

SHIP8, INC.

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

AP.SHIP8@SHIP8.COM

ORDER FROM
100047

ULINE
ATTN: ACCOUNTS RECEIVABLE
CHICAGO, IL 60680-1741

SHIP TO
WDC(4000),
SHIP8, INC.
ATTN: CHRISTINE JENKINS
221 HANSON WAY
WOODLAND, CA 95776
US

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	S-9658	Laser Labels	5.00	Each		26.00

JMW. 5-2

Comments:

1. RW20250429494

Total Extended Price =



Purchase Requisition Form

SHIP8 INC.

DATE 4.30.25
 WHS LOCATION WDC
 DEPARTMENT Rework/Returns

SUPPLIER / VENDOR:

NAME Uline
 ADDRESS _____
 CONTACT _____
 TEL NO. _____

SHIP TO:

NAME SHIP8 INC
 ADDRESS 221 Hanson Way
Woodland, CA 95776
 CONTACT Alex Gonzalez
 TEL NO. 916-897-7622

ITEM	DESCRIPTION	UNIT PRICE	QTY	EXTENDED \$	REMARKS/PURPOSE	CODING (ACCT USE ONLY)
S-9658	Laser Labels	\$ 26.00	5	\$ 130.00	Walmart Reworks	
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -	RW20250429494	
		\$ -		\$ -		
		\$0.00				
		\$ -		\$ -		
		\$ -		\$ -	WALMARTWHS ITEM	
		\$ -		\$ -	MS8544409622-18 GTIN	
		\$ -		\$ -	Sticker Issue	
		\$ -		\$ -		
		\$ -		\$ -		
ESTIMATED TOTAL				\$ 130.00		

Check box if attaching quote

REQUESTER SIGNATURE: _____
 WAREHOUSE DIRECTOR SIGNATURE: Alex Gonzalez
 SHIP8 PRESIDENT SIGNATURE: _____
 E&E CONTROLLER SIGNATURE: _____
 IT AUTHORIZER (SOFTWARE & HARDWARE): _____

DATE: _____
 DATE: 4/30/25
 DATE: _____
 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"/> Provide REQ # to vendor for invoicing; submit approved requisition form to A/P for payment processing
<input type="checkbox"/> COD / PREPAID	<input type="checkbox"/> Submit approved requisition form and vendor invoice to Controller for COD/prepaid check
<input type="checkbox"/> COMPANY CREDIT CARD / CARD HOLDER	<input type="checkbox"/> Submit approved requisition form and receipt to Credit Card holder
<input type="checkbox"/> EMPLOYEE CREDIT CARD / CHECK	<input type="checkbox"/> Attach approved requisition form and receipt to employee's expense report for reimbursement.

NOTES / INSTRUCTIONS (Not part of printed form)

Please select and thoroughly review the below linked

Warehouse Purchases and Approval Policy - Mar 2023

This form is required for all SHIP8 INC. purchase requests

Fill out form in its entirety

Confirm pricing with the vendor

Obtain all appropriate approvals

Download/Save completed form as a pdf (include quote if applicable)

Email PDF to AP.SHIP8@SHIP8.com

Upload a copy of the signed PDF to the Purchase Req Forms
folder on the Google Drive to relevant location

Once product is received, upload POD to the shared drive

so that payment to the vendor can be processed

ULINE

1-800-295-5510

uline.com

8800 Military Road Reno, NV 89506



DO#: 1003186001001

SHIPPING SUPPLY SPECIALISTS

SOLD TO:

SHIP 8 INC

45875 NORTHPORT LOOP E

FREMONT, CA 945386414

SHIP TO:

SHIP8

221 HANSON WAY

WOODLAND, CA 957766211

CUSTOMER NO	PURCHASE ORDER NO	SHIP VIA	ORDER DATE	INVOICE DATE	ORDER #	
4320560	25040434	FedEx Ground (California)	04/30/25	04/30/25	33149479	
MODEL NUMBER	DESCRIPTION	QUANTITY	ORDERED	U/M	SHIPPED	BACK ORDERED
S-9658	7.5X2" WHITE LASER LBL 500/BOX	5	5	BX	5	

PN
5/2/25

RETURNS: WE HOPE YOU ARE HAPPY WITH THIS ORDER. HOWEVER, IF YOU NEED TO RETURN MERCHANDISE, PLEASE REFER TO THE BACK OF THIS FORM. THERE IS NO NEED TO CALL ULINE.

ORDERED BY: ALEX GONZALEZ

5306695991 04/30/25 10:00

0031 -1

INTERNET

R6

PACKING LIST



1-800-295-5510

uline.com

PO Box 88741 • Chicago, IL 60680-1741

INVOICE

ULINE FED ID#: 36-3684738

INVOICE #: 192286548

ORDER #: 33149479

THANK YOU FOR YOUR ORDER. ULINE CUSTOMER SINCE 2008

SOLD TO: SHIP 8 INC
45875 NORTHPORT LOOP E
FREMONT CA 94538-6414

SHIP TO: SHIP8
221 HANSON WAY
WOODLAND CA 95776-6211

CUSTOMER NO.	PURCHASE ORDER NO.	SHIP VIA	ORDER DATE	DATE SHIPPED	TERMS	INVOICE DATE
4320560	25040434	PARCEL	04/30/25	04/30/25	NET 30 DAYS	04/30/25
QTY ORDERED	U/M	BACK ORDERED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
5	BX		S-9658	ULINE LASER LABELS - WHITE, 7 1/2 X 2" 'T' DENOTES A TAXABLE LINE.	26.00	130.00 T

ORDER PLACED BY: ALEX GONZALEZ
INTERNET

SUB-TOTAL 130.00	SALES TAX 10.52	SHIPPING/HANDLING 19.41	AMOUNT DUE \$ 159.93
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PLEASE PAY FROM THIS INVOICE REFER TO THIS INVOICE NUMBER WHEN CONTACTING US REGARDING THIS TRANSACTION

CUSTOMER NAME	CUSTOMER NUMBER	INVOICE NUMBER	INVOICE DATE	AMOUNT DUE
SHIP 8 INC	4320560	192286548	04/30/25	159.93

AMOUNT ENCLOSED
IF DIFFERENT THAN AMOUNT DUE \$ _____
EXPLAIN DIFFERENCES ON REVERSE SIDE

MAKE CHECK PAYABLE AND MAIL TO:

ULINE
ATTN: ACCOUNTS RECEIVABLE
PO Box 88741
Chicago IL 60680-1741

IMPORTANT - PLEASE DETACH AND RETURN THIS PORTION TO ENSURE PROPER CREDIT

0432056001922865482504300000159934