## SALES INVOICE / SHIPPING MANIFEST

	ST IEE		CL / D		LOI	L				
INVOICE/MANIFEST # SO7402 ATTACHED PAGES No			ACTUAL DATE AND TIME OF DEPARTURE 10/25/2019 03:49 PM ESTIMATED DATE AND TIME OF ARRIVAL							
SHIPPER INFORMATION				RECEIVER INFORMATION						
STATE LICENSE #	C11-0000224-LIC			STATE LICENSE #	C	C10-0000355	-LIC			
	icense			STATE LICENSE2#						
BUSINESS NAME	Oz Distribution, Inc.			TYPE OF LICENSE	F	Retailer Licen	se			
BUSINESS ADDRESS 195 Harvey West Blvd				BUSINESS NAME	V	/alley Herbal	Center VHC			
CITY, STATE, ZIP CODE Santa Cruz, CA				BUSINESS ADDRESS	14522 Victory Blvd					
950602126				CITY, STATE, ZIP CODE	V	/an Nuys, CA	91405			
PHONE NUMBER (831) 600-7710				PHONE NUMBER	8187861100					
CONTACT NAME Miguel Felix			CONTACT NAME							
		DI	ISTRIBUTOI	R INFORMATION						
STATE LICENSE #	ICENSE # C11-0000224-LIC			DRIVER'S NAME		Angel Rodriguez				
USINESS NAME Oz Distribution, Inc.		CA DRVR LIC #		CA DRVR LIC #	Е	B9147506				
BUSINESS ADDRESS 195 Harvey West Blvd		t	VEHICLE MAKE		F	Ford				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602126		02126	VEHICLE MODEL		Т	Transit				
PHONE NUMBER (831) 600-7710			VEHICLE LIC. PLATE #		5	4269L2				
CONTACT NAME	Miguel Felix			ACTUAL DATE AND TIME OF ARRIVAL						
	RE			HIPPED DETAILS THE SHADED COLUMNS BELOV	W					
						TY UNIT			TOTAL RETAIL	
UID ITEM NAME							TOTAL COST		VALUE	
[CT00210] Summit Boys Caviar Crumble Forbidden Fruit 1G					12	\$16.00				
[CT00208] Summit Boys Caviar Crumble Gelato 1g					12	\$16.00				
[CT00121] Summit Boys Crumble Mango Brulee 1g					12	\$12.00				
[CT00209] S -Summit Boys Caviar Crumble Forbidden Fruit 1G					0	\$0.01	\$0.00			
CT00207] S -Summit Boys Caviar Crumble Gelato 1g CT00012] S -Summit Boys Crumble Mango Brulee 1g					0	\$0.01 \$0.01	\$0.00 \$0.00			
			PRODUCT	rejection						
IF PRODUCTS AR	E REJECTED PLEAS	SE CIRCLE THE IT		G REJECTED IN THE PRODUCT	SHIPPE	D DETAILS S	SECTION ABO	VE		
REASON FOR RECECTION										
		PROD	OUCT RECE	IPT CONFIRMATION						
I confirm that the contents of this shipr I agree to take custody of all items as The products circled abbove are reject	nicated received above	ve - and which are	not circled.		indicated	d in this form	and all attache	d product	t detail	
sheet(s).										
NAME OF PERSON RECEIVING AND REJECTIONG PRODUCT	IAME OF PERSON RECEIVING AND/OR				PHO	ONE MBER				
SIGNATURE OF PERSON RECEIVIN	G AND/OR					E SIGNED				