

SHIP FROM

Name: **E & E COMPANY LTD**
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____ FOB:

Master Bill of Lading Number: 06757163000614554

SHIP TO

Name: **Kohls** DC#: XDSFS
 Div. _____
 Address: X-DOCK PERFORMANCE TEAM BLDG 6
 12816 SHOEMAKER AVE, XDSFS
 City/State/Zip: **SANTA FE SPRINGS, CA 90670**
 SID#: _____ FOB:

CARRIER NAME: Schneider

Trailer number: TA157280
 Seal number(s): 35529557

SCAC: SCNN
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

SPECIAL INSTRUCTIONS:

ME# 820260848

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
8:00 AM PM	9:30 AM PM	3:45 AM PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO			
					BOL#	DC#	Supplier#	
13432279	Dept#: 115	25	408.55	Y	N	06757163000613755	00875	
13431646	Dept#: 115	19	249.64	Y	N	06757163000613700	00830	
13231813	Dept#: 211	53	536.84	Y	N	06757163000613687	00830	
13497671	Dept#: 211	212	2642.61	Y	N	06757163000613694	00830	
13497671	Dept#: 211	236	2993.17	Y	N	06757163000613779	00875	
13431646	Dept#: 115	7	91.88	Y	N	06757163000613748	00860	
13431646	Dept#: 115	19	250.52	Y	N	06757163000613786	00875	
13431648	Dept#: 115	6	82.74	Y	N	06757163000614547	00860	
13497671	Dept#: 211	187	2354.04	Y	N	06757163000613731	00860	
13231813	Dept#: 211	44	444.30	Y	N	06757163000613724	00860	
13231813	Dept#: 211	30	296.85	Y	N	06757163000613762	00875	
13431648	Dept#: 115	3	48.48	Y	N	06757163000613793	00830	
13432279	Dept#: 115	38	602.24	Y	N	06757163000613670	00830	

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount \$ _____

Fee Terms: Collect: Prepaid:
 Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

[Signature] 8/25/21

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

[Signature] 8/25/21

SHIP FROM		Master Bill of Lading Number: 06757163000614554	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: Schneider	
Name:	Kohls	DC#:	XDSFS
		Div.	
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	Trailer number:	TA157280
		Seal number(s):	35529557
City/State/Zip:	SANTA FE SPRINGS, CA 90670	SCAC:	SCNN
SID#:		Pro Number:	
		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
ME# 820260848		AM PM	AM PM
		Driver Departure Time	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO	
						DC#	Supplier#
13432279	Dept#: 115	10	199.22	Y	N	06757163000613717	00860
13431648	Dept#: 115	5	69.74	Y	N	06757163000613816	00875
Grand Total		894	11270.82				

CARRIER INFORMATION										
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION			LTL ONLY	
Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360						NMFC #	CLASS			
93	ctns			1129.85		Bath Towel, Beach Towel			49390 Sub 4	175
762	ctns			9267.81		Comforters, Bedspreads			49017	200
39	ctns			873.16		Shower curtain			49385	77.5
Grand Total				894		Grand Total				

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <p style="text-align: right;">Shipper Signature</p>
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00860 Location #: 00860
Address:	221 Hanson Way	Address:	1600 North Business 45 Corsicana D.C., 00860
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Corsicana, TX 75110
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Load #: 820260848		Prepaid: Collect: X 3rd Party:	
Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13432279 Dept#: 115	10	199.22	Y N	
Grand Total	10	199.22		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	ctns			15.86		Bath Towel, Beach Towel	49390 Sub 4	175
8	ctns			183.36		Shower curtain	49385	77.5
10				199.22		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.


Appt Time:
In:
Out:
Driver Signature:

Order No.: 6150509 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13432279
 #00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/25/2021 Shipment No.: 300061371
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	60	5	60	5
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	36	3	36	3

Total Weight:	199.22
Total Quantity Ordered:	144
Total Cartons Ordered:	10
Total Quantity Shipped:	144
Total Cartons Shipped:	10

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Ecom DC-#00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive Winchester D. C., 00830
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester, VA 22602
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000613793		Trailer number: TA157280	
		Seal number(s): 35529557	
(402)06757163000613793		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 820260848			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
13431648 Dept#: 115	3	48.48	Y	N	EFC Master Pack
Grand Total	3	48.48			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	ctns			13.00		Bath Towel, Beach Towel	49390 Sub 4	175
2	ctns			35.48		Shower curtain	49385	77.5
3				48.48		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms:

Collect: Prepaid: Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6150489 Order Date: 07/23/2021 Customer: KOHLS ECOM DC-#00830 Customer PO No.: 13431648

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S ECOM FULFILLMENT N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/25/2021 Shipment No.: 300061379
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK-EFC	086569492906	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBFSC02	11BOMSPBFS C02-EFC	086569491947	Cole Lattice 13Pcs Set	EA	12	24	2	24	2

Total Weight:	48.48
Total Quantity Ordered:	48
Total Cartons Ordered:	3
Total Quantity Shipped:	48
Total Cartons Shipped:	3

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive Winchester D. C., 00830
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester, VA 22602
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Load #: 820260848		Prepaid: Collect: X 3rd Party:	
Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
13497671 Dept#: 211	212	2642.61	Y	N	
Grand Total	212	2642.61			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
212	ctns			2642.61		Comforters, Bedspreads	49017	200
212				2642.61		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms:

Collect:

Prepaid:

Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

By Shipper

By Driver

Freight Counted:

By Shipper

By Driver/pallets said to contain

By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6191057 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13497671
#00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/25/2021 Shipment No.: 300061369
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2981	086569339157	Q Jess 6 pcs Comforter Set	EA	1	20	20	20	20
N/A	KL10-2982	086569339164	K Jess 6 pcs Comforter Set	EA	1	13	13	13	13
N/A	KL10-3005	086569396716	Q Klein 6pcs Comforter Set	EA	1	22	22	22	22
N/A	KL10-3006	086569396723	K Klein 6pcs Comforter Set	EA	1	10	10	10	10
N/A	KL10-3146	086569472205	Q Felicity 6pcs Comforter Set	EA	1	24	24	24	24
N/A	KL10-3147	086569472212	K Felicity 6pcs Comforter Set	EA	1	20	20	20	20
N/A	KL10-3174	086569475213	Q Spindrift 6pcs Comforter Set	EA	1	3	3	3	3
N/A	KL10-3175	086569475220	K Spindrift 6pcs Comforter Set	EA	1	4	4	4	4
N/A	KL10-3216	086569361851	Q Becca Comforter Set	EA	1	31	31	31	31
N/A	KL10-3217	086569676788	K Becca Comforter Set	EA	1	12	12	12	12
N/A	KL10-3220	086569676818	Q Logan Comforter Set	EA	1	16	16	16	16
N/A	KL10-3221	086569676825	K Logan Comforter Set	EA	1	10	10	10	10
N/A	KL10-3223	086569676863	Q Clare Comforter Set	EA	1	17	17	17	17
N/A	KL10-3224	086569676870	K Clare Comforter Set	EA	1	10	10	10	10

Total Weight:	2642.61
Total Quantity Ordered:	212
Total Cartons Ordered:	212
Total Quantity Shipped:	212
Total Cartons Shipped:	212

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____
 PHONE: _____
 VENDOR: 000074879

Bill of Lading Number: 06757163000613687



CARRIER NAME: Schneider
 Responsible Acct.No: _____

SHIP TO

Name: Kohls Dist. Center - #00830 Location #: 00830
 Address: 300 Admiral Byrd Drive
 Winchester D. C., 00830
 City/State/Zip: Winchester, VA 22602
 CID#: 820260848

Trailer number: TA157280
 Seal number(s): 35529557

SCAC: SCNN
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: _____ Collect: X 3rd Party: _____

SPECIAL INSTRUCTIONS:
 Load #: 820260848
 Packing List is Attached

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
13231813 Dept#: 211	53	536.84	Y	N	
Grand Total	53	536.84			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
53	ctns			536.84		Comforters, Bedspreads	49017	200
53				536.84		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

COD Amount: _____
 Fee Terms: Collect: Prepaid:
 Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

 Shipper Signature

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
 Property described above is received in good order, except as noted.

Appt Time: _____
 In: _____
 Out: _____
 Driver Signature: _____

Order No.: 6191039 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13231813
#00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/25/2021 Shipment No.: 300061368
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	11SNBJOCSFQ	086569451408	F/Q Joplin Geo Comforter Mini	EA	1	18	18	18	18
N/A	11SNBJOCSKC	086569451422	K/CK Joplin Geo Comforter Mini	EA	1	13	13	13	13
N/A	11SNBPDCSFQ	086569452672	F/Q Lagos Tufted Dot -BLUSH	EA	1	14	14	14	14
N/A	11SNBPDCSKC	086569452689	K/CK Lagos Tufted Dot -BLUSH	EA	1	8	8	8	8

Total Weight:	536.84
Total Quantity Ordered:	53
Total Cartons Ordered:	53
Total Quantity Shipped:	53
Total Cartons Shipped:	53

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000613762



(402)06757163000613762

SHIP TO

Name: Kohls Dist. Center - #00875 Location #: 00875
 Address: 3030 Airport Road East
 Macon D.C., 00875
 City/State/Zip: Macon, GA 31216
 CID#: 820260848 FOB:

CARRIER NAME: Schneider
 Responsible Acct.No:
 Trailer number: TA157280
 Seal number(s): 35529557

SCAC: SCNN
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
 Address:
 City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS:
 Load #: 820260848
 Packing List is Attached

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
13231813 Dept#: 211	30	296.85	Y	N	
Grand Total	30	296.85			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
30	ctns			296.85		Comforters, Bedspreads	49017	200
30				296.85		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

COD Amount: _____
 Fee Terms: Collect: Prepaid:
 Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

 Shipper Signature

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded: Freight Counted:

By Shipper By Shipper
 By Driver By Driver/pallets said to contain
 By Driver By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
 Property described above is received in good order, except as noted.

Appt Time:
 In:
 Out:
 Driver Signature:

Order No.: 6191044 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13231813
 #00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/25/2021 Shipment No.: 300061376
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	11SNBJOCSFQ	086569451408	F/Q Joplin Geo Comforter Mini	EA	1	12	12	12	12
N/A	11SNBJOCSKC	086569451422	K/CK Joplin Geo Comforter Mini	EA	1	3	3	3	3
N/A	11SNBPDCSFQ -BLUSH	086569452672	F/Q Lagos Tufted Dot	EA	1	9	9	9	9
N/A	11SNBPDCSKC -BLUSH	086569452689	K/CK Lagos Tufted Dot	EA	1	6	6	6	6


Total Weight:	296.85
Total Quantity Ordered:	30
Total Cartons Ordered:	30
Total Quantity Shipped:	30
Total Cartons Shipped:	30

Order No.: 6191060 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13497671
#00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/25/2021 Shipment No.: 300061373
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2981	086569339157	Q Jess 6 pcs Comforter Set	EA	1	10	10	10	10
N/A	KL10-2982	086569339164	K Jess 6 pcs Comforter Set	EA	1	15	15	15	15
N/A	KL10-3005	086569396716	Q Klein 6pcs Comforter Set	EA	1	21	21	21	21
N/A	KL10-3006	086569396723	K Klein 6pcs Comforter Set	EA	1	14	14	14	14
N/A	KL10-3146	086569472205	Q Felicity 6pcs Comforter Set	EA	1	12	12	12	12
N/A	KL10-3147	086569472212	K Felicity 6pcs Comforter Set	EA	1	15	15	15	15
N/A	KL10-3174	086569475213	Q Spindrift 6pcs Comforter Set	EA	1	12	12	12	12
N/A	KL10-3175	086569475220	K Spindrift 6pcs Comforter Set	EA	1	14	14	14	14
N/A	KL10-3216	086569361851	Q Becca Comforter Set	EA	1	9	9	9	9
N/A	KL10-3217	086569676788	K Becca Comforter Set	EA	1	6	6	6	6
N/A	KL10-3220	086569676818	Q Logan Comforter Set	EA	1	4	4	4	4
N/A	KL10-3221	086569676825	K Logan Comforter Set	EA	1	4	4	4	4
N/A	KL10-3223	086569676863	Q Clare Comforter Set	EA	1	27	27	27	27
N/A	KL10-3224	086569676870	K Clare Comforter Set	EA	1	24	24	24	24

Total Weight:	2354.04
Total Quantity Ordered:	187
Total Cartons Ordered:	187
Total Quantity Shipped:	187
Total Cartons Shipped:	187

SHIP FROM		Bill of Lading Number: 06757163000613670
Name: E & E COMPANY LTD	 (402)06757163000613670	
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#:		
PHONE:		
VENDOR: 000074879	FOB: <input type="checkbox"/>	CARRIER NAME: Schneider
		Responsible Acct.No:

SHIP TO		Trailer number: TA157280
Name: Kohls Dist. Center - #00830	Location #: 00830	Seal number(s): 35529557
Address: 300 Admiral Byrd Drive		
	Winchester D. C., 00830	
City/State/Zip: Winchester, VA 22602		
CID#: 820260848	FOB: <input type="checkbox"/>	SCAC: SCNN
		Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Name:		
Address:		
City/State/Zip:	Prepaid:	Collect: X 3rd Party:
SPECIAL INSTRUCTIONS:	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 820260848		
Packing List is Attached		

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
13432279 Dept#: 115	38	602.24	Y N		
Grand Total	38	602.24			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
23	ctns			258.44		Bath Towel, Beach Towel	49390 Sub 4	175
15	ctns			343.80		Shower curtain	49385	77.5
38				602.24		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. _____ Shipper Signature
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
			Appt Time: In: Out: Driver Signature:

Order No.: 6150506 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13432279
 #00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/25/2021 Shipment No.: 300061367
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT01	11SNMEDWHT01	086569491985	Spa Border Bath Towel	EA	24	72	3	72	3
11SNMEDWHT02	11SNMEDWHT02	086569492029	Spa Waffle Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	168	7	168	7
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	96	4	96	4
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	96	4	96	4
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	48	2	48	2
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	72	6	72	6
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	108	9	108	9

Total Weight:	602.24
Total Quantity Ordered:	732
Total Cartons Ordered:	38
Total Quantity Shipped:	732
Total Cartons Shipped:	38

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Ecom DC-#00860 Location #: 00860
Address:	221 Hanson Way	Address:	1600 North Business 45 Corsicana D.C., 00860
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Corsicana, TX 75110
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Load #: 820260848		Prepaid: Collect: X 3rd Party:	
Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13431648 Dept#: 115	6	82.74	Y N	EFC Master Pack
Grand Total	6	82.74		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		5	ctns	65.00		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.74		Shower curtain	49385	77.5
1		6		132.74		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

By Shipper

By Driver

Freight Counted:

By Shipper

By Driver/pallets said to contain

By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6150493 Order Date: 07/23/2021 Customer: KOHLS ECOM DC-#00860 Customer PO No.: 13431648

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S ECOM FULFILLMENT N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00860 1600 NORTH BUSINESS 45 CORSICANA D.C. CORSICANA, TX 75110 US	Shipping Date: 08/25/2021 Shipment No.: 300061454
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT012 PCK	11BOMSPBFHT 012PCK-EFC	086569492890	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK-EFC	086569492906	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBFSC02	11BOMSPBFS C02-EFC	086569491947	Cole Lattice 13Pcs Set	EA	12	12	1	12	1
11BOMSPBGHT01	11BOMSPBGH T01-EFC	086569492876	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBGHT02	11BOMSPBGH T02-EFC	086569492883	2Pk Hand Towel	EA	24	48	2	48	2

Total Weight:	82.74
Total Quantity Ordered:	132
Total Cartons Ordered:	6
Total Quantity Shipped:	132
Total Cartons Shipped:	6

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00860 Location #: 00860
Address:	221 Hanson Way	Address:	1600 North Business 45 Corsicana D.C., 00860
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Corsicana, TX 75110
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Load #: 820260848		Prepaid: Collect: X 3rd Party:	
Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

Bill of Lading Number: 06757163000613724



(402)06757163000613724

CARRIER NAME: Schneider

Responsible Acct.No:

Trailer number: TA157280

Seal number(s): 35529557

SCAC: SCNN

Pro Number:

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13231813 Dept#: 211	44	444.30	Y N	
Grand Total	44	444.30		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
44	ctns			444.30		Comforters, Bedspreads	49017	200
44				444.30		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature _____

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper
 By Driver

Freight Counted:

 By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6191042 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13231813
#00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/25/2021
			Shipment No.: 300061372

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	11SNBJOCSFQ	086569451408	F/Q Joplin Geo Comforter Mini	EA	1	21	21	21	21
N/A	11SNBJOCSKC	086569451422	K/CK Joplin Geo Comforter Mini	EA	1	10	10	10	10
N/A	11SNBPDCSFQ	086569452672	F/Q Lagos Tufted Dot -BLUSH	EA	1	10	10	10	10
N/A	11SNBPDCSKC	086569452689	K/CK Lagos Tufted Dot -BLUSH	EA	1	3	3	3	3

Total Weight:	444.3
Total Quantity Ordered:	44
Total Cartons Ordered:	44
Total Quantity Shipped:	44
Total Cartons Shipped:	44

Order No.: 6150511 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13432279
#00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/25/2021 Shipment No.: 300061375
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT01	11SNMEDWHT01	086569491985	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWHT02	11SNMEDWHT02	086569492029	Spa Waffle Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	48	2	48	2
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	72	6	72	6
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	72	6	72	6

Total Weight:	408.55
Total Quantity Ordered:	456
Total Cartons Ordered:	25
Total Quantity Shipped:	456
Total Cartons Shipped:	25

Date: 8/25/2021 3:35:09 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00860 Location #: 00860
Address:	221 Hanson Way	Address:	1600 North Business 45 Corsicana D.C., 00860
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Corsicana, TX 75110
SID#:		CID#:	820260848
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000613748		CARRIER NAME: Schneider	
		Responsible Acct.No:	
(402)06757163000613748		Trailer number: TA157280	
		Seal number(s): 35529557	
		SCAC: SCNN	
		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	
Address:		Collect: X	
City/State/Zip:		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached	
Load #: 820260848		(check box) underlying Bills of Lading	
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13431646 Dept#: 115	7	91.88	Y N	
Grand Total	7	91.88		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	ctns			91.88		Bath Towel, Beach Towel	49390 Sub 4	175
7				91.88		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6150454 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13431646 #00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/25/2021 Shipment No.: 300061374
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT012 PCK	11BOMSPBFHT 012PCK	086569492890	2Pk Hand Towel	EA	24	48	2	48	2
11BOMSPBFHT01P CK	11BOMSPBFHT 01PCK	086569492937	6Pk Wash Cloth	EA	24	24	1	24	1
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK	086569492906	2Pk Hand Towel	EA	24	48	2	48	2
11BOMSPBGHT01	11BOMSPBGH T01	086569492876	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBGHT02	11BOMSPBGH T02	086569492883	2Pk Hand Towel	EA	24	24	1	24	1

Total Weight:	91.88
Total Quantity Ordered:	168
Total Cartons Ordered:	7
Total Quantity Shipped:	168
Total Cartons Shipped:	7

Date: 8/25/2021 3:35:13 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000613786	
Name:	E & E COMPANY LTD	 (402)06757163000613786	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776	CARRIER NAME: Schneider	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: TA157280	
VENDOR: 000074879	FOB: <input type="checkbox"/>	Seal number(s): 35529557	
SHIP TO		SCAC: SCNN	
Name:	Kohls Dist. Center - #00875 Location #: 00875	Pro Number:	
Address:	3030 Airport Road East	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
	Macon D.C., 00875	Prepaid: Collect: X 3rd Party:	
City/State/Zip:	Macon, GA 31216	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
CID#: 820260848	FOB: <input type="checkbox"/>		
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 820260848			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13431646 Dept#: 115	19	250.52	Y N	
Grand Total	19	250.52		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
19	ctns			250.52		Bath Towel, Beach Towel	49390 Sub 4	175
19				250.52		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:

Driver Signature:

Order No.: 6150462 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13431646
#00875

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	08/25/2021
			Shipment No.: 300061378


Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT012 PCK	11BOMSPBFHT 012PCK	086569492890	2Pk Hand Towel	EA	24	120	5	120	5
11BOMSPBFHT01P CK	11BOMSPBFHT 01PCK	086569492937	6Pk Wash Cloth	EA	24	48	2	48	2
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK	086569492906	2Pk Hand Towel	EA	24	72	3	72	3
11BOMSPBGHT01	11BOMSPBGH T01	086569492876	2Pk Hand Towel	EA	24	96	4	96	4
11BOMSPBGHT02	11BOMSPBGH T02	086569492883	2Pk Hand Towel	EA	24	72	3	72	3
11BOMSPBGHT03	11BOMSPBGH T03	086569492913	6Pk Wash Cloth	EA	24	48	2	48	2

Total Weight:	250.52
Total Quantity Ordered:	456
Total Cartons Ordered:	19
Total Quantity Shipped:	456
Total Cartons Shipped:	19

Date: 8/25/2021 3:35:17 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive Winchester D. C., 00830
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester, VA 22602
SID#:		CID#:	820260848 FOB: <input type="checkbox"/>
PHONE:			
VENDOR:	000074879 FOB: <input type="checkbox"/>		
Bill of Lading Number: 06757163000613700		Trailer number: TA157280	
		Seal number(s): 35529557	
(402)06757163000613700		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X 3rd Party:	
SPECIAL INSTRUCTIONS: Load #: 820260848 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13431646 Dept#: 115	19	249.64	Y N	
Grand Total	19	249.64		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
19	ctns			249.64		Bath Towel, Beach Towel	49390 Sub 4	175
19				249.64		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper
 By Driver

Freight Counted:

 By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Appt Time:

In:

Out:


Driver Signature:

Order No.: 6150441 Order Date: 07/23/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13431646
#00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/25/2021 Shipment No.: 300061370
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT012 PCK	11BOMSPBFHT 012PCK	086569492890	2Pk Hand Towel	EA	24	96	4	96	4
11BOMSPBFHT01P CK	11BOMSPBFHT 01PCK	086569492937	6Pk Wash Cloth	EA	24	24	1	24	1
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK	086569492906	2Pk Hand Towel	EA	24	96	4	96	4
11BOMSPBGHT01	11BOMSPBGH T01	086569492876	2Pk Hand Towel	EA	24	96	4	96	4
11BOMSPBGHT02	11BOMSPBGH T02	086569492883	2Pk Hand Towel	EA	24	96	4	96	4
11BOMSPBGHT03	11BOMSPBGH T03	086569492913	6Pk Wash Cloth	EA	24	48	2	48	2

Total Weight:	249.64
Total Quantity Ordered:	456
Total Cartons Ordered:	19
Total Quantity Shipped:	456
Total Cartons Shipped:	19

SHIP FROM		Bill of Lading Number: 06757163000613816	
Name: E & E COMPANY LTD		 (402)06757163000613816	
Address: 221 Hanson Way		CARRIER NAME: Schneider	
City/State/Zip: Woodland, CA 95776		Responsible Acct.No:	
SID#:		Trailer number: TA157280	
PHONE:		Seal number(s): 35529557	
VENDOR: 000074879	FOB: <input type="checkbox"/>	SCAC: SCNN	
SHIP TO		Pro Number:	
Name: Kohls Ecom DC-#00875	Location #: 00875		
Address: 3030 Airport Road East			
City/State/Zip: Macon D.C., 00875			
CID#: 820260848	FOB: <input type="checkbox"/>		
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:		Prepaid: Collect: X 3rd Party:	
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Load #: 820260848 Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
13431648 Dept#: 115	5	69.74	Y N	EFC Master Pack	
Grand Total	5	69.74			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	ctns			52.00		Bath Towel, Beach Towel	49390 Sub 4	175
1	ctns			17.74		Shower curtain	49385	77.5
5				69.74		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount: _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. <i>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

Order No.: 6150496 Order Date: 07/23/2021 Customer: KOHLS ECOM DC-#00875 Customer PO No.: 13431648

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS ECOM FULFILLMENT N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/25/2021 Shipment No.: 300061381
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBFHT012 PCK	11BOMSPBFHT 012PCK-EFC	086569492890	2Pk Hand Towel	EA	24	24	1	24	1
11BOMSPBFHT02P CK	11BOMSPBFHT 02PCK-EFC	086569492906	2Pk Hand Towel	EA	24	48	2	48	2
11BOMSPBFSC02	11BOMSPBFS C02-EFC	086569491947	Cole Lattice 13Pcs Set	EA	12	12	1	12	1
11BOMSPBGHT02	11BOMSPBGH T02-EFC	086569492883	2Pk Hand Towel	EA	24	24	1	24	1

Total Weight:	69.74
Total Quantity Ordered:	108
Total Cartons Ordered:	5
Total Quantity Shipped:	108
Total Cartons Shipped:	5

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000613779

 (402)06757163000613779

SHIP TO
 Name: Kohls Dist. Center - #00875 Location #: 00875
 Address: 3030 Airport Road East
 Macon D.C., 00875
 City/State/Zip: Macon, GA 31216
 CID#: 820260848 FOB:

CARRIER NAME: Schneider
 Responsible Acct.No:
 Trailer number: TA157280
 Seal number(s): 35529557

SCAC: SCNN
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name:
 Address:
 City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
 Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS:
 Load #: 820260848
 Packing List is Attached

Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13497671 Dept#: 211	236	2993.17	Y N	
Grand Total	236	2993.17		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
236	ctns			2993.17		Comforters, Bedspreads	49017	200
236				2993.17		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount: _____
 Fee Terms: Collect: Prepaid:
 Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

 Shipper Signature

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
 Property described above is received in good order, except as noted.
 Appt Time:
 In:
 Out:
 Driver Signature:

Order No.: 6191062 Order Date: 08/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13497671
#00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. (STORE) N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/25/2021 Shipment No.: 300061377
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL10-2981	086569339157	Q Jess 6 pcs Comforter Set	EA	1	15	15	15	15
N/A	KL10-2982	086569339164	K Jess 6 pcs Comforter Set	EA	1	19	19	19	19
N/A	KL10-3005	086569396716	Q Klein 6pcs Comforter Set	EA	1	22	22	22	22
N/A	KL10-3006	086569396723	K Klein 6pcs Comforter Set	EA	1	34	34	34	34
N/A	KL10-3146	086569472205	Q Felicity 6pcs Comforter Set	EA	1	11	11	11	11
N/A	KL10-3147	086569472212	K Felicity 6pcs Comforter Set	EA	1	12	12	12	12
N/A	KL10-3174	086569475213	Q Spindrift 6pcs Comforter Set	EA	1	17	17	17	17
N/A	KL10-3175	086569475220	K Spindrift 6pcs Comforter Set	EA	1	13	13	13	13
N/A	KL10-3216	086569361851	Q Becca Comforter Set	EA	1	12	12	12	12
N/A	KL10-3217	086569676788	K Becca Comforter Set	EA	1	4	4	4	4
N/A	KL10-3220	086569676818	Q Logan Comforter Set	EA	1	4	4	4	4
N/A	KL10-3221	086569676825	K Logan Comforter Set	EA	1	4	4	4	4
N/A	KL10-3223	086569676863	Q Clare Comforter Set	EA	1	42	42	42	42
N/A	KL10-3224	086569676870	K Clare Comforter Set	EA	1	27	27	27	27

Total Weight:	2993.17
Total Quantity Ordered:	236
Total Cartons Ordered:	236
Total Quantity Shipped:	236
Total Cartons Shipped:	236