

Date: 7/12/2022 9:11:36 AM

Master Bill Of Lading

SHIP FROM

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

Master Bill of Lading Number: 06757163000711611

SHIP TO

Customer Code: **HGART**
 Name: **GILBERT WEST - POMONA**
 Address: **2849 FICUS STREET**
 City/State/Zip: **POMONA, CA 91766**
 SID#: _____ FOB:

CARRIER NAME: **WESTERN EXPRESS**

Trailer number: 310022
 Seal number(s): 44369284

SCAC: **WSXI**
 Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

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

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

SPECIAL INSTRUCTIONS:

Load #: 641039

MASTER BILL OF LANDING: WITH ATTACHED
 UNDERLYING BILLS OF LANDING

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
1:00 AM	8:10 AM	9:25 AM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO	
			Y	N	BOL#	DC#
40-225714DEPT#48	262	8262.20	Y	N	06757163000711598	884
50-225714DEPT#48	88	2702.10	Y	N	06757163000711604	885
Grand Total	350	10964.30				

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
26	Pallet			1300.00		Pallet		70
		350	ctns	10964.30		Framed Goods	76580 Sub 5	125
26				12264.30		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.

[Signature] 7/12/22

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] 7/12/22

Date: 7/12/2022 9:11:28 AM

Bill Of Lading

Page 1 of 1

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 PHONE: (530)669-5991
 VENDOR:

Bill of Lading Number: 06757163000711598



SHIP TO

Name: HomeGoods Distribution Center
 #884
 Address: 125 LOGISTICS CENTER PKWY
 City/State/Zip: JEFFERSON, GA 30549
 CID#: FOB:
 Dept: 48

CARRIER NAME: WESTERN EXPRESS

Responsible Acct.No:
 Trailer number: 310022
 Seal number(s): 44369284

SCAC: WSXI

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:

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

SPECIAL INSTRUCTIONS:

Load #: 641039
 Packing List is Attached

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
40-225714DEPT#48	262	8262.20	Y N	
Grand Total	262	8262.20		

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	Pallet			950.00		Pallet		
		262	ctns	8262.20		Framed Goods	76580 Sub 5	125
19		262		9212.20		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.



Packing List

Vendor Name: E & E COMPANY LTD
 Vendor Phone:
 Ship Date: 07/12/2022

Ship To: 884
 HOMEGOODS DISTRIBUTION
 CENTER #884
 125 LOGISTICS CENTER PKWY
 JEFFERSON, GA 30549
 Customer PO #: 40-225714DEPT#48
 Dept. #: 48

Authorization #:
 Carrier Name: WESTERN EXPRESS
 Carrier Truck #: 310022
 Seal #: 44369284

Page-Line No.	Item #	Description	Color	Preticketed	Store Ready Pack	Vendor Pack	Nest Code	Master Carton	Multi Carton (Y/N)	Units Ordered	Units Shipped	# of Cartons
1	HG95B-3070	4010 4pc set Blue Garden Plywd	Multi	No		2		No	No	142	142	71
2	HG95B-3071	4010 4pc set Natural Mineral P	Multi	No		2		No	No	52	52	26
3	HG95C-2209	Heavy Texture -7120 Mercitu	Multi	No		2		No	No	60	60	30
4	HG95C-2667	4848 Golden Wave 70	Multi	No		2		No	No	80	80	40
5	HG95C-2687	7120 Twilight Rains Ht	Multi	No		2		No	No	60	60	30
6	HG95C-2690	4848 White Floral Explosion70	Multi	No		2		No	No	80	80	40
7	HG95C-3678	3060 (4836) Metamorphosis Ht F	Multi	No		2		No	No	160	160	80
8	HG95C-3679	3060 (3648) Blush Bliss (Ht) F	Multi	No		2		No	No	30	30	15

Total Units Shipped: 664
 Total Cartons: 262
 Pallets: 19

Date: 7/12/2022 9:11:31 AM

Bill Of Lading

Page 1 of 1

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 PHONE: (530)669-5991
 VENDOR:

Bill of Lading Number: 06757163000711604



SHIP TO

Name: HomeGoods Distribution Center
 #885
 Address: 1415 BLUE HILL AVE
 City/State/Zip: BLOOMFIELD, CT 06002
 CID#: FOB:
 Dept: 48

CARRIER NAME: WESTERN EXPRESS

Responsible Acct.No:

Trailer number: 310022

Seal number(s): 44369284

SCAC: W SXI

Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
 Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Load #: 641039

Packing List is Attached

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

Prepaid: Collect: X 3rd Party:

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

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
50-225714DEPT#48	88	2702.10	Y	N	
Grand Total	88	2702.10			

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
7	Pallet			350.00		Pallet		
		88	ctns	2702.10		Framed Goods	76580 Sub 5	125
7		88		3052.10		Grand Total		

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 "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.



Packing List

Vendor Name: E & E COMPANY LTD
 Vendor Phone:

Ship Date: 07/12/2022

Authorization #:

WESTERN EXPRESS

Ship To: 885
 HOMEGOODS DISTRIBUTION
 CENTER #885
 1415 BLUE HILL AVE
 BLOOMFIELD, CT 06002

Customer PO #: 50-225714DEPT#48
 Dept. #: 48

Carrier Name: 310022
 Carrier Truck #: 44369284
 Seal #:

Page-Line No.	Item #	Description	Color	Preticketed	Store Ready Pack	Vendor Pack	Nest Code	Master Carton	Multi Carton (Y/N)	Units Ordered	Units Shipped	# of Cartons
1	HG95B-3070	4010 4pc set Blue Garden Plywd	Multi	No		2		No	No	42	42	21
2	HG95B-3071	4010 4pc set Natural Mineral P	Multi	No		2		No	No	16	16	8
3	HG95C-2209	Heavy Texture -7120 Mercifu	Multi	No		2		No	No	42	42	21
4	HG95C-2667	4848 Golden Wave 70	Multi	No		2		No	No	12	12	6
5	HG95C-2687	7120 Twilight Rains Ht	Multi	No		2		No	No	42	42	21
6	HG95C-2690	4848 White Floral Explosion 70	Multi	No		2		No	No	12	12	6
7	HG95C-3678	3060 (4836) Metamorphosis Ht F	Multi	No		2		No	No	22	22	11
8	HG95C-3679	3060 (3648) Blush Bliss (Ht) F	Multi	No		2		No	No	42	42	21

Total Units Shipped: 230
 Total Cartons: 88
 Pallets: 7