


Date: 9/28/2022 8:17:52 AM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757168000803601
Name: E & E COMPANY LTD	Address: 311 International Trade Pkwy	 (402)06757168000803601
City/State/Zip: Port Wentworth, GA 31407	PHONE: 912-373-7778	
VENDOR: 879816		
SHIP TO		
Name: SmallPackage	Address: SmallPackage	CARRIER NAME: UPS
City/State/Zip: N/A, N/A	CID#: FOB: <input type="checkbox"/>	Responsible Acct.No:
Dept:		Trailer number: 184713
THIRD PARTY FREIGHT CHARGES BILL TO:		Seal number(s): 36575710
Name:	Address:	SCAC: UPSG
City/State/Zip:		Pro Number:
SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
		Prepaid: Collect: 3rd Party: X
		<input type="checkbox"/> Master Bill of Lading: with attached 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
47928920	1	32.24	Y N	
47928929	9	133.24	Y N	
47928934	5	118.66	Y N	
47928925	3	119.19	Y N	
47928939	15	299.20	Y N	
47928927	1	14.98	Y N	
47928933	5	149.22	Y N	
47928923	1	32.24	Y N	
47928926	2	64.51	Y N	
47928938	3	71.91	Y N	
47928931	11	165.68	Y N	
47928937	8	103.14	Y N	
47928919	1	19.82	Y N	

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:
 *This 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
 9/28/22		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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Page 2 of 2

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Name:	E & E COMPANY LTD	 (402)06757168000803601
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City/State/Zip:	Port Wentworth, GA 31407	
PHONE:	912-373-7778	
VENDOR:	879816	CARRIER NAME: UPS
SHIP TO		Responsible Acct.No:
Name:	SmallPackage	Trailer number: 184713
Address:	SmallPackage	Seal number(s): 36575710
City/State/Zip:	N/A, N/A	SCAC: UPSG
CID#:	FOB: <input type="checkbox"/>	Pro Number:
Dept:		

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	Collect: 3rd Party: <input checked="" type="checkbox"/>
Address:		<input type="checkbox"/>	Master Bill of Lading: with attached underlying Bills of Lading
City/State/Zip:		<input type="checkbox"/>	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
			Driver Departure Time
			AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
47928930	4	64.63	Y N	
47928921	5	222.26	Y N	
47928928	2	95.01	Y N	
47928936	7	183.20	Y N	
Grand Total	83	1889.13		

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 385</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
57	Pallet			2850.00		Pallet		
		83	ctns	1889.13		Rugs	70970-5	125
57		83		4739.13		Grand Total		

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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.
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Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold 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.

Wholesale Order Changes Report

Customer PO No. Start:	<input type="text" value="47928921"/>	Customer PO No. End:	<input type="text" value="47928921"/>	Date Type:	<input type="text" value=""/>
E&E SO No. Start:	<input type="text" value=""/>	E&E SO No. End:	<input type="text" value=""/>	Start Date:	<input type="text" value="09/01/2022"/>
Customer:	<input type="text" value=""/>	Location:	<input type="text" value=""/>	End Date:	<input type="text" value="02/09/2023"/>
Dept. No.:	<input type="text" value=""/>	Batch No.:	<input type="text" value=""/>	Item No.:	<input type="text" value=""/>
Routing PO No.:	<input type="text" value=""/>	Multiple Cust. PO No.:	<input type="text" value=""/>		
User Opeartion:	<input type="text" value=""/>	Remark:	<input type="text" value=""/>		

Items:1 Page number:1/1 Paginal:100 items

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Customer PO No.	E&E SO No.	Customer	EDI Order Type	Dept. No.	Ship To	Create Date	Shipping Date	Cancel After Date	In DC Date	Item No.	Description	Pattern	UPC	Cust. Item No.	Cust Line No.	Location	Batch No.	Routing PO No.	Case Pack Qty	Qty Ordered	Qty To Ship	Updated Date	Updated By	Operation Type
47928921	6809065	HOMEDEPOT	0000022883		5030	09/26/2022	09/28/2022	10/07/2022	09/30/2022	HDW35-003	Willow Scatter	Willow	086569342386	1005094558	1	SV3	B20220926013335		1	3	0	09/26/2022 01:35:06	wuqingang@scmhome.com	Zero out