

**SHIP8, INC.**

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

AP.SHIP8@SHIP8.COM

**ORDER FROM**

101218

ATLANTIC PACKAGING  
806 NORTH 23RD STREET  
WILMINGTON, NC 28405  
US

**SHIP TO**

SD3(3000),  
SHIP8, INC.  
ATTN: CHRISTINE JENKINS  
311 INTERNATIONAL TRADE PARKWAY  
PORT WENTWORTH, GA 31407  
US

Page

PO Date

PO No.

11/27/2024

24111363

1 OF 1

**Buyer**

Purchasing Dept

**Terms**

Net 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	6196078	14.5 x 2000 30GA HAND FILM STRETCH WRAP	25.00	Each	927.36	2

*12-10 Inv.*

**Total Extended Price =**



**Re: Req Form Stretch Wrap SD2 SD3**

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**From** Jessica Jeng <jessica.jeng@jlahome.com>  
**Date** Wed 11/27/2024 2:44 PM  
**To** Christine Jenkins <christine.jenkins@ship8.com>

Approved  
Sent from my iPhone

On Nov 28, 2024, at 2:09 AM, Christine Jenkins <Christine.Jenkins@ship8.com> wrote:

*Hi Jessica*

*Attached is a requisition form needing your approval for a TL of stretch wrap that till be shared between SD2 and SD3.*

<Outlook-ebqyosje.png>

**Christine Jenkins**  
**Purchasing Coordinator**  
**550 Northport Parkway**  
**Port Wentworth, GA 31407**

**O:912-373-7778 X 3751**

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**From:** Ron Capranos <ron.capranos@ship8.com>  
**Sent:** Wednesday, November 27, 2024 12:04 PM  
**To:** Christine Jenkins <christine.jenkins@ship8.com>  
**Subject:** Re: Req Form Stretch Wrap SD2 SD3


Hi Christine,

Here is the approval.

I want to wish you a happy and safe Thanksgiving!

See you next week.

**SHIP FROM**  
 Name: Intertape Polymer Corp.  
 Address: 360 Ringgold Industrial Parkway  
 Danville Va 24540  
 US  
 FOB:

Bill of Lading Number: 0504008086  


**SHIP TO**  
 Name: SHIP8 INC  
 Location #:   
 Address: 311 INTERNATIONAL TRADE PKWY  
 PORT WENTWORTH GA 31407-9265  
 US  
 FOB:

**CARRIER NAME: WATCO SUPPLY CHAIN**  
 Trailer Number: D03  
 Seal number(s): 049930668

**FREIGHT CHARGES BILL TO:**  
 Name: INTERTAPE POLYMER CORP  
 C/O UBER FREIGHT  
 Address: PO BOX 425  
 LOWELL AR 72745  
 US

**SCAC: WSYH**  
**PRO Number: 896059532**  
  
 (9012K)WSYH896059532

**SPECIAL INSTRUCTIONS:**  
**See Attached Supplement Page**

**Freight Charge Terms: (freight charges are prepaid unless marked otherwise)**  
 Prepaid  Collect  3rd Party

Master Bill of Lading with attached underlying Bills of Lading (check box)

CUSTOMER ORDER INFORMATION							
Cust PO/Customer Name	Skids	Weight	Trailer #	BOL	PRO #	Zip	
715359	1	13,733	D03	0504008086	896059532	31407-9265	
<b>GRAND TOTAL</b>	<b>1</b>	<b>13,733</b>					

HANDLING UNIT						PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #		CLASS						
25	Skid	3150	PKBX	13,733	N	FILM OR SHEETING 30 OR GREATER	156830SUB4	50				
25		3150		13,733		<b>GRAND TOTAL</b>						

Freight Payment Reference # 12-10-24

Chy Over

2411363

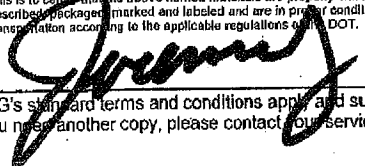
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:  
 \*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

COD Amount: \$ \_\_\_\_\_  
 Fee Terms: Collect  Prepaid:   
 Customer check acceptable:

**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
 Shipper Signature \_\_\_\_\_

**SHIPPER SIGNATURE / DATE**  
 This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the DOT.  


Trailer Loaded: Freight Counted:  
 By Shipper  By Driver  
 By Driver/pallets sold to contain  By Driver/Pieces

**CARRIER SIGNATURE / PICKUP DATE**  
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.  
 Property described above is received in good order, except as \_\_\_\_\_



**ATLANTIC**  
CORPORATION  
Packaging And Supply Solutions

INVOICE

Remit To: Atlantic Corporation  
P. O. Box 60002  
Charlotte, NC 28260  
910-343-0624

Bill To: SHIP8 INC  
45875 NORTHPORT LOOP EAST  
FREMONT CA 94538  
  
UNITED STATES OF AMERICA

Ship To: SHIP8 INC  
311 INTERNATIONAL TRADE PKWY  
PORT WENTWORTH GA 31407  
  
UNITED STATES OF AMERICA

Invoice  
99939334  
Date  
12/11/24

Co/Cust No      Order No      Customer PO#      Ter      Sls #  
1/0000213996      7V8N1/00      24111363      09      6936  
Ship Via      BEST WAY PPD      Terms      NET 30      Ref #  
Pay Type      Accounts Receivable

Item / Description	U/M	Ordered	Shipped	Sell Price	Total
FOB Description: DELIVERED					
6196078	RL	3150.000	3150.000	7.36000 RL	23,184.00
STRETCH FILM SP0760368-U2					US\$
14.5 X 2000 30GA 126RL/SK					
CONTACT: CHRISTINE JENKINS - 912-235-1443, FOR RECEIVING					
Receiving Hours: 8am-2pm, delivery appt not required					

ALL SALES ARE SUBJECT TO ATLANTIC'S TERMS AND CONDITIONS. A  
COPY CAN BE OBTAINED BY WRITTEN REQUEST TO 806 NORTH 23RD ST.  
WILMINGTON, NC 28405, OR VIEWED AT [www.atlanticpkg.com](http://www.atlanticpkg.com).

INVOICE DUE: 01/10/25

SUBTOTAL: 23,184.00  
TOTAL: 23,184.00 US\$  
DEPOSIT:  
AMT DUE: 23,184.00 US\$