

SHIP8, INC.

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

AP.SHIP8@SHIP8.COM

ORDER FROM

100041

ODP BUSINESS SOLUTIONS, LLC
 PO BOX 29248
 PHOENIX, AR 85038-9248
 US

Buyer

Purchasing Dept

Terms

Net 30 Days

FOB

FOB Origin

Ship Via

Best possible

SHIP TO

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

PO No.

25101105

PO Date

10/06/2025

Page

1 OF 1

Line No.	Vendor Item No.	Vendor Item Description	Qty Ordered	UOM	Unit Price	Extended Price
1	MSCNOTES	K-Cup Coffee Pods, Medium Roast	4.00	Each	23.90	
2	MSCNOTES	Sharpies Permanent Markers	2.00	Each	14.18	
3	MSCNOTES	Post It Sticky Notes 3x3	1.00	Each	12.36	
4	MSCNOTES	Box Cutters 12/pk	1.00	Each	13.09	

10-7 EMI

Total Extended Price =

250101105



SHIP8 INC.

Purchase Requisition Fo

DATE 10/6/25
 WHS LOCATION WDC
 DEPARTMENT Administrative

SUPPLIER / VENDOR:

NAME ODP
 ADDRESS PO BOX 29248
Phoenix, AR 85038
 CONTACT
 TEL NO. 1-800-721-6592

SHIP TO:

NAME Ship8 INC
 ADDRESS 221 Hanson Way
Woodland, CA 95776
 CONTACT
 TEL NO. 530-669-5991

ITEM	DESCRIPTION	UNIT PRICE	QTY	EXTENDED \$	REMARKS/PURPOSE
	K-Cup Coffee Pods, Medium	\$23.90	4	\$ 95.60	
				\$ -	
	Sharpie King Size Permanent Marker, Black	\$14.18	2	\$ 28.36	
	Sticky Notes 3x3 yellow	\$12.36	1	\$ 12.36	
	box cutters 12 pk	\$13.09	1	\$ 13.09	
				\$ -	
				\$ -	
		\$0.00		\$ -	
		\$0.00		\$ -	
ESTIMATED TOTAL				\$ 149.41	

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: 10/6/25
 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

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

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



BUSINESS SOLUTIONS™

*** PACKING LIST ***

ODP Business Solutions, LLC
1-888-2OFFICE
6700 AUTOMALL PKWY
FREMONT, CA 94538

Order Number: 443203813001

Order Summary

Billing Address
SHIP 8 INC
45875 NORTHPORT LOOP E
FREMONT CA 94538-6414

Shipping Address
SHIP 8 INC
221 HANSON WAY
WOODLAND CA 95776-6211

Customer Information
Customer#: 70324916
Contact: ALEX GONZALEZ
Phone#: 53066695991

Comments

Carton Counts
Repack / Split Case 2
Full Case 0
Total 2

Additional Information
PO # 25101105
Route/Door: 362/51
Order Date: 06 - Oct - 2025
Delivery Date: 07 - Oct - 2025

Parent Order Number 443203813001

Item Details		Item Details		Item Details		
Line	Ordered	Shipped	Back Ordered	Description	Units	Carton ID
1	4	4	0	KGUP, HOUSE BLEND, POD, 70CT	CT	01370992
2	1	1	0	NOTE OD, 3X3, YLW, 18PK	PACK	01370992
3	1	1	0	CUTTER, BOX, 12PK, WHITE	PACK	01370992
4	2	2	0	MARKER, FELT, PERM, KING SIZE, DZ	DOZ	01370993

Please visit ODPBusiness.com for all order information including re-orders, invoice re-prints, paper replacement and quick easy returns.

PLEASE NOTE: Your orders will arrive in separate shipments, the ODP Business Solutions website.

443210809001 2025-10-07

PN
10/17/25



