

Date: 4/3/2024 11:07:57 AM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757168001142525	
Name:	E & E COMPANY LTD		
Address:	311 International Trade Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:		FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: US Xpress	
Name:	Macys /Bloom Consolidation Center	DC#:	
		Div.	
Address:	1124 Elon Place	Trailer number:	910644
		Seal number(s):	5627949
City/State/Zip:	High Point, NC 27260	SCAC:	USXI
SID#:		Pro Number:	00000
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> UNDERLYING BILLS OF LANDING	
Load #: 00051947854M		Appointment Time	Actual Driver Arrival
		13:00 AM PM	10:50 AM PM
			Driver Departure Time
			11:07 AM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
8117652	17	174.96	Y	N	06757168001137385	CI
8131545	8	37.84	Y	N	06757168001137248	CL
8131545	10	47.30	Y	N	06757168001137293	SC
8131292	1	4.73	Y	N	06757168001137316	SW
8131292	6	28.38	Y	N	06757168001137293	SC
8117652	3	31.71	Y	N	06757168001137415	HA
8131545	6	28.38	Y	N	06757168001137316	SW
8117652	1	11.67	Y	N	06757168001137378	BA
8117652	5	51.75	Y	N	06757168001137477	TU
8131545	1	4.73	Y	N	06757168001137255	DV
8131545	4	18.92	Y	N	06757168001137279	JP
8117652	1	11.67	Y	N	06757168001137408	DV
8131292	3	14.19	Y	N	06757168001137323	TM

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 rates that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

SHIPPER SIGNATURE / DATE
Adelmar
 4/3/24

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.
 04-03-24 *Joseph Smith*

Shipper Signature _____

Date: 4/3/2024 11:07:57 AM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757168001142525	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: US Xpress	
Name: Macys /Bloom Consolidation Center DC#: _____ Div. _____ Address: 1124 Elon Place City/State/Zip: High Point, NC 27260 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 910644 Seal number(s): 5627949 SCAC: USXI Pro Number: 00000	
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 #: 00051947854M		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
		Appointment Time AM PM	Actual Driver Arrival Time AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
8131545	20	94.60	Y	N	06757168001137231	CI	
8117652	3	30.06	Y	N	06757168001137392	CL	
8117652	5	55.05	Y	N	06757168001137460	TM	
8131292	4	18.92	Y	N	06757168001137224	BA	
8131545	9	42.57	Y	N	06757168001137224	BA	
8131545	5	23.65	Y	N	06757168001137262	HA	
8117652	2	20.04	Y	N	06757168001137422	JP	
8131292	6	28.38	Y	N	06757168001137309	ST	
8117652	19	202.92	Y	N	06757168001137446	ST	
8131545	9	42.57	Y	N	06757168001137309	ST	
8131545	3	14.19	Y	N	06757168001137323	TM	
8117652	3	31.71	Y	N	06757168001137439	SC	
8131292	2	9.46	Y	N	06757168001137262	HA	

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: <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			
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Customer: MACYS HOME SECAUCUS DC

Ship Date: 04/03/2024

SHIP FROM:

E & E COMPANY LTD
311 INTERNATIONAL TRADE PKWY
PORT WENTWORTH, GA 31407

BILL TO:

MACY'S HOME MMG 111 WHS
7 W 7TH ST,
CINCINNATI, OH 45202
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
8117652	N/A	MCG51N-4764	194136475563	Egyptian Cotton Blanket	EA	2	4	2	4	2
8117652	N/A	MCG51N-4765	194136475525	Egyptian Cotton Blanket	EA	2	2	1	2	1

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