

Date: 6/10/2024 11:35:04 AM

# Master Bill Of Lading

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757163000894260	
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: HUB CITY GROUP	
Name: HUBGROUP FONTANA CROSSDOCK Address: 13204 Philadelphia Ave City/State/Zip: FONTANA, CA 92337 SID#: _____ FOB: <input type="checkbox"/>		DC#: _____ Div. _____ Trailer number: T253 Seal number(s): 44369830 SCAC: HGLS Pro Number: 14005559501	
<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 #: 5016467225		<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 (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
20BL17	9	26.73	Y	N	06757163000894123	96150	
20BL16	10	29.70	Y	N	06757163000894147	96170	
20BL11	22	65.34	Y	N	06757163000894246	96930	
20BL07	23	68.31	Y	N	06757163000894086	96120	
20BKZ7	41	121.77	Y	N	06757163000894079	96100	
20BL06	24	71.28	Y	N	06757163000894055	96000	
206XT8	38	449.10	Y	N	06757163000894062	96100	
20BL02	32	95.04	Y	N	06757163000894178	96540	
20BL10	22	65.34	Y	N	06757163000894239	96910	
20BL08	22	65.34	Y	N	06757163000894093	96130	
20BL13	16	47.52	Y	N	06757163000894109	96140	
206V17	49	668.83	Y	N	06757163000894192	96700	
20BKZ5	25	74.25	Y	N	06757163000894161	96500	

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"/> 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.	<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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SHIP FROM		Master Bill of Lading Number: 06757163000894260	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: HUB CITY GROUP	
Name:	HUBGROUP FONTANA CROSSDOCK	DC#:	
		Div.	
Address:	13204 Philadelphia Ave	Trailer number:	T253
		Seal number(s):	44369830
City/State/Zip:	FONTANA, CA 92337	SCAC:	HGLS
SID#:		Pro Number:	14005559501
		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
City/State/Zip:		3rd Party:	<input type="checkbox"/>
SPECIAL INSTRUCTIONS:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
Load #: 5016467225		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	DC#	Supplier#
20BL15	13	38.61	Y	N	06757163000894185	96600	
20BL03	28	83.16	Y	N	06757163000894215	96800	
20BL05	27	80.19	Y	N	06757163000894253	96970	
20BL14	13	38.61	Y	N	06757163000894130	96160	
20BL00	34	100.98	Y	N	06757163000894208	96700	
20BKZ9	39	115.83	Y	N	06757163000894222	96900	
206XV2	28	265.04	Y	N	06757163000894116	96150	
20BL12	20	59.40	Y	N	06757163000894154	96300	
<b>Grand Total</b>	<b>535</b>	<b>2630.37</b>					

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
24	Pallet			1200.00		Pallet		70

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"/>
	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> <small>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.</small>	<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> <small>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.</small>
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Shipper Signature

SHIP FROM		Master Bill of Lading Number: 06757163000894260
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: HUB CITY GROUP  Trailer number: T253 Seal number(s): 44369830  SCAC: HGSL Pro Number: 14005559501
Name:	HUBGROUP FONTANA CROSSDOCK	
Address:	13204 Philadelphia Ave	
City/State/Zip:	FONTANA, CA 92337	
SID#:	DC#: Div. FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:  Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>  <input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING						
Name:	Address:							
City/State/Zip:								
SPECIAL INSTRUCTIONS: Load #: 5016467225		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Appointment Time</td> <td>Actual Driver Arrival Time</td> <td>Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> <td style="text-align: center;">AM PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM PM	AM PM	AM PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time						
AM PM	AM PM	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
		22	ctns	72.60		Sheet Set & Pillowcase	49260 Sub 3	250
		420	ctns	1247.40		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
		93	ctns	1310.37		Mattress Pads	149265	100
24				3830.37		<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: <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.

<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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Shipper Signature

# MASTER BILL OF LADING

ESTIMATED PICK UP DATE: 6/10/2024

## SHIPPER

Name: E E CO LTD

Address: 221 HANSON WAY

City/State/Zip: WOODLAND, CA 95776

Contact: ALEX GONZALEZ

BILL OF LADING :5016467225

TRAILER # SEAL # T 253

ORDER # : 1038319\_ALC72781793S, 1038319\_AMS72782545S,  
1038319\_ARD72763760S, 1038319\_BES72782031S, 1038319\_BLA72765106S,  
1038319\_BTH72763418S, 1038319\_FLT72763758S, 1038319\_IND72781293S,  
1038319\_JAC72781292S, 1038319\_JAN72780805S, 1038319\_JON72782288S,  
1038319\_LEB72765453S, 1038319\_LGV72763087S, 1038319\_SAT72764446S,  
1038319\_SBO72780804S, 1038319\_SCV72782030S, 1038319\_WAL72781794S,  
1038319\_ZAN72781046S

CR ALC72781793S  
CR AMS72782545S  
CR ARD72763760S  
CR BES72782031S  
CR BLA72765106S  
CR BTH72763418S  
CR FLT72763758S  
CR IND72781293S  
CR JAC72781292S  
CR JAN72780805S  
CR JON72782288S  
CR LEB72765453S  
CR LGV72763087S  
CR SAT72764446S  
CR SBO72780804S  
CR SCV72782030S  
CR WAL72781794S  
CR ZAN72781046S

P8 206V17-01  
P8 206XT8-01  
P8 206XV2-01  
P8 20BKZ5-01  
P8 20BKZ7-01  
P8 20BKZ9-01  
P8 20BL00-01  
P8 20BL02-01  
P8 20BL03-01  
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P8 20BL16-01  
P8 20BL17-01  
PO 206V17-01  
PO 206XT8-01  
PO 206XV2-01  
PO 20BKZ5-01  
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Scal H 44369830

## CONSIGNEE

Name: HUBGROUP FONTANA CROSSDOCK  
Address: 13204 PHILADELPHIA AVE YARD

City/State/Zip: FONTANA, CA 92337

## CARRIER

CARRIER NAME: HUB HIGHWAY SERVICES  
SCAC: HHWY  
PRO NUMBER: 14005559501  
**14005559501**  
QUOTE NUMBER:

# MASTER BILL OF LADING

Contact:	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>	
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK, IL 60523	Freight Charge Terms :  (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  X  </u>

<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>
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**CUSTOMS INSTRUCTION:**

**SPECIAL INSTRUCTION:**  
 Number of miles: 2705,70692104,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,P U# NEEDED,Number of miles: 2824,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,P U# NEEDED,Number of miles: 2725,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,P U# NEEDED,Number of miles: 1885,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2652,70692108,70692107,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 329,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2761,70692015,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2430,70692101,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER | STOP#:1 CR - ALC72781793S;AMS72782545S;ARD72763760S;BES72782031S;BLA72765106S;BTH72763418S;FLT72763758S;IND72781293S;JAC72781292S;JAN72780805S;JON72782288S;LEB72765453S;LGV72763087S;SAT72764446S;SBO72780804S;SCV72782030S;WAL72781794S;ZAN72781046S,STOP#:1 PO - 206V17-01;206XT8-01;206XV2-01;20BKZ5-01;20BKZ7-01;20BKZ9-01;20BL00-01;20BL02-01;20BL03-01;20BL05-01;20BL06-01;20BL07-01;20BL08-01;20BL10-01;20BL11-01;20BL12-01;20BL13-01;20BL14-01;20BL15-01;20BL16-01;20BL17-01

**SPECIAL SERVICES:**

<b>CARRIER INFO</b>								
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PALLETS	QTY	WEIGHT (LB)	CUBE	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. EMERGENCY PH # 1-800-535-5053</small>	NMFC#	CLASS
12	388	1677	1383		GENERAL COMMODITIES	NMFC_CLASS	400.0
5	72	465	575		GENERAL COMMODITIES	NMFC_CLASS	500.0
7	75	1691	807		GENERAL COMMODITIES	NMFC_CLASS	300.0
<b>24</b>	<b>535</b>	<b>3833.00</b>	<b>2765.00</b>		<b>GRAND TOTAL</b>		

<b>CUSTOMER</b>								
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CUSTOMER ORDER NUMBER	SKU	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
JAN72780805S		1	22	115	115	Y	N	
LEB72765453S		1	27	130	115	Y	N	
LGV72763087S		1	13	89	115	Y	N	
SAT72764446S		1	23	118	115	Y	N	
FLT72763758S		4	34	970	461	Y	N	
FLT72763758S		0	49	1	1	Y	N	
ARD72763760S		1	20	109	115	Y	N	
BLA72765106S		1	32	145	115	Y	N	
BTH72763418S		0	38	1	1	Y	N	
BTH72763418S		3	41	721	346	Y	N	
ZAN72781046S		1	39	166	115	Y	N	
WAL72781794S		1	10	80	115	Y	N	
SBO72780804S		1	25	124	115	Y	N	
ALC72781793S		1	28	133	115	Y	N	
AMS72782545S		0	28	1	1	Y	N	
AMS72782545S		2	9	392	230	Y	N	
JAC72781292S		1	16	98	115	Y	N	

# MASTER BILL OF LADING

JON72782288S		1	22	115	115	Y	N	
SCV72782030S		1	24	121	115	Y	N	
BES72782031S		1	22	115	115	Y	N	
IND72781293S		1	13	89	115	Y	N	
<b>GRAND TOTAL</b>		<b>24</b>	<b>535</b>	<b>3833.00</b>	<b>2765.00</b>			

**PALLET TYPE**

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."	COD Amount: \$ _____ Fee Terms: Collect: <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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  _____ Shipper Signature
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<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.  6/10/24	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 has the DOT emergency response.  06/10/24 Property described above is received in good order, except as
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# MASTER BILL OF LADING

SHIPPER	BILL OF LADING :5016467225
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:	BL#: 1038319_LEB72765453S

CONSIGNEE	CARRIER
Name: LEBEC DISTRIBUTION CENTER Address: 4193 INDUSTRIAL PARKWAY DR City/State/Zip: LEBEC, CA 93243 Contact:	CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>

THIRD PARTY FREIGHT CHARGES BILL TO	FREIGHT CHARGE TERMS
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK	Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  </u> X <u>  </u>

SPECIAL INSTRUCTIONS AND SPECIAL SERVICES
CUSTOMERS INSTRUCTION:

SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER

SPECIAL SERVICES:
(This section is currently blank)

CARRIER INFO							
PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
1	27	130	115		GENERAL COMMODITIES	NMFC_CLASS	400.0
1	27	130.00	115.00		<b>GRAND TOTAL</b>		

CUSTOMER						
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
LEB72765453S	1	27	130	115	Y    N	
<b>GRAND TOTAL</b>	<b>1</b>	<b>27</b>	<b>130.00</b>	<b>115.00</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: <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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.

<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input 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  Property described above is received in good order, except as noted
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# MASTER BILL OF LADING

<b>SHIPPER</b>				BILL OF LADING :5016467225			
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:				BL#: 1038319_SAT72764446S			
<b>CONSIGNEE</b>				<b>CARRIER</b>			
Name: SAN ANTONIO DISTRIBUTION CENTE Address: 6601 CAL TURNER DR City/State/Zip: SAN ANTONIO, TX 78220 Contact:				CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK				Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party __X__			
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>	NMFC#	CLASS
1	23	118	115		GENERAL COMMODITIES	NMFC_CLASS	400.0
1	23	118.00	115.00		<b>GRAND TOTAL</b>		
<b>CUSTOMER</b>							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
SAT72764446S	1	23	118	115	Y    N		
<b>GRAND TOTAL</b>	<b>1</b>	<b>23</b>	<b>118.00</b>	<b>115.00</b>			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>							
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input 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	
Property described above is received in good order, except as noted							

# MASTER BILL OF LADING

<b>SHIPPER</b>					BILL OF LADING :5016467225			
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:					BL#: 1038319_ALC72781793S			
<b>CONSIGNEE</b>					<b>CARRIER</b>			
Name: ALACHUA DISTRIBUTION CENTER Address: 12000 NW 173RD ST City/State/Zip: ALACHUA, FL 32615 Contact:					CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>								
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK					Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>			
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>								
CUSTOMERS INSTRUCTION:								
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER								
SPECIAL SERVICES:								
<b>CARRIER INFO</b>								
<b>PALLETS</b>	<b>QTY</b>	<b>WEIGHT (LB)</b>	<b>CUBE</b>	<b>H.M.(X)</b>	<b>COMMODITY DESCRIPTION</b> <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.</small>		<b>NMFC#</b>	<b>CLASS</b>
1	28	133	115		GENERAL COMMODITIES		NMFC_CLASS	400.0
1	28	133.00	115.00		<b>GRAND TOTAL</b>			
<b>CUSTOMER</b>								
<b>CUSTOMER ORDER NUMBER</b>	<b>PALLETS</b>	<b>QTY</b>	<b>WEIGHT (LB)</b>	<b>CUBE</b>	<b>PALLETS/SLIP (CIRCLE ONE)</b>		<b>ADDITIONAL SHIPPER INFO</b>	
ALC72781793S	1	28	133	115	Y    N			
<b>GRAND TOTAL</b>	<b>1</b>	<b>28</b>	<b>133.00</b>	<b>115.00</b>				
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>		
						Customer check acceptable: <input type="checkbox"/>		
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>								
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		<b>SHIPPER 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
Property described above is received in good order, except as noted								

# MASTER BILL OF LADING

SHIPPER	BILL OF LADING :5016467225
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:	BL#: 1038319_AMS72782545S

CONSIGNEE	CARRIER
Name: AMSTERDAM DISTRIBUTION CENTER Address: 2041 STATE HIGHWAY 5S City/State/Zip: AMSTERDAM, NY 12010 Contact:	CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>

THIRD PARTY FREIGHT CHARGES BILL TO	FREIGHT CHARGE TERMS
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK	Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>

### SPECIAL INSTRUCTIONS AND SPECIAL SERVICES

**CUSTOMS INSTRUCTION:**

SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER

### SPECIAL SERVICES:

CARRIER INFO							
PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
2	37	393	231		GENERAL COMMODITIES	NMFC_CLASS	400.0
2	37	393.00	231.00		<b>GRAND TOTAL</b>		

CUSTOMER							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
AMS72782545S	2	9	392	230	Y	N	
AMS72782545S	0	28	1	1	Y	N	
<b>GRAND TOTAL</b>	<b>2</b>	<b>37</b>	<b>393.00</b>	<b>231.00</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: <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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.

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

<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	Shipper Signature _____  <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  Property described above is received in good order, except as noted
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# MASTER BILL OF LADING

<b>SHIPPER</b>				BILL OF LADING :5016467225					
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:				BL#: 1038319_BTH72763418S					
<b>CONSIGNEE</b>				<b>CARRIER</b>					
Name: BETHEL DISTRIBUTION CENTER Address: 30 MARTHA DR City/State/Zip: BETHEL, PA 19507 Contact:				CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>					
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>									
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK				Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  X  </u>					
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>									
CUSTOMERS INSTRUCTION:									
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER									
SPECIAL SERVICES:									
<b>CARRIER INFO</b>									
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>		NMFC#	CLASS	
0	38	1	1		GENERAL COMMODITIES		NMFC_CLASS	400.0	
3	41	721	346		GENERAL COMMODITIES		NMFC_CLASS	300.0	
3	79	722.00	347.00		<b>GRAND TOTAL</b>				
<b>CUSTOMER</b>									
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
BTH72763418S	3	41	721	346	Y	N			
BTH72763418S	0	38	1	1	Y	N			
<b>GRAND TOTAL</b>	<b>3</b>	<b>79</b>	<b>722.00</b>	<b>347.00</b>					
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>									
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.			
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input 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	
Property described above is received in good order, except as noted									



# MASTER BILL OF LADING

SHIPPER	BILL OF LADING :5016467225
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:	BL#: 1038319_FLT72763758S

CONSIGNEE	CARRIER
Name: DOLLAR GENERAL - FULTON Address: 1900 CARDINAL DR City/State/Zip: FULTON, MO 65251 Contact:	CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>

THIRD PARTY FREIGHT CHARGES BILL TO	Freight Charge Terms :
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK	(freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>

### SPECIAL INSTRUCTIONS AND SPECIAL SERVICES

**CUSTOMS INSTRUCTION:**

SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER

**SPECIAL SERVICES:**

### CARRIER INFO

PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
0	49	1	1		GENERAL COMMODITIES	NMFC_CLASS	400.0
4	34	970	461		GENERAL COMMODITIES	NMFC_CLASS	300.0
<b>4</b>	<b>83</b>	<b>971.00</b>	<b>462.00</b>		<b>GRAND TOTAL</b>		

### CUSTOMER

CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
FLT72763758S	4	34	970	461	<input type="checkbox"/> Y	<input type="checkbox"/> N	
FLT72763758S	0	49	1	1	<input type="checkbox"/> Y	<input type="checkbox"/> N	
<b>GRAND TOTAL</b>	<b>4</b>	<b>83</b>	<b>971.00</b>	<b>462.00</b>			

PALLET TYPE Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."	COD Amount: \$ _____ Fee Terms: Collect: <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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.

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

<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input 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  Property described above is received in good order, except as noted
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# MASTER BILL OF LADING

SHIPPER	BILL OF LADING :5016467225
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:	BL#: 1038319_ARD72763760S

CONSIGNEE	CARRIER
Name: ARDMORE DISTRIBUTION CENTER Address: 401 GENERAL DR City/State/Zip: ARDMORE, OK 73401 Contact:	CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>

THIRD PARTY FREIGHT CHARGES BILL TO	Freight Charge Terms :
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK	(freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  X  </u>

### SPECIAL INSTRUCTIONS AND SPECIAL SERVICES

**CUSTOMS INSTRUCTION:**

SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER

### SPECIAL SERVICES:

### CARRIER INFO

PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>	NMFC#	CLASS
1	20	109	115		GENERAL COMMODITIES	NMFC_CLASS	500.0
<b>1</b>	<b>20</b>	<b>109.00</b>	<b>115.00</b>		<b>GRAND TOTAL</b>		

### CUSTOMER

CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
ARD72763760S	1	20	109	115	Y    N	
<b>GRAND TOTAL</b>	<b>1</b>	<b>20</b>	<b>109.00</b>	<b>115.00</b>		

### PALLETTYPE

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"/>
--	--

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.  _____ Shipper Signature
---	---

<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver	Freight Counted: <input 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  _____ Property described above is received in good order, except as noted
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# MASTER BILL OF LADING

<b>SHIPPER</b>				BILL OF LADING :5016467225			
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:				BL#: 1038319_IND72781293S			
<b>CONSIGNEE</b>				<b>CARRIER</b>			
Name: INDIANOLA DISTRIBUTION CENTER Address: 914 HIGHWAY 82 W City/State/Zip: INDIANOLA, MS 38751 Contact:				CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK				Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>			
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>	NMFC#	CLASS
1	13	89	115		GENERAL COMMODITIES	NMFC_CLASS	500.0
1	13	89.00	115.00		GRAND TOTAL		
<b>CUSTOMER</b>							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
IND72781293S	1	13	89	115	Y	N	
GRAND TOTAL	1	13	89.00	115.00			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>					RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.		
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.					Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input 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  Property described above is received in good order, except as noted		

# MASTER BILL OF LADING

<b>SHIPPER</b>					BILL OF LADING :5016467225		
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:					BL#: 1038319_JAN72780805S		
<b>CONSIGNEE</b>					<b>CARRIER</b>		
Name: JANESVILLE DISTRIBUTION CENTER Address: 101 INNOVATION DR City/State/Zip: JANESVILLE, WI 53546 Contact:					CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>		
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK					Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  </u> X <u>  </u>		
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMERS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
1	22	115	115		GENERAL COMMODITIES	NMFC_CLASS	400.0
1	22	115.00	115.00		<b>GRAND TOTAL</b>		
<b>CUSTOMER</b>							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
JAN72780805S	1	22	115	115	Y    N		
<b>GRAND TOTAL</b>	<b>1</b>	<b>22</b>	<b>115.00</b>	<b>115.00</b>			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>							
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input 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	
Property described above is received in good order, except as noted							

# MASTER BILL OF LADING

<b>SHIPPER</b>				BILL OF LADING :5016467225			
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:				BL#: 1038319_WAL72781794S			
<b>CONSIGNEE</b>				<b>CARRIER</b>			
Name: WALTON DISTRIBUTION CENTER Address: 950 WENSTRUP LN City/State/Zip: WALTON, KY 41094 Contact:				CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK				Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>			
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>	NMFC#	CLASS
1	10	80	115		GENERAL COMMODITIES	NMFC_CLASS	500.0
<b>1</b>	<b>10</b>	<b>80.00</b>	<b>115.00</b>		<b>GRAND TOTAL</b>		
<b>CUSTOMER</b>							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
WAL72781794S	1	10	80	115	Y    N		
<b>GRAND TOTAL</b>	<b>1</b>	<b>10</b>	<b>80.00</b>	<b>115.00</b>			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>						14706(c)(1)(A) and (B)	
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input 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	
Property described above is received in good order, except as noted							



# MASTER BILL OF LADING

SHIPPER	BILL OF LADING :5016467225
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:	BL#: 1038319_JAC72781292S

CONSIGNEE	CARRIER
Name: JACKSON DISTRIBUTION CENTER Address: 200 JACKSON RD City/State/Zip: JACKSON, GA 30233 Contact:	CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>

THIRD PARTY FREIGHT CHARGES BILL TO	Freight Charge Terms :
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK	(freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  </u> X <u>  </u>

**SPECIAL INSTRUCTIONS AND SPECIAL SERVICES**

CUSTOMS INSTRUCTION:

SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER

SPECIAL SERVICES:

**CARRIER INFO**

PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
1	16	98	115		GENERAL COMMODITIES	NMFC_CLASS	500.0
1	16	98.00	115.00		<b>GRAND TOTAL</b>		

CUSTOMER							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
JAC72781292S	1	16	98	115	Y	N	
<b>GRAND TOTAL</b>	<b>1</b>	<b>16</b>	<b>98.00</b>	<b>115.00</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: <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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.

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

<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	Shipper Signature _____ <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  Property described above is received in good order, except as noted
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# MASTER BILL OF LADING

<b>SHIPPER</b>				BILL OF LADING :5016467225			
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:				BL#: 1038319_BLA72765106S			
<b>CONSIGNEE</b>				<b>CARRIER</b>			
Name: BLAIR DISTRIBUTION CENTER Address: 1200 S 10TH ST City/State/Zip: BLAIR, NE 68008 Contact:				CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK				Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  </u> X <u>  </u>			
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMERS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		
1	32	145	115		GENERAL COMMODITIES	NMFC_CLASS	400.0
1	32	145.00	115.00		<b>GRAND TOTAL</b>		
<b>CUSTOMER</b>							
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
BLA72765106S	1	32	145	115	Y    N		
<b>GRAND TOTAL</b>	<b>1</b>	<b>32</b>	<b>145.00</b>	<b>115.00</b>			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>							
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	
						Shipper Signature _____ <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  Property described above is received in good order, except as noted	

# MASTER BILL OF LADING

<b>SHIPPER</b>					BILL OF LADING :5016467225		
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:					BL#: 1038319_JON72782288S		
<b>CONSIGNEE</b>					<b>CARRIER</b>		
Name: JONESVILLE DISTRIBUTION CENTER Address: 1451 SPARTANBURG HWY City/State/Zip: JONESVILLE, SC 29353 Contact:					CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>		
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>							
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK, IL OAK BROOK					Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  X  </u>		
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>							
CUSTOMERS INSTRUCTION:							
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER							
SPECIAL SERVICES:							
<b>CARRIER INFO</b>							
PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	<b>COMMODITY DESCRIPTION</b> <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.</small>	NMFC#	CLASS
1	22	115	115		GENERAL COMMODITIES	NMFC_CLASS	400.0
1	22	115.00	115.00		<b>GRAND TOTAL</b>		
<b>CUSTOMER</b>							
<b>CUSTOMER ORDER NUMBER</b>	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
JON72782288S	1	22	115	115	Y    N		
<b>GRAND TOTAL</b>	1	22	115.00	115.00			
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>							
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.					The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	
					Shipper Signature _____ <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		
Property described above is received in good order, except as noted							



# MASTER BILL OF LADING

<b>SHIPPER</b>					BILL OF LADING :5016467225				
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact:					BL#: 1038319_SCV72782030S				
<b>CONSIGNEE</b>					<b>CARRIER</b>				
Name: SCOTTSVILLE DISTRIBUTION CENTE Address: 427 BEECH ST City/State/Zip: SCOTTSVILLE, KY 42164 Contact:					CARRIER NAME:HUB HIGHWAY SERVICES SCAC:HHWY PRO NUMBER: [14005559501] <b>[14005559501]</b>				
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>									
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK , IL OAK BROOK					Freight Charge Terms : (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u>  </u> X <u>  </u>				
<b>SPECIAL INSTRUCTIONS AND SPECIAL SERVICES</b>									
CUSTOMERS INSTRUCTION:									
SPECIAL INSTRUCTION:70692104,Number of miles: 2705,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2824,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692113,Number of miles: 1736,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692115,Number of miles: 2350,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692103,Number of miles: 1608,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2725,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1885,P U# NEEDED,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692111,Number of miles: 2144,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692109,Number of miles: 2531,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692110,Number of miles: 2036,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692108,Number of miles: 2652,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692107,Number of miles: 329,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692112,Number of miles: 1873,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692105,Number of miles: 1761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692015,Number of miles: 2761,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692106,Number of miles: 2279,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692114,Number of miles: 2326,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,70692101,Number of miles: 2430, PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER									
SPECIAL SERVICES:									
<b>CARRIER INFO</b>									
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>			NMFC#	CLASS
1	24	121	115		GENERAL COMMODITIES			NMFC_CLASS	400.0
<b>1</b>	<b>24</b>	<b>121.00</b>	<b>115.00</b>		<b>GRAND TOTAL</b>				
<b>CUSTOMER</b>									
CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
SCV72782030S	1	24	121	115	Y	N			
<b>GRAND TOTAL</b>	<b>1</b>	<b>24</b>	<b>121.00</b>	<b>115.00</b>					
<b>PALLET TYPE</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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)</b>									
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/ herself and his/her assigns.							The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
<b>SHIPPER SIGNATURE / DATE</b>					<b>Trailer Loaded:</b>		<b>Freight Counted:</b>		
This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.					<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		
<b>SHIPPER SIGNATURE / DATE</b>					<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				
					Property described above is received in good order, except as noted				

Date: 6/10/2024 11:34:41 AM

# Bill Of Lading

Page 1 of 1

### 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: 06757163000894154



(402)06757163000894154

CARRIER NAME: HUB CITY GROUP

Responsible Acct.No:

Trailer number: T253

Seal number(s): 44369830

SCAC: HGLS

Pro Number: 14005559501

### SHIP TO

Name: DOLGEN - ARDMORE DC Location #: 96300  
 Address: 401 General Drive  
 Ardmore Industrial Air Pa, 96300  
 City/State/Zip: Ardmore, OK 73401-0000

CID#:

Dept: 00

FOB:

### THIRD PARTY FREIGHT CHARGES BILL TO:

Name:

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Load #: 5016467225

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 (check box)

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
20BL12	20	59.40	Y N	
<b>Grand Total</b>	20	59.40		

### 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		
		20	ctns	59.40		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		20		109.40		<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.

Order No.: 70692113    Order Date: 05/28/2024    Customer: DOLGEN - ARDMORE DC    Customer PO No.: 20BL12

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - ARDMORE DC 401 GENERAL DRIVE ARDMORE INDUSTRIAL AIR PA ARDMORE, OK 73401-0000 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089415
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	240	20	240	20

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<b>Total Weight:</b>	59.4
<b>Total Quantity Ordered:</b>	240
<b>Total Cartons Ordered:</b>	20
<b>Total Quantity Shipped:</b>	240
<b>Total Cartons Shipped:</b>	20

**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: 06757163000894178  
  
 (402)06757163000894178

**SHIP TO**  
 Name: DOLGEN - BLAIR DRY DC Location #: 96540  
 Address: 1200 South 10th Street  
 96540  
 City/State/Zip: Blair, NE 68008  
 CID#:  
 Dept: 00 FOB:

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No:  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGSL  
**Pro Number:** 14005559501

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name:  
 Address:  
 City/State/Zip:

**Freight Charge Terms: (freight charges are prepaid unless marked otherwise)**  
 Prepaid: Collect:  3rd Party:

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

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BL02	32	95.04	Y N	
<b>Grand Total</b>	32	95.04		

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				
		32	ctns	95.04		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175		
1		32		145.04		<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.

Order No.: 70692103    Order Date: 05/28/2024    Customer: DOLGEN - BLAIR DRY DC    Customer PO No.: 20BL02

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - BLAIR DRY DC 1200 SOUTH 10TH STREET BLAIR, NE 68008 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089417
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	384	32	384	32

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<b>Total Weight:</b>	<b>95.04</b>
<b>Total Quantity Ordered:</b>	<b>384</b>
<b>Total Cartons Ordered:</b>	<b>32</b>
<b>Total Quantity Shipped:</b>	<b>384</b>
<b>Total Cartons Shipped:</b>	<b>32</b>

Date: 6/10/2024 11:34:42 AM

# Bill Of Lading

Page 1 of 1

**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: 06757163000894079



(402)06757163000894079

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGLS  
**Pro Number:** 14005559501

**SHIP TO**

Name: DOLGEN - BETHEL DC Location #: 96100  
 Address: 30 Martha Dr  
 96100  
 City/State/Zip: Bethel, PA 19507  
 CID#: \_\_\_\_\_  
 Dept: 00 FOB:

**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 (check box)

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BKZ7	41	121.77	Y N	
<b>Grand Total</b>	41	121.77		

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		
		41	ctns	121.77		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		41		171.77		<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.

Order No.: 70692100 Order Date: 05/28/2024 Customer: DOLGEN - BETHEL DC Customer PO No.: 20BKZ7

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - BETHEL DC 30 MARTHA DR BETHEL, PA 19507 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089407
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	492	41	492	41

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<b>Total Weight:</b>	121.77
<b>Total Quantity Ordered:</b>	492
<b>Total Cartons Ordered:</b>	41
<b>Total Quantity Shipped:</b>	492
<b>Total Cartons Shipped:</b>	41

Date: 6/10/2024 11:34:43 AM

# Bill Of Lading

**SHIP FROM**

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

Bill of Lading Number: 06757163000894215



CARRIER NAME: HUB CITY GROUP

Responsible Acct.No: \_\_\_\_\_

**SHIP TO**

Name: DOLGEN - ALACHUA DC Location #: 96800  
 Address: 12000 Nw 173 Street  
 96800  
 City/State/Zip: Alachua, FL 32615-8141  
 CID#: \_\_\_\_\_  
 Dept: 00

Trailer number: T253

Seal number(s): 44369830

SCAC: HGLS

Pro Number: 14005559501

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

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

Prepaid:  Collect:  3rd Party:

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

City/State/Zip: \_\_\_\_\_

SPECIAL INSTRUCTIONS:  
 Load #: 5016467225  
 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
20BL03	28	83.16	Y	N	
<b>Grand Total</b>	28	83.16			

**CARRIER INFORMATION**

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		28	ctns	83.16		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		28		133.16		<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.

Order No.: 70692104    Order Date: 05/28/2024    Customer: DOLGEN - ALACHUA DC    Customer PO No.: 20BL03

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

**BILL TO:**  
DOLLAR GENERAL  
CORPORATION CO.111  
100 MISSION RIDGE  
GOODLETTSVILLE, TN 37072  
US

**SHIP TO:**  
DOLGEN - ALACHUA DC  
12000 NW 173 STREET  
ALACHUA, FL 32615-8141  
US

**Shipping Date:**  
06/10/2024  
**Shipment No.:**  
300089421

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	336	28	336	28

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**Total Weight:** 83.16  
**Total Quantity Ordered:** 336  
**Total Cartons Ordered:** 28  
**Total Quantity Shipped:** 336  
**Total Cartons Shipped:** 28

Date: 6/10/2024 11:34:43 AM

# Bill Of Lading

Page 1 of 1

**SHIP FROM**

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

Bill of Lading Number: 06757163000894093



CARRIER NAME: HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_

**SHIP TO**

Name: DOLGEN- JANESVILLE DC Location #: 96130  
 Address: 101 Innovation Drive  
 96130  
 City/State/Zip: Janesville, WI 53546  
 CID#: \_\_\_\_\_  
 Dept: 00

Trailer number: T253  
 Seal number(s): 44369830

SCAC: HGLS  
 Pro Number: 14005559501

**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 #: 5016467225  
 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
20BL08	22	65.34	Y N	
<b>Grand Total</b>	22	65.34		

**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	65.34		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		22		115.34		<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.

Order No.: 70692110 Order Date: 05/28/2024 Customer: DOLGEN- JANESVILLE DC Customer PO No.: 20BL08

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN- JANESVILLE DC 101 INNOVATION DRIVE JANESVILLE, WI 53546 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089409
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	264	22	264	22


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<b>Total Weight:</b>	65.34
<b>Total Quantity Ordered:</b>	264
<b>Total Cartons Ordered:</b>	22
<b>Total Quantity Shipped:</b>	264
<b>Total Cartons Shipped:</b>	22

Date: 6/10/2024 11:34:44 AM

# Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000894086
Name:	E & E COMPANY LTD	 (402)06757163000894086
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:		
PHONE:		
VENDOR:		CARRIER NAME: HUB CITY GROUP
	FOB: <input type="checkbox"/>	Responsible Acct.No:

SHIP TO		Trailer number: T253
Name:	DOLGEN - SAN ANTONIO DC Location #: 96120	Seal number(s): 44369830
Address:	6601 Cal Turner Drive	SCAC: HGLS
	96120	Pro Number: 14005559501
City/State/Zip:	San Antonio, TX 78220	
CID#:		
Dept:	00	
	FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Name:		Prepaid:	Collect: X	3rd Party:
Address:		<input type="checkbox"/>	Master Bill of Lading: with attached	
City/State/Zip:		(check box)	underlying Bills of Lading	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
Load #: 5016467225		AM	AM	AM
Packing List is Attached		PM	PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
20BL07	23	68.31	Y N	
<b>Grand Total</b>	23	68.31		

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			
		23	ctns	68.31		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175	
1		23		118.31		<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.	<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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Order No.: 70692105    Order Date: 05/28/2024    Customer: DOLGEN - SAN ANTONIO DC    Customer PO No.: 20BL07

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - SAN ANTONIO DC 6601 CAL TURNER DRIVE SAN ANTONIO, TX 78220 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089408
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	276	23	276	23

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<b>Total Weight:</b>	<b>68.31</b>
<b>Total Quantity Ordered:</b>	<b>276</b>
<b>Total Cartons Ordered:</b>	<b>23</b>
<b>Total Quantity Shipped:</b>	<b>276</b>
<b>Total Cartons Shipped:</b>	<b>23</b>

Date: 6/10/2024 11:34:44 AM

# Bill Of Lading

Page 1 of 1

**SHIP FROM**

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

Bill of Lading Number: 06757163000894116



CARRIER NAME: HUB CITY GROUP

Responsible Acct.No: \_\_\_\_\_

Trailer number: T253

Seal number(s): 44369830

SCAC: HGLS

Pro Number: 14005559501

**SHIP TO**

Name: DOLGEN - AMSTERDAM DC Location #: 96150  
 Address: 2041 State Highway 5 South  
 96150  
 City/State/Zip: Amsterdam, NY 12010  
 CID#: \_\_\_\_\_  
 Dept: 00

FOB:

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

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

Prepaid:  Collect:  3rd Party:

City/State/Zip: \_\_\_\_\_

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

SPECIAL INSTRUCTIONS:  
 Load #: 5016467225  
 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
206XV2	28	265.04	Y N	
<b>Grand Total</b>	28	265.04		

**CARRIER INFORMATION**

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		16	ctns	225.44		Mattress Pads	149265	100
		12	ctns	39.60		Sheet Set & Pillowcase	49260 Sub 3	250
1		28		315.04		<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.

Order No.: 70636474    Order Date: 05/21/2024    Customer: DOLGEN - AMSTERDAM DC    Customer PO No.: 206XV2

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - AMSTERDAM DC 2041 STATE HIGHWAY 5 SOUTH AMSTERDAM, NY 12010 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089411
--	--	---	--

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
10739005	DG16-038	675716390419	Q Polypropylene Mattress Pad	EA	8	128	16	128	16
18714101	DG21-131	086569017901	Std Microfiber Pillowcase	EA	12	144	12	144	12

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<b>Total Weight:</b>	<b>265.04</b>
<b>Total Quantity Ordered:</b>	<b>272</b>
<b>Total Cartons Ordered:</b>	<b>28</b>
<b>Total Quantity Shipped:</b>	<b>272</b>
<b>Total Cartons Shipped:</b>	<b>28</b>

Date: 6/10/2024 11:34:45 AM

# Bill Of Lading

Page 1 of 1

**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: 06757163000894185



(402)06757163000894185

**SHIP TO**

Name: DOLGEN- INDIANOLA DC Location #: 96600  
 Address: 914 Hwy 82 W  
 96600  
 City/State/Zip: Indianola, MS 38751  
 CID#:  
 Dept: 00 FOB:

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No:  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGLS  
**Pro Number:** 14005559501

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name:  
 Address:  
 City/State/Zip:  
 SPECIAL INSTRUCTIONS:  
 Load #: 5016467225  
 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
20BL15	13	38.61	Y N	
<b>Grand Total</b>	13	38.61		

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			
		13	ctns	38.61		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175	
1		13		88.61		<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.

Order No.: 70692111    Order Date: 05/28/2024    Customer: DOLGEN- INDIANOLA DC    Customer PO No.: 20BL15

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN- INDIANOLA DC 914 HWY 82 W INDIANOLA, MS 38751 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089418
--	--	--	--

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	156	13	156	13

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<b>Total Weight:</b>	<b>38.61</b>
<b>Total Quantity Ordered:</b>	<b>156</b>
<b>Total Cartons Ordered:</b>	<b>13</b>
<b>Total Quantity Shipped:</b>	<b>156</b>
<b>Total Cartons Shipped:</b>	<b>13</b>

**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: 06757163000894222



(402)06757163000894222

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGLS  
**Pro Number:** 14005559501

**SHIP TO**

Name: DOLGEN - ZANESVILLE DC Location #: 96900  
 Address: 2505 East Pointe Drive  
 96900  
 City/State/Zip: Zanesville, OH 43701-7761  
 CID#: \_\_\_\_\_  
 Dept: 00 FOB:

**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  
 (check box)

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BKZ9	39	115.83	Y N	
<b>Grand Total</b>	39	115.83		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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		
		39	ctns	115.83		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		39		165.83		<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.

Order No.: 70692101    Order Date: 05/28/2024    Customer: DOLGEN - ZANESVILLE    Customer PO No.: 20BKZ9  
 DC

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - ZANESVILLE DC 2505 EAST POINTE DRIVE ZANESVILLE, OH 43701-7761 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089422
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	468	39	468	39

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<b>Total Weight:</b>	<b>115.83</b>
<b>Total Quantity Ordered:</b>	<b>468</b>
<b>Total Cartons Ordered:</b>	<b>39</b>
<b>Total Quantity Shipped:</b>	<b>468</b>
<b>Total Cartons Shipped:</b>	<b>39</b>

**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: 06757163000894253



(402)06757163000894253

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGLS  
**Pro Number:** 14005559501

**SHIP TO**

Name: DOLGEN- CALIFORNIA DC Location #: 96970  
 Address: 4193 Industrial Parkway Drive  
 96970  
 City/State/Zip: Lebec, CA 93243  
 CID#: \_\_\_\_\_  
 Dept: 00 FOB:

**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  
 (check box)

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BL05	27	80.19	Y N	
<b>Grand Total</b>	27	80.19		

CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
1	Pallet			50.00		Pallet			
		27	ctns	80.19		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175	
1		27		130.19		<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.

Order No.: 70692107 Order Date: 05/28/2024 Customer: DOLGEN- CALIFORNIA DC Customer PO No.: 20BL05

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

**BILL TO:**  
DOLLAR GENERAL  
CORPORATION CO.111  
100 MISSION RIDGE  
GOODLETTSVILLE, TN 37072  
US

**SHIP TO:**  
DOLGEN- CALIFORNIA DC  
4193 INDUSTRIAL PARKWAY  
DRIVE  
LEBEC, CA 93243  
US

**Shipping Date:**  
06/10/2024

**Shipment No.:**  
300089425

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	324	27	324	27

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**Total Weight:** 80.19  
**Total Quantity Ordered:** 324  
**Total Cartons Ordered:** 27  
**Total Quantity Shipped:** 324  
**Total Cartons Shipped:** 27

Date: 6/10/2024 11:34:47 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	DOLGEN - AMSTERDAM DC Location #: 96150
Address:	221 Hanson Way	Address:	2041 State Highway 5 South 96150
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Amsterdam, NY 12010
SID#:		CID#:	
PHONE:		Dept:	00
VENDOR:		FOB:	<input type="checkbox"/>
		FOB:	
		<input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	Collect: X 3rd Party:
Address:		<input type="checkbox"/>	Master Bill of Lading: with attached underlying Bills of Lading
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS: Load #: 5016467225 Packing List is Attached		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

Bill of Lading Number: 06757163000894123



(402)06757163000894123

CARRIER NAME: HUB CITY GROUP

Responsible Acct.No:

Trailer number: T253

Seal number(s): 44369830

SCAC: HGLS

Pro Number: 14005559501

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
20BL17	9	26.73	Y N	
<b>Grand Total</b>	9	26.73		

## 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
1	Pallet			50.00		Pallet		
		9	ctns	26.73		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		9		76.73		<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 \_\_\_\_\_

COD Amount: \_\_\_\_\_

Fee Terms: Collect:  Prepaid: Customer check acceptable: 

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

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

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

Shipper Signature

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

 By Shipper By Driver/pallets said to contain By Driver/Pieces

## CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Order No.: 70692116    Order Date: 05/28/2024    Customer: DOLGEN - AMSTERDAM DC    Customer PO No.: 20BL17

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - AMSTERDAM DC 2041 STATE HIGHWAY 5 SOUTH AMSTERDAM, NY 12010 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089412
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	108	9	108	9

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<b>Total Weight:</b>	<b>26.73</b>
<b>Total Quantity Ordered:</b>	<b>108</b>
<b>Total Cartons Ordered:</b>	<b>9</b>
<b>Total Quantity Shipped:</b>	<b>108</b>
<b>Total Cartons Shipped:</b>	<b>9</b>

Date: 6/10/2024 11:34:47 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:

Bill of Lading Number: 06757163000894055



(402)06757163000894055

**SHIP TO**

Name: DOLGEN - SCOTTSVILLE DC Location #: 96000  
 Address: 427 Beech Street  
 96000  
 City/State/Zip: Scottsville, KY 42164-1698  
 CID#: \_\_\_\_\_  
 Dept: 00 FOB:

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGLS  
**Pro Number:** 14005559501

**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  
 (check box)

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BL06	24	71.28	Y N	
<b>Grand Total</b>	24	71.28		

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		
		24	ctns	71.28		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		24		121.28		<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.

Order No.: 70692106    Order Date: 05/28/2024    Customer: DOLGEN - SCOTTSVILLE DC    Customer PO No.: 20BL06

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - SCOTTSVILLE DC 427 BEECH STREET SCOTTSVILLE, KY 42164-1698 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089405
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	288	24	288	24

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<b>Total Weight:</b>	71.28
<b>Total Quantity Ordered:</b>	288
<b>Total Cartons Ordered:</b>	24
<b>Total Quantity Shipped:</b>	288
<b>Total Cartons Shipped:</b>	24

Date: 6/10/2024 11:34:48 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:

Bill of Lading Number: 06757163000894161



CARRIER NAME: HUB CITY GROUP

Responsible Acct.No:

### SHIP TO

Name: DOLGEN - SOUTH BOSTON DC Location #: 96500  
 Address: 3207 Philpott Road  
 US Hwy 58/360, 96500  
 City/State/Zip: South Boston, VA 24592-6607  
 CID#:

Dept: 00

FOB:

Trailer number: T253

Seal number(s): 44369830

SCAC: HGSL

Pro Number: 14005559501

### THIRD PARTY FREIGHT CHARGES BILL TO:

Name:

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Load #: 5016467225

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 (check box)

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
20BKZ5	25	74.25	Y	N	
<b>Grand Total</b>	25	74.25			

### CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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		
		25	ctns	74.25		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		25		124.25		<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.

Order No.: 70692015    Order Date: 05/28/2024    Customer: DOLGEN - SOUTH BOSTON DC    Customer PO No.: 20BKZ5

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - SOUTH BOSTON DC 3207 PHILPOTT ROAD US HWY 58/360 SOUTH BOSTON, VA 24592-6607 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089416
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	300	25	300	25


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<b>Total Weight:</b>	<b>74.25</b>
<b>Total Quantity Ordered:</b>	<b>300</b>
<b>Total Cartons Ordered:</b>	<b>25</b>
<b>Total Quantity Shipped:</b>	<b>300</b>
<b>Total Cartons Shipped:</b>	<b>25</b>

Date: 6/10/2024 11:34:48 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	DOLGEN - BESSEMER DC Location #: 96930
Address:	221 Hanson Way	Address:	4101 Lakeshore Pkwy 96930
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Bessemer, AL 35022
SID#:		CID#:	
PHONE:		Dept:	00
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000894246		Trailer number: T253	
		Seal number(s): 44369830	
(402)06757163000894246		SCAC: HGLS	
CARRIER NAME: HUB CITY GROUP		Pro Number: 14005559501	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
<input type="checkbox"/>		3rd Party:	
(check box)		Master Bill of Lading: with attached underlying Bills of Lading	
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 #: 5016467225			
Packing List is Attached			

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
20BL11	22	65.34	Y	N	
<b>Grand Total</b>	22	65.34			

## 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	65.34		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		22		115.34		<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.

Order No.: 70692115    Order Date: 05/28/2024    Customer: DOLGEN - BESSEMER DC    Customer PO No.: 20BL11

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - BESSEMER DC 4101 LAKESHORE PKWY BESSEMER, AL 35022 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089424
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	264	22	264	22

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<b>Total Weight:</b>	65.34
<b>Total Quantity Ordered:</b>	264
<b>Total Cartons Ordered:</b>	22
<b>Total Quantity Shipped:</b>	264
<b>Total Cartons Shipped:</b>	22

**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: 06757163000894147



(402)06757163000894147

**CARRIER NAME:** HUB CITY GROUP  
 Responsible Acct.No: \_\_\_\_\_  
 Trailer number: T253  
 Seal number(s): 44369830

**SCAC:** HGSL  
**Pro Number:** 14005559501

**SHIP TO**

Name: DOLGEN - WALTON DC Location #: 96170  
 Address: 950 Wenstrup Lane  
 96170  
 City/State/Zip: Walton, KY 41094  
 CID#: \_\_\_\_\_  
 Dept: 00 FOB:

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

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

Prepaid: \_\_\_\_\_ Collect:  3rd Party: \_\_\_\_\_

Master Bill of Lading: with attached underlying Bills of Lading

**SPECIAL INSTRUCTIONS:**  
 Load #: 5016467225  
 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
20BL16	10	29.70	Y	N	
<b>Grand Total</b>	10	29.70			

**CARRIER INFORMATION**

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		10	ctns	29.70		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		10		79.70		<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.

Order No.: 70692114 Order Date: 05/28/2024 Customer: DOLGEN - WALTON DC Customer PO No.: 20BL16


<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - WALTON DC 950 WENSTRUP LANE WALTON, KY 41094 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089414
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	120	10	120	10

<b>Total Weight:</b>	29.7
<b>Total Quantity Ordered:</b>	120
<b>Total Cartons Ordered:</b>	10
<b>Total Quantity Shipped:</b>	120
<b>Total Cartons Shipped:</b>	10

Date: 6/10/2024 11:34:50 AM

# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000894062	
Name: E & E COMPANY LTD		 (402)06757163000894062	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:			
VENDOR:		CARRIER NAME: HUB CITY GROUP	
<b>SHIP TO</b>		Responsible Acct.No:	
Name: DOLGEN - BETHEL DC Location #: 96100		Trailer number: T253	
Address: 30 Martha Dr		Seal number(s): 44369830	
96100		<b>SCAC:</b> HGLS	
City/State/Zip: Bethel, PA 19507		<b>Pro Number:</b> 14005559501	
CID#:			
Dept: 00 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	
City/State/Zip:		(check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS:		Appointment Time Actual Driver Arrival Time Driver Departure Time	
Load #: 5016467225		AM AM AM	
Packing List is Attached		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
206XT8	38	449.10	Y N	
<b>Grand Total</b>	38	449.10		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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		
		30	ctns	422.70		Mattress Pads	149265	100
		8	ctns	26.40		Sheet Set & Pillowcase	49260 Sub 3	250
2		38		549.10		<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><b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p style="text-align: center;">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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Order No.: 70636470    Order Date: 05/21/2024    Customer: DOLGEN - BETHEL DC    Customer PO No.: 206XT8

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - BETHEL DC 30 MARTHA DR BETHEL, PA 19507 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089406
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
10739005	DG16-038	675716390419	Q Polypropylene Mattress Pad	EA	8	240	30	240	30
18714101	DG21-131	086569017901	Std Microfiber Pillowcase	EA	12	96	8	96	8

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<b>Total Weight:</b>	<b>449.1</b>
<b>Total Quantity Ordered:</b>	<b>336</b>
<b>Total Cartons Ordered:</b>	<b>38</b>
<b>Total Quantity Shipped:</b>	<b>336</b>
<b>Total Cartons Shipped:</b>	<b>38</b>



Order No.: 70636141    Order Date: 05/21/2024    Customer: DOLGEN - FULTON DC    Customer PO No.: 206V17

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - FULTON DC 1900 CARDINAL DRIVE CALLAWAY FULTON, MO 65251-7250 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089419
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
10739005	DG16-038	675716390419	Q Polypropylene Mattress Pad	EA	8	376	47	376	47
18714101	DG21-131	086569017901	Std Microfiber Pillowcase	EA	12	24	2	24	2


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<b>Total Weight:</b>	<b>668.83</b>
<b>Total Quantity Ordered:</b>	<b>400</b>
<b>Total Cartons Ordered:</b>	<b>49</b>
<b>Total Quantity Shipped:</b>	<b>400</b>
<b>Total Cartons Shipped:</b>	<b>49</b>

Date: 6/10/2024 11:34:51 AM

## Bill Of Lading

Page 1 of 1

SHIP FROM					SHIP TO				
Name: E & E COMPANY LTD					Name: DOLGEN - JONESVILLE DC Location #: 96910				
Address: 221 Hanson Way					Address: 1451 Spartanburg Hwy				
City/State/Zip: Woodland, CA 95776					City/State/Zip: Jonesville, SC 29353				
SID#:					CID#:				
PHONE:					Dept: 00				
VENDOR:					FOB: <input type="checkbox"/>				
Bill of Lading Number: 06757163000894239					Trailer number: T253				
					Seal number(s): 44369830				
(402)06757163000894239					SCAC: HGLS				
CARRIER NAME: HUB CITY GROUP					Pro Number: 14005559501				
Responsible Acct.No:					Freight Charge Terms: (freight charges are prepaid unless marked otherwise)				
Prepaid: <input type="checkbox"/>					Collect: X				
					3rd Party: <input type="checkbox"/>				
City/State/Zip:					Master Bill of Lading: with attached underlying Bills of Lading				
SPECIAL INSTRUCTIONS: Load #: 5016467225					Appointment Time		Actual Driver Arrival Time		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		
20BL10			22	65.34	Y	N			
<b>Grand Total</b>			22	65.34					
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	65.34		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175	
1		22		115.34		<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.


**Order No.:** 70692108   **Order Date:** 05/28/2024   **Customer:** DOLGEN - JONESVILLE DC   **Customer PO No.:** 20BL10

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - JONESVILLE DC 1451 SPARTANBURG HWY JONESVILLE, SC 29353 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089423
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	264	22	264	22

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<b>Total Weight:</b>	65.34
<b>Total Quantity Ordered:</b>	264
<b>Total Cartons Ordered:</b>	22
<b>Total Quantity Shipped:</b>	264
<b>Total Cartons Shipped:</b>	22

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000894208	
Name: E & E COMPANY LTD		 (402)06757163000894208	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: HUB CITY GROUP	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: T253	
VENDOR:		Seal number(s): 44369830	
FOB: <input type="checkbox"/>		SCAC: HGLS	
<b>SHIP TO</b>		Pro Number: 14005559501	
Name: DOLGEN - FULTON DC		Location #: 96700	
Address: 1900 Cardinal Drive			
Callaway, 96700			
City/State/Zip: Fulton, MO 65251-7250			
CID#:			
Dept: 00		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:		(check box)	
SPECIAL INSTRUCTIONS:		Appointment Time	
Load #: 5016467225		Actual Driver Arrival Time	
Packing List is Attached		Driver Departure Time	
		AM AM AM	
		PM PM PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
20BL00	34	100.98	Y N	
<b>Grand Total</b>	34	100.98		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		34	ctns	100.98		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		34		150.98		<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**

**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.

Order No.: 70692102    Order Date: 05/28/2024    Customer: DOLGEN - FULTON DC    Customer PO No.: 20BL00

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - FULTON DC 1900 CARDINAL DRIVE CALLAWAY FULTON, MO 65251-7250 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089420
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	408	34	408	34

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<b>Total Weight:</b>	<b>100.98</b>
<b>Total Quantity Ordered:</b>	<b>408</b>
<b>Total Cartons Ordered:</b>	<b>34</b>
<b>Total Quantity Shipped:</b>	<b>408</b>
<b>Total Cartons Shipped:</b>	<b>34</b>

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000894130
Name: E & E COMPANY LTD		 (402)06757163000894130
Address: 221 Hanson Way		
City/State/Zip: Woodland, CA 95776		
SID#:		
PHONE:		
VENDOR:	FOB: <input type="checkbox"/>	<b>CARRIER NAME:</b> HUB CITY GROUP

<b>SHIP TO</b>		Responsible Acct.No:
Name: DOLGEN - LONGVIEW DC Location #: 96160		Trailer number: T253
Address: 3300 E. George Richey Road		Seal number(s): 44369830
96160		<b>SCAC:</b> HGSL
City/State/Zip: Longview, TX 75605		<b>Pro Number:</b> 14005559501
CID#:		
Dept: 00	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:		<b>Prepaid:</b>	<b>Collect: X</b>	<b>3rd Party:</b>
Address:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading		
City/State/Zip:		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
SPECIAL INSTRUCTIONS:		AM	AM	AM
Load #: 5016467225		PM	PM	PM
Packing List is Attached				

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
20BL14	13	38.61	Y N	
<b>Grand Total</b>	13	38.61		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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		
		13	ctns	38.61		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		13		88.61		<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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Order No.: 70692112 Order Date: 05/28/2024 Customer: DOLGEN - LONGVIEW DC Customer PO No.: 20BL14

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN - LONGVIEW DC 3300 E. GEORGE RICHEY ROAD LONGVIEW, TX 75605 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089413
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	156	13	156	13

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<b>Total Weight:</b>	<b>38.61</b>
<b>Total Quantity Ordered:</b>	<b>156</b>
<b>Total Cartons Ordered:</b>	<b>13</b>
<b>Total Quantity Shipped:</b>	<b>156</b>
<b>Total Cartons Shipped:</b>	<b>13</b>

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000894109	
Name: E & E COMPANY LTD		 (402)06757163000894109	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:			
PHONE:		<b>CARRIER NAME:</b> HUB CITY GROUP	
VENDOR:		Responsible Acct.No:	
<b>SHIP TO</b>		Trailer number: T253	
Name: DOLGEN- JACKSON DC Location #: 96140		Seal number(s): 44369830	
Address: 200 Jackson Road		<b>SCAC:</b> HGLS	
96140		<b>Pro Number:</b> 14005559501	
City/State/Zip: Jackson, GA 30233			
CID#:			
Dept: 00			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		<b>Freight Charge Terms: (freight charges are prepaid unless marked otherwise)</b>	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached	
City/State/Zip:		(check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Load #: 5016467225		Appointment Time Actual Driver Arrival Time 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
20BL13	16	47.52	Y N	
<b>Grand Total</b>	16	47.52		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		16	ctns	47.52		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		16		97.52		<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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Order No.: 70692109 Order Date: 05/28/2024 Customer: DOLGEN- JACKSON DC Customer PO No.: 20BL13

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> DOLLAR GENERAL CORPORATION CO.111 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	<b>SHIP TO:</b> DOLGEN- JACKSON DC 200 JACKSON ROAD JACKSON, GA 30233 US	<b>Shipping Date:</b> 06/10/2024  <b>Shipment No.:</b> 300089410
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	192	16	192	16

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<b>Total Weight:</b>	47.52
<b>Total Quantity Ordered:</b>	192
<b>Total Cartons Ordered:</b>	16
<b>Total Quantity Shipped:</b>	192
<b>Total Cartons Shipped:</b>	16