

Date: 2/8/2023 8:53:37 AM

Master Bill Of Lading

Page 1 of 1

SHIP FROM		Master Bill of Lading Number: 06757163000769766	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: TFORCE FREIGHT	
Customer Code:	TJ MAXX		
Name:	NRC CONSOL CENTER	Trailer number:	294856
Address:	PERRIS 400 Harley Knox Blvd	Seal number(s):	NA
City/State/Zip:	Perris, CA 92571	SCAC:	
SID#:		Pro Number:	357241161
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
Load #: 1622601		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)		ADDITIONAL SHIPPER INFO	
					BOL#	DC#
02-766824DEPT#53	221	3847.70	Y	N	06757163000767236	882
40-766825DEPT#53	18	317.16	Y	N	06757163000767205	894
60-766825DEPT#53	78	1374.36	Y	N	06757163000767212	896
70-766825DEPT#53	97	1634.00	Y	N	06757163000767229	897
Grand Total	414	7173.22				

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
9	Pallet			450.00		Pallet		70
		414	ctns	7173.22		Sleepwear,Underwear	49880	100
9				7623.22		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: 2/8/2023 8:53:19 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000767205	
Name:	E & E COMPANY LTD	 (402)06757163000767205	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
PHONE:	(530)669-5991		
VENDOR:			
SHIP TO		CARRIER NAME: TFORCE FREIGHT	
Name:	T J Maxx - Charlotte	Responsible Acct.No:	
Address:	Distribution Center # 894	Trailer number: 294856	
	14300 Carowinds Blvd,	Seal number(s): NA	
City/State/Zip:	Charlotte, NC 28273	SCAC: UPGF	
CID#:		Pro Number: 357241161	
Dept:	53	Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
THIRD PARTY FREIGHT CHARGES BILL TO:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Name:		Appointment Time	Actual Driver Arrival Time
Address:		AM	AM
City/State/Zip:		PM	PM
SPECIAL INSTRUCTIONS:		Driver Departure Time	AM
Load #: 1622601			PM
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
40-766825DEPT#53	18	317.16	Y	N	
Grand Total	18	317.16			

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		
		18	ctns	317.16		Sleepwear,Underwear	49880	100
1		18		367.16		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.



BILL OF LADING

Phone: 866-643-9481

SHIP FROM

Name: OA LOG-JLA HOME-INK
 Address: 221 HANSON WAY
 City/State/Zip: WOODLAND, CA 95776
 Contact: SHIPPER

Bill of Lading Number: LD3068054
 Bill of Lading Date: 2023-02-02

Comments:

SHIP TO

Name: NRC CONSOL CENTER - PERRIS
 Address: 400 HARLEY KNOX BOULEVARD
 City/State/Zip: PERRIS, CA 92571
 Contact: RECEIVER
 555-555-5555

CARRIER NAME:
 Trailer Number:
 Seal Number(s):
 SCAC:



LIMITATIONS OF LIABILITY APPLY. SUBJECT TO LIMITS OF LIABILITY OF THE CARRIER'S RULES TARIFF. CUSTOMER SERVICE 1-800-333-7400

Comments:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: TJX Companies Inc
 Address: c/o ArcBest Enterprises Solutions Inc
 PO Box 10048
 City/State/Zip: Fort Smith, AR 72917

References:
 Authorization Number: 1622601
 PO Number: 02766824
 PO Number: 40766825
 PO Number: 60766825
 PO Number: 70766825
 Shipment Number: 1622601

Special Instructions:

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

Accessorials:

Prepaid Collect 3rd Party X

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

CUSTOMER ORDER INFORMATION

Description	Handling #	Handling Type	Weight	L x W x H	Cube	HazMat	LTL Only	
							NMFC #	Class
08 - FAK - See Supplement PO #40766825	1	PLT	367 lb	0 x 0 x 0	142			250
10 - FAK - See Supplement PO #02766824	3	PLT	3998 lb	0 x 0 x 0	426			100
08 - FAK - See Supplement PO #60766825	1	PLT	1424 lb	0 x 0 x 0	142			92.5
08 - FAK - See Supplement PO #70766825	2	PLT	1734 lb	0 x 0 x 0	284			125
GRAND TOTAL	9	PLT	7523 lb					

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: Check acceptable:

Except as otherwise indicated in your Service Agreement, ArcBest acts as a broker and all such Services shall be subject to the terms, conditions, rules and special charges in or referenced in your Service Agreement. ArcBest as a broker shall have no commodity liability to you for loss and/or damage to commodities, and only Service Providers who arrange, manage or perform Services for you are solely liable to you for loss and/or damage to commodities. When ArcBest performs as a freight forwarder or when a Service Agreement does not indicate applicable liability for commodity loss and/or damage and ArcBest acts as a freight forwarder, ArcBest's and Service Providers' aggregate commodity liability will be as set forth in the applicable Service Agreement. When ArcBest acts as a freight forwarder or Service Providers perform services for you, you acknowledge that ArcBest's and Service Providers' liability is limited in consideration of a lower rate than would otherwise be applicable. For certain Services, you may purchase excess liability coverage at certain costs and limitations but such request must occur prior to the shipment pickup and/or Services performed and must be included on your Service Agreement and bill of lading, if a bill of lading is applicable to Services. You understand and agree that entering a Customs declared value on this bill of lading is NOT a request for excess liability coverage. ArcBest and Service Providers shall not be liable for indirect, incidental, consequential, special, punitive, multiple or any other indirect costs, fees, charges or delays of any kind arising from commodity claims filed hereunder or any other acts or omission of either ArcBest or Service providers, whether or not foreseeable or disclosed. ArcBest arranges, manages and/or performs Services under this bill of lading as non-agent independent contractor to you. Service Providers performing Services for you under this bill of lading are non-agent independent contractors to both ArcBest and you. Services hereunder are governed by U.S. federal laws and regulations. Venue shall be in a state or federal court located in Sebastian County, State of Arkansas. You agree to pay ArcBest for access, arranging, managing and/or performing through our Managed Solutions Services as set forth in your Service Agreement. You understand that when ArcBest arranges and/or manages Services with Service Providers on your behalf, you will be subject to additional terms and conditions contained in such Service Provider's tariffs, contractual and/or other applicable documents, including, commodity liability limitations therein. When rail services are used in arranging Services for you, you agree to be subject to all applicable railroad service directories and the Association of American Railroads rules that outline the proper packaging, blocking and bracing of shipments. You hereby expressly agree to be bound by such terms and conditions as they relate to you and that Service Provider. By accepting Services hereunder, you agree to the terms and conditions contained in the following documents, and the following order of precedence will apply if such documents have inconsistent or conflicting provisions: 1) Your applicable Service Agreement; and 2) ArcBest bill of lading. Any bills of lading, waybills, manifests or pickup document utilized shall not alter or supplement the terms and conditions contained in the applicable ArcBest bill of lading, and such documents shall only acts as a receipt of the commodities.

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 Department of Transportation.

alromo 2-8-23

Loaded and/or Counted:

By Shipper
 By Driver

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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

TJW J. Sou 2-08-23

CONSIGNEE SIGNATURE / DELIVERY DATE

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

9 SKids

Order No.: 6893334 Order Date: 01/10/2023 Customer: T J MAXX - CHARLOTTE Customer PO No.: 40-766825DEPT#53

SHIP FROM:
E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:
T J MAXX INC. (AP)
300 VALUE WAY
ATTN: ACCOUNTS PAYABLE 2N
MARLBOROUGH, MA 01752
US

SHIP TO:
T J MAXX - CHARLOTTE
DISTRIBUTION CENTER # 894
14300 CAROWINDS BLVD
CHARLOTTE, NC 28273
US

Shipping Date:
02/08/2023

Shipment No.:
300076720


Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
II222204	II02-7942	022164131802	S II222204 Top/Jogger Set	EA	20	60	3	60	3
II222204	II02-7943	022164131819	M II222204 Top/Jogger Set	EA	20	120	6	120	6
II222204	II02-7944	022164131826	L II222204 Top/Jogger Set	EA	20	120	6	120	6
II222204	II02-7945	022164131833	XL II222204 Top/Jogger Set	EA	20	60	3	60	3

Total Weight: 317.16
Total Quantity Ordered: 360
Total Cartons Ordered: 18
Total Quantity Shipped: 360
Total Cartons Shipped: 18

Date: 2/8/2023 8:53:22 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000767236	
Name:	E & E COMPANY LTD	 (402)06757163000767236	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
PHONE:	(530)669-5991		
VENDOR:			
SHIP TO		CARRIER NAME: TFORCE FREIGHT	
Name:	Marshalls - Mar CH Phoenix	Responsible Acct.No:	
Address:	Distribution Center # 882	Trailer number: 294856	
	3000 S. 55th Avenue,	Seal number(s): NA	
City/State/Zip:	Phoenix, AZ 85043	SCAC: UPGF	
CID#:		Pro Number: 357241161	
Dept:	53	FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 1622601		AM	AM
Packing List is Attached		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
02-766824DEPT#53	221	3847.70	Y	N	
Grand Total	221	3847.70			

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	Pallet			200.00		Pallet		
		221	ctns	3847.70		Sleepwear,Underwear	49880	100
4		221		4047.70		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.

Order No.: 6893340 Order Date: 01/10/2023 Customer: MARSHALLS - MAR CH PHOENIX Customer PO No.: 02-766824DEPT#53

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: MARSHALLS, INC. (AP) 300 VALUE WAY ATTN: ACCOUNTS PAYABLE 2N MARLBOROUGH, MA 01752 US	SHIP TO: MARSHALLS - MAR CH PHOENIX DISTRIBUTION CENTER # 882 3000 S. 55TH AVENUE PHOENIX, AZ 85043 US	Shipping Date: 02/08/2023 Shipment No.: 300076723
--	--	--	--

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
II222204	II02-7938	022164131765	S II222204 Top/Jogger Set	EA	14	14	1	14	1
II222204	II02-7938	022164131765	S II222204 Top/Jogger Set	EA	20	300	15	300	15
II222204	II02-7939	022164131772	M II222204 Top/Jogger Set	EA	19	19	1	19	1
II222204	II02-7939	022164131772	M II222204 Top/Jogger Set	EA	20	640	32	640	32
II222204	II02-7940	022164131789	L II222204 Top/Jogger Set	EA	5	5	1	5	1
II222204	II02-7940	022164131789	L II222204 Top/Jogger Set	EA	20	660	33	660	33
II222204	II02-7941	022164131796	XL II222204 Top/Jogger Set	EA	13	13	1	13	1
II222204	II02-7941	022164131796	XL II222204 Top/Jogger Set	EA	20	300	15	300	15
II222204	II02-7950	022164132397	S II222204 Top/Jogger Set	EA	13	13	1	13	1
II222204	II02-7950	022164132397	S II222204 Top/Jogger Set	EA	20	380	19	380	19
II222204	II02-7951	022164132403	M II222204 Top/Jogger Set	EA	13	13	1	13	1
II222204	II02-7951	022164132403	M II222204 Top/Jogger Set	EA	20	800	40	800	40
II222204	II02-7952	022164132410	L II222204 Top/Jogger Set	EA	17	17	1	17	1
II222204	II02-7952	022164132410	L II222204 Top/Jogger Set	EA	20	800	40	800	40
II222204	II02-7953	022164132427	XL II222204 Top/Jogger Set	EA	18	18	1	18	1
II222204	II02-7953	022164132427	XL II222204 Top/Jogger Set	EA	20	380	19	380	19

Total Weight:	3847.7
Total Quantity Ordered:	4372
Total Cartons Ordered:	221
Total Quantity Shipped:	4372
Total Cartons Shipped:	221

Date: 2/8/2023 8:53:26 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000767229	
Name:	E & E COMPANY LTD	 (402)06757163000767229	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
PHONE:	(530)669-5991		
VENDOR:			
SHIP TO		CARRIER NAME: TFORCE FREIGHT	
Name:	T J Maxx - Evansville	Responsible Acct.No:	
Address:	Distribution Center # 897	Trailer number: 294856	
	3301 Maxx Road,	Seal number(s): NA	
City/State/Zip:	Evansville, IN 47711	SCAC: UPGF	
CID#:		Pro Number: 357241161	
Dept:	53	FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 1622601		AM	AM
Packing List is Attached		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
70-766825DEPT#53	97	1634.00	Y	N	
Grand Total	97	1634.00			

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		
		97	ctns	1634.00		Sleepwear,Underwear	49880	100
2		97		1734.00		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.

Order No.: 6893339 Order Date: 01/10/2023 Customer: T J MAXX - EVANSVILLE Customer PO No.: 70-766825DEPT#53

SHIP FROM:
E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:
T J MAXX INC. (AP)
300 VALUE WAY
ATTN: ACCOUNTS PAYABLE 2N
MARLBOROUGH, MA 01752
US

SHIP TO:
T J MAXX - EVANSVILLE
DISTRIBUTION CENTER # 897
3301 MAXX ROAD
EVANSVILLE, IN 47711
US

Shipping Date:
02/08/2023

Shipment No.:
300076722

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
II222204	II02-7942	022164131802	S II222204 Top/Jogger Set	EA	4	4	1	4	1
II222204	II02-7942	022164131802	S II222204 Top/Jogger Set	EA	20	120	6	120	6
II222204	II02-7943	022164131819	M II222204 Top/Jogger Set	EA	3	3	1	3	1
II222204	II02-7943	022164131819	M II222204 Top/Jogger Set	EA	20	300	15	300	15
II222204	II02-7944	022164131826	L II222204 Top/Jogger Set	EA	9	9	1	9	1
II222204	II02-7944	022164131826	L II222204 Top/Jogger Set	EA	20	300	15	300	15
II222204	II02-7945	022164131833	XL II222204 Top/Jogger Set	EA	3	3	1	3	1
II222204	II02-7945	022164131833	XL II222204 Top/Jogger Set	EA	20	140	7	140	7
II222204	II02-7946	022164131840	S II222204 Top/Jogger Set	EA	8	8	1	8	1
II222204	II02-7946	022164131840	S II222204 Top/Jogger Set	EA	20	140	7	140	7
II222204	II02-7947	022164131857	M II222204 Top/Jogger Set	EA	10	10	1	10	1
II222204	II02-7947	022164131857	M II222204 Top/Jogger Set	EA	20	320	16	320	16
II222204	II02-7948	022164131864	L II222204 Top/Jogger Set	EA	19	19	1	19	1
II222204	II02-7948	022164131864	L II222204 Top/Jogger Set	EA	20	320	16	320	16
II222204	II02-7949	022164131871	XL II222204 Top/Jogger Set	EA	11	11	1	11	1
II222204	II02-7949	022164131871	XL II222204 Top/Jogger Set	EA	20	140	7	140	7

Total Weight: 1634
Total Quantity Ordered: 1847
Total Cartons Ordered: 97
Total Quantity Shipped: 1847
Total Cartons Shipped: 97

Date: 2/8/2023 8:53:32 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	T J Maxx - Worcester
Address:	221 Hanson Way	Address:	Distribution Center # 896 135 Goddard Memorial Drive,
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Worcester, MA 01603
PHONE:	(530)669-5991	CID#:	FOB: <input type="checkbox"/>
VENDOR:		Dept:	53
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Address:	Prepaid: <input type="checkbox"/> Collect: X 3rd Party:		
City/State/Zip:	Master Bill of Lading: with attached underlying Bills of Lading		
SPECIAL INSTRUCTIONS:	Appointment Time Actual Driver Arrival Time Driver Departure Time		
Load #: 1622601	AM AM AM		
Packing List is Attached	PM PM PM		

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
60-766825DEPT#53	78	1374.36	Y N	
Grand Total	78	1374.36		

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		
		78	ctns	1374.36		Sleepwear,Underwear	49880	100
2		78		1474.36		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.

Order No.: 6893335 Order Date: 01/10/2023 Customer: T J MAXX - WORCESTER Customer PO No.: 60-766825DEPT#53

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: T J MAXX INC. (AP) 300 VALUE WAY ATTN: ACCOUNTS PAYABLE 2N MARLBOROUGH, MA 01752 US	SHIP TO: T J MAXX - WORCESTER DISTRIBUTION CENTER # 896 135 GODDARD MEMORIAL DRIVE WORCESTER, MA 01603 US	Shipping Date: 02/08/2023 Shipment No.: 300076721
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
I1222204	I102-7942	022164131802	S I1222204 Top/Jogger Set	EA	20	100	5	100	5
I1222204	I102-7943	022164131819	M I1222204 Top/Jogger Set	EA	20	200	10	200	10
I1222204	I102-7944	022164131826	L I1222204 Top/Jogger Set	EA	20	200	10	200	10
I1222204	I102-7945	022164131833	XL I1222204 Top/Jogger Set	EA	20	100	5	100	5
I1222204	I102-7946	022164131840	S I1222204 Top/Jogger Set	EA	20	160	8	160	8
I1222204	I102-7947	022164131857	M I1222204 Top/Jogger Set	EA	20	320	16	320	16
I1222204	I102-7948	022164131864	L I1222204 Top/Jogger Set	EA	20	320	16	320	16
I1222204	I102-7949	022164131871	XL I1222204 Top/Jogger Set	EA	20	160	8	160	8

Total Weight:	1374.36
Total Quantity Ordered:	1560
Total Cartons Ordered:	78
Total Quantity Shipped:	1560
Total Cartons Shipped:	78