

**SHIP8, INC.**

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

**ORDER FROM**

101218

ATLANTIC PACKAGING  
 806 NORTH 23RD STREET  
 WILMINGTON, NC 28405  
 US

**SHIP TO**

SD2(2000),  
 SHIP8, INC.  
 ATTN: CHRISTINE JENKINS  
 550 NORTHPORT PARKWAY  
 PORT WENTWORTH, GA 31407  
 US

Line No.	Vendor Item No.	Vendor Item Description	Qty Ordered	UOM	Unit Price	Extended Price
1	6172648	PJ7 19X24 LARGE POLY MAILERS	108.00	Each	30.51	
2	6209735	PJ6 14.5X19 MED POLY MAILERS	100.00	Each	37.80	

*Inv. 9-24*

Buyer Purchasing Dept  
 Terms Net 30 Days  
 FOB Origin  
 Ship Via Best possible

Total Extended Price =



# SHIP8 INC.

DATE 9/18/2025  
 WHS LOCATION SD2  
 DEPARTMENT SHIPPING

SUPPLIER / VENDOR:

NAME ADDRESS **ATLANTIC PACKAGING**  
**PEAK SEASON READINESS**

CONTACT TEL NO.

SHIP TO:

NAME ADDRESS Ship8 Inc  
 550 Northport Parkway Port Wentworth, GA  
 31407

CONTACT TEL NO. Christine Jenkins  
 912-373-7778 ext 3751.

ITEM	DESCRIPTION	UNIT PRICE	QTY	EXTENDED \$\$	REMARKS/PURPOSE	CODING (ACCT USE ONLY)
6172648	PJ7 19X24 LARGE POLY MAILERS	30.51	108	3295.08	1 PALLET	
6209735	PJ 6 14.5X19 MED POLY MAILERS	37.80	100	3780.00	1 PALLET	
<b>ESTIMATED TOTAL</b>				<b>7075.08</b>		

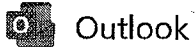
Check box if attaching quote

REQUESTER SIGNATURE: \_\_\_\_\_  
 WAREHOUSE DIRECTOR SIGNATURE: \_\_\_\_\_  
 SHIP8 PRESIDENT SIGNATURE: *Ron Capranos*  
 E&E CONTROLLER SIGNATURE: \_\_\_\_\_  
 IT AUTHORIZER (SOFTWARE & HARDWARE): \_\_\_\_\_

DATE: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 DATE: 9/18/2025  
 DATE: \_\_\_\_\_  
 DATE: \_\_\_\_\_

FOR OFFICE USE ONLY

ORDER DATE: _____	ORDERED BY: _____
ETA DATE: _____	ORDERED AMOUNT: _____
<b>PAYMENT METHOD: (Please check one)</b> <input type="checkbox"/> OPEN ACCOUNT (VENDOR BILL) Provide REQ # to vendor for invoicing, submit approved requisition form to A/P for payment processing. <input type="checkbox"/> COD / PREPAID Submit approved requisition form and vendor invoice to Controller for COD/prepaid check. <input type="checkbox"/> COMPANY CREDIT CARD / CARD HOLDER Submit approved requisition form and receipt to Credit Card Holder. <input type="checkbox"/> EMPLOYEE CREDIT CARD / CHECK Attach approved requisition form and receipt to employee's expense report for reimbursement.	



Outlook

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Re: 2025 9 18 SD2 Atlantic Req Form Peak Season

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From Jessica Jeng <jessica.jeng@jlahome.com>  
Date: Fri 9/19/2025 7:10 AM  
To Christine Jenkins <christine.jenkins@ship8.com>

Approved  
Sent from my iPhone

On Sep 19, 2025, at 2:57 AM, Christine Jenkins <Christine.Jenkins@ship8.com> wrote:

*Hi Jessica*

*Attached is a req form for 2 pallets of poly bags at SD2 needing your approval.*

<Outlook-f4qolmtq.png>

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

O:912-373-7778 X 3825  
<https://ship8.com/>

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**From:** Ron Capranos <ron.capranos@ship8.com>  
**Sent:** Thursday, September 18, 2025 1:18 PM  
**To:** Christine Jenkins <christine.jenkins@ship8.com>  
**Subject:** Re: 2025 9 18 SD2 Atlantic Req Form Peak Season

Here you go,

Thanks,

Ron

<Outlook-3uysh33w.png>

# Packing List

**Page Number:** 1 of 1  
**Warehouse:** 2000  
**Load ID:** LD-0235313  
**Shipment ID:** 1389292  
**Ship Date:** 9/19/2025  
**Customer ID:** C102711  
**Customer Alias:** ASHPAP  
**Order Number:** S1249069  
**Customer PO:** 759492  
**Customer Reference:** 25091013  
**Delivery Date:** 9/19/2025  
**Destination Code:** BS-Destination  
**Ship Via:** -  
**Delivery Terms:**  
**Incoterms:**  
**Trailer/Container:**  
**CES:** Chelsey Reed

**Ship To**  
 SHIP8 INC  
 550 NORTHPORT PARKWAY  
 (912) 373-7778  
 Port Wentworth, GA 31407  
 USA

**Ship From**  
 ATLANTIC PACKAGING  
 3131 Cincinnati Dayton Rd  
 Middletown, OH 45044  
 USA

**Delivery Notes**

## PACKLIST

Item Number	Description	Customer Part No.	Order Qty	Ship Qty	Unit	Weight
1087860	PJ-6 NO IND 14.5 x 19 + 2 250/CS 2MIL; 50% RC PNSP50006 - Cases/Bundles: 100 - Pallets: 1	6209735	100	100	CA	1,110.00 LB
1087863	PJ-7 NO IND 19 x 24 + 2 125/CS 2.25MIL; 50% RC PNSP50007 - Cases/Bundles: 108 - Pallets: 1	6172648	108	108	CA	1,077.84 LB
<b>Net Total Weight:</b>						2,187.84 LBS
<b>Pallet Weight:</b>						74.00 LBS
<b>Miscellaneous Weight:</b>						0.00 LBS
<b>Total Weight:</b>						2,261.84 LBS
<b>Total # of Cartons/Bundles:</b> <u>208</u>		<b>Total # of Pallets:</b> <u>2</u>				

**Comments**

CONTACT: CHRISTINE JENKINS - 912-235-1443, FOR RECEIVING

## PACKLIST

Rec  
 9-24-25  
 CA



**ATLANTIC**  
CORPORATION  
Packaging And Supply Solutions

INVOICE

Remit To: Atlantic Corporation  
P. O. Box 60002  
Charlotte, NC 28260  
910-343-0624

Bill To: SHIP8 INC  
45875 NORTHPORT LOOP EAST  
FREMONT CA 94538  
  
UNITED STATES OF AMERICA

Ship To: SHIP8 INC  
550 NORTHPORT PARKWAY  
PORT WENTWORTH GA 31407  
  
UNITED STATES OF AMERICA

Invoice  
90107590  
Date  
09/22/25

Co/Cust No	Order No	Customer PO#	Ter	Sls #	
1/0000213996	9N386/00	25091013	09	6936	
Ship Via	BEST WAY PPD	Terms	NET 30	Ref #	
Pay Type	Accounts Receivable				

Item / Description	U/M	Ordered	Shipped	Sell Price	Total
FOB Description: DELIVERED					
6172648	CS	108.000	108.000	30.51000 CS	3,295.08
POLY MAILER PJ7 NON-PRNT WHT					
19X24 125/CS					
6209735	CS	100.000	100.000	37.80000 CS	3,780.00
POLY MAILER PJ6 NON-PRNT WHT					
14.5 X 19 250/CS					
CONTACT: CHRISTINE JENKINS - 912-235-1443, FOR RECEIVING					

ALL SALES ARE SUBJECT TO ATLANTIC'S TERMS AND CONDITIONS. A  
COPY CAN BE OBTAINED BY WRITTEN REQUEST TO 806 NORTH 23RD ST.  
WILMINGTON, NC 28405, OR VIEWED AT [www.atlanticpkg.com](http://www.atlanticpkg.com).

INVOICE DUE: 10/22/25

SUBTOTAL:	7,075.08
TOTAL:	7,075.08 US\$
DEPOSIT:	
AMT DUE:	7,075.08 US\$