

Date: 8/5/2021 1:57:49 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000608324
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: KOHL BACKHAUL
Name:	Kohls Dist. Center - #00885	DC#: 00885
		Div.
Address:	2065 Keystone Pacific Parkway	Trailer number: G14278
	Patterson D.C., 00885	Seal number(s): 35529574
City/State/Zip:	Patterson, CA 95363	SCAC: 885G
SID#:	FOB: <input type="checkbox"/>	Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
ME# 819016130		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	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#
13431630 Dept#: 115	5	65.88	Y	N	06757163000603893	00885	
13231811 Dept#: 211	58	599.23	Y	N	06757163000603985	00885	
Grand Total	63	665.11					

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	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>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
3	Pallet			150.00		Pallet		70
		5	ctns	65.88		Bath Towel, Beach Towel	49390 Sub 4	175
		58	ctns	599.23		Comforters, Bedspreads	49017	200
3				815.11		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.


Signature
 8/5/21

REWSK 8-5-21

Date: 8/5/2021 1:57:45 PM

Bill Of Lading

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SHIP FROM		Bill of Lading Number: 06757163000603893	
Name:	E & E COMPANY LTD	 (402)06757163000603893	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:	000074879	FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: KOHL BACKHAUL	
Name:	Kohls Dist. Center - #00885	Location #:	00885
Address:	2065 Keystone Pacific Parkway		
	Patterson D.C., 00885		
City/State/Zip:	Patterson, CA 95363		
CID#:	819016130	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Load #: 819016130	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
13431630 Dept#: 115	5	65.88	Y N	
Grand Total	5	65.88		

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(e) of NMFC Item 360</small>	PACKAGE	
	QTY	TYPE				NMFC #	CLASS
1	Pallet		50.00		Pallet		
		5	ctns	65.88	Bath Towel, Beach Towel	49390 Sub 4	175
1		5		115.88	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.: 6111684 Order Date: 07/06/2021 Customer: KOHLS DIST. CENTER - #00885 Customer PO No.: 13431630

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 - #00885 2065 KEYSTONE PACIFIC PARKWAY PATTERSON D.C. PATTERSON, CA 95363 US	Shipping Date: 08/05/2021 Shipment No.: 300060389
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11BOMSPBGHT01	11BOMSPBGH T01	086569492876	2Pk Hand Towel	EA	24	48	2	48	2
11BOMSPBGHT03	11BOMSPBGH T03	086569492913	6Pk Wash Cloth	EA	24	24	1	24	1

Total Weight:	65.88
Total Quantity Ordered:	120
Total Cartons Ordered:	5
Total Quantity Shipped:	120
Total Cartons Shipped:	5

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Bill Of Lading

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SHIP FROM		Bill of Lading Number: 06757163000603985
Name:	E & E COMPANY LTD	 (402)06757163000603985
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:		
PHONE:		
VENDOR:	000074879	FOB: <input type="checkbox"/>
SHIP TO		CARRIER NAME: KOHL BACKHAUL
Name:	Kohls Dist. Center - #00885	Location #: 00885
Address:	2065 Keystone Pacific Parkway	
	Patterson D.C., 00885	
City/State/Zip:	Patterson, CA 95363	
CID#:	819016130	FOB: <input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Trailer number: G14278
Name:		Seal number(s): 35529574
Address:		SCAC: 885G
City/State/Zip:		Pro Number:
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Load #: 819016130		Prepaid: Collect: X 3rd Party:
Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
13231811 Dept#: 211	58	599.23	Y N	
Grand Total	58	599.23		

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	Pallet			100.00		Pallet		
		58	ctns	599.23		Comforters, Bedspreads	49017	200
2		58		699.23		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.: 6133102 Order Date: 07/15/2021 Customer: KOHLS DIST. CENTER - Customer PO No.: 13231811
#00885

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 - #00885 2065 KEYSTONE PACIFIC PARKWAY PATTERSON D.C. PATTERSON, CA 95363 US	Shipping Date: 08/05/2021 Shipment No.: 300060398
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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	23	23	23	23
N/A	11SNBJOCSKC	086569451422	K/CK Joplin Geo Comforter Mini	EA	1	21	21	21	21
N/A	11SNBPDCSFQ	086569452672	F/Q Lagos Tufted Dot -BLUSH	EA	1	11	11	11	11
N/A	11SNBPDCSKC	086569452689	K/CK Lagos Tufted Dot -BLUSH	EA	1	3	3	3	3

Total Weight:	599.23
Total Quantity Ordered:	58
Total Cartons Ordered:	58
Total Quantity Shipped:	58
Total Cartons Shipped:	58