

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

PO No. 25070747
PO Date 07/23/2025
Page 1 OF 1

Buyer

Terms

FOB

Ship Via

Purchasing Dept

Net 30 Days

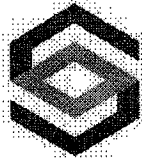
FOB Origin

Best possible

Line No.	Vendor Item No.	Vendor Item Description	Qty Ordered	UOM	Unit Price	Extended Price
1	S-468	18x18x10 32 Ect Box 25/300	500.00	Each	2.58	

JUNE 7-24

Total Extended Price =



Purchase Requisition Form

SHIP8 INC.

DATE 7/22/25
 WHS LOCATION WDC
 DEPARTMENT Ecom

SUPPLIER / VENDOR.

SHIP TO:

NAME Uline
 ADDRESS _____
 CONTACT _____
 TEL NO. _____

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)
		\$0		\$ -		
		\$0		\$ -		
S-4468	18x18x10 box's	\$3	500	\$ 1,290.00		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
ESTIMATED TOTAL				\$ 1,290.00		

Check box if attaching quote

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

DATE: _____
 DATE: 7/22/25
 DATE: _____
 DATE: _____
 DATE: _____

FOR OFFICE USE ONLY

ORDER DATE: _____ ORDERED BY: _____
 ETA DATE: _____ ORDERED AMOUNT: _____

PAYMENT METHOD: (Please check one)

OPEN ACCOUNT (VENDOR BILL) Provide REQ # to vendor for invoicing; submit approved requisition form to A/P for payment process

COD / PREPAID Submit approved requisition form and vendor invoice to Controller for COD/prepaid check

COMPANY CREDIT CARD / CARD HOLDER Submit approved requisition form and receipt to Credit Card Holder

EMPLOYEE CREDIT CARD / CHECK Attach approved requisition form and receipt to employee's expense report for reimbursement

ULINE

1-800-295-5510

uline.com

8800 Military Road, Reno, NV 89506



DO#: 1007282961001

SHIPPING SUPPLY SPECIALISTS

SOLD TO:

SHIP 8 INC
45875 NORTHPORT LOOP E
FREMONT, CA 945386414

SHIP TO:

SHIP8
221 HANSON WAY
WOODLAND, CA 95776

Order #: 38220988

CUSTOMER NO.	PURCHASE ORDER NO.	SHIP VIA	ORDER DATE	TERMS	INVOICE DATE
4320560	25070747	DHE Transport	07/23/2025		07/23/2025

MODEL NUMBER	DESCRIPTION	QUANTITY			
		ORDERED	U/M	SHIPPED	BACK ORDERED
S-25533SFG-L	MLB WINDBREAKER - GIANTS L THIS ITEM AT NO CHARGE	1	EA	1	
S-4468	18X18X10 BOX 20/240	500	EA	500	

DO NOT DOUBLE STACK
DO NOT SEND CATALOGS

7/24/25
PRU

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.

ORDER PLACED BY: ALEX GONZALEZ

5306695991

R6

7/23/25 12:00 PM

7/23/25 9:39 AM

INTERNET

PACKING LIST



1-800-295-5510
 uline.com
 PO Box 88741 • Chicago, IL 60680-1741

INVOICE

ULINE FED ID#: 36-3684738

INVOICE #: 195688095

ORDER #: 38220988

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	25070747	DHE TRANSP	07/23/25	07/23/25	NET 30 DAYS	07/23/25
QTY ORDERED	U/M	BACK ORDERED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
500	EA		S-4468	18 X 18 X 10" CORRUGATED BOXES	2.44	1,220.00 T
1	EA		S-25533SFG-L	MLB WINDBREAKER - SAN FRANCISCO GIANTS, LARGE THIS ITEM AT NO CHARGE T DENOTES A TAXABLE LINE.	.00	.00

ORDER PLACED BY: ALEX GONZALEZ
 INTERNET PRO #: 338696404

SUB-TOTAL	SALES TAX	SHIPPING/HANDLING	AMOUNT DUE
1,220.00	97.60	.00	\$ 1,317.60

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	195688095	07/23/25	1,317.60

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

0432056001956880952507230001317601