGNED				