

**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

**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	196517	PAPER,COPY,OD,CASE -	4.00	Each	52.18	

12-29 JMN.

Total Extended Price =



# Purchase Requisition Form

## SHIP8 INC.

DATE 12/23/25  
 WHS LOCATION WDC  
 DEPARTMENT Maintenance

NAME Office Depot  
 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)
196517	Boise 8.5x11 copy paper	\$52.18	4	\$ 208.72		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
				\$ -		
<b>ESTIMATED TOTAL</b>				<b>\$ 208.72</b>		

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: 12/23/25  
 DATE: \_\_\_\_\_  
 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)	<input type="checkbox"/> Provide REQ # to vendor for invoicing, submit approved requisition form to A/P for payment processing
<input type="checkbox"/> COD / PREPAID	<input type="checkbox"/> Submit approved requisition form and vendor invoice to Controller for COD/prepaid check
<input type="checkbox"/> COMPANY CREDIT CARD / CARD HOLDER	<input type="checkbox"/> Submit approved requisition form and receipt to Credit Card Holder
<input type="checkbox"/> EMPLOYEE CREDIT CARD / CHECK	<input type="checkbox"/> Attach approved requisition form and receipt to employee's expense report for reimbursement



