

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.

25080938

PO Date

08/29/2025

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-13029W

4 X 6" DT MOBILE PRINTER LABELS,
WHITE, 105 LABELS PER ROLL

120.00

Each

8.00

9-2 JMW

Total Extended Price =



Purchase Requisition Form

SHIP8 INC.

DATE 8/28/25
 WHS LOCATION WDC
 DEPARTMENT Ecom

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)
		\$0		\$ -		
S-13029W	4x6 Wireless labels	\$8	120	\$ 960.00	5 cartons for Ecom	
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
ESTIMATED TOTAL				\$ 960.00		

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: 8/28/25
 DATE: 8/29/25
 DATE: _____
 DATE: _____

FOR OFFICE USE ONLY

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

PAYMENT METHOD: (Please check one)

OPEN ACCOUNT (VENDOR BILL) Provide REG # 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.

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)

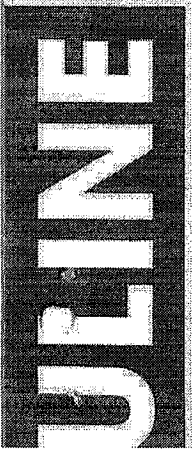
Email PDF to AP.SHIP8@SHIP8.com

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

S:\POD Public File



1-800-295-5510

uline.com

8800 Military Road, Reno, NV 89506

SHIPPING SUPPLY SPECIALISTS



DO#: 1009561135001

SOLD TO: SHIP 8 INC

45875 NORTHPORT LOOP E
FREMONT, CA 945386414

SHIP8

SHIP TO: 221 HANSON WAY
WOODLAND, CA 957766211

25080938

CUSTOMER NO.	PURCHASE ORDER NO.	SHIP VIA	ORDER DATE	INVOICE DATE	ORDER #
320560	-25080907 <i>CA</i>	FedEx Ground (California)	08/29/25	08/29/25	40880211
MODEL NUMBER	DESCRIPTION	QUANTITY	ORDERED	U/M	SHIPPED
-13029W	4X6 ZEBRA MOBILE PRINTER LBL-WHT	120	120	PL	120
I-9519	MAGIC BULLET THIS ITEM AT NO CHARGE	1	1	EA	1

***** DO NOT SEND CATALOGS *****

ZF 8/10/25

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
08/29/25 12:00

5306695991

0159-1

INTERNET

R6

PACKING LIST

Re: Uline PO

From Christine Jenkins <christine.jenkins@ship8.com>

Date Wed 9/3/2025 7:45 AM

To Alex Gonzalez <alex.gonzalez@ship8.com>

No worries!



SHIP8 INC.

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

O:912-373-7778 X 3825

<https://ship8.com/>

From: Alex Gonzalez <alex.gonzalez@ship8.com>
Sent: Wednesday, September 3, 2025 7:43 AM
To: Christine Jenkins <christine.jenkins@ship8.com>
Subject: Re: Uline PO

SMH.... sorry about that. Thank you Christine.



SHIP8 INC.

Alex Gonzalez
Director of Operations
2222 East Beamer Street
Woodland, CA 95776

O: 530-669-5991 C:916-897-7622

From: Christine Jenkins <christine.jenkins@ship8.com>

Sent: Wednesday, September 3, 2025 4:33 AM

To: Alex Gonzalez <alex.gonzalez@ship8.com>

Subject: Re: Uline PO

Hi Alex

FYI PO 25080938 you put 25080907 when you ordered, I manually changed it on the invoice.



SHIP8 INC.

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

O:912-373-7778 X 3825

<https://ship8.com/>

From: Christine Jenkins <christine.jenkins@ship8.com>

Sent: Friday, August 29, 2025 12:43 PM

To: Alex Gonzalez <alex.gonzalez@ship8.com>

Subject: Re: Uline PO

PO 25080938 is attached

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

O:912-373-7778 X 3825

<https://ship8.com/>



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

INVOICE

ULINE FED ID#: 36-3684738
 INVOICE #: 197322534
 ORDER #: 40880211

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

25080938 A.

CUSTOMER NO.	PURCHASE ORDER NO.	SHIP VIA	ORDER DATE	DATE SHIPPED	TERMS	INVOICE DATE
4320560	25080907	PARCEL	08/29/25	08/29/25	NET 30 DAYS	08/29/25
QTY ORDERED	U/M	BACK ORDERED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
120	RL		S-13029W	MOBILE PRINTER LABELS - 4 X 6", WHITE	8.00	960.00 T
1	EA		H-9519	MAGIC BULLET®	.00	.00
				THIS ITEM AT NO CHARGE		
				'T' DENOTES A TAXABLE LINE.		

ORDER PLACED BY: ALEX GONZALEZ
 INTERNET

SUB-TOTAL 960.00	SALES TAX 76.80	SHIPPING/HANDLING .00	AMOUNT DUE \$ 1,036.80
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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	197322534	08/29/25	1,036.80

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