

SHIP FROM		Master Bill of Lading Number: 06757163000813315	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: Schneider	
Name: Macys /Bloom Consolidation Center DC#: _____ Div. _____ Address: 14141 Alondra Boulevard City/State/Zip: Santa Fe Spgs, CA 90670 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 140300 Seal number(s): 8070979 SCAC: SCNN Pro Number: NA	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 53373612		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
		Appointment Time 8:00 AM	Actual Driver Arrival Time 8:00 AM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
3434963	135	1347.24	Y	N	06757163000813223	OK	
3434963	4	44.48	Y	N	06757163000813261	TM	
3434897	41	248.38	Y	N	06757163000813131	SW	
3434897	292	2225.93	Y	N	06757163000813049	AZ	
3434897	8	66.96	Y	N	06757163000813087	DV	
3434963	78	737.46	Y	N	06757163000813155	AZ	
3434963	35	330.88	Y	N	06757163000813162	BA	
3434963	5	50.86	Y	N	06757163000813247	ST	
3434897	245	1907.35	Y	N	06757163000813056	BA	
3434897	93	629.73	Y	N	06757163000813117	SC	
3434963	3	27.96	Y	N	06757163000813216	JP	
3434897	31	200.42	Y	N	06757163000813063	CI	
3434963	2	21.58	Y	N	06757163000813209	HA	

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

**Shipper Signature**

<b>SHIPPER SIGNATURE / DATE</b> 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. <i>Stannell 7/26/23</i>	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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>Max 7/26/23</i>
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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757163000813315	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		CARRIER NAME: Schneider	
Name: Macys /Bloom Consolidation Center DC#: _____ Div. _____ Address: 14141 Alondra Boulevard City/State/Zip: Santa Fe Spgs, CA 90670 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 140300 Seal number(s): 8070979 SCAC: SCNN Pro Number: NA	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
<b>SPECIAL INSTRUCTIONS:</b> Load #: 53373612		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED <input type="checkbox"/> 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#
3434963	2	19.15	Y	N	06757163000813179	CI	
3434963	15	142.65	Y	N	06757163000813254	SW	
3434897	252	1997.13	Y	N	06757163000813148	WJ	
3434963	1	10.13	Y	N	06757163000813193	DV	
3434897	8	58.08	Y	N	06757163000813094	JP	
3434963	8	67.78	Y	N	06757163000813230	SC	
3434897	255	1950.69	Y	N	06757163000813100	OK	
3434963	7	68.69	Y	N	06757163000813186	CL	
3434897	18	102.96	Y	N	06757163000813070	CL	
3434897	22	176.37	Y	N	06757163000813124	ST	
3434963	3	31.71	Y	N	06757163000813278	TU	
<b>Grand Total</b>	1563	12464.57					

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"/>
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The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
\_\_\_\_\_  
Shipper Signature

<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757163000813315	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>
<b>SHIP TO</b>		<b>CARRIER NAME:</b> Schneider	
Name:	Macys /Bloom Consolidation Center	DC#:	
		Div.	
Address:	14141 Alondra Boulevard	Trailer number:	140300
		Seal number(s):	8070979
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC:	SCNN
SID#:		Pro Number:	NA
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms:</b>	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/>	<b>MASTER BILL OF LANDING: WITH ATTACHED</b>
<b>SPECIAL INSTRUCTIONS:</b>		<b>UNDERLYING BILLS OF LANDING</b>	
Load #: 53373612		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	AM PM

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
39	Pallet			1950.00		Pallet		70
		1265	ctns	9564.00		Throws,Blankets	49040	150
		298	ctns	2900.57		Comforters, Bedspreads	49017	200
39				14414.57		<b>Grand Total</b>		

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 \_\_\_\_\_

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

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The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

\_\_\_\_\_  
Shipper Signature

<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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<b>SHIP FROM</b>		Name: E & E COMPANY LTD		Bill of Lading Number: 06757163000813186	
Address: 221 Hanson Way		City/State/Zip: Woodland, CA 95776		 (402)06757163000813186	
SID#:		PHONE:			
VENDOR:		FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		Name: Macys Home Minooka DC		Trailer number: 140300	
Address: 601 Midpoint Rd.		Location #: CL		Seal number(s): 8070979	
City/State/Zip: Minooka, IL 60447		CID#:		SCAC: SCNN	
Dept: 0609		FOB: <input type="checkbox"/>		Pro Number: NA	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>			Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Name:			Prepaid: <input type="checkbox"/>		
Address:			Collect: X		
City/State/Zip:			3rd Party: <input type="checkbox"/>		
SPECIAL INSTRUCTIONS:			Master Bill of Lading: with attached		
Load #: 53373612			(check box) underlying Bills of Lading		
Packing List is Attached			Appointment Time	Actual Driver Arrival Time	Driver Departure Time
			AM	AM	AM
			PM	PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	7	68.69	Y N	
<b>Grand Total</b>	7	68.69		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		7	ctns	68.69		Comforters, Bedspreads	49017	200
1		7		118.69		<b>Grand Total</b>		

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<b>COD Amount:</b> _____
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).**

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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.

<b>Trailer Loaded:</b>	<b>Freight Counted:</b>
<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.

**Customer:** MACYS HOME MINOOKA DC

**Ship Date:** 07/26/2023

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

**BILL TO:**  
MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**  
MACYS HOME MINOOKA DC  
601 MIDPOINT RD.  
MINOOKA, IL 60447  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	4	2	4	2
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	4	2	4	2
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4334	766390779000	Microfiber Comforter	EA	2	2	1	2	1

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**Total Weight:** 68.69  
**Total Quantity Ordered:** 14  
**Total Cartons Ordered:** 7  
**Total Quantity Shipped:** 14  
**Total Cartons Shipped:** 7

# Bill Of Lading

<b>SHIP FROM</b>		Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____ FOB: <input type="checkbox"/>		Bill of Lading Number: 06757163000813148   (402)06757163000813148	
<b>SHIP TO</b>		Name: Macy's Home West Johnson Pool Location #: WJ Stock Address: 181 West Johnson Ave City/State/Zip: Cheshire, CT 06410 CID#: _____ Dept: 0784 FOB: <input type="checkbox"/>		CARRIER NAME: Schneider Responsible Acct.No: _____ Trailer number: 140300 Seal number(s): 8070979  SCAC: SCNN Pro Number: NA	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Name: _____ Address: _____ City/State/Zip: _____		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  Prepaid: _____ Collect: <b>X</b> 3rd Party: _____  <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: Load #: 53373612  Packing List is Attached		Appointment Time AM _____ PM _____		Actual Driver Arrival Time AM _____ PM _____	
Driver Departure Time AM _____ PM _____					

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434897	252	1997.13	Y	N	
<b>Grand Total</b>	252	1997.13			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet		
		252	ctns	1997.13		Throws, Blankets	49040	150
4		252		2197.13		<b>Grand Total</b>		

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COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  
  

**Shipper Signature**

<b>SHIPPER SIGNATURE / DATE</b> 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	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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**Customer:** MACY'S HOME WEST JOHNSON POOL STOCK

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACY'S HOME WEST JOHNSON POOL  
STOCK  
181 WEST JOHNSON AVE  
CHESHIRE, CT 06410  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267K	MCG51-4298	766390778829	Fleece Blanket	EA	2	98	49	98	49
3434897	100168267FQ	MCG51-4300	766390778782	Fleece Blanket	EA	2	100	50	100	50
3434897	100168267K	MCG51-4301	766390778843	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267K	MCG51-4304	766390778805	Fleece Blanket	EA	2	102	51	102	51

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**Total Weight:** 1997.13  
**Total Quantity Ordered:** 504  
**Total Cartons Ordered:** 252  
**Total Quantity Shipped:** 504  
**Total Cartons Shipped:** 252

**SHIP FROM**  
 Name: E & E COMPANY LTD  
 Address: 221 Hanson Way  
 City/State/Zip: Woodland, CA 95776  
 SID#: \_\_\_\_\_  
 PHONE: \_\_\_\_\_  
 VENDOR: \_\_\_\_\_ FOB:

Bill of Lading Number: 06757163000813179  
  
 (402)06757163000813179

**SHIP TO**  
 Name: Macys Home Los Angeles DC Location #: CI  
 Address: 15541 East Gale Ave  
 City/State/Zip: City of Industry, CA 91745  
 CID#: \_\_\_\_\_  
 Dept: 0609 FOB:

**CARRIER NAME:** Schneider  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: 140300  
 Seal number(s): 8070979  
**SCAC:** SCNN  
**Pro Number:** NA

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
**SPECIAL INSTRUCTIONS:**  
 Load #: 53373612  
 Packing List is Attached

**Freight Charge Terms: (freight charges are prepaid unless marked otherwise)**  
**Prepaid:**  **Collect:** X **3rd Party:** \_\_\_\_\_  
 Master Bill of Lading: with attached underlying Bills of Lading  

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	2	19.15	Y N	
<b>Grand Total</b>	2	19.15		

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	19.15		Comforters, Bedspreads	49017	200
1		2		69.15		<b>Grand Total</b>		

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:**

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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.

**Customer:** MACYS HOME LOS ANGELES DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME LOS ANGELES DC  
15541 EAST GALE AVE  
CITY OF INDUSTRY, CA 91745  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4331	766390779017	Microfiber Comforter	EA	2	2	1	2	1


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**Total Weight:** 19.15  
**Total Quantity Ordered:** 4  
**Total Cartons Ordered:** 2  
**Total Quantity Shipped:** 4  
**Total Cartons Shipped:** 2

Date: 7/26/2023 8:56:46 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Hayward DC Location #: HA
Address:	221 Hanson Way	Address:	28701 Hall Road
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Hayward, CA 94545
SID#:		CID#:	
PHONE:		Dept:	0609
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813209		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813209		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
3rd Party:		Master Bill of Lading: with attached underlying Bills of Lading	
<input type="checkbox"/>		Appointment Time	
(check box)		Actual Driver Arrival Time	
		Driver Departure Time	
SPECIAL INSTRUCTIONS:		AM	
Load #: 53373612		PM	
Packing List is Attached		AM	
		PM	

## THIRD PARTY FREIGHT CHARGES BILL TO:

CUSTOMER ORDER INFORMATION	
CUSTOMER ORDER NUMBER	ADDITIONAL SHIPPER INFO
# PKGS	
WEIGHT	
PALLET/SLIP	
3434963	
2	
21.58	
Y	
N	
<b>Grand Total</b>	
2	
21.58	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	2	21.58	Y N	
<b>Grand Total</b>	2	21.58		

## 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 366</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		2	ctns	21.58		Comforters, Bedspreads	49017	200
1		2		71.58		<b>Grand Total</b>		

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.

Customer: MACYS HOME HAYWARD DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME HAYWARD DC  
28701 HALL ROAD  
HAYWARD, CA 94545  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	2	1	2	1

<b>Total Weight:</b>	21.58
<b>Total Quantity Ordered:</b>	4
<b>Total Cartons Ordered:</b>	2
<b>Total Quantity Shipped:</b>	4
<b>Total Cartons Shipped:</b>	2

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813216	
Name: E & E COMPANY LTD		 (402)06757163000813216	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:			
VENDOR:		CARRIER NAME: Schneider	
<b>SHIP TO</b>		Responsible Acct.No:	
Name: Macys Home Joppa DC		Trailer number: 140300	
Address: 3300 Fashion Way		Seal number(s): 8070979	
City/State/Zip: Joppa, MD 21085		SCAC: SCNN	
CID#:		Pro Number: NA	
Dept: 0609			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS: Load #: 53373612 Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM	
		PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	3	27.96	Y N	
<b>Grand Total</b>	<b>3</b>	<b>27.96</b>		

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	27.96		Comforters, Bedspreads	49017	200
1		3		77.96		<b>Grand Total</b>		

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 \_\_\_\_\_

<b>COD Amount:</b> _____
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.

<b>SHIPPER SIGNATURE / DATE</b> 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: <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	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME JOPPA DC

Ship Date: 07/26/2023

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

**BILL TO:**  
 MACY'S HOME MMG  
 2101 EAST KEMPER ROAD  
 CINCINNATI, OH 45241  
 US

**SHIP TO:**  
 MACYS HOME JOPPA DC  
 3300 FASHION WAY  
 JOPPA, MD 21085  
 US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	2	1	2	1

**Total Weight:** 27.96  
**Total Quantity Ordered:** 6  
**Total Cartons Ordered:** 3  
**Total Quantity Shipped:** 6  
**Total Cartons Shipped:** 3

Date: 7/26/2023 8:56:48 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Denver DC
Address:	221 Hanson Way	Address:	510 East 51st Ave
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Denver, CO 80216
SID#:		CID#:	
PHONE:		Dept:	0609
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813193		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813193		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
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:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Address:		Appointment Time	Actual Driver Arrival Time
City/State/Zip:		AM	AM
SPECIAL INSTRUCTIONS:		PM	PM
Load #: 53373612		Driver Departure Time	AM
Packing List is Attached			PM

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434963	1	10.13	Y	N	
<b>Grand Total</b>	<b>1</b>	<b>10.13</b>			

## 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	10.13		Comforters, Bedspreads	49017	200
1		1		60.13		<b>Grand Total</b>		

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.

Customer: MACYS HOME DENVER DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME DENVER DC  
510 EAST 51ST AVE  
DENVER, CO 80216  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1


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**Total Weight:** 10.13  
**Total Quantity Ordered:** 2  
**Total Cartons Ordered:** 1  
**Total Quantity Shipped:** 2  
**Total Cartons Shipped:** 1

Date: 7/26/2023 8:56:49 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Goodyear DC Location #: AZ
Address:	221 Hanson Way	Address:	16575 West Commerce Lane
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Goodyear, AZ 85338
SID#:		CID#:	
PHONE:		Dept:	0784
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813049		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813049		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
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:	
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:	
Load #: 53373612	
Packing List is Attached	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434897	292	2225.93	Y	N	
<b>Grand Total</b>	292	2225.93			

## 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
4	Pallet			200.00		Pallet		
		292	ctns	2225.93		Throws,Blankets	49040	150
4		292		2425.93		<b>Grand Total</b>		

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.

Customer: MACYS HOME GOODYEAR DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME GOODYEAR DC  
16575 WEST COMMERCE LANE  
GOODYEAR, AZ 85338  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267TW	MCG51-4296	766390778881	Fleece Blanket	EA	2	80	40	80	40
3434897	100168267K	MCG51-4298	766390778829	Fleece Blanket	EA	2	98	49	98	49
3434897	100168267FQ	MCG51-4300	766390778782	Fleece Blanket	EA	2	100	50	100	50
3434897	100168267K	MCG51-4301	766390778843	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267K	MCG51-4304	766390778805	Fleece Blanket	EA	2	102	51	102	51

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**Total Weight:** 2225.93  
**Total Quantity Ordered:** 584  
**Total Cartons Ordered:** 292  
**Total Quantity Shipped:** 584  
**Total Cartons Shipped:** 292

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813117	
Name: E & E COMPANY LTD		 (402)06757163000813117	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home Secaucus DC Location #: SC		Seal number(s): 8070979	
Address: 500 Meadowlands Parkway		SCAC: SCNN	
City/State/Zip: Secaucus, NJ 07094		Pro Number: NA	
CID#:			
Dept: 0784			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:			
SPECIAL INSTRUCTIONS: Load #: 53373612		Appointment Time	
Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434897	93	629.73	Y N	
<b>Grand Total</b>	93	629.73		

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		
		93	ctns	629.73		Throws,Blankets	49040	150
2		93		729.73		<b>Grand Total</b>		

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 \_\_\_\_\_"

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

<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME SECAUCUS DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME SECAUCUS DC  
500 MEADOWLANDS PARKWAY  
SECAUCUS, NJ 07094  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267TW	MCG51-4293	766390778874	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	36	18	36	18
3434897	100168267TW	MCG51-4296	766390778881	Fleece Blanket	EA	2	8	4	8	4
3434897	100168267FQ	MCG51-4297	766390778768	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267TW	MCG51-4299	766390778904	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4300	766390778782	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267K	MCG51-4301	766390778843	Fleece Blanket	EA	2	18	9	18	9
3434897	100168267TW	MCG51-4302	766390778867	Fleece Blanket	EA	2	32	16	32	16
3434897	100168267FQ	MCG51-4303	766390778744	Fleece Blanket	EA	2	28	14	28	14

<b>Total Weight:</b>	<b>629.73</b>
<b>Total Quantity Ordered:</b>	<b>186</b>
<b>Total Cartons Ordered:</b>	<b>93</b>
<b>Total Quantity Shipped:</b>	<b>186</b>
<b>Total Cartons Shipped:</b>	<b>93</b>

# Bill Of Lading

<b>SHIP FROM</b>		Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		Bill of Lading Number: 06757163000813100   (402)06757163000813100	
<b>SHIP TO</b>		Name: Macy's Home Owasso DC      Location #: OK Address: 7120 E.76th Street North  City/State/Zip: Owasso, OK 74055 CID#: _____ Dept: 0784		CARRIER NAME: Schneider Responsible Acct.No: _____ Trailer number: 140300 Seal number(s): 8070979 SCAC: SCNN Pro Number: NA	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Name: _____ Address: _____  City/State/Zip: _____		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____      Collect: <input checked="" type="checkbox"/> 3rd Party: _____ <input type="checkbox"/> (check box)      Master Bill of Lading: with attached underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Load #: 53373612 Packing List is Attached		Appointment Time AM PM		Actual Driver Arrival Time AM PM	
Driver Departure Time AM PM					

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
3434897	255	1950.69	Y    N		
<b>Grand Total</b>	255	1950.69			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet		
		255	ctns	1950.69		Throws,Blankets	49040	150
4		255		2150.69		<b>Grand Total</b>		

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**

<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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**Customer:** MACY'S HOME OWASSO DC

**Ship Date:** 07/26/2023

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

**BILL TO:**  
MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**  
MACY'S HOME OWASSO DC  
7120 E.76TH STREET NORTH  
OWASSO, OK 74055  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267TW	MCG51-4296	766390778881	Fleece Blanket	EA	2	54	27	54	27
3434897	100168267K	MCG51-4298	766390778829	Fleece Blanket	EA	2	50	25	50	25
3434897	100168267FQ	MCG51-4300	766390778782	Fleece Blanket	EA	2	100	50	100	50
3434897	100168267K	MCG51-4301	766390778843	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267K	MCG51-4304	766390778805	Fleece Blanket	EA	2	102	51	102	51

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**Total Weight:** 1950.69  
**Total Quantity Ordered:** 510  
**Total Cartons Ordered:** 255  
**Total Quantity Shipped:** 510  
**Total Cartons Shipped:** 255

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813094	
Name: E & E COMPANY LTD		 (402)06757163000813094	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home Joppa DC Location #: JP		Seal number(s): 8070979	
Address: 3300 Fashion Way		SCAC: SCNN	
City/State/Zip: Joppa, MD 21085		Pro Number: NA	
CID#:			
Dept: 0784 FOB: <input type="checkbox"/>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time Actual Driver Arrival Time Driver Departure Time	
SPECIAL INSTRUCTIONS:		AM AM AM	
Load #: 53373612		PM PM PM	
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434897	8	58.08	Y N	
<b>Grand Total</b>	8	58.08		

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		
		8	ctns	58.08		Throws,Blankets	49040	150
1		8		108.08		<b>Grand Total</b>		

<p>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 _____</p>	<p><b>COD Amount:</b> _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p style="text-align: center;"><b>Customer check acceptable:</b> <input type="checkbox"/></p>
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**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;"><b>Shipper Signature</b></p>
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<p><b>SHIPPER SIGNATURE / DATE</b>                  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.</p>	<p><b>Trailer Loaded:</b></p> <p><input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p>	<p><b>Freight Counted:</b></p> <p><input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver/pallets said to contain  <input type="checkbox"/> By Driver/Pieces</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b>                  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.</p>
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Customer: MACYS HOME JOPPA DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**


MACYS HOME JOPPA DC  
3300 FASHION WAY  
JOPPA, MD 21085  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267FQ	MCG51-4297	766390778768	Fleece Blanket	EA	2	16	8	16	8

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<b>Total Weight:</b>	<b>58.08</b>
<b>Total Quantity Ordered:</b>	<b>16</b>
<b>Total Cartons Ordered:</b>	<b>8</b>
<b>Total Quantity Shipped:</b>	<b>16</b>
<b>Total Cartons Shipped:</b>	<b>8</b>

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813162	
Name: E & E COMPANY LTD		 (402)06757163000813162	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home Bailey Rd DC Location #: BA		Seal number(s): 8070979	
Address: 300 South Bailey Road		SCAC: SCNN	
City/State/Zip: North Jackson, OH 44451		Pro Number: NA	
CID#:			
Dept: 0609			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS:		Actual Driver Arrival Time	
Load #: 53373612		Driver Departure Time	
Packing List is Attached		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	35	330.88	Y N	
<b>Grand Total</b>	35	330.88		

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		
		35	ctns	330.88		Comforters, Bedspreads	49017	200
1		35		380.88		<b>Grand Total</b>		

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.

Customer: MACYS HOME BAILEY RD DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**


MACYS HOME BAILEY RD DC  
300 SOUTH BAILEY ROAD  
NORTH JACKSON, OH 44451  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	24	12	24	12
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	6	3	6	3
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	30	15	30	15
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	6	3	6	3
3434963	100168398TW	MCG10-4332	766390779062	Microfiber Comforter	EA	2	2	1	2	1

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**Total Weight:** 330.88  
**Total Quantity Ordered:** 70  
**Total Cartons Ordered:** 35  
**Total Quantity Shipped:** 70  
**Total Cartons Shipped:** 35

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813155	
Name: E & E COMPANY LTD		 (402)06757163000813155	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home Goodyear DC Location #: AZ		Seal number(s): 8070979	
Address: 16575 West Commerce Lane		SCAC: SCNN	
City/State/Zip: Goodyear, AZ 85338		Pro Number: NA	
CID#:			
Dept: 0609		FOB: <input type="checkbox"/>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS: Load #: 53373612 Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM	
		PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	78	737.46	Y N	
<b>Grand Total</b>	78	737.46		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		78	ctns	737.46		Comforters, Bedspreads	49017	200
2		78		837.46		<b>Grand Total</b>		

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.

Customer: MACYS HOME GOODYEAR DC

Ship Date: 07/26/2023

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

**BILL TO:**  
MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**  
MACYS HOME GOODYEAR DC  
16575 WEST COMMERCE LANE  
GOODYEAR, AZ 85338  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	64	32	64	32
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	4	2	4	2
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	42	21	42	21
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	34	17	34	17
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	12	6	12	6

**Total Weight:** 737.46  
**Total Quantity Ordered:** 156  
**Total Cartons Ordered:** 78  
**Total Quantity Shipped:** 156  
**Total Cartons Shipped:** 78

Date: 7/26/2023 8:56:56 AM

# Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000813131	
Name: E & E COMPANY LTD		 (402)06757163000813131	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
SHIP TO		Trailer number: 140300	
Name: Macys Home South Windsor DC Location #: SW		Seal number(s): 8070979	
Address: 301 Governors Hwy		SCAC: SCNN	
City/State/Zip: South Windsor, CT 06074		Pro Number: NA	
CID#:			
Dept: 0784			
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:			
SPECIAL INSTRUCTIONS: Load #: 53373612		Appointment Time	
Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434897	41	248.38	Y N	
Grand Total	41	248.38		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE	
QTY	TYPE	QTY	TYPE			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		
		NMFC #	CLASS					
1	Pallet			50.00		Pallet		
		41	ctns	248.38		Throws,Blankets	49040	150
1		41		298.38		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"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
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<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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Customer: MACYS HOME SOUTH WINDSOR DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME SOUTH WINDSOR DC  
301 GOVERNORS HWY  
SOUTH WINDSOR, CT 06074  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267TW	MCG51-4293	766390778874	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	18	9	18	9
3434897	100168267TW	MCG51-4299	766390778904	Fleece Blanket	EA	2	32	16	32	16
3434897	100168267TW	MCG51-4302	766390778867	Fleece Blanket	EA	2	16	8	16	8

Total Weight:	248.38
Total Quantity Ordered:	82
Total Cartons Ordered:	41
Total Quantity Shipped:	82
Total Cartons Shipped:	41

Date: 7/26/2023 8:56:57 AM

## Bill Of Lading

Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813223	
Name:	E & E COMPANY LTD	 (402)06757163000813223	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:		FOB: <input type="checkbox"/>	<b>CARRIER NAME:</b> Schneider
<b>SHIP TO</b>		Responsible Acct.No:	Trailer number: 140300
Name:	Macys Home Logistics DC-OK	Location #: OK	Seal number(s): 8070979
Address:	7120 E.76th Street North		<b>SCAC:</b> SCNN
City/State/Zip:	Owasso, OK 74055		<b>Pro Number:</b> NA
CID#:			
Dept:	0609	FOB: <input type="checkbox"/>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms: (freight charges are prepaid unless marked otherwise)</b>	
Name:	Prepaid: <input type="checkbox"/> Collect: <b>X</b> 3rd Party: <input type="checkbox"/>		
Address:	Master Bill of Lading: with attached underlying Bills of Lading		
City/State/Zip:	(check box)		
SPECIAL INSTRUCTIONS:	Appointment Time	Actual Driver Arrival Time	Driver Departure Time
Load #: 53373612	AM	AM	AM
Packing List is Attached	PM	PM	PM

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434963	135	1347.24	Y	N	
<b>Grand Total</b>	135	1347.24			

## 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
2	Pallet			100.00		Pallet		
		135	ctns	1347.24		Comforters, Bedspreads	49017	200
2		135		1447.24		<b>Grand Total</b>		

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.

Customer: MACYS HOME LOGISTICS DC-OK

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME LOGISTICS DC-OK  
7120 E.76TH STREET NORTH  
OWASSO, OK 74055  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	42	21	42	21
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	50	25	50	25
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	34	17	34	17
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	36	18	36	18
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	16	8	16	8
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	34	17	34	17
3434963	100168398K	MCG10-4331	766390779017	Microfiber Comforter	EA	2	10	5	10	5
3434963	100168398TW	MCG10-4332	766390779062	Microfiber Comforter	EA	2	16	8	16	8
3434963	100168398FQ	MCG10-4333	766390778942	Microfiber Comforter	EA	2	16	8	16	8
3434963	100168398K	MCG10-4334	766390779000	Microfiber Comforter	EA	2	16	8	16	8

Total Weight: 1347.24  
 Total Quantity Ordered: 270  
 Total Cartons Ordered: 135  
 Total Quantity Shipped: 270  
 Total Cartons Shipped: 135

# Bill Of Lading

<b>SHIP FROM</b>		Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		Bill of Lading Number: 06757163000813230   (402)06757163000813230	
<b>SHIP TO</b>		Name: Macys Home Secaucus DC      Location #: SC Address: 500 Meadowlands Parkway  City/State/Zip: Secaucus, NJ 07094 CID#: _____ Dept: 0609		CARRIER NAME: Schneider Responsible Acct.No: _____ Trailer number: 140300 Seal number(s): 8070979 SCAC: SCNN Pro Number: NA	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Name: _____ Address: _____  City/State/Zip: _____		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	
SPECIAL INSTRUCTIONS: Load #: 53373612  Packing List is Attached		Appointment Time AM                                      PM		Actual Driver Arrival Time AM                                      PM	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
3434963	8	67.78	Y    N		
<b>Grand Total</b>	<b>8</b>	<b>67.78</b>			

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		
		8	ctns	67.78		Comforters, Bedspreads	49017	200
1		8		117.78		<b>Grand Total</b>		

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                               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.

Customer: MACYS HOME SECAUCUS DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME SECAUCUS DC  
500 MEADOWLANDS PARKWAY  
SECAUCUS, NJ 07094  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	12	6	12	6
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	2	1	2	1


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Total Weight: 67.78  
 Total Quantity Ordered: 16  
 Total Cartons Ordered: 8  
 Total Quantity Shipped: 16  
 Total Cartons Shipped: 8

Date: 7/26/2023 8:57:00 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Stone Mountain DC Location #: ST
Address:	221 Hanson Way	Address:	4401 Sarr Parkway
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Stone Mountain, GA 30083
SID#:		CID#:	
PHONE:		Dept:	0784
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813124		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813124		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
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:	
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:	
Load #: 53373612	
Packing List is Attached	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434897	22	176.37	Y	N	
<b>Grand Total</b>	<b>22</b>	<b>176.37</b>			

## 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		
		22	ctns	176.37		Throws,Blankets	49040	150
1		22		226.37		<b>Grand Total</b>		

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.

**Customer:** MACYS HOME STONE MOUNTAIN DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**


MACYS HOME STONE MOUNTAIN DC  
4401 SARR PARKWAY  
STONE MOUNTAIN, GA 30083  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267K	MCG51-4295	766390778812	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267K	MCG51-4298	766390778829	Fleece Blanket	EA	2	14	7	14	7
3434897	100168267FQ	MCG51-4303	766390778744	Fleece Blanket	EA	2	14	7	14	7

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**Total Weight:** 176.37  
**Total Quantity Ordered:** 44  
**Total Cartons Ordered:** 22  
**Total Quantity Shipped:** 44  
**Total Cartons Shipped:** 22

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813254	
Name: E & E COMPANY LTD		 (402)06757163000813254	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home South Windsor DC Location #: SW		Seal number(s): 8070979	
Address: 301 Governors Hwy		SCAC: SCNN	
City/State/Zip: South Windsor, CT 06074		Pro Number: NA	
CID#:			
Dept: 0609		FOB: <input type="checkbox"/>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS: Load #: 53373612 Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434963	15	142.65	Y	N	
<b>Grand Total</b>	15	142.65			

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		
		15	ctns	142.65		Comforters, Bedspreads	49017	200
1		15		192.65		<b>Grand Total</b>		

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.

Customer: MACYS HOME SOUTH WINDSOR DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME SOUTH WINDSOR DC  
301 GOVERNORS HWY  
SOUTH WINDSOR, CT 06074  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	10	5	10	5
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	6	3	6	3
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	4	2	4	2
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	4	2	4	2
3434963	100168398TW	MCG10-4332	766390779062	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4333	766390778942	Microfiber Comforter	EA	2	2	1	2	1

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Total Weight:	142.65
Total Quantity Ordered:	30
Total Cartons Ordered:	15
Total Quantity Shipped:	30
Total Cartons Shipped:	15

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813087	
Name: E & E COMPANY LTD		 (402)06757163000813087	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		CARRIER NAME: Schneider	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: 140300	
Name: Macys Home Denver DC Location #: DV		Seal number(s): 8070979	
Address: 510 East 51st Ave		SCAC: SCNN	
City/State/Zip: Denver, CO 80216		Pro Number: NA	
CID#:			
Dept: 0784			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time Actual Driver Arrival Time Driver Departure Time	
SPECIAL INSTRUCTIONS:		AM AM AM	
Load #: 53373612		PM PM PM	
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434897	8	66.96	Y N	
<b>Grand Total</b>	<b>8</b>	<b>66.96</b>		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE	
QTY TYPE		QTY TYPE				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	NMFC #	CLASS
1	Pallet			50.00		Pallet		
		8	ctns	66.96		Throws,Blankets	49040	150
1		8		116.96		<b>Grand Total</b>		

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 \_\_\_\_\_

<b>COD Amount:</b> _____
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**

<b>SHIPPER SIGNATURE / DATE</b> 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	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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**Customer:** MACYS HOME DENVER DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME DENVER DC  
510 EAST 51ST AVE  
DENVER, CO 80216  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267K	MCG51-4295	766390778812	Fleece Blanket	EA	2	16	8	16	8

**Total Weight:** 66.96  
**Total Quantity Ordered:** 16  
**Total Cartons Ordered:** 8  
**Total Quantity Shipped:** 16  
**Total Cartons Shipped:** 8

Date: 7/26/2023 8:57:03 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Tomball DC Location #: TM
Address:	221 Hanson Way	Address:	19201 Hamish Rd
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Tomball, TX 77377
SID#:		CID#:	
PHONE:		Dept:	0609
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813261		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813261		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
3rd Party:		Master Bill of Lading: with attached underlying Bills of Lading	
<input type="checkbox"/>		(check box)	
Appointment Time		Actual Driver Arrival Time	
AM		AM	
PM		PM	
Driver Departure Time		AM	
		PM	
SPECIAL INSTRUCTIONS:		THIRD PARTY FREIGHT CHARGES BILL TO:	
Load #: 53373612		Name:	
Packing List is Attached		Address:	
		City/State/Zip:	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	4	44.48	Y N	
<b>Grand Total</b>	<b>4</b>	<b>44.48</b>		

## 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	44.48		Comforters, Bedspreads	49017	200
1		4		94.48		<b>Grand Total</b>		

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.

**Customer:** MACYS HOME TOMBALL DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US


**SHIP TO:**

MACYS HOME TOMBALL DC  
19201 HAMISH RD  
TOMBALL, TX 77377  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4331	766390779017	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4334	766390779000	Microfiber Comforter	EA	2	2	1	2	1

**Total Weight:** 44.48  
**Total Quantity Ordered:** 8  
**Total Cartons Ordered:** 4  
**Total Quantity Shipped:** 8  
**Total Cartons Shipped:** 4

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813247	
Name: E & E COMPANY LTD		 (402)06757163000813247	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:		CARRIER NAME: Schneider	
PHONE:		Responsible Acct.No:	
VENDOR:		Trailer number: 140300	
<b>SHIP TO</b>		Seal number(s): 8070979	
Name: Macys Home Stone Mountain DC Location #: ST		SCAC: SCNN	
Address: 4401 Sarr Parkway		Pro Number: NA	
City/State/Zip: Stone Mountain, GA 30083			
CID#:			
Dept: 0609			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		Appointment Time	
SPECIAL INSTRUCTIONS: Load #: 53373612 Packing List is Attached		Actual Driver Arrival Time	
		Driver Departure Time	
		AM	
		PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	5	50.86	Y N	
<b>Grand Total</b>	5	50.86		

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	50.86		Comforters, Bedspreads	49017	200
1		5		100.86		<b>Grand Total</b>		

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.

Customer: MACYS HOME STONE MOUNTAIN DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**


MACYS HOME STONE MOUNTAIN DC  
4401 SARR PARKWAY  
STONE MOUNTAIN, GA 30083  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398TW	MCG10-4323	766390779055	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4328	766390778980	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4330	766390778959	Microfiber Comforter	EA	2	4	2	4	2

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Total Weight: 50.86  
 Total Quantity Ordered: 10  
 Total Cartons Ordered: 5  
 Total Quantity Shipped: 10  
 Total Cartons Shipped: 5

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813056	
Name: E & E COMPANY LTD		 (402)06757163000813056	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:		CARRIER NAME: Schneider	
PHONE:		Responsible Acct.No:	
VENDOR:		Trailer number: 140300	
<b>SHIP TO</b>		Seal number(s): 8070979	
Name: Macys Home North Jackson DC Location #: BA		SCAC: SCNN	
Address: 300 South Bailey Road		Pro Number: NA	
City/State/Zip: North Jackson, OH 44451			
CID#:			
Dept: 0784			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS: Load #: 53373612		Appointment Time	Actual Driver Arrival Time
Packing List is Attached		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434897	245	1907.35	Y N	
<b>Grand Total</b>	245	1907.35		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	Pallet			200.00		Pallet		
		245	ctns	1907.35		Throws,Blankets	49040	150
4		245		2107.35		<b>Grand Total</b>		

<p>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 _____</p>	<p><b>COD Amount:</b> _____</p> <p><b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;"><b>Shipper Signature</b></p>
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<p><b>SHIPPER SIGNATURE / DATE</b>                  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.</p>	<p><b>Trailer Loaded:</b></p> <p><input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p>	<p><b>Freight Counted:</b></p> <p><input checked="" type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver/pallets said to contain  <input type="checkbox"/> By Driver/Pieces</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b>                  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.</p>
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**Customer:** MACYS HOME NORTH JACKSON DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME NORTH JACKSON DC  
300 SOUTH BAILEY ROAD  
NORTH JACKSON, OH 44451  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267TW	MCG51-4293	766390778874	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4294	766390778751	Fleece Blanket	EA	2	120	60	120	60
3434897	100168267K	MCG51-4298	766390778829	Fleece Blanket	EA	2	50	25	50	25
3434897	100168267FQ	MCG51-4300	766390778782	Fleece Blanket	EA	2	100	50	100	50
3434897	100168267K	MCG51-4301	766390778843	Fleece Blanket	EA	2	102	51	102	51
3434897	100168267K	MCG51-4304	766390778805	Fleece Blanket	EA	2	102	51	102	51

**Total Weight:** 1907.35  
**Total Quantity Ordered:** 490  
**Total Cartons Ordered:** 245  
**Total Quantity Shipped:** 490  
**Total Cartons Shipped:** 245

Date: 7/26/2023 8:57:07 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Macys Home Tukwila DC
Address:	221 Hanson Way	Address:	17000 Southcenter Parkway
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Tukwila, WA 98188
SID#:		CID#:	
PHONE:		Dept:	0609
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000813278		Trailer number: 140300	
		Seal number(s): 8070979	
(402)06757163000813278		SCAC: SCNN	
CARRIER NAME: Schneider		Pro Number: NA	
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:		underlying Bills of Lading	
City/State/Zip:		Appointment Time	Actual Driver Arrival Time
SPECIAL INSTRUCTIONS:		AM	AM
Load #: 53373612		PM	PM
Packing List is Attached		Driver Departure Time	AM
			PM

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3434963	3	31.71	Y N	
<b>Grand Total</b>	<b>3</b>	<b>31.71</b>		

## 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	31.71		Comforters, Bedspreads	49017	200
1		3		81.71		<b>Grand Total</b>		

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.

Customer: MACYS HOME TUKWILA DC

Ship Date: 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S HOME MMG  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME TUKWILA DC  
17000 SOUTHCENTER PARKWAY  
TUKWILA, WA 98188  
US


Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434963	100168398FQ	MCG10-4324	766390778935	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398K	MCG10-4325	766390778997	Microfiber Comforter	EA	2	2	1	2	1
3434963	100168398FQ	MCG10-4327	766390778928	Microfiber Comforter	EA	2	2	1	2	1

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**Total Weight:** 31.71  
**Total Quantity Ordered:** 6  
**Total Cartons Ordered:** 3  
**Total Quantity Shipped:** 6  
**Total Cartons Shipped:** 3

Date: 7/26/2023 8:57:08 AM

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000813070										
Name: E & E COMPANY LTD		 (402)06757163000813070										
Address: 221 Hanson Way												
City/State/Zip: Woodland, CA 95776												
SID#:												
PHONE:		CARRIER NAME: Schneider										
VENDOR:		Responsible Acct.No:										
<b>SHIP TO</b>		Trailer number: 140300										
Name: Macys Home Minooka DC Location #: CL		Seal number(s): 8070979										
Address: 601 Midpoint Rd		SCAC: SCNN										
City/State/Zip: Minooka, IL 60447		Pro Number: NA										
CID#:												
Dept: 0784												
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)										
Name:		Prepaid: Collect: X 3rd Party:										
Address:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading										
City/State/Zip:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Appointment Time</td> <td style="width: 33%;">Actual Driver Arrival Time</td> <td style="width: 33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> </tr> <tr> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time										
AM	AM	AM										
PM	PM	PM										
SPECIAL INSTRUCTIONS: Load #: 53373612												
Packing List is Attached												

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434897	18	102.96	Y	N	
<b>Grand Total</b>	18	102.96			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		18	ctns	102.96		Throws,Blankets	49040	150
1		18		152.96		<b>Grand Total</b>		

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.

<b>SHIPPER SIGNATURE / DATE</b> 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	<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
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**Customer:** MACYS HOME MINOOKA DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME MINOOKA DC  
601 MIDPOINT RD  
MINOOKA, IL 60447  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267TW	MCG51-4293	766390778874	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267TW	MCG51-4296	766390778881	Fleece Blanket	EA	2	4	2	4	2
3434897	100168267TW	MCG51-4302	766390778867	Fleece Blanket	EA	2	16	8	16	8

**Total Weight:** 102.96  
**Total Quantity Ordered:** 36  
**Total Cartons Ordered:** 18  
**Total Quantity Shipped:** 36  
**Total Cartons Shipped:** 18

Date: 7/26/2023 8:57:09 AM

# Bill Of Lading

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

Bill of Lading Number: 06757163000813063



(402)06757163000813063

SHIP TO	
Name:	Macys Home Los Angeles DC Location #: CI
Address:	15541 East Gale Ave
City/State/Zip:	City of Industry, CA 91745
CID#:	
Dept:	0784 FOB: <input type="checkbox"/>

CARRIER NAME: Schneider  
 Responsible Acct.No:  
 Trailer number: 140300  
 Seal number(s): 8070979

SCAC: SCNN  
 Pro Number: NA

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:

Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:  
 Load #: 53373612  
 Packing List is Attached

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

### CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3434897	31	200.42	Y	N	
<b>Grand Total</b>	<b>31</b>	<b>200.42</b>			

### 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		
		31	ctns	200.42		Throws,Blankets	49040	150
1		31		250.42		<b>Grand Total</b>		

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.

**Customer:** MACYS HOME LOS ANGELES DC

**Ship Date:** 07/26/2023

**SHIP FROM:**

E & E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

**BILL TO:**

MACY'S CFC  
2101 EAST KEMPER ROAD  
CINCINNATI, OH 45241  
US

**SHIP TO:**

MACYS HOME LOS ANGELES DC  
15541 EAST GALE AVE  
CITY OF INDUSTRY, CA 91745  
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3434897	100168267TW	MCG51-4293	766390778874	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4297	766390778768	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267TW	MCG51-4302	766390778867	Fleece Blanket	EA	2	16	8	16	8
3434897	100168267FQ	MCG51-4303	766390778744	Fleece Blanket	EA	2	14	7	14	7

<b>Total Weight:</b>	<b>200.42</b>
<b>Total Quantity Ordered:</b>	<b>62</b>
<b>Total Cartons Ordered:</b>	<b>31</b>
<b>Total Quantity Shipped:</b>	<b>62</b>
<b>Total Cartons Shipped:</b>	<b>31</b>