

SHIP8, INC.

ATTN: ACCOUNTS PAYABLE
 45875 NORTHPORT LOOP EAST
 FREMONT, CA 94538
 US

AP.SHIP8@SHIP8.COM

ORDER FROM

101098

UNITED PALLET SOLUTIONS LLC
 116 ASHFORD DR.
 STATESBORO, GA 30461
 US

SHIP TO

SD2(2000),
 SHIP8, INC.
 ATTN: CHRISTINE JENKINS
 550 NORTHPORT PARKWAY
 PORT WENTWORTH, GA 31407
 US

PO No. 24050540
 PO Date 05/20/2024
 Page 1 OF 1

Buyer Purchasing Dept
 Terms 30 days
 FOB FOB Origin
 Ship Via Best possible

Line No.	Vendor Item No.	Vendor Item Description	Qty Ordered	UOM	Unit Price	Extended Price
1	PLT4840B	48 X 40 GRADE B PALLET <i>INV. 6-22</i>	616.00	Each	3.95	
2	PLT4840B	48 X 40 GRADE B PALLET	616.00	Each	3.95	
3	PLT4840B	48 X 40 GRADE B PALLET	616.00	Each	3.95	

Total Extended Price =



SHIP8 INC.

DATE 5/17/2024
WHS LOCATION SD2
DEPARTMENT RECEIVING

SUPPLIER / VENDOR:
NAME United Pallet Solutions
ADDRESS
CONTACT TEL NO. 24050540

SHIP TO:
NAME Ship8 Inc
ADDRESS 550 NorthPort Parkway Port Wentworth GA, 31407
Port Wentworth, GA 31407
CONTACT Christine Jenkins
TEL NO. 912-373-7778 ext 3751

ITEM	DESCRIPTION	UNIT PRICE	QTY	EXTENDED \$\$	REMARKS/PURPOSE	CODING (ACCT USE ONLY)
	GRADE B PALLETS	3.95	616	2433.20	1 TL	
	GRADE B PALLETS	3.95	616	2433.20	1 TL	
	GRADE B PALLETS	3.95	616	2433.20	1 TL	
ESTIMATED TOTAL				7299.60		

Check box if attaching quote

REQUESTER SIGNATURE: _____
WAREHOUSE DIRECTOR SIGNATURE: _____
SHIP8 PRESIDENT SIGNATURE: *LJ Show*
E&E CONTROLLER SIGNATURE: *Ron Capranos*
IT AUTHORIZER (SOFTWARE & HARDWARE): _____

DATE: _____
DATE: 05/20/24
DATE: 05/20/24
DATE: _____
DATE: _____

FOR OFFICE USE ONLY

ORDER DATE: _____	ORDERED BY: _____
ETA DATE: _____	ORDERED AMOUNT: _____
PAYMENT METHOD: (Please check one) <input type="checkbox"/> OPEN ACCOUNT (VENDOR BILL) <input type="checkbox"/> COD / PREPAID <input type="checkbox"/> COMPANY CREDIT CARD / CARD HOLDER <input type="checkbox"/> EMPLOYEE CREDIT CARD / CHECK	
Provide REQ # to vendor for invoicing; submit approved requisition form to A/P for payment processing Submit approved requisition form and vendor invoice to Controller for COD/prepaid check Submit approved requisition form and receipt to Credit Card Holder Attach approved requisition form and receipt to employee's expense report for reimbursement.	



Search in mail



Compose

Mail

Inbox

355

REQ FORM 3 TL PALLETS External Inbox x

Chat

Starred



Christine Jenkins

Hi Larry Attached is a requisition form for 3 TL of grade B pallets that Sharriff requested. Christine Jenkins Purchasing Coord

Meet

Sent



Christine Jenkins

Good morning Jessica Attached is a requisition form for 3 TL pf grade B pallets for SD2 needing your approval.

Drafts

More

Labels



Jessica Jeng

to Christine

Approved

Sent from my iPhone

On May 20, 2024, at 9:31 PM, Christine Jenkins <Christine.Jenkins@ship8.com> wrote:

<2024 05 17 SD2 Grade B Pallets 3TL.pdf>

Reply

Forward

240 5705 410

INVOICE

United Pallet Solutions
 PO BOX 1307
 Brooklet, GA 30415

Date	Invoice #
5/29/2024	6336

Bill To
SHIP8, Inc. 45875 Northport Loop East Fremont, CA 94538

Ship To
Ship8, Inc. 550 Northport Parkway Port Wentworth GA 31407

P.O. Number	Terms	Rep	Ship	Via	F.O.B.
24050540			5/22/2024		

Quantity	Item Code	Description	Price	Total
616	Pallet	48x40 B Grade 4Way Pallet	3.95	2,433.20

Thank you for your business!
Please remember to sign upon receipt!

			Total	\$2,433.20
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BILL OF LADING

Date	Invoice #
5/20/2024	6336

United Pallet Solutions
PO BOX 1307
Brooklet, GA 30415

Ship To
Ship8, Inc. 550 Northport Parkway Port Wentworth GA 31407

P.O. No.	Ship
24050540	5/21/2024

Quantity	Item Code	Description	Delivery Date
616	Pallet	48x40 B Grade 4Way Pallet	Wednesday 05/22/2024

*Drivers: Once load is delivered, if customer signed copy is not back to freight company within 24 hours, you will not be paid.
Thank you

Thank you for your business!
Please make sure to sign below upon receipt!

Carrier:

Driver Signature: 

Date: 05/21/24

Customer Signature: 

Print Name: Ruben Perry

Date: 05/22/24



Scanned with CamScanner

INVOICE

United Pallet Solutions
PO BOX 1307
Brooklet, GA 30415

Date	Invoice #
5/29/2024	6353

Bill To
SHIP8, Inc. 45875 Northport Loop East Fremont, CA 94538

Ship To
Ship8, Inc. 550 Northport Parkway Port Wentworth GA 31407

P.O. Number	Terms	Rep	Ship	Via	F.O.B.
24050540			5/23/2024		

Quantity	Item Code	Description	Price	Total
616	Pallet	48x40 B Grade 4Way Pallet	3.95	2,433.20

Thank you for your business!
Please remember to sign upon receipt!

Total	\$2,433.20
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BILL OF LADING

Date	Invoice #
5/21/2024	6353

United Pallet Solutions
 PO BOX 1307
 Brooklet, GA 30415

Ship To
Ship8, Inc. 550 Northport Parkway Port Wentworth GA 31407

P.O. No.	Ship
24050540	5/22/2024

Quantity	Item Code	Description	Delivery Date
616	Pallet	48x40 B Grade 4Way Pallet	Thursday 05/23/2024
<p>*Drivers: Once load is delivered, if customer signed copy is not back to freight company within 24 hours, you will not be paid. Thank you</p> <p>Thank you for your business! Please make sure to sign below upon receipt!</p>			

Carrier: *Protrans*

Customer Signature: *Ruben Perry*

Driver Signature: *[Signature]*

Print Name: *Erin Arica*

Date: *5/22/2024*

Date: *05/22/24*

INVOICE

United Pallet Solutions
PO BOX 1307
Brooklet, GA 30415

Date	Invoice #
5/29/2024	6359

Bill To
SHIP8, Inc. 45875 Northport Loop East Fremont, CA 94538

Ship To
Ship8, Inc. 550 Northport Parkway Port Wentworth GA 31407

P.O. Number	Terms	Rep	Ship	Via	F.O.B.
24050540			5/24/2024		

Quantity	Item Code	Description	Price	Total
616	Pallet	48x40 B Grade 4Way Pallet	3.95	2,433.20

Thank you for your business!
Please remember to sign upon receipt!

Total	\$2,433.20
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BILL OF LADING

Date	Invoice #
5/22/2024	6359

United Pallet Solutions
 PO BOX 1307
 Brooklet, GA 30415

Ship To
ShipR, Inc. 550 Northport Parkway Port Wentworth, GA 31407

P.O. No.	Ship
24030540	5/23/2024

Quantity	Item Code	Description	Delivery Date
616	Pallet	48x40 B Grade 4 Way Pallet	Friday 05/24/2024

*Drivers: Once load is delivered, if customer signed copy is not back to freight company within 24 hours, you will not be paid.
 Thank you

Thank you for your business!
 Please make sure to sign below upon receipt!

Carrier: <i>US Trans</i> Driver Signature: <i>[Signature]</i> Date: <i>5-23-24</i>	Customer Signature: <i>[Signature]</i> Print Name: <i>SHADIFF LARRY</i> Date: <i>5-24-24</i>
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