

SHIP8, INC.

ATTN: ACCOUNTS PAYABLE
45875 NORTHPORT LOOP EAST
FREMONT, CA 94538
US
AP.SHIP8@SHIP8.COM

PO No. 25091022
PO Date 09/19/2025
Page 1 OF 1

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

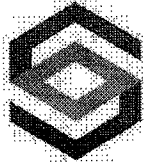
Ship Via

Best possible

Line No.	Vendor Item No.	Vendor Item Description	Qty Ordered	UOM	Unit Price	Extended Price
1	S-22635	12 X 10 X 5" LIGHTWEIGHT 32 ECT CORRUGATED BOXES	575.00	Each	0.87	

J.M. 9-22

Total Extended Price =



Purchase Requisition Form

SHIP8 INC.

SUPPLIER / VENDOR:

NAME
ADDRESS
CONTACT
TEL NO.

Uline

DATE 9/19/25
 WHS LOCATION WDC
 DEPARTMENT Ecom

SHIP TO:

NAME
ADDRESS
CONTACT
TEL NO.

SHIP8 INC
 221 Hanson Way
 Woodland, CA 95776
 Alex Gonzalez
 916-897-7622

ITEM	DESCRIPTION	UNIT PRICE	QTY	EXTENDED \$	REMARKS/PURPOSE	CODING (ACCT USE ONLY)
s-22635	12x10x5" Lightweight 32 ECT Corrugated Boxes	\$1	575	\$ 483.00	Ecom Packing Station	
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
		\$0		\$ -		
ESTIMATED TOTAL				\$ 483.00		

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: 9/19/25

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

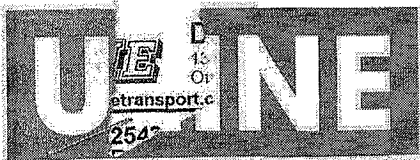
Submit approved requisition form and vendor invoice to Controller for COD/prepaid check

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



1-800-295-5510

uline.com

8800 Military Road, Reno, NV 89506



DO#: 1010667165001

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 #: 41814540

CUSTOMER NO.	PURCHASE ORDER NO.	SHIP VIA	ORDER DATE	TERMS	INVOICE DATE
4320560	25091022	DHE Transport	09/19/2025		09/19/2025

MODEL NUMBER	DESCRIPTION	QUANTITY			BACK ORDERED
		ORDERED	U/M	SHIPPED	
S-22139CAMO	CAMO LUNCH BOX THIS ITEM AT NO CHARGE	1	EA	1	
S-22635	12X10X5.32 ECT BOX 25/900	575	EA	575	

DO NOT DOUBLE STACK
DO NOT SEND CATALOGS

PN
9/22/25

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.

ORDER PLACED BY: ALEX GONZALEZ
9/19/25 12:00 PM 9/19/25 10:02 AM

5306695991
INTERNET

R6

PACKING LIST



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

INVOICE

ULINE FED ID#: 36-3684738
 INVOICE #: 198180279
 ORDER #: 41814540

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	25091022	DHE TRANSP	09/19/25	09/19/25	NET 30 DAYS	09/19/25
QTY ORDERED	U/M	BACK ORDERED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
575	EA		S-22635	12 X 10 X 5" LIGHTWEIGHT 32 ECT CORRUGATED BOXES	.84	483.00 T
1	EA		S-22139CAMO	ULINE LUNCH BOX - CAMO/BROWN THIS ITEM AT NO CHARGE	.00	.00
T' DENOTES A TAXABLE LINE.						

ORDER PLACED BY: ALEX GONZALEZ
 INTERNET PRO #: 349082420

SUB-TOTAL 483.00	SALES TAX 38.76	SHIPPING/HANDLING 116.96	AMOUNT DUE \$ 638.72
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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	198180279	09/19/25	638.72

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

0432056001981802792509190000638729