

Date: 6/2/2023 8:50:33 AM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000786152	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: ABF Freight	
Name:	Kohls Ecom DC-#00870	DC#:	00870
		Div.:	
Address:	3500 Salzman Road Monroe (Middletown) F.C., 00870	Trailer number:	552347
		Seal number(s):	NA
City/State/Zip:	Middletown, OH 45044-9401	SCAC:	ABFS
SID#:		Pro Number:	155158053
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 UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
ME# 855735306		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#
14026107	Dept#: 115	6	93.57	Y N	06757163000785094	00870	
14271606	Dept#: 115	2	46.02	Y N	06757163000785032	00870	
14275090	Dept#: 115	6	93.47	Y N	06757163000785155	00870	
Grand Total		14	233.06				

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
		8	ctns	115.14		Bath Towel, Beach Towel	49390 Sub 4	175
		6	ctns	117.92		Shower curtain	49385	77.5
3				383.06		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.

Date: 6/2/2023 8:50:51 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000785094	
Name:	E & E COMPANY LTD	 (402)06757163000785094	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: ABF Freight	
VENDOR:	000074879	Responsible Acct.No:	
SHIP TO		Trailer number:	552347
Name:	Kohls Ecom DC-#00870	Seal number(s):	NA
Address:	3500 Salzman Road	SCAC: ABFS	
	Monroe (Middletown) F.C., 00870	Pro Number: 155158053	
City/State/Zip:	Middletown, OH 45044-9401		
CID#:	855735306		
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: X 3rd Party:	
Name:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 855735306			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14026107 Dept#: 115	6	93.57	Y N	
Grand Total	6	93.57		

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		
		4	ctns	47.77		Bath Towel, Beach Towel	49390 Sub 4	175
		2	ctns	45.80		Shower curtain	49385	77.5
1		6		143.57		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.: 66843639 Order Date: 03/07/2023 Customer: KOHLS ECOM DC-#00870 Customer PO No.: 14026107

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00870 3500 SALZMAN ROAD MONROE (MIDDLETOWN) F.C. MIDDLETOWN, OH 45044-9401 US	Shipping Date: 03/29/2023 Shipment No.: 300078509
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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-EFC	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T-EFC	086569491992	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT03	11SNMEDWHT03-EFC	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1-EFC	086569491756	Spa Shower Curtain	EA	12	12	1	12	1
11SNMEDWSC2	11SNMEDWSC2-EFC	086569491763	Spa Shower Curtain	EA	12	12	1	12	1
21SNMLRHT02	21SNMLRHT02-EFC	022164104028	Ryley Lemon Hand Towel	EA	24	24	1	24	1

Total Weight:	93.57
Total Quantity Ordered:	120
Total Cartons Ordered:	6
Total Quantity Shipped:	120
Total Cartons Shipped:	6