## BLAZE°

## Delivery Checklist - Record Manual Transactions

Number	Packaging Employee Full Name + Employee #	Member Info (FN, LN, DOB)	Time and Date Delivery was requested	Delivery Address	Consumer Type (rec vs med)	Product & Quantity of individual product/s sold	Unique #, Batch Number, Metric Tag	Retail Value	Discounts /Promos	Fees	Taxes (NAL & AL Excise, Federal, State, County, City)	Final Total Paid	Change Due	Payment Type	Date & Time Delivery was made	Signature of customer who received the delivery
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