

SHIP FROM		Master Bill of Lading Number: 06757163000818648	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: Swift Transportation	
Name:	Kohls	DC#:	XDSFS
		Div.:	
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	Trailer number:	212053
		Seal number(s):	2149229
City/State/Zip:	SANTA FE SPRINGS, CA 90670	SCAC:	SWFT
SID#:		Pro Number:	
		FOB:	<input type="checkbox"/>

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: ME# 865084898	<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING		
	Appointment Time	Actual Driver Arrival Time	Driver Departure Time
	AM PM	AM PM	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
14275084	Dept#: 115	24	364.83	Y	N	06757163000818440	00855
14178090	Dept#: 115	3	45.81	Y	N	06757163000818617	00885
14277013	Dept#: 115	1	14.97	Y	N	06757163000818303	00836
14275084	Dept#: 115	44	653.45	Y	N	06757163000818549	00875
14276996	Dept#: 115	6	85.53	Y	N	06757163000818273	00816
14178090	Dept#: 115	27	397.53	Y	N	06757163000818488	00860
14271597	Dept#: 115	14	320.82	Y	N	06757163000818464	00855
14276996	Dept#: 115	7	101.50	Y	N	06757163000818259	00813
14178090	Dept#: 115	4	44.93	Y	N	06757163000818358	00810
14178090	Dept#: 115	7	90.74	Y	N	06757163000818389	00830
14275084	Dept#: 115	17	254.29	Y	N	06757163000818495	00860
14277013	Dept#: 115	2	32.70	Y	N	06757163000818297	00826
14276996	Dept#: 115	8	116.91	Y	N	06757163000818327	00870

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 / 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.
John 8/23/23

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] 8/23/23

SHIP FROM		Master Bill of Lading Number: 06757163000818648
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: Swift Transportation	
Name:	Kohls		DC#: XDSFS
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS		Div.
City/State/Zip:	SANTA FE SPRINGS, CA 90670		
SID#:	FOB: <input type="checkbox"/>		

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 UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
ME# 865084898		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#	Supplier#		
14271597	Dept#: 115	10	214.02	Y	N	06757163000818518	00860	
14271597	Dept#: 115	10	214.24	Y	N	06757163000818587	00885	
14271597	Dept#: 115	57	1185.68	Y	N	06757163000818624	00890	
14275084	Dept#: 115	3	46.46	Y	N	06757163000818426	00840	
14277012	Dept#: 115	3	47.67	Y	N	06757163000818396	00830	
14271597	Dept#: 115	30	612.32	Y	N	06757163000818563	00875	
14277012	Dept#: 115	14	217.98	Y	N	06757163000818501	00860	
14277013	Dept#: 115	1	14.31	Y	N	06757163000818334	00870	
14178090	Dept#: 115	17	255.91	Y	N	06757163000818471	00855	
14271597	Dept#: 115	89	1783.66	Y	N	06757163000818525	00865	
14275084	Dept#: 115	9	135.51	Y	N	06757163000818372	00830	
14275084	Dept#: 115	8	119.99	Y	N	06757163000818600	00885	
14277012	Dept#: 115	22	348.12	Y	N	06757163000818457	00855	

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 \$ _____

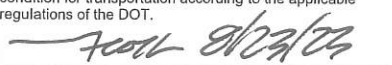
Fee Terms: Collect: Prepaid:

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 / 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.
 8-23-23

SHIP FROM		Master Bill of Lading Number: 06757163000818648	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Swift Transportation	
Name:	Kohls	DC#:	XDSFS
		Div.:	
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS		
City/State/Zip:	SANTA FE SPRINGS, CA 90670		
SID#:		FOB: <input type="checkbox"/>	
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: ME# 865084898		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
		Appointment Time	Actual Driver Arrival Time
		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#
14271610	Dept#: 115	10	199.70	Y	N	06757163000818266	00816	
14277012	Dept#: 115	9	138.27	Y	N	06757163000818594	00885	
14271597	Dept#: 115	25	512.80	Y	N	06757163000818419	00840	
14277012	Dept#: 115	8	126.72	Y	N	06757163000818570	00875	
14178090	Dept#: 115	4	54.62	Y	N	06757163000818433	00840	
14271610	Dept#: 115	33	396.84	Y	N	06757163000818242	00813	
14277012	Dept#: 115	5	76.95	Y	N	06757163000818631	00890	
14271597	Dept#: 115	67	1384.50	Y	N	06757163000818341	00810	
14276996	Dept#: 115	1	14.31	Y	N	06757163000818310	00836	
14277012	Dept#: 115	2	32.70	Y	N	06757163000818402	00840	
14277012	Dept#: 115	14	220.74	Y	N	06757163000818532	00865	
14178090	Dept#: 115	50	706.30	Y	N	06757163000818556	00875	
14271597	Dept#: 115	66	1376.58	Y	N	06757163000818365	00830	

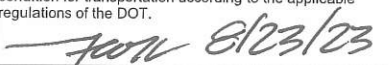
Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

COD Amount \$ _____
Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>

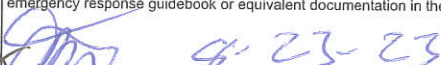
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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 / 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.
 8/23/23

Trailer Loaded:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said 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.
 8-23-23

Date: 8/23/2023 12:00:12 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163000818648
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: Swift Transportation
Name:	Kohls	DC#: XDSFS
		Div.
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	
City/State/Zip:	SANTA FE SPRINGS, CA 90670	
SID#:	FOB: <input type="checkbox"/>	
		Trailer number: 212053
		Seal number(s): 2149229
		SCAC: SWFT
		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 UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
ME# 865084898		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	DC#	Supplier#
14277013 Dept#: 115	1	17.73	Y	N	06757163000818235	00806	
14277013 Dept#: 115	4	61.98	Y	N	06757163000818280	00816	
Grand Total	736	13040.62					

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
45	Pallet			2250.00		Pallet		70
		294	ctns	3617.57		Bath Towel, Beach Towel	49390 Sub 4	175
		442	ctns	9423.05		Shower curtain	49385	77.5
45				15290.62		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.

Kohl 8/23/23

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] 8-23-23

Date: 8/23/2023 12:00:08 PM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818419	
Name: E & E COMPANY LTD		 (402)06757163000818419	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:		CARRIER NAME: Swift Transportation	
PHONE:		Responsible Acct.No:	
VENDOR: 000074879		Trailer number: 212053	
SHIP TO		Seal number(s): 2149229	
Name: Kohls Dist. Center - #00840		SCAC: SWFT	
Address: 2015 NE Jefferson Street		Pro Number:	
City/State/Zip: Blue Spring (Grain Valley) D.C., 00840			
CID#: 865084898			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		Prepaid: Collect: X 3rd Party:	
Load #: 865084898		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14271597 Dept#: 115	25	512.80	Y N		
Grand Total	25	512.80			

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		
		5	ctns	54.80		Bath Towel, Beach Towel	49390 Sub 4	175
		20	ctns	458.00		Shower curtain	49385	77.5
1		25		562.80		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>

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	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:
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Date: 8/23/2023 12:00:06 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000818341	
Name:	E & E COMPANY LTD	 (402)06757163000818341	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: Swift Transportation	
VENDOR: 000074879	FOB: <input type="checkbox"/>	Responsible Acct.No:	
SHIP TO		Trailer number: 212053	
Name:	Kohls Dist. Center - #00810 Location #: 00810	Seal number(s): 2149229	
Address:	7855 County Road 140	SCAC: SWFT	
	Findlay D.C., 00810	Pro Number:	
City/State/Zip:	Findlay, OH 45840		
CID#:	865084898 FOB: <input type="checkbox"/>		
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:			
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14271597 Dept#: 115	67	1384.50	Y N		
Grand Total	67	1384.50			

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		
		10	ctns	79.20		Bath Towel, Beach Towel	49390 Sub 4	175
		57	ctns	1305.30		Shower curtain	49385	77.5
2		67		1484.50		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.

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

Appt Time:

In:


Out:

Driver Signature:

Date: 8/23/2023 12:00:05 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000818396	
Name: E & E COMPANY LTD		 (402)06757163000818396	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Swift Transportation	
VENDOR: 000074879		Responsible Acct.No:	
SHIP TO		Trailer number: 212053	
Name: Kohls Dist. Center - #00830		Seal number(s): 2149229	
Address: 300 Admiral Byrd Drive		SCAC: SWFT	
City/State/Zip: Winchester D. C., 00830		Pro Number:	
CID#: 865084898			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14277012	Dept#: 115	3	47.67	Y	N
Grand Total		3	47.67		

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		
		2	ctns	29.94		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.73		Shower curtain	49385	77.5
1		3		97.67		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: **Freight Counted:**

By Shipper By Shipper
 By Driver 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:

Date: 8/23/2023 12:00:01 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester D. C., 00830
SID#:		CID#:	865084898
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818389		Trailer number: 212053	
		Seal number(s): 2149229	
(402)06757163000818389		SCAC: SWFT	
CARRIER NAME: Swift Transportation		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: Collect: X 3rd Party:	
Name:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Address:		(check box)	
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14178090 Dept#: 115	7	90.74	Y N	
Grand Total	7	90.74		

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	35.24		Bath Towel, Beach Towel	49390 Sub 4	175
		3	ctns	55.50		Shower curtain	49385	77.5
1		7		140.74		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:

Date: 8/23/2023 11:59:55 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00865 Location #: 00865
Address:	221 Hanson Way	Address:	Mamakating (Wurtsboro) D.C. 3440 State Route 209, 00865
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Wurtsboro, NY 12790
SID#:		CID#:	865084898
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818525		CARRIER NAME: Swift Transportation	
		Responsible Acct.No:	
(402)06757163000818525		Trailer number: 212053	
Seal number(s): 2149229		SCAC: SWFT	
Pro Number:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	
Address:		Collect: X	
City/State/Zip:		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Load #: 865084898		(check box)	
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14271597	89	1783.66	Y N	Dept#: 115
Grand Total	89	1783.66		

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		
		18	ctns	157.76		Bath Towel, Beach Towel	49390 Sub 4	175
		71	ctns	1625.90		Shower curtain	49385	77.5
2		89		1883.66		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:

SHIP FROM		Bill of Lading Number: 06757163000818358	
Name: E & E COMPANY LTD		 (402)06757163000818358	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Swift Transportation	
VENDOR: 000074879		Responsible Acct.No:	
SHIP TO		Trailer number: 212053	
Name: Kohls Dist. Center - #00810		Seal number(s): 2149229	
Address: 7855 County Road 140		SCAC: SWFT	
City/State/Zip: Findlay D.C., 00810		Pro Number:	
CID#: 865084898		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:			
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14178090 Dept#: 115	4	44.93	Y N	
Grand Total	4	44.93		

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		
		3	ctns	26.43		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	18.50		Shower curtain	49385	77.5
1		4		94.93		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>

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:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said 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.
Property described above is received in good order, except as noted.

Appt Time:
 In:
 Out:
 Driver Signature:

Date: 8/23/2023 11:59:48 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000818549	
Name:	E & E COMPANY LTD	 (402)06757163000818549	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:	000074879	FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: Swift Transportation	
Name:	Kohls Dist. Center - #00875	Location #:	00875
Address:	3030 Airport Road East		
	Macon D.C., 00875		
City/State/Zip:	Macon, GA 31216		
CID#:	865084898	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Trailer number: 212053	
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		Seal number(s): 2149229	
Load #: 865084898		SCAC: SWFT	
Packing List is Attached		Pro Number:	
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Prepaid:	Collect: X 3rd Party:
		<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
14275084 Dept#: 115	44	653.45	Y N	
Grand Total	44	653.45		

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		
		32	ctns	468.48		Bath Towel, Beach Towel	49390 Sub 4	175
		12	ctns	184.97		Shower curtain	49385	77.5
2		44		753.45		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:

Date: 8/23/2023 11:59:46 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Ecom DC-#00816 Location #: 00816
Address:	221 Hanson Way	Address:	1701 Trimble Avenue
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Edgewood-EC, 00816
SID#:		City/State/Zip:	Edgewood, MD 21040
PHONE:		CID#:	865084898
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818273		Trailer number: 212053	
		Seal number(s): 2149229	
(402)06757163000818273		SCAC: SWFT	
CARRIER NAME: Swift Transportation		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: Collect: X 3rd Party:	
Name:	Address:	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14276996 Dept#: 115	6	85.53	Y N	
Grand Total	6	85.53		

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		
		3	ctns	44.25		Bath Towel, Beach Towel	49390 Sub 4	175
		3	ctns	41.28		Shower curtain	49385	77.5
1		6		135.53		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:

Date: 8/23/2023 11:59:43 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000818440	
Name:	E & E COMPANY LTD	 (402)06757163000818440	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: Swift Transportation	
VENDOR:	000074879	FOB:	<input type="checkbox"/>
SHIP TO		Responsible Acct.No:	
Name:	Kohls Dist. Center - #00855	Location #:	00855
Address:	890 East Mill Street		
	San Bernardino D.C., 00855		
City/State/Zip:	San Bernardino, CA 92408-1614		
CID#:	865084898	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Trailer number: 212053	
Name:	Address:		
City/State/Zip:	Seal number(s): 2149229		
SPECIAL INSTRUCTIONS:		SCAC: SWFT	
Load #: 865084898	Pro Number:		
Packing List is Attached	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
		Prepaid:	Collect: X 3rd Party:
		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14275084 Dept#: 115	24	364.83	Y N		
Grand Total	24	364.83			

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		
		16	ctns	234.90		Bath Towel, Beach Towel	49390 Sub 4	175
		8	ctns	129.93		Shower curtain	49385	77.5
1		24		414.83		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:

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818488	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____		 (402)06757163000818488	
VENDOR: 000074879 FOB: <input type="checkbox"/>		CARRIER NAME: Swift Transportation Responsible Acct.No: _____	
SHIP TO		Trailer number: 212053 Seal number(s): 2149229	
Name: Kohls Dist. Center - #00860 Location #: 00860 Address: 1600 North Business 45 Corsicana D.C., 00860 City/State/Zip: Corsicana, TX 75110 CID#: 865084898 FOB: <input type="checkbox"/>		SCAC: SWFT Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: Collect: X 3rd Party:	
SPECIAL INSTRUCTIONS: Load #: 865084898 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
14178090 Dept#: 115	27	397.53	Y	N	
Grand Total	27	397.53			

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		
		12	ctns	120.03		Bath Towel, Beach Towel	49390 Sub 4	175
		15	ctns	277.50		Shower curtain	49385	77.5
1		27		447.53		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>

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	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. <i>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

Date: 8/23/2023 11:59:38 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Ecom DC-#00870 Location #: 00870
Address:	221 Hanson Way	Address:	3500 Salzman Road
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Monroe (Middletown) F.C., 00870
SID#:		City/State/Zip:	Middletown, OH 45044-9401
PHONE:		CID#:	865084898
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818327		Trailer number: 212053	
		Seal number(s): 2149229	
(402)06757163000818327		SCAC: SWFT	
CARRIER NAME: Swift Transportation		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Name:		Master Bill of Lading: with attached	
Address:		(check box) underlying Bills of Lading	
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14276996 Dept#: 115	8	116.91	Y N	
Grand Total	8	116.91		

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	57.90		Bath Towel, Beach Towel	49390 Sub 4	175
		4	ctns	59.01		Shower curtain	49385	77.5
1		8		166.91		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:

Date: 8/23/2023 11:59:37 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000818303	
Name: E & E COMPANY LTD		 (402)06757163000818303	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: Swift Transportation	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 212053	
VENDOR: 000074879		Seal number(s): 2149229	
SHIP TO		SCAC: SWFT	
Name: Kohls Ecom DC-#00836		Pro Number:	
Address: 9998 All Points Parkway		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
City/State/Zip: Plainfield, IN 46168			
CID#: 865084898		Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
THIRD PARTY FREIGHT CHARGES BILL TO:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14277013	Dept#: 115	1	14.97	Y	N
Grand Total		1	14.97		

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		
		1	ctns	14.97		Bath Towel, Beach Towel	49390 Sub 4	175
1		1		64.97		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:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said 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.
Property described above is received in good order, except as noted.

Appt Time:
 In:
 Out:
 Driver Signature:

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000818402



(402)06757163000818402

SHIP TO

Name: Kohls Dist. Center - #00840 Location #: 00840
 Address: 2015 NE Jefferson Street
 City/State/Zip: Blue Spring (Grain Valley) D.C., 00840
 Grain Valley, MO 64029
 CID#: 865084898 FOB:

CARRIER NAME: Swift Transportation
 Responsible Acct.No:
 Trailer number: 212053
 Seal number(s): 2149229

SCAC: SWFT
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:

SPECIAL INSTRUCTIONS:
 Load #: 865084898
 Packing List is Attached

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
14277012	Dept#: 115	2	32.70	Y	N
Grand Total		2	32.70		

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
1	Pallet			50.00		Pallet		
		1	ctns	14.97		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.73		Shower curtain	49385	77.5
1		2		82.70		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:

Appt Time:
 In:
 Out:
 Driver Signature:

Appt Time:
 In:
 Out:
 Driver Signature:

Date: 8/23/2023 11:59:34 AM

Bill Of Lading

SHIP FROM	
Name:	E & E COMPANY LTD
Address:	221 Hanson Way
City/State/Zip:	Woodland, CA 95776
SID#:	
PHONE:	
VENDOR:	000074879
FOB:	<input type="checkbox"/>

Bill of Lading Number: 06757163000818631



(402)06757163000818631

CARRIER NAME: Swift Transportation
 Responsible Acct.No:
 Trailer number: 212053
 Seal number(s): 2149229

SCAC: SWFT
Pro Number:

SHIP TO		
Name:	Kohls Dist. Center - #00890	Location #: 00890
Address:	4300 MBL Drive	
	Ottawa D.C., 00890	
City/State/Zip:	Ottawa, IL 61350	
CID#:	865084898	FOB: <input type="checkbox"/>

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:

SPECIAL INSTRUCTIONS:
 Load #: 865084898
 Packing List is Attached

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
14277012 Dept#: 115	5	76.95	Y N	
Grand Total	5	76.95		

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	59.22		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.73		Shower curtain	49385	77.5
1		5		126.95		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:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said 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.
Property described above is received in good order, except as noted.

Appt Time:
 In:
 Out:
 Driver Signature:

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818242	
Name: E & E COMPANY LTD		 (402)06757163000818242	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: Swift Transportation	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 212053	
VENDOR: 000074879		Seal number(s): 2149229	
SHIP TO		SCAC: SWFT	
Name: Kohls Ecom DC-#00813		Pro Number:	
Address: 10201 Schuster Way		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
City/State/Zip: Pataskala, OH 43062			
CID#: 865084898			
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
Name:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14271610	Dept#: 115	33	396.84	Y	N
Grand Total		33	396.84		

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		
		27	ctns	259.44		Bath Towel, Beach Towel	49390 Sub 4	175
		6	ctns	137.40		Shower curtain	49385	77.5
1		33		446.84		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>

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: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver <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. <i>Property described above is received in good order, except as noted.</i> Appt Time: In: Out: Driver Signature:
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Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818457	
Name: E & E COMPANY LTD		 (402)06757163000818457	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:			
VENDOR: 000074879		CARRIER NAME: Swift Transportation	
SHIP TO		Responsible Acct.No:	
Name: Kohls Dist. Center - #00855		Trailer number: 212053	
Address: 890 East Mill Street		Seal number(s): 2149229	
City/State/Zip: San Bernardino D.C., 00855		SCAC: SWFT	
CID#: 865084898		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: X 3rd Party:	
Name:			
Address:			
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: Load #: 865084898 Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14277012 Dept#: 115	22	348.12	Y N	
Grand Total	22	348.12		

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		
		14	ctns	206.28		Bath Towel, Beach Towel	49390 Sub 4	175
		8	ctns	141.84		Shower curtain	49385	77.5
1		22		398.12		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>

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	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. <i>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

Date: 8/23/2023 11:59:29 AM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818532	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____		 (402)06757163000818532	
VENDOR: 000074879 FOB: <input type="checkbox"/>		CARRIER NAME: Swift Transportation Responsible Acct.No: _____	
SHIP TO		Trailer number: 212053 Seal number(s): 2149229	
Name: Kohls Dist. Center - #00865 Location #: 00865 Address: Mamakating (Wurtsboro) D.C. 3440 State Route 209, 00865 City/State/Zip: Wurtsboro, NY 12790 CID#: 865084898 FOB: <input type="checkbox"/>		SCAC: SWFT Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: Collect: X 3rd Party: _____	
SPECIAL INSTRUCTIONS: Load #: 865084898 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14277012 Dept#: 115	14	220.74	Y N		
Grand Total	14	220.74			

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		
		9	ctns	132.09		Bath Towel, Beach Towel	49390 Sub 4	175
		5	ctns	88.65		Shower curtain	49385	77.5
1		14		270.74		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>

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	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. <i>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

Date: 8/23/2023 11:59:26 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester D. C., 00830
SID#:		CID#:	865084898
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818365		Trailer number: 212053	
		Seal number(s): 2149229	
(402)06757163000818365		SCAC: SWFT	
CARRIER NAME: Swift Transportation		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	
Address:		Collect: X	
City/State/Zip:		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached	
Load #: 865084898		(check box) underlying Bills of Lading	
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14271597 Dept#: 115	66	1376.58	Y N	
Grand Total	66	1376.58		

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		
		9	ctns	71.28		Bath Towel, Beach Towel	49390 Sub 4	175
		57	ctns	1305.30		Shower curtain	49385	77.5
2		66		1476.58		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:

Date: 8/23/2023 11:59:25 AM

Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#:
 PHONE:
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000818280



CARRIER NAME: Swift Transportation
 Responsible Acct.No:

SHIP TO

Name: Kohls Ecom DC-#00816 Location #: 00816
 Address: 1701 Trimble Avenue
 Edgewood-EC, 00816
 City/State/Zip: Edgewood, MD 21040
 CID#: 865084898 FOB:

Trailer number: 212053
 Seal number(s): 2149229

SCAC: SWFT
 Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
 Address:

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

City/State/Zip:

Prepaid: Collect: X 3rd Party:

SPECIAL INSTRUCTIONS:

Load #: 865084898
 Packing List is Attached

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
14277013 Dept#: 115	4	61.98	Y N	
Grand Total	4	61.98		

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		
		3	ctns	44.25		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.73		Shower curtain	49385	77.5
1		4		111.98		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.


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

Appt Time:
 In:
 Out:
 Driver Signature:

Date: 8/23/2023 11:59:19 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00885 Location #: 00885
Address:	221 Hanson Way	Address:	2065 Keystone Pacific Parkway
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Patterson D.C., 00885
SID#:		CID#:	865084898
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000818587		Trailer number: 212053	
		Seal number(s): 2149229	
(402)06757163000818587		SCAC: SWFT	
CARRIER NAME: Swift Transportation		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: Collect: X 3rd Party:	
Name:	Address:	<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS:			
Load #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14271597 Dept#: 115	10	214.24	Y N	
Grand Total	10	214.24		

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		
		2	ctns	31.04		Bath Towel, Beach Towel	49390 Sub 4	175
		8	ctns	183.20		Shower curtain	49385	77.5
1		10		264.24		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:

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818624	
Name: E & E COMPANY LTD		 (402)06757163000818624	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: Swift Transportation	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 212053	
VENDOR: 000074879		Seal number(s): 2149229	
SHIP TO		SCAC: SWFT	
Name: Kohls Dist. Center - #00890		Pro Number:	
Address: 4300 MBL Drive		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
City/State/Zip: Ottawa, IL 61350			
CID#: 865084898			
THIRD PARTY FREIGHT CHARGES BILL TO:		Prepaid: Collect: <input checked="" type="checkbox"/> 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 #: 865084898			
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14271597	Dept#: 115	57	Y N	
Grand Total		57	1185.68	

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		
		9	ctns	86.48		Bath Towel, Beach Towel	49390 Sub 4	175
		48	ctns	1099.20		Shower curtain	49385	77.5
1		57		1235.68		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: **Freight Counted:**

By Shipper By Shipper

By Driver 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:

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____
 PHONE: _____
 VENDOR: 000074879 FOB:

Bill of Lading Number: 06757163000818266



CARRIER NAME: Swift Transportation
 Responsible Acct.No: _____

SHIP TO

Name: Kohls Ecom DC-#00816 Location #: 00816
 Address: 1701 Trimble Avenue
 Edgewood-EC, 00816
 City/State/Zip: Edgewood, MD 21040
 CID#: 865084898 FOB:

Trailer number: 212053
 Seal number(s): 2149229

SCAC: SWFT
 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: _____

SPECIAL INSTRUCTIONS:
 Load #: 865084898
 Packing List is Attached

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
14271610 Dept#: 115	10	199.70	Y	N	
Grand Total	10	199.70			

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
1	Pallet			50.00		Pallet		
		5	ctns	85.20		Bath Towel, Beach Towel	49390 Sub 4	175
		5	ctns	114.50		Shower curtain	49385	77.5
1		10		249.70		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:

Bill Of Lading

SHIP FROM

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

PHONE:

VENDOR: 000074879

FOB:

Bill of Lading Number: 06757163000818297



CARRIER NAME: Swift Transportation

Responsible Acct.No:

Trailer number: 212053

Seal number(s): 2149229

SCAC: SWFT

Pro Number:

SHIP TO

Name: Kohls Ecom DC-#00826 Location #: 00826
 Address: 2019 N. I-35 E
 Desoto-EC, 00826
 City/State/Zip: Desoto, TX 75115
 CID#: 865084898

FOB:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
 Address:

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

Prepaid: Collect: **X** 3rd Party:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Load #: 865084898

Packing List is Attached

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
14277013 Dept#: 115	2	32.70	Y	N	
Grand Total	2	32.70			

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
1	Pallet			50.00		Pallet		
		1	ctns	14.97		Bath Towel, Beach Towel	49390 Sub 4	175
		1	ctns	17.73		Shower curtain	49385	77.5
1		2		82.70		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: _____

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000818570	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____		 (402)06757163000818570	
VENDOR: 000074879 FOB: <input type="checkbox"/>		CARRIER NAME: Swift Transportation	
SHIP TO		Responsible Acct.No: _____	
Name: Kohls Dist. Center - #00875 Location #: 00875 Address: 3030 Airport Road East Macon D.C., 00875 City/State/Zip: Macon, GA 31216 CID#: 865084898 FOB: <input type="checkbox"/>		Trailer number: 212053 Seal number(s): 2149229	
THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____		SCAC: SWFT	
		Pro Number: _____	
SPECIAL INSTRUCTIONS: Load #: 865084898 Packing List is Attached		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: X 3rd Party: _____	
		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14277012 Dept#: 115	8	126.72	Y N	
Grand Total	8	126.72		

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		
		5	ctns	73.53		Bath Towel, Beach Towel	49390 Sub 4	175
		3	ctns	53.19		Shower curtain	49385	77.5
1		8		176.72		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>

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	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.: 67891050 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
#00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. 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: 08/23/2023 Shipment No.: 300081861
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	24	1	24	1
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	12	1	12	1
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	12	1	12	1

Total Weight:	45.81
Total Quantity Ordered:	48
Total Cartons Ordered:	3
Total Quantity Shipped:	48
Total Cartons Shipped:	3

Order No.: 67897101 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00840 Customer PO No.: 14271597

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 DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 08/23/2023 Shipment No.: 300081841
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02	11SNMEDWHT02	086569492029	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	96	8	96	8
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	144	12	144	12

Total Weight:	512.8
Total Quantity Ordered:	360
Total Cartons Ordered:	25
Total Quantity Shipped:	360
Total Cartons Shipped:	25

Order No.: 67897099 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00810 Customer PO No.: 14271597

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 DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	Shipping Date: 08/23/2023 Shipment No.: 300081834
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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	086569492012	Spa Border Hand Towel	EA	24	120	5	120	5
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	48	2	48	2
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	276	23	276	23
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	408	34	408	34

Total Weight:	1384.5
Total Quantity Ordered:	924
Total Cartons Ordered:	67
Total Quantity Shipped:	924
Total Cartons Shipped:	67

Order No.: 67919946 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14277012
#00830

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 DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/23/2023 Shipment No.: 300081839
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	48	2	48	2

Total Weight:	47.67
Total Quantity Ordered:	60
Total Cartons Ordered:	3
Total Quantity Shipped:	60
Total Cartons Shipped:	3

Order No.: 67891049 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
 #00875

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 DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/23/2023 Shipment No.: 300081855
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRBT01	21SNMLRBT01	022164103991	Ryley Paisley Bath Towel	EA	24	72	3	72	3
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	216	9	216	9
21SNMLRHT02	21SNMLRHT02	022164104028	Ryley Lemon Hand Towel	EA	24	168	7	168	7
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	192	8	192	8
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	168	14	168	14
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	108	9	108	9

Total Weight:	706.3
Total Quantity Ordered:	924
Total Cartons Ordered:	50
Total Quantity Shipped:	924
Total Cartons Shipped:	50

Order No.: 67891045 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
 #00830

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 DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/23/2023 Shipment No.: 300081838
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	48	2	48	2
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	48	2	48	2
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	24	2	24	2
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	12	1	12	1

Total Weight:	90.74
Total Quantity Ordered:	132
Total Cartons Ordered:	7
Total Quantity Shipped:	132
Total Cartons Shipped:	7

Order No.: 67919954 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14277012
 #00885

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00885 2065 KEYSTONE PACIFIC PARKWAY PATTERSON D.C. PATTERSON, CA 95363 US	08/23/2023
			Shipment No.: 300081859

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	72	3	72	3
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	24	2	24	2
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	96	4	96	4

Total Weight:	138.27
Total Quantity Ordered:	192
Total Cartons Ordered:	9
Total Quantity Shipped:	192
Total Cartons Shipped:	9

Order No.: 67891042 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00836 Customer PO No.: 14276996

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00836 9998 ALL POINTS PARKWAY PLAINFIELD, IN 46168 US	Shipping Date: 08/23/2023 Shipment No.: 300081831
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMTSHT02	21BOMTSHT02 -EFC	022164111934	Amelia Collection Hand Towel	EA	24	24	1	24	1

Total Weight:	14.31
Total Quantity Ordered:	24
Total Cartons Ordered:	1
Total Quantity Shipped:	24
Total Cartons Shipped:	1

Order No.: 67897104 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
 #00865

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00865 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	08/23/2023
			Shipment No.: 300081852

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02	11SNMEDWHT02	086569492029	Spa Waffle Hand Towel	EA	24	48	2	48	2
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	144	6	144	6
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	144	6	144	6
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	348	29	348	29
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	504	42	504	42

Total Weight:	1783.66
Total Quantity Ordered:	1284
Total Cartons Ordered:	89
Total Quantity Shipped:	1284
Total Cartons Shipped:	89

Order No.: 67897105 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
#00875

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	08/23/2023
			Shipment No.: 300081856

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02	11SNMEDWHT02	086569492029	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	48	2	48	2
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	120	10	120	10
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	168	14	168	14

Total Weight:	612.32
Total Quantity Ordered:	432
Total Cartons Ordered:	30
Total Quantity Shipped:	432
Total Cartons Shipped:	30

Order No.: 67891040 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00813 Customer PO No.: 14276996

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00813 10201 SCHUSTER WAY PATASKALA, OH 43062 US	Shipping Date: 08/23/2023 Shipment No.: 300081825
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	60	5	60	5
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	24	1	24	1

Total Weight:	101.5
Total Quantity Ordered:	96
Total Cartons Ordered:	7
Total Quantity Shipped:	96
Total Cartons Shipped:	7

Order No.: 67891044 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
 #00810

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 DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	Shipping Date: 08/23/2023 Shipment No.: 300081835
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	24	1	24	1
21SNMLRHT02	21SNMLRHT02	022164104028	Ryley Lemon Hand Towel	EA	24	24	1	24	1
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	24	1	24	1
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	12	1	12	1

Total Weight:	44.93
Total Quantity Ordered:	84
Total Cartons Ordered:	4
Total Quantity Shipped:	84
Total Cartons Shipped:	4

Order No.: 67897121 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00875 Customer PO No.: 14275084

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/23/2023 Shipment No.: 300081854
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCHT01	21BOMCCHT01	022164111965	Devon Collection Hand Towel	EA	24	96	4	96	4
21BOMCCHT02	21BOMCCHT02	022164111972	Devon Collection Hand Towel	EA	24	72	3	72	3
21BOMCCSC01	21BOMCCSC01	022164112023	Devon Collection Shower Curtai	EA	12	24	2	24	2
21BOMCCWP01	21BOMCCWP01	022164111989	Devon Collection Washcloth Set	EA	24	168	7	168	7
21BOMTSHT01	21BOMTSHT01	022164111927	Amelia Collection Hand Towel	EA	24	72	3	72	3
21BOMTSHT02	21BOMTSHT02	022164111934	Amelia Collection Hand Towel	EA	24	144	6	144	6
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	36	3	36	3
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	84	7	84	7
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	216	9	216	9

Total Weight:	653.45
Total Quantity Ordered:	912
Total Cartons Ordered:	44
Total Quantity Shipped:	912
Total Cartons Shipped:	44

Order No.: 67891041 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00816 Customer PO No.: 14276996

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-#00816 1701 TRIMBLE AVENUE EDGEWOOD-EC EDGEWOOD, MD 21040 US	Shipping Date: 08/23/2023 Shipment No.: 300081827
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMTSHT01	21BOMTSHT01 -EFC	022164111927	Amelia Collection Hand Towel	EA	24	24	1	24	1
21BOMTSSC02	21BOMTSSC02 -EFC	022164112016	Amelia Collection Shower Curta	EA	12	36	3	36	3
21BOMTSWP01	21BOMTSWP0 1-EFC	022164111941	Amelia Collection Washcloth Se	EA	24	48	2	48	2

Total Weight:	85.53
Total Quantity Ordered:	108
Total Cartons Ordered:	6
Total Quantity Shipped:	108
Total Cartons Shipped:	6

Order No.: 67897119 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14275084
#00855

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408- 1614 US	08/23/2023
			Shipment No.: 300081844

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCHT01	21BOMCCHT01	022164111965	Devon Collection Hand Towel	EA	24	24	1	24	1
21BOMCCSC01	21BOMCCSC01	022164112023	Devon Collection Shower Curtai	EA	12	24	2	24	2
21BOMCCWP01	21BOMCCWP01	022164111989	Devon Collection Washcloth Set	EA	24	96	4	96	4
21BOMTSHT01	21BOMTSHT01	022164111927	Amelia Collection Hand Towel	EA	24	48	2	48	2
21BOMTSHT02	21BOMTSHT02	022164111934	Amelia Collection Hand Towel	EA	24	96	4	96	4
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	36	3	36	3
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	36	3	36	3
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	120	5	120	5

Total Weight:	364.83
Total Quantity Ordered:	480
Total Cartons Ordered:	24
Total Quantity Shipped:	480
Total Cartons Shipped:	24

Order No.: 67897135 Order Date: 08/03/2023 Customer: KOHLS ECOM DC-#00870 Customer PO No.: 14277013

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS 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: 08/23/2023 Shipment No.: 300081833
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01 -EFC	022164229448	Elena Hand Towel	EA	24	24	1	24	1

Total Weight:	14.31
Total Quantity Ordered:	24
Total Cartons Ordered:	1
Total Quantity Shipped:	24
Total Cartons Shipped:	1

Order No.: 67891048 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
#00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORSICANA D.C. CORSICANA, TX 75110 US	Shipping Date: 08/23/2023 Shipment No.: 300081848
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRBT01	21SNMLRBT01	022164103991	Ryley Paisley Bath Towel	EA	24	24	1	24	1
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	120	5	120	5
21SNMLRHT02	21SNMLRHT02	022164104028	Ryley Lemon Hand Towel	EA	24	72	3	72	3
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	72	3	72	3
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	108	9	108	9
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	72	6	72	6

Total Weight:	397.53
Total Quantity Ordered:	468
Total Cartons Ordered:	27
Total Quantity Shipped:	468
Total Cartons Shipped:	27

Order No.: 67891043 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00870 Customer PO No.: 14276996

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: 08/23/2023 Shipment No.: 300081832
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMTSHT01	21BOMTSHT01	022164111927	Amelia Collection Hand Towel	EA	24	24	1	24	1
21BOMTSHT02	21BOMTSHT02	022164111934	Amelia Collection Hand Towel	EA	24	48	2	48	2
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	36	3	36	3
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	24	1	24	1

Total Weight:	116.91
Total Quantity Ordered:	144
Total Cartons Ordered:	8
Total Quantity Shipped:	144
Total Cartons Shipped:	8

Order No.: 67897134 Order Date: 08/03/2023 Customer: KOHLS ECOM DC-#00836 Customer PO No.: 14277013

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS ECOM DC-#00836 9998 ALL POINTS PARKWAY PLAINFIELD, IN 46168 US	Shipping Date: 08/23/2023 Shipment No.: 300081830
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSWP01	21BOMCSWP0 1-EFC	022164229455	Elena Wash Pack	EA	24	24	1	24	1

Total Weight:	14.97
Total Quantity Ordered:	24
Total Cartons Ordered:	1
Total Quantity Shipped:	24
Total Cartons Shipped:	1

Order No.: 67919948 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - #00840 Customer PO No.: 14277012

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 08/23/2023	Shipment No.: 300081840
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSC01	21BOMCSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	24	1	24	1

Total Weight:	32.7
Total Quantity Ordered:	36
Total Cartons Ordered:	2
Total Quantity Shipped:	36
Total Cartons Shipped:	2

Order No.: 67919955 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - #00890 Customer PO No.: 14277012

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 DIST. CENTER - #00890 4300 MBL DRIVE OTTAWA D.C. OTTAWA, IL 61350 US	Shipping Date: 08/23/2023 Shipment No.: 300081863
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	24	1	24	1
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	72	3	72	3

Total Weight:	76.95
Total Quantity Ordered:	108
Total Cartons Ordered:	5
Total Quantity Shipped:	108
Total Cartons Shipped:	5

Order No.: 67897117 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14275084
#00830

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	08/23/2023
			Shipment No.: 300081837

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCHT01	21BOMCCHT01	022164111965	Devon Collection Hand Towel	EA	24	24	1	24	1
21BOMCCHT02	21BOMCCHT02	022164111972	Devon Collection Hand Towel	EA	24	24	1	24	1
21BOMCCWP01	21BOMCCWP01	022164111989	Devon Collection Washcloth Set	EA	24	48	2	48	2
21BOMTSHT02	21BOMTSHT02	022164111934	Amelia Collection Hand Towel	EA	24	24	1	24	1
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	72	3	72	3

Total Weight:	135.51
Total Quantity Ordered:	204
Total Cartons Ordered:	9
Total Quantity Shipped:	204
Total Cartons Shipped:	9

Order No.: 67891031 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00813 Customer PO No.: 14271610

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-#00813
10201 SCHUSTER WAY
PATASKALA, OH 43062
US

Shipping Date:
08/23/2023

Shipment No.:
300081824

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02	11SNMEDWHT02-EFC	086569492029	Spa Waffle Hand Towel	EA	24	96	4	96	4
11SNMEDWHT02GS	11SNMEDWHT02GS-EFC	086569492012	Spa Border Hand Towel	EA	24	144	6	144	6
11SNMEDWHT02GT	11SNMEDWHT02GT-EFC	086569492036	Spa Waffle Hand Towel	EA	24	144	6	144	6
11SNMEDWHT02T	11SNMEDWHT02T-EFC	086569491992	Spa Border Hand Towel	EA	24	192	8	192	8
11SNMEDWHT03	11SNMEDWHT03-EFC	086569492005	Spa Border Bath Towel	EA	24	72	3	72	3
11SNMEDWSC2	11SNMEDWSC2-EFC	086569491763	Spa Shower Curtain	EA	12	72	6	72	6

Total Weight: 396.84
Total Quantity Ordered: 720
Total Cartons Ordered: 33
Total Quantity Shipped: 720
Total Cartons Shipped: 33

Order No.: 67919949 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - #00855 Customer PO No.: 14277012

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 DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408-1614 US	Shipping Date: 08/23/2023 Shipment No.: 300081845
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	120	5	120	5
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	96	8	96	8
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	216	9	216	9

Total Weight:	348.12
Total Quantity Ordered:	432
Total Cartons Ordered:	22
Total Quantity Shipped:	432
Total Cartons Shipped:	22

Order No.: 67919951 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14277012
 #00865

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00865 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	Shipping Date: 08/23/2023 Shipment No.: 300081853
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	96	4	96	4
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	60	5	60	5
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	120	5	120	5

Total Weight:	220.74
Total Quantity Ordered:	276
Total Cartons Ordered:	14
Total Quantity Shipped:	276
Total Cartons Shipped:	14

Order No.: 67919950 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - #00860 Customer PO No.: 14277012

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 DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORSICANA D.C. CORSICANA, TX 75110 US	Shipping Date: 08/23/2023 Shipment No.: 300081850
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	96	4	96	4
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	48	4	48	4
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	144	6	144	6

Total Weight:	217.98
Total Quantity Ordered:	288
Total Cartons Ordered:	14
Total Quantity Shipped:	288
Total Cartons Shipped:	14

Order No.: 67897100 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
 #00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/23/2023 Shipment No.: 300081836
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT 02GS	086569492012	Spa Border Hand Towel	EA	24	120	5	120	5
11SNMEDWHT02GT	11SNMEDWHT 02GT	086569492036	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT 02T	086569491992	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	276	23	276	23
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	408	34	408	34

Total Weight:	1376.58
Total Quantity Ordered:	900
Total Cartons Ordered:	66
Total Quantity Shipped:	900
Total Cartons Shipped:	66

Order No.: 67897131 Order Date: 08/03/2023 Customer: KOHLS ECOM DC-#00806 Customer PO No.: 14277013

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-#00806 825 EAST CENTRAL AVENUE SAN BERNARDINO - DC SAN BERNARDINO, CA 92408-2413 US	Shipping Date: 08/23/2023 Shipment No.: 300081823
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSC01	21BOMCSC01 -EFC	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1

Total Weight:	17.73
Total Quantity Ordered:	12
Total Cartons Ordered:	1
Total Quantity Shipped:	12
Total Cartons Shipped:	1

Order No.: 67897132 Order Date: 08/03/2023 Customer: KOHLS ECOM DC-#00816 Customer PO No.: 14277013

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-#00816 1701 TRIMBLE AVENUE EDGEWOOD-EC EDGEWOOD, MD 21040 US	Shipping Date: 08/23/2023 Shipment No.: 300081828
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01 -EFC	022164229448	Elena Hand Towel	EA	24	24	1	24	1
21BOMCSSC01	21BOMCSSC01 -EFC	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1
21BOMCSWP01	21BOMCSWP0 1-EFC	022164229455	Elena Wash Pack	EA	24	48	2	48	2

Total Weight:	61.98
Total Quantity Ordered:	84
Total Cartons Ordered:	4
Total Quantity Shipped:	84
Total Cartons Shipped:	4

Order No.: 67891047 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14178090
#00855

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 DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408-1614 US	Shipping Date: 08/23/2023 Shipment No.: 300081847
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRBT01	21SNMLRBT01	022164103991	Ryley Paisley Bath Towel	EA	24	48	2	48	2
21SNMLRHT01	21SNMLRHT01	022164104004	Ryley Paisley Hand Towel	EA	24	48	2	48	2
21SNMLRHT02	21SNMLRHT02	022164104028	Ryley Lemon Hand Towel	EA	24	72	3	72	3
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	48	2	48	2
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	48	4	48	4
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	48	4	48	4

Total Weight:	255.91
Total Quantity Ordered:	312
Total Cartons Ordered:	17
Total Quantity Shipped:	312
Total Cartons Shipped:	17

Order No.: 67897118 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00840 Customer PO No.: 14275084

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 08/23/2023 Shipment No.: 300081842
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCSC01	21BOMCCSC01	022164112023	Devon Collection Shower Curtai	EA	12	12	1	12	1
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	24	1	24	1

Total Weight:	46.46
Total Quantity Ordered:	48
Total Cartons Ordered:	3
Total Quantity Shipped:	48
Total Cartons Shipped:	3

Order No.: 67897106 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
#00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. 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: 08/23/2023 Shipment No.: 300081858
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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	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	36	3	36	3
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	60	5	60	5

Total Weight:	214.24
Total Quantity Ordered:	144
Total Cartons Ordered:	10
Total Quantity Shipped:	144
Total Cartons Shipped:	10

Order No.: 67897122 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14275084
#00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. 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: 08/23/2023 Shipment No.: 300081860
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCHT01	21BOMCCHT01	022164111965	Devon Collection Hand Towel	EA	24	24	1	24	1
21BOMCCHT02	21BOMCCHT02	022164111972	Devon Collection Hand Towel	EA	24	24	1	24	1
21BOMCCWP01	21BOMCCWP01	022164111989	Devon Collection Washcloth Set	EA	24	24	1	24	1
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	72	3	72	3

Total Weight: 119.99
Total Quantity Ordered: 168
Total Cartons Ordered: 8
Total Quantity Shipped: 168
Total Cartons Shipped: 8

Order No.: 67897107 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00890 Customer PO No.: 14271597

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 DIST. CENTER - #00890 4300 MBL DRIVE OTTAWA D.C. OTTAWA, IL 61350 US	Shipping Date: 08/23/2023 Shipment No.: 300081862
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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	086569492012	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02GT	11SNMEDWHT02GT	086569492036	Spa Waffle Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	96	4	96	4
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	228	19	228	19
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	348	29	348	29

Total Weight:	1185.68
Total Quantity Ordered:	792
Total Cartons Ordered:	57
Total Quantity Shipped:	792
Total Cartons Shipped:	57

Order No.: 67891046 Order Date: 08/02/2023 Customer: KOHLS DIST. CENTER - #00840 Customer PO No.: 14178090

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 DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 08/23/2023 Shipment No.: 300081843
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21SNMLRHT02	21SNMLRHT02	022164104028	Ryley Lemon Hand Towel	EA	24	24	1	24	1
21SNMLRHT03	21SNMLRHT03	022164104011	Ryley Border Hand Towel	EA	24	24	1	24	1
21SNMLRSC01	21SNMLRSC01	022164103977	Ryley Paisley Shower Curtain	EA	12	12	1	12	1
21SNMLRSC02	21SNMLRSC02	022164103984	Ryley Lemon Shower Curtain	EA	12	12	1	12	1

Total Weight:	54.62
Total Quantity Ordered:	72
Total Cartons Ordered:	4
Total Quantity Shipped:	72
Total Cartons Shipped:	4

Order No.: 67897120 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - #00860 Customer PO No.: 14275084

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 DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORSICANA D.C. CORSICANA, TX 75110 US	Shipping Date: 08/23/2023 Shipment No.: 300081849
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCCSC01	21BOMCCSC01	022164112023	Devon Collection Shower Curtai	EA	12	12	1	12	1
21BOMCCWP01	21BOMCCWP01	022164111989	Devon Collection Washcloth Set	EA	24	72	3	72	3
21BOMTSHT01	21BOMTSHT01	022164111927	Amelia Collection Hand Towel	EA	24	48	2	48	2
21BOMTSHT02	21BOMTSHT02	022164111934	Amelia Collection Hand Towel	EA	24	72	3	72	3
21BOMTSSC01	21BOMTSSC01	022164112009	Amelia Collection Shower Curta	EA	12	12	1	12	1
21BOMTSSC02	21BOMTSSC02	022164112016	Amelia Collection Shower Curta	EA	12	24	2	24	2
21BOMTSWP01	21BOMTSWP01	022164111941	Amelia Collection Washcloth Se	EA	24	120	5	120	5

Total Weight:	254.29
Total Quantity Ordered:	360
Total Cartons Ordered:	17
Total Quantity Shipped:	360
Total Cartons Shipped:	17

Order No.: 67897102 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
 #00855

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408- 1614 US	08/23/2023
			Shipment No.: 300081846

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT03	11SNMEDWHT03	086569492005	Spa Border Bath Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC1	086569491756	Spa Shower Curtain	EA	12	60	5	60	5
11SNMEDWSC2	11SNMEDWSC2	086569491763	Spa Shower Curtain	EA	12	96	8	96	8

Total Weight:	320.82
Total Quantity Ordered:	180
Total Cartons Ordered:	14
Total Quantity Shipped:	180
Total Cartons Shipped:	14

Order No.: 67897103 Order Date: 08/03/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14271597
 #00860

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	08/23/2023
			Shipment No.: 300081851

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02T	11SNMEDWHT 02T	086569491992	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	48	4	48	4
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	60	5	60	5

Total Weight:	214.02
Total Quantity Ordered:	132
Total Cartons Ordered:	10
Total Quantity Shipped:	132
Total Cartons Shipped:	10

Order No.: 67891032 Order Date: 08/02/2023 Customer: KOHLS ECOM DC-#00816 Customer PO No.: 14271610

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-#00816 1701 TRIMBLE AVENUE EDGEWOOD-EC EDGEWOOD, MD 21040 US	Shipping Date: 08/23/2023 Shipment No.: 300081826
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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	72	3	72	3
11SNMEDWSC2	11SNMEDWSC2-EFC	086569491763	Spa Shower Curtain	EA	12	60	5	60	5

Total Weight:	199.7
Total Quantity Ordered:	180
Total Cartons Ordered:	10
Total Quantity Shipped:	180
Total Cartons Shipped:	10

Order No.: 67897133 Order Date: 08/03/2023 Customer: KOHLS ECOM DC-#00826 Customer PO No.: 14277013

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-#00826 2019 N. I-35 E DESOTO-EC DESOTO, TX 75115 US	Shipping Date: 08/23/2023 Shipment No.: 300081829
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	12	1	12	1
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	24	1	24	1

Total Weight:	32.7
Total Quantity Ordered:	36
Total Cartons Ordered:	2
Total Quantity Shipped:	36
Total Cartons Shipped:	2

Order No.: 67919952 Order Date: 08/06/2023 Customer: KOHLS DIST. CENTER - Customer PO No.: 14277012
#00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/23/2023 Shipment No.: 300081857
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
21BOMCSHT01	21BOMCSHT01	022164229448	Elena Hand Towel	EA	24	48	2	48	2
21BOMCSSC01	21BOMCSSC01	022164229431	Elena 13pcs Shower Curtain	EA	12	36	3	36	3
21BOMCSWP01	21BOMCSWP01	022164229455	Elena Wash Pack	EA	24	72	3	72	3

Total Weight:	126.72
Total Quantity Ordered:	156
Total Cartons Ordered:	8
Total Quantity Shipped:	156
Total Cartons Shipped:	8