

SHIP FROM		Master Bill of Lading Number: 06757163000919505
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: US Xpress
Name:	Kohls	Trailer number: 403784
	DC#: XDSFS	Seal number(s): 44369642
	Div.	SCAC: USXI
Address:	X-DOCK PERFORMANCE TEAM BLDG 6 12816 SHOEMAKER AVE, XDSFS	Pro Number:
City/State/Zip:	SANTA FE SPRINGS, CA 90670	
SID#:	FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:		
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>	3rd Party: <input type="checkbox"/>
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING		
City/State/Zip:		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
SPECIAL INSTRUCTIONS:		10:00 AM	10:30 AM	11:40 AM
ME# 888481318				

CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	ADDITIONAL SHIPPER INFO				
				BOL#	DC#	Supplier#		
14987928	Dept#: 115	10	229.00	Y	N	06757163000919383	00855	
14987928	Dept#: 115	20	458.00	Y	N	06757163000919482	00890	
14987928	Dept#: 115	9	206.10	Y	N	06757163000919444	00875	
14987928	Dept#: 115	18	412.20	Y	N	06757163000919420	00865	
14987928	Dept#: 115	20	458.00	Y	N	06757163000919321	00810	
14990560	Dept#: 115	5	39.60	Y	N	06757163000919475	00885	
14987928	Dept#: 115	12	274.80	Y	N	06757163000919345	00830	
14990560	Dept#: 115	11	87.12	Y	N	06757163000919352	00830	
14990560	Dept#: 115	1	7.92	Y	N	06757163000919406	00860	
14987928	Dept#: 115	5	114.50	Y	N	06757163000919413	00860	
14990560	Dept#: 115	13	102.96	Y	N	06757163000919437	00865	
14990560	Dept#: 115	3	23.76	Y	N	06757163000919390	00855	
14990560	Dept#: 115	6	47.52	Y	N	06757163000919451	00875	

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

COD Amount \$ _____


Fee Terms: Collect: Prepaid:

Customer check acceptable:

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

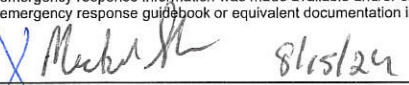
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable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

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

SHIPPER SIGNATURE / DATE
 This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.
 8/15/24

Trailer Loaded: By Shipper By Driver

Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
 8/15/24

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

Master Bill of Lading Number: 06757163000919505

SHIP TO
 Name: Kohls DC#: XDSFS
 Div.
 Address: X-DOCK PERFORMANCE TEAM BLDG 6
 12816 SHOEMAKER AVE, XDSFS
 City/State/Zip: SANTA FE SPRINGS, CA 90670
 SID#: _____ FOB:

CARRIER NAME: US Xpress
 Trailer number: 403784
 Seal number(s): 44369642
 SCAC: USXI
 Pro Number:

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

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 MASTER BILL OF LANDING: WITH ATTACHED
 (check box) UNDERLYING BILLS OF LANDING

SPECIAL INSTRUCTIONS:
 ME# 888481318

Appointment Time AM PM	Actual Driver Arrival Time AM PM	Driver Departure Time AM PM
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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
14987928 Dept#: 115	12	274.80	Y	N	06757163000919369	00840	
14987928 Dept#: 115	5	114.50	Y	N	06757163000919468	00885	
14990560 Dept#: 115	16	126.72	Y	N	06757163000919338	00810	
14990560 Dept#: 115	9	71.28	Y	N	06757163000919376	00840	
14990560 Dept#: 115	14	110.88	Y	N	06757163000919499	00890	
Grand Total	189	3159.66					

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
78	ctns			617.76		Bath Towel, Beach Towel	49260 Sub 4	175
111	ctns			2541.90		Shower curtain	49385	77.5
189				3159.66		Grand Total		

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

COD Amount \$
 Fee Terms: Collect: Prepaid:
 Customer check acceptable:

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


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

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

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

Trailer Loaded: By Shipper By Driver
 Freight Counted: By Shipper By Driver/pallets said to contain By Driver/Pieces

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

SHIP FROM		Bill of Lading Number: 06757163000919390	
Name:	E & E COMPANY LTD	 (402)06757163000919390	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
VENDOR:	000074879	FOB:	<input type="checkbox"/>
SHIP TO		CARRIER NAME: US Xpress	
Name:	Kohls Dist. Center - #00855	Location #:	00855
Address:	890 East Mill Street		
	San Bernardino D.C., 00855		
City/State/Zip:	San Bernardino, CA 92408-1614		
CID#:	888481318	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Trailer number: 403784	
Name:	Address:		
City/State/Zip:	Seal number(s): 44369642		
SPECIAL INSTRUCTIONS:		SCAC: USXI	
Load #: 888481318		Pro Number:	
Packing List is Attached		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Prepaid:	Collect: X 3rd Party:
		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
14990560 Dept#: 115		3	23.76	Y	N	
Grand Total		3	23.76			

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
3	ctns			23.76		Bath Towel, Beach Towel	49260 Sub 4	175
3				23.76		Grand Total		

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

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

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

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

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

Shipper Signature

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

Order No.: 71133260 **Order Date:** 07/25/2024 **Customer:** KOHLS DIST. CENTER - **Customer PO No.:** 14990560
 #00855

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408- 1614 US	Shipping Date: 08/15/2024 Shipment No.: 300091939
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	48	2	48	2

Total Weight:	23.76
Total Quantity Ordered:	72
Total Cartons Ordered:	3
Total Quantity Shipped:	72
Total Cartons Shipped:	3

Order No.: 71133268 **Order Date:** 07/25/2024 **Customer:** KOHLS DIST. CENTER - **Customer PO No.:** 14987928
#00840

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	Shipping Date: 08/15/2024 Shipment No.: 300091936
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	60	5	60	5
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	84	7	84	7

Total Weight:	274.8
Total Quantity Ordered:	144
Total Cartons Ordered:	12
Total Quantity Shipped:	144
Total Cartons Shipped:	12

Date: 8/15/2024 11:29:55 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00875 Location #: 00875
Address:	221 Hanson Way	Address:	3030 Airport Road East
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Macon D.C., 00875
SID#:		CID#:	888481318
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000919451		Trailer number: 403784	
		Seal number(s): 44369642	
(402)06757163000919451		SCAC: USXI	
CARRIER NAME: US Xpress		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 888481318			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14990560 Dept#: 115	6	47.52	Y N	
Grand Total	6	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 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
6	ctns			47.52		Bath Towel, Beach Towel	49260 Sub 4	175
6				47.52		Grand Total		

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

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

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

Appt Time:

In:

Out:

Driver Signature:

Order No.: 71133263 **Order Date:** 07/25/2024 **Customer:** KOHLS DIST. CENTER - **Customer PO No.:** 14990560
 #00875

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/15/2024 Shipment No.: 300091945
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	72	3	72	3

Total Weight:	47.52
Total Quantity Ordered:	144
Total Cartons Ordered:	6
Total Quantity Shipped:	144
Total Cartons Shipped:	6

Order No.: 71133265 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14990560
#00890

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00890 4300 MBL DRIVE OTTAWA D.C. OTTAWA, IL 61350 US	Shipping Date: 08/15/2024 Shipment No.: 300091949
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	168	7	168	7
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	168	7	168	7

Total Weight:	110.88
Total Quantity Ordered:	336
Total Cartons Ordered:	14
Total Quantity Shipped:	336
Total Cartons Shipped:	14

Date: 8/15/2024 11:29:54 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000919420	
Name:	E & E COMPANY LTD	 (402)06757163000919420	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776	CARRIER NAME: US Xpress	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 403784	
VENDOR: 000074879	FOB: <input type="checkbox"/>	Seal number(s): 44369642	
SHIP TO		SCAC: USXI	
Name:	Kohls Dist. Center - #00865 Location #: 00865	Pro Number:	
Address:	Mamakating (Wurtsboro) D.C. 3440 State Route 209, 00865	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
City/State/Zip:	Wurtsboro, NY 12790	Prepaid: Collect: X 3rd Party:	
CID#: 888481318	FOB: <input type="checkbox"/>	<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS: Load #: 888481318 Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	18	412.20	Y	N	
Grand Total	18	412.20			

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
18	ctns			412.20		Shower curtain	49385	77.5
18				412.20		Grand Total		

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

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid:
 Customer check acceptable:

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

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

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

 Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

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

Appt Time:
 In:
 Out:
 Driver Signature:

Order No.: 71133271 **Order Date:** 07/25/2024 **Customer:** KOHLS DIST. CENTER - **Customer PO No.:** 14987928
 #00865

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00865 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	Shipping Date: 08/15/2024 Shipment No.: 300091942
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	108	9	108	9
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	108	9	108	9


Total Weight:	412.2
Total Quantity Ordered:	216
Total Cartons Ordered:	18
Total Quantity Shipped:	216
Total Cartons Shipped:	18

Order No.: 71133262 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14990560
 #00865

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00865 MAMAKATING (WURTSBORO) D.C. 3440 STATE ROUTE 209 WURTSBORO, NY 12790 US	Shipping Date: 08/15/2024 Shipment No.: 300091943
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	168	7	168	7
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	144	6	144	6

Total Weight:	102.96
Total Quantity Ordered:	312
Total Cartons Ordered:	13
Total Quantity Shipped:	312
Total Cartons Shipped:	13

SHIP FROM		Bill of Lading Number: 06757163000919376	
Name: E & E COMPANY LTD		 (402)06757163000919376	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776		CARRIER NAME: US Xpress	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 403784	
VENDOR: 000074879		Seal number(s): 44369642	
FOB: <input type="checkbox"/>		SCAC: USXI	
SHIP TO		Pro Number:	
Name: Kohls Dist. Center - #00840 Location #: 00840		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Address: 2015 NE Jefferson Street			
City/State/Zip: Blue Spring (Grain Valley) D.C., 00840		Prepaid: Collect: X 3rd Party:	
City/State/Zip: Grain Valley, MO 64029		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
CID#: 888481318 FOB: <input type="checkbox"/>			
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 888481318			
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14990560 Dept#: 115	9	71.28	Y N	
Grand Total	9	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 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
9	ctns			71.28		Bath Towel, Beach Towel	49260 Sub 4	175
9				71.28		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">_____ Shipper Signature</div>
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. <i>Property described above is received in good order, except as noted.</i>
			Appt Time: In: Out: Driver Signature:

Order No.: 71133259 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14990560
#00840

SHIP FROM:	BILL TO:	SHIP TO:	Shipping Date:
E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	KOHL'S DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	08/15/2024
			Shipment No.: 300091937

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	96	4	96	4
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	120	5	120	5

Total Weight:	71.28
Total Quantity Ordered:	216
Total Cartons Ordered:	9
Total Quantity Shipped:	216
Total Cartons Shipped:	9

Order No.: 71133257 **Order Date:** 07/25/2024 **Customer:** KOHLS DIST. CENTER - #00810 **Customer PO No.:** 14990560

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	Shipping Date: 08/15/2024 Shipment No.: 300091933
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	216	9	216	9
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	168	7	168	7

Total Weight:	126.72
Total Quantity Ordered:	384
Total Cartons Ordered:	16
Total Quantity Shipped:	384
Total Cartons Shipped:	16

Date: 8/15/2024 11:29:51 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	Kohls Dist. Center - #00830 Location #: 00830
Address:	221 Hanson Way	Address:	300 Admiral Byrd Drive
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Winchester D. C., 00830
SID#:		CID#:	888481318
PHONE:		FOB:	<input type="checkbox"/>
VENDOR:	000074879	FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000919345		Trailer number: 403784	
		Seal number(s): 44369642	
(402)06757163000919345		SCAC: USXI	
CARRIER NAME: US Xpress		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
Load #: 888481318			
Packing List is Attached			

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	12	274.80	Y N	
Grand Total	12	274.80		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
12	ctns			274.80		Shower curtain	49385	77.5
12				274.80		Grand Total		

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

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

 By Shipper By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

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

Appt Time:

In:

Out:

Driver Signature:

Order No.: 71133267 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14987928
 #00830

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/15/2024 Shipment No.: 300091934
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	84	7	84	7
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	60	5	60	5

Total Weight:	274.8
Total Quantity Ordered:	144
Total Cartons Ordered:	12
Total Quantity Shipped:	144
Total Cartons Shipped:	12

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

Bill of Lading Number: 06757163000919413

 (402)06757163000919413

SHIP TO
 Name: Kohls Dist. Center - #00860 Location #: 00860
 Address: 1600 North Business 45
 Corsicana D.C., 00860
 City/State/Zip: Corsicana, TX 75110
 CID#: 888481318 FOB:

CARRIER NAME: US Xpress
 Responsible Acct.No:
 Trailer number: 403784
 Seal number(s): 44369642

SCAC: USXI
Pro Number:

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

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

SPECIAL INSTRUCTIONS:
 Load #: 888481318
 Packing List is Attached

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

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	5	114.50	Y	N	
Grand Total	5	114.50			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
5	ctns			114.50		Shower curtain	49385	77.5
5				114.50		Grand Total		

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

COD Amount: _____
Fee Terms: Collect: Prepaid:
 Customer check acceptable:

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

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

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

Shipper Signature

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

Trailer Loaded: **Freight Counted:**
 By Shipper By Shipper
 By Driver By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.
Property described above is received in good order, except as noted.

Appt Time:
 In:
 Out:
 Driver Signature:

Order No.: 71133270 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14987928
 #00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/15/2024 Shipment No.: 300091941
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	24	2	24	2
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	36	3	36	3


Total Weight:	114.5
Total Quantity Ordered:	60
Total Cartons Ordered:	5
Total Quantity Shipped:	60
Total Cartons Shipped:	5

Order No.: 71133261 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14990560
 #00860

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00860 1600 NORTH BUSINESS 45 CORNICANA D.C. CORNICANA, TX 75110 US	Shipping Date: 08/15/2024 Shipment No.: 300091940
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02G S	11SNMEDWHT 02GS	086569492012	Spa Border Hand Towel	EA	24	24	1	24	1

Total Weight:	7.92
Total Quantity Ordered:	24
Total Cartons Ordered:	1
Total Quantity Shipped:	24
Total Cartons Shipped:	1

SHIP FROM		Bill of Lading Number: 06757163000919383	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____		 (402)06757163000919383	
VENDOR: 000074879 FOB: <input type="checkbox"/>		CARRIER NAME: US Xpress Responsible Acct.No: _____	
SHIP TO		Trailer number: 403784 Seal number(s): 44369642	
Name: Kohls Dist. Center - #00855 Location #: 00855 Address: 890 East Mill Street San Bernardino D.C., 00855 City/State/Zip: San Bernardino, CA 92408-1614 CID#: 888481318 FOB: <input type="checkbox"/>		SCAC: USXI Pro Number: _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: Collect: X 3rd Party: _____	
SPECIAL INSTRUCTIONS: Load #: 888481318 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
14987928 Dept#: 115	10	229.00	Y N		
Grand Total	10	229.00			

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
10	ctns			229.00		Shower curtain	49385	77.5
10				229.00		Grand Total		

Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. _____ Shipper Signature
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. Appt Time: In: Out: Driver Signature:
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Order No.: 71133269 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14987928
 #00855

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00855 890 EAST MILL STREET SAN BERNARDINO D.C. SAN BERNARDINO, CA 92408-1614 US	Shipping Date: 08/15/2024 Shipment No.: 300091938
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	72	6	72	6
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	48	4	48	4

Total Weight:	229
Total Quantity Ordered:	120
Total Cartons Ordered:	10
Total Quantity Shipped:	120
Total Cartons Shipped:	10

Date: 8/15/2024 11:29:49 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000919444	
Name: E & E COMPANY LTD		 (402)06757163000919444	
Address: 221 Hanson Way			
City/State/Zip: Woodland, CA 95776			
SID#:		CARRIER NAME: US Xpress	
PHONE:		Responsible Acct.No:	
VENDOR: 000074879		Trailer number: 403784	
SHIP TO		Seal number(s): 44369642	
Name: Kohls Dist. Center - #00875		SCAC: USXI	
Address: 3030 Airport Road East		Pro Number:	
City/State/Zip: Macon D.C., 00875			
CID#: 888481318			
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:			
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
SPECIAL INSTRUCTIONS:			
Load #: 888481318			
Packing List is Attached			

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	9	206.10	Y N	
Grand Total	9	206.10		

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
9	ctns			206.10		Shower curtain	49385	77.5
9				206.10		Grand Total		

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

COD Amount: _____

Fee Terms: Collect: Prepaid:

Customer check acceptable:

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

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

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

Shipper Signature

<p>SHIPPER SIGNATURE / DATE</p> <p><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></p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted:</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>CARRIER SIGNATURE / PICKUP DATE</p> <p><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></p> <p><i>Property described above is received in good order, except as noted.</i></p> <p>Appt Time: In: Out: Driver Signature:</p>
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Order No.: 71133272 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - #00875 Customer PO No.: 14987928

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00875 3030 AIRPORT ROAD EAST MACON D.C. MACON, GA 31216 US	Shipping Date: 08/15/2024 Shipment No.: 300091944
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	60	5	60	5
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	48	4	48	4

Total Weight:	206.1
Total Quantity Ordered:	108
Total Cartons Ordered:	9
Total Quantity Shipped:	108
Total Cartons Shipped:	9

Order No.: 71133258 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - #00830 Customer PO No.: 14990560

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00830 300 ADMIRAL BYRD DRIVE WINCHESTER D. C. WINCHESTER, VA 22602 US	Shipping Date: 08/15/2024 Shipment No.: 300091935
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	144	6	144	6
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	120	5	120	5

Total Weight:	87.12
Total Quantity Ordered:	264
Total Cartons Ordered:	11
Total Quantity Shipped:	264
Total Cartons Shipped:	11

Date: 8/15/2024 11:29:47 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000919321	
Name:	E & E COMPANY LTD	 (402)06757163000919321	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: US Xpress	
VENDOR:	000074879	FOB:	<input type="checkbox"/>
RESPONSIBLE ACCT. NO:		Trailer number: 403784	
Seal number(s): 44369642		SCAC: USXI	
SHIP TO		Pro Number:	
Name:	Kohls Dist. Center - #00810	Location #:	00810
Address:	7855 County Road 140		
	Findlay D.C., 00810		
City/State/Zip:	Findlay, OH 45840		
CID#:	888481318	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:			
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS:		Prepaid: <input type="checkbox"/>	
Load #: 888481318		Collect: X	
Packing List is Attached		3rd Party: <input type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	20	458.00	Y N	
Grand Total	20	458.00		

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
20	ctns			458.00		Shower curtain	49385	77.5
20				458.00		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

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

Appt Time:
In:
Out:
Driver Signature:

Order No.: 71133266 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - #00810 Customer PO No.: 14987928

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHLS, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00810 7855 COUNTY ROAD 140 FINDLAY D.C. FINDLAY, OH 45840 US	Shipping Date: 08/15/2024 Shipment No.: 300091932
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	120	10	120	10
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	120	10	120	10

Total Weight:	458
Total Quantity Ordered:	240
Total Cartons Ordered:	20
Total Quantity Shipped:	240
Total Cartons Shipped:	20

Order No.: 71133273 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14987928
#00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00885 2065 KEYSTONE PACIFIC PARKWAY PATTERSON D.C. PATTERSON, CA 95363 US	Shipping Date: 08/15/2024 Shipment No.: 300091946
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	36	3	36	3
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	24	2	24	2

Total Weight:	114.5
Total Quantity Ordered:	60
Total Cartons Ordered:	5
Total Quantity Shipped:	60
Total Cartons Shipped:	5

Order No.: 71133264 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14990560
#00885

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	SHIP TO: KOHLS DIST. CENTER - #00885 2065 KEYSTONE PACIFIC PARKWAY PATTERSON D.C. PATTERSON, CA 95363 US	Shipping Date: 08/15/2024 Shipment No.: 300091947
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWHT02GS	11SNMEDWHT02GS	086569492012	Spa Border Hand Towel	EA	24	72	3	72	3
11SNMEDWHT02T	11SNMEDWHT02T	086569491992	Spa Border Hand Towel	EA	24	48	2	48	2

Total Weight:	39.6
Total Quantity Ordered:	120
Total Cartons Ordered:	5
Total Quantity Shipped:	120
Total Cartons Shipped:	5

Date: 8/15/2024 11:29:46 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163000919482	
Name:	E & E COMPANY LTD	 (402)06757163000919482	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:		CARRIER NAME: US Xpress	
VENDOR:	000074879	Responsible Acct.No:	
SHIP TO		Trailer number: 403784	
Name:	Kohls Dist. Center - #00890	Seal number(s): 44369642	
Address:	4300 MBL Drive	SCAC: USXI	
	Ottawa D.C., 00890	Pro Number:	
City/State/Zip:	Ottawa, IL 61350		
CID#:	888481318		
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:			
City/State/Zip:			
SPECIAL INSTRUCTIONS: Load #: 888481318 Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
14987928 Dept#: 115	20	458.00	Y N	
Grand Total	20	458.00		

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
20	ctns			458.00		Shower curtain	49385	77.5
20				458.00		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount: _____

Fee Terms: Collect: Prepaid: Customer check acceptable:

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

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

Appt Time:
In:
Out:
Driver Signature:

Order No.: 71133274 Order Date: 07/25/2024 Customer: KOHLS DIST. CENTER - Customer PO No.: 14987928
#00890

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

BILL TO:
KOHLS, INC.
N56 W17000 RIDGEWOOD DRIVE
MENOMONEE FALLS, WI 53051
US

SHIP TO:
KOHLS DIST. CENTER - #00890
4300 MBL DRIVE
OTTAWA D.C.
OTTAWA, IL 61350
US

Shipping Date:
08/15/2024

Shipment No.:
300091948

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
11SNMEDWSC1	11SNMEDWSC 1	086569491756	Spa Shower Curtain	EA	12	108	9	108	9
11SNMEDWSC2	11SNMEDWSC 2	086569491763	Spa Shower Curtain	EA	12	132	11	132	11

Total Weight: 458
Total Quantity Ordered: 240
Total Cartons Ordered: 20
Total Quantity Shipped: 240
Total Cartons Shipped: 20