

SHIP8, INC.

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

US

AP.SHIP8@SHIP8.COM

ORDER FROM

3

GRAINGER
DEPT.864582804
PALATINE, IL 60038-0001

SHIP TO

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

Page

1 OF 1

PO Date

07/28/2025

PO No.

25070776

Buyer

Purchasing Dept

Terms

Net 30 Days

FOB

FOB Origin

Ship Via

Best possible

Extended Price

Unit Price

UOM

Qty Ordered

Vendor Item Description

Vendor Item No.

Line No.

799UW7

Spectracide Wasp & Hornet Spray

25.00

Each

7.81

SM

Total Extended Price =



Purchase Requisition Form

DATE 7.28.25
 WHS LOCATION WDC
 DEPARTMENT Maintenance

SHIP8 INC.

SUPPLIER / VENDOR.

NAME Grainger
 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)
799UW7	Spectracide Wasp & Hornet Spray per can	\$ 7.81	25	\$ 195.25	Bees	
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
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		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
		\$ -		\$ -		
ESTIMATED TOTAL				\$ 195.25		

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: 7/28/25
 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 processing

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



PACKING LIST

FOR THE ONES WHO GET IT DONE

Click: www.grainger.com | Call: 1-800-GRAINGER (472-4643)

BOX ID U884260100

WW GRAINGER SAN FRANCISCO DC
2710 KEYSTONE PACIFIC PARKWAY
PATTERSON CA 95363-0000

Ship To

SHIP8 INC.
221 Hanson Way
Woodland CA 95776-6211

ATTN:

Sold To

SHIP8 INC.
45875 NORTHPORT LOOP E
FREMONT CA 94538-6414

PO Number	25070776
Delivery Number	6679586335
Account Number	888128022
Caller	ALEX GONZALEZ
Telephone	9168977622
PO Release Number	
Project/Job Number	
Department	
Order Date	07/28/2025
Ship Date	07/28/2025
Requisitioner	
Employee Contact	PICCLNT000
Carrier	FDX GROUND
Order Type	SH
Debit/Credit Code	Z001
Cartons Shipped	1

SPECIAL INSTRUCTIONS

Please reference DELIVERY NUMBER 6679586335 on all remittance and correspondence.

Your Order Number is: 1556527371

PO Line	Item #	Item Description	Quantity Shipped	Shipped from other location	Back ordered	Tax	Unit Price	Total
1	799UW7	Wasp/Hornet Killer, 18.5oz, Spray Can	25	0	0	T	7.90	197.50

7-30-25
OK
AD

Subtotal	197.50
Tax	15.80
Stand. Parcel Shipping	0.00
Other Shipping	0.00
Total	213.30

We'd love to hear your feedback about this order. Go to www.grainger.com/survey and tell us what you think.

THIS PURCHASE IS GOVERNED EXCLUSIVELY BY GRAINGER'S TERMS OF SALE, INCLUDING: (i) DISPUTE RESOLUTION REMEDIES, AND (ii) CERTAIN WARRANTY AND DAMAGES LIMITATIONS AND DISCLAIMERS IN EFFECT AT THE TIME OF THE ORDER, WHICH ARE INCORPORATED BY REFERENCE HEREIN. GRAINGER'S TERMS OF SALE ARE AVAILABLE AT WWW.GRAINGER.COM.

PRODUCT RETURN INSTRUCTIONS ARE AVAILABLE AT WWW.GRAINGER.COM/RETURNS

THESE ITEMS ARE SOLD FOR DOMESTIC CONSUMPTION IN THE UNITED STATES. IF EXPORTED, PURCHASER ASSUMES FULL RESPONSIBILITY FOR COMPLIANCE WITH US EXPORT CONTROLS.





2261 RINGWOOD AVE.
SAN JOSE, CA 95131-1717
www.grainger.com

ORIGINAL INVOICE

GRAINGER ACCOUNT NUMBER 888128022
INVOICE NUMBER 9587215568
INVOICE DATE 07/28/2025
DUE DATE 08/27/2025
AMOUNT DUE \$213.30

SHIP TO

SHIP8 INC.
221 Hanson Way
Woodland CA 95776-6211

PO NUMBER: 25070776
CALLER: ALEX GONZALEZ
CUSTOMER PHONE: 9168977622
ORDER NUMBER: 1556527371
INCO TERMS: FOB ORIGIN

BILL TO
SHIP8 INC
45875 NORTHPORT LOOP E
FREMONT CA 94538-6414

Pay invoices online at:
www.grainger.com/invoicing

THANK YOU! FEI NUMBER 36-1150280
FOR QUESTIONS ABOUT THIS INVOICE OR ACCOUNT CALL 1-800-472-4643

PO LINE #	ITEM #	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL
1	799UW7	WASP/HORNET KILLER,18.5OZ, SPRAY CAN MANUFACTURER # 97221 Delivery #6679586335 Date Shipped:07/28/2025 Carrier: FDX GROUND No:of Pkgs:1 Wt: 36.500 Trk #:469550629270 SHIPPED FROM: DC PATTERSON 004 2710 KEYSTONE PACIFIC PARKWAY,PATTERSON,CA 95363-0000	25	7.90	197.50

THIS PURCHASE IS GOVERNED EXCLUSIVELY BY GRAINGER'S TERMS OF SALE, INCLUDING: (I) DISPUTE RESOLUTION REMEDIES, AND (II) CERTAIN WARRANTY AND DAMAGES LIMITATIONS AND DISCLAIMERS IN EFFECT AT THE TIME OF THE ORDER, WHICH ARE INCORPORATED BY REFERENCE HEREIN. GRAINGER'S TERMS OF SALE ARE AVAILABLE AT WWW.GRAINGER.COM
PRODUCT RETURN INSTRUCTIONS ARE AVAILABLE AT WWW.GRAINGER.COM/RETURNS

INVOICE SUB TOTAL 197.50
TAX 15.80

These items are sold for domestic consumption. If exported, purchaser assumes full responsibility for export controls. Diversion contrary to US law prohibited.

PAY THIS INVOICE - PAYMENT TERMS Net 30 days after inv IN U.S. DOLLARS.

AMOUNT DUE \$213.30

PLEASE DETACH THIS PORTION AND RETURN WITH YOUR PAYMENT

BILL TO:

SHIP8 INC
45875 NORTHPORT LOOP E
FREMONT CA 94538-6414
UNITED STATES OF AMERICA

REMIT TO:

GRAINGER
DEPT. 864582804
PALATINE, IL 60038-0001

864582804958721556810000213301000158010000000100000025082710

X ACCOUNT NUMBER 888128022 DATE 07/28/2025 INVOICE NUMBER 9587215568 AMOUNT DUE \$213.30