SALES INVOICE / SHIPPING MANIFEST

INVOICE/MANIFEST # SO7	546	ACTUAL DATE AND TIME OF DEPARTURE 1	11/13/2010 03:30 DM	1		
INVOICE/MANIFEST # SO7546 ATTACHED PAGES No		ESTIMATED DATE AND TIME OF DEPARTURE 11/13/2019 03:30 FM				
SHI	PPER INFORMATION	RECE	RECEIVER INFORMATION			
		STATE LICENSE #	C10-0000326-LIC			
STATE LICENSE # TYPE OF LICENSE	License	STATE LICENSE # STATE LICENSE2 #	C10-0000320-I	LIC		
BUSINESS NAME	Oz Distribution, Inc.	TYPE OF LICENSE	Retailer Licens	Retailer License		
BUSINESS ADDRESS	195 Harvey West Blvd	BUSINESS NAME		La Florista		
CITY, STATE, ZIP CODE Santa Cruz, CA		BUSINESS ADDRESS	242 Main Street			
0111, 017(12, 211 0002	950602126	CITY, STATE, ZIP CODE	Weed, CA 96094			
PHONE NUMBER	(831) 600-7710	PHONE NUMBER	(530) 408-0420			
CONTACT NAME Miguel Felix		CONTACT NAME				
		DISTRIBUTOR INFORMATION				
STATE LICENSE #	C14 0000324 LIC	DDIVEDIS NAME	DDIVEDIO NAME			
		DRIVER'S NAME	·			
BUSINESS NAME Oz Distribution, Inc. BUSINESS ADDRESS 195 Harvey West Blvd		CA DRVR LIC # VEHICLE MAKE	B9489158 Ford			
		VEHICLE MAKE VEHICLE MODEL				
CITY, STATE, ZIP CODE Santa Cruz, CA 950602 PHONE NUMBER (831) 600-7710		VEHICLE LIC. PLATE #	54269L2	Transit		
CONTACT NAME	Miguel Felix	ACTUAL DATE AND TIME OF				
		ARRIVAL				
		PRODUCT SHIPPED DETAILS				
	RECEIVE	ER COMPLETES ONLY THE SHADED COLUMNS BELOW	l			
				UNIT	TOTAL	
			QTY QTY UNIT	RET	AIL RETAIL	
UID ITEM NAME		(ORD REC'IDOST	TOTAL COST VAL	JE VALUE	
[CT00170] The Oz Indica Crum	ble Purple Punch 1g		24 \$13.00	\$312.00		
		PRODUCT REJECTION				
IF PRODU	JCTS ARE REJECTED PLEASE CIR	CLE THE ITEMS BEING REJECTED IN THE PRODUCT S	HIPPED DETAILS S	ECTION ABOVE		
REASON FOR RECECTION						
REASONT OR RECECTION						
		PRODUCT RECEIPT CONFIRMATION				
I confirm that the contents of	this shipment match in weight and co	unt as indicated above.				
	items as inicated received above - an are rejected for delivery and remain ir	d which are not circled. In the custody of the distributor for return to the shipper as in	ndicated in this form a	and all attached prod	duct detail	
NAME OF PERSON RECEIVING AND/OR REJECTIONG PRODUCT			PHONE NUMBER			
SIGNATURE OF PERSON RECEIVING AND/OR REJECTING PRODUCT			DATE SIGNED			