

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**CLAIMS
SETTLEMENT
REMITTANCE ADVICE
FOR UPS CUSTOMER**

0123911 01 RE 0.67 **AUTO T8 0 6059 31407-928650

-P23934 C07

SHIPPER #: 1X780R

DATE: 03/30/26

PAGE 1 OF 1



SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

SHIPPER INVOICE NO.	SHIPPER REFERENCE NO.	SHIPMENT DATE	PACKAGE TRACKING NO.	UPS CLAIM NO.	BILLED AMOUNT	PAYMENT AMOUNT	PMT CODE
N/A	76400111	03/18/26	1Z1X780R0396761878	0356676088	30.25	30.25	0
TOTALS					30.00	30.25	



1. Claim reimbursement adjusted to include UPS Shipping Charges.
2. Claim reimbursement adjusted to reflect the appropriate UPS Shipping Charges.
3. Claim reimbursement adjusted to reflect the value declared at time of shipment.
4. Claim reimbursement adjusted to reflect your actual cost, replacement cost, or the purchase price paid by the consignee.
5. Claim reimbursement adjusted to reflect the cost to repair damaged merchandise.

INCLUDES UPS PAYMENT AND ANY INSURANCE PAYMENT FOR EXCESS VALUE INSURANCE.

DETACH AND RETAIN THIS PORTION FOR YOUR RECORDS

ADVICE # 0006207015 ATTACHED

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**UPS
CLAIMS
SETTLEMENT**

Advice No. 0006207015

Issue Date: 03/30/26

DEPOSIT ADVICE ONLY

DEPOSITED INTO THE ACCOUNT OF: SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

Direct Deposit Banking Information		
Deposit Amount \$\$\$\$\$\$330.25	Transit No. ****0248	Account No. *****5189

If you plan to change your financial institution and / or account number, you must notify the Accounts Payable Department.

1X780R

NON - NEGOTIABLE

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**CLAIMS
SETTLEMENT
REMITTANCE ADVICE
FOR UPS CUSTOMER**

0117440 01 RE 0.67 **AUTO T6 0 6061 31407-928650

-P17457 C07



SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

SHIPPER #: 1X780R

DATE: 04/01/26

PAGE 1 OF 1



SHIPPER INVOICE NO.	SHIPPER REFERENCE NO.	SHIPMENT DATE	PACKAGE TRACKING NO.	UPS CLAIM NO.	BILLED AMOUNT	PAYMENT AMOUNT	PMT. CODE
N/A	356898717_74401	03/12/26	1Z1X780R0395289819	0357177142	35.00	17.06	0
TOTALS					35.00	17.06	



1. Claim reimbursement adjusted to include UPS Shipping Charges.
2. Claim reimbursement adjusted to reflect the appropriate UPS Shipping Charges.
3. Claim reimbursement adjusted to reflect the value declared at time of shipment.
4. Claim reimbursement adjusted to reflect your actual cost, replacement cost, or the purchase price paid by the consignee.
5. Claim reimbursement adjusted to reflect the cost to repair damaged merchandise.

INCLUDES UPS PAYMENT AND ANY INSURANCE PAYMENT FOR EXCESS VALUE INSURANCE.

DETACH AND RETAIN THIS PORTION FOR YOUR RECORDS

ADVICE # 0006210881 ATTACHED

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**UPS
CLAIMS
SETTLEMENT**

Advice No. 0006210881

Issue Date: 04/01/26

DEPOSIT ADVICE ONLY

DEPOSITED INTO THE ACCOUNT OF: SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

Direct Deposit Banking Information

Deposit Amount	Transit No.	Account No.
\$\$\$\$\$\$\$17.06	****0248	*****5189

If you plan to change your financial institution and / or account number, you must notify the Accounts Payable Department.

1X780R

NON - NEGOTIABLE

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**CLAIMS
SETTLEMENT
REMITTANCE ADVICE
FOR UPS CUSTOMER**

0116943 01 RE 0.67 **AUTO T3 0 6057 31407-928650

-P16959 C07

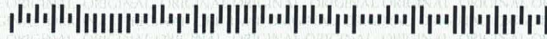


SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

SHIPPER #: 1X780R

DATE: 03/26/26

PAGE 1 OF 1



SHIPPER INVOICE NO.	SHIPPER REFERENCE NO.	SHIPMENT DATE	PACKAGE TRACKING NO.	UPS CLAIM NO.	BILLED AMOUNT	PAYMENT AMOUNT	PMT. CODE
N/A	76270321	02/23/26	1Z1X780R0392007673	0354678250	93.26	93.26	0
TOTALS					93.00	93.26	



1. Claim reimbursement adjusted to include UPS Shipping Charges.
2. Claim reimbursement adjusted to reflect the appropriate UPS Shipping Charges.
3. Claim reimbursement adjusted to reflect the value declared at time of shipment.
4. Claim reimbursement adjusted to reflect your actual cost, replacement cost, or the purchase price paid by the consignee.
5. Claim reimbursement adjusted to reflect the cost to repair damaged merchandise.

INCLUDES UPS PAYMENT AND ANY INSURANCE PAYMENT FOR EXCESS VALUE INSURANCE.

DETACH AND RETAIN THIS PORTION FOR YOUR RECORDS

ADVICE # 0006187428 ATTACHED

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**UPS
CLAIMS
SETTLEMENT**

Advice No. 0006187428

Issue Date: 03/26/26

DEPOSIT ADVICE ONLY

DEPOSITED INTO THE ACCOUNT OF: SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

Direct Deposit Banking Information		
Deposit Amount	Transit No.	Account No.
\$\$\$\$\$\$\$93.26	****0248	*****5189

If you plan to change your financial institution and / or account number, you must notify the Accounts Payable Department.

1X780R

NON - NEGOTIABLE

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**CLAIMS
SETTLEMENT
REMITTANCE ADVICE
FOR UPS CUSTOMER**

0116944 01 RE 0.67 **AUTO T3 0 6057 31407-928650 -P16960 C07



SHIPPER #: 1X780R

DATE: 03/26/26

PAGE 1 OF 1



SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

SHIPPER INVOICE NO.	SHIPPER REFERENCE NO.	SHIPMENT DATE	PACKAGE TRACKING NO.	UPS CLAIM NO.	BILLED AMOUNT	PAYMENT AMOUNT	PMT. CODE
N/A	215344296_74001	03/09/26	1Z1X780R0392771114	0355700018	70.00	37.00	0
TOTALS					70.00	37.00	



1. Claim reimbursement adjusted to include UPS Shipping Charges.
2. Claim reimbursement adjusted to reflect the appropriate UPS Shipping Charges.
3. Claim reimbursement adjusted to reflect the value declared at time of shipment.
4. Claim reimbursement adjusted to reflect your actual cost, replacement cost, or the purchase price paid by the consignee.
5. Claim reimbursement adjusted to reflect the cost to repair damaged merchandise.

INCLUDES UPS PAYMENT AND ANY INSURANCE PAYMENT FOR EXCESS VALUE INSURANCE.

DETACH AND RETAIN THIS PORTION FOR YOUR RECORDS

ADVICE # 0006195142 ATTACHED

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**UPS
CLAIMS
SETTLEMENT**

Advice No. 0006195142

Issue Date: 03/26/26

DEPOSIT ADVICE ONLY

DEPOSITED INTO THE ACCOUNT OF: SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

Direct Deposit Banking Information

Deposit Amount \$\$\$\$\$\$37.00	Transit No. ****0248	Account No. *****6189
--	--------------------------------	---------------------------------

If you plan to change your financial institution and / or account number, you must notify the Accounts Payable Department.

1X780R

NON - NEGOTIABLE

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**CLAIMS
SETTLEMENT
REMITTANCE ADVICE
FOR UPS CUSTOMER**

0116945 01 RE 0.67 **AUTO T3 0 6057 31407-928650 -P16961 C07



SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

SHIPPER #: 1X780R
DATE: 03/26/26
PAGE 1 OF 1



SHIPPER INVOICE NO.	SHIPPER REFERENCE NO.	SHIPMENT DATE	PACKAGE TRACKING NO.	UPS CLAIM NO.	BILLED AMOUNT	PAYMENT AMOUNT	PMT. CODE
N/A	98608666	03/02/26	1Z1X780R0392321314	0354220329	15.30	100.00	0
TOTALS					15.00	100.00	



1. Claim reimbursement adjusted to include UPS Shipping Charges.
2. Claim reimbursement adjusted to reflect the appropriate UPS Shipping Charges.
3. Claim reimbursement adjusted to reflect the value declared at time of shipment.
4. Claim reimbursement adjusted to reflect your actual cost, replacement cost, or the purchase price paid by the consignee.
5. Claim reimbursement adjusted to reflect the cost to repair damaged merchandise.

INCLUDES UPS PAYMENT AND ANY INSURANCE PAYMENT FOR EXCESS VALUE INSURANCE.

DETACH AND RETAIN THIS PORTION FOR YOUR RECORDS

ADVICE # 0006184546 ATTACHED

UPS/UPS CAPITAL INSURANCE AGENCY
PO BOX 1977
Scranton PA 18501

**UPS
CLAIMS
SETTLEMENT**

Advice No. 0006184546
Issue Date: 03/26/26

DEPOSIT ADVICE ONLY

DEPOSITED INTO THE ACCOUNT OF: SHIP8, INC.
550 NORTHPORT PKWY
PORT WENTWORTH GA 31407-9286

Direct Deposit Banking Information		
Deposit Amount	Transit No.	Account No.
\$\$\$\$\$\$100.00	****0248	*****5189

If you plan to change your financial institution and / or account number, you must notify the Accounts Payable Department.

1X780R

NON - NEGOTIABLE