

MASTER BILL OF LADING

ESTIMATED PICK UP DATE: 5/26/2023

SHIPPER

Name: E E CO LTD
 Address: 221 HANSON WAY
 City/State/Zip: WOODLAND, CA 95776
 Contact: ALEX GONZALEZ

BILL OF LADING :5004817989
 TRAILER # SEAL #
 ORDER # : 1038319_JAC70369069S
 CR JAC70369069S
 P8 1T5WD9-01
 PO 1T5WD9-01

CONSIGNEE

Name: TAGG
 Address: 2650 S WILLOW AVE
 City/State/Zip: BLOOMINGTON, CA 92316
 Contact:

CARRIER

CARRIER NAME: **U S F REDDAWAY INC**
 SCAC: RETL
 PRO NUMBER:

SHIPPER BOL

790

11/10/21

624-816767-5



Carrier tariffs are incorporated herein (copies available upon request).
 Carrier tariffs limit its liability. This shipment is subject to the terms and conditions
 of the Uniform Straight Bill of Lading as stated in the NMFC 100 series tariff.

THIRD PARTY FREIGHT CHARGES BILL TO

Name: DOLLAR GENERAL C/O HUB GROUP
 Address: 2001 HUB GROUP WAY
 City/State/Zip: OAK BROOK, IL 60523

Freight Charge Terms :

(freight charges are prepaid unless marked otherwise)

Prepaid Collect 3rd Party

SPECIAL INSTRUCTIONS AND SPECIAL SERVICES

CUSTOMS INSTRUCTION:

SPECIAL INSTRUCTION:

67349644, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER, Number of miles: 2528 | STOP#:1 CR - JAC70369069S, STOP#:1 PO - **1T5WD9-01** | |

SPECIAL SERVICES:

CARRIER INFO

PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					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. EMERGENCY PH # 1-800-535-5053 GENERAL COMMODITIES		
1	42	175	115			NMFC_CLASS	400.0
1	42	175.00	115.00		GRAND TOTAL		

CUSTOMER

CUSTOMER ORDER NUMBER	SKU	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
JAC70369069S		1	42	175	115	Y	N	
GRAND TOTAL		1	42	175.00	115.00			

PALLET TYPE

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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.

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, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

[Signature] 5-26-23

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. C certifies emergency response information was made available and/ has the DOT emergency response

[Signature] 5-26-23
 Property described above is received in good order, except as

Date: 5/26/2023 10:22:27 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	DOLGEN- JACKSON DC
Address:	221 Hanson Way	Address:	200 Jackson Road
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Jackson, GA 30233
SID#:		CID#:	
PHONE:		Dept:	00
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000798933		Trailer number: 850633	
		Seal number(s): NA	
(402)06757163000798933		SCAC: HGLS	
CARRIER NAME: HUB CITY GROUP		Pro Number: 6248167675	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid: <input type="checkbox"/>		Collect: X	
Master Bill of Lading: with attached underlying Bills of Lading		3rd Party: <input type="checkbox"/>	
Appointment Time		Actual Driver Arrival Time	
AM		AM	
PM		PM	
Driver Departure Time		AM	
		PM	
THIRD PARTY FREIGHT CHARGES BILL TO:		Name:	
Address:		City/State/Zip:	
SPECIAL INSTRUCTIONS:		Packing List is Attached	
Load #: JAC70369069S			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
1T5WD9	42	124.74	Y	N	
Grand Total	42	124.74			

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		
		42	ctns	124.74		Assorted Products of Different Class and NMFC No.	49390 Sub 4	100
1		42		174.74		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.

Order No.: 67349644 Order Date: 05/16/2023 Customer: DOLGEN- JACKSON DC Customer PO No.: 1T5WD9

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	SHIP TO: DOLGEN- JACKSON DC 200 JACKSON ROAD JACKSON, GA 30233 US	Shipping Date: 05/26/2023 Shipment No.: 300079893
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	504	42	504	42

Total Weight:	124.74
Total Quantity Ordered:	504
Total Cartons Ordered:	42
Total Quantity Shipped:	504
Total Cartons Shipped:	42