

SHIP FROM		Master Bill of Lading Number: 06757163000924592
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:	Macys Merge Center co Dynamic	DC#:
		Div.
Address:	14141 Alondra Boulevard	Trailer number: 910289
		Seal number(s): 28792823
City/State/Zip:	Santa Fe Spgs, CA 90670	SCAC: USXI
SID#:	FOB: <input type="checkbox"/>	Pro Number: 01-6399677-0

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/>	Collect: <input checked="" type="checkbox"/>
Address:			3rd Party: <input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 54287681		8:00 AM	11:26 AM
			Driver Departure Time
			1:10 PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3162340	758	8094.78	Y	N	06757163000924561	AZ	
3162340	846	9026.26	Y	N	06757163000924578	OK	
3162340	121	1288.43	Y	N	06757163000924585	SC	
Grand Total	1725	18409.47					

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
29	Pallet			1450.00		Pallet		70
		1725	ctns	18409.47		Comforters, Bedspreads	49017	200
29				19859.47		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.
M. Chavez 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.
 8/26/24

Trailer Loaded:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said to contain
	<input type="checkbox"/> By Driver/Pieces

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

Ship 8 Detention Waiver

Dear Carrier,

- You have arrived late and missed your scheduled appointment time. Every effort will be made to fit you into our schedule but please be advised that Ship 8 will NOT be responsible for any detention charges. If you wish you can make another appointment and reschedule if this is not acceptable.
- You have arrived early for your scheduled appointment. Please be advised that your loading time begins at your scheduled appointment time and OA Logistics will not be responsible for detention.

Date: 8-26-24

Carrier: US Express

B/L Number: 54287681

Scheduled Appointment time: 8:00 Am

Arrival Time: 11:26 Am

Driver Signature: Michael M. Baek


OA Logistics Signature: [Signature]

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: 06757163000924561



(402)06757163000924561

SHIP TO

Name: Macys Home Goodyear DC Location #: AZ
 Address: 16575 West Commerce Lane
 City/State/Zip: Goodyear, AZ 85338
 CID#: _____
 Dept: 0609 FOB:

CARRIER NAME: US Xpress
 Responsible Acct.No: _____
 Trailer number: 910289
 Seal number(s): 28792823
 SCAC: USXI
 Pro Number: 01-6399677-0

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____
 SPECIAL INSTRUCTIONS:
 Load #: 54287681
 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
3162340	758	8094.78	Y N	
Grand Total	758	8094.78		

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
13	Pallet			650.00		Pallet		
		758	ctns	8094.78		Comforters, Bedspreads	49017	200
13		758		8744.78		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.

Date: 8/26/2024 12:59:23 PM

Bill Of Lading

SHIP FROM		Bill of Lading Number: 06757163000924585	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____ VENDOR: _____		 (402)06757163000924585	
SHIP TO		CARRIER NAME: US Xpress	
Name: Macys Home Secaucus DC Location #: SC Address: 500 Meadowlands Parkway City/State/Zip: Secaucus, NJ 07094 CID#: _____ Dept: 0609		Responsible Acct.No: _____ Trailer number: 910289 Seal number(s): 28792823 SCAC: USXI Pro Number: 01-6399677-0	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: Collect: <input checked="" type="checkbox"/> 3rd Party:	
SPECIAL INSTRUCTIONS: Load #: 54287681 Packing List is Attached		<input type="checkbox"/> 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

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
3162340	121	1288.43	Y	N	
Grand Total	121	1288.43			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		121	ctns	1288.43		Comforters, Bedspreads	49017	200
2		121		1388.43		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 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.
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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: 06757163000924578



CARRIER NAME: US Xpress
 Responsible Acct.No: _____

SHIP TO

Name: Macys Home Logistics DC-OK Location #: OK
 Address: 7120 E.76th Street North
 City/State/Zip: Owasso, OK 74055
 CID#: _____
 Dept: 0609

FOB:

Trailer number: 910289
 Seal number(s): 28792823

SCAC: USXI
 Pro Number: 01-6399677-0

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)

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

SPECIAL INSTRUCTIONS:
 Load #: 54287681
 Packing List is Attached

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3162340	846	9026.26	Y N	
Grand Total	846	9026.26		

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
14	Pallet			700.00		Pallet		
		846	ctns	9026.26		Comforters, Bedspreads	49017	200
14		846		9726.26		Grand Total		

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

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

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

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

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

Shipper Signature

SHIPPER SIGNATURE / DATE

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

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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

Customer: MACYS HOME SECAUCUS DC

Ship Date: 08/26/2024

SHIP FROM:

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

BILL TO:

MACY'S HOME MMG 111 WHS
7 W 7TH ST,
CINCINNATI, OH 45202
US

SHIP TO:

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

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3162340	N/A	MCG10-4323	194145786674	Microfiber Comforter	EA	2	2	1	2	1
3162340	N/A	MCG10-4324	194145786575	Microfiber Comforter	EA	2	8	4	8	4
3162340	N/A	MCG10-4325	194145786629	Microfiber Comforter	EA	2	26	13	26	13
3162340	N/A	MCG10-4326	194145786667	Microfiber Comforter	EA	2	4	2	4	2
3162340	N/A	MCG10-4327	194145786568	Microfiber Comforter	EA	2	84	42	84	42
3162340	N/A	MCG10-4328	194145786612	Microfiber Comforter	EA	2	66	33	66	33
3162340	N/A	MCG10-4330	194145786599	Microfiber Comforter	EA	2	38	19	38	19
3162340	N/A	MCG10-4331	194145786643	Microfiber Comforter	EA	2	14	7	14	7

Total Weight:	1288.43
Total Quantity Ordered:	242
Total Cartons Ordered:	121
Total Quantity Shipped:	242
Total Cartons Shipped:	121

Customer: MACYS HOME LOGISTICS DC-OK

Ship Date: 08/26/2024

SHIP FROM:

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

BILL TO:

MACY'S HOME MMG 111 WHS
7 W 7TH ST,
CINCINNATI, OH 45202
US

SHIP TO:

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

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3162340	N/A	MCG10-4323	194145786674	Microfiber Comforter	EA	2	24	12	24	12
3162340	N/A	MCG10-4324	194145786575	Microfiber Comforter	EA	2	166	83	166	83
3162340	N/A	MCG10-4325	194145786629	Microfiber Comforter	EA	2	240	120	240	120
3162340	N/A	MCG10-4326	194145786667	Microfiber Comforter	EA	2	8	4	8	4
3162340	N/A	MCG10-4327	194145786568	Microfiber Comforter	EA	2	604	302	604	302
3162340	N/A	MCG10-4328	194145786612	Microfiber Comforter	EA	2	362	181	362	181
3162340	N/A	MCG10-4330	194145786599	Microfiber Comforter	EA	2	140	70	140	70
3162340	N/A	MCG10-4331	194145786643	Microfiber Comforter	EA	2	148	74	148	74

Total Weight: 9026.26
Total Quantity Ordered: 1692
Total Cartons Ordered: 846
Total Quantity Shipped: 1692
Total Cartons Shipped: 846

Customer: MACYS HOME GOODYEAR DC

Ship Date: 08/26/2024

SHIP FROM:

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

BILL TO:

MACY'S HOME MMG 111 WHS
7 W 7TH ST,
CINCINNATI, OH 45202
US

SHIP TO:

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

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3162340	N/A	MCG10-4323	194145786674	Microfiber Comforter	EA	2	16	8	16	8
3162340	N/A	MCG10-4324	194145786575	Microfiber Comforter	EA	2	142	71	142	71
3162340	N/A	MCG10-4325	194145786629	Microfiber Comforter	EA	2	222	111	222	111
3162340	N/A	MCG10-4326	194145786667	Microfiber Comforter	EA	2	12	6	12	6
3162340	N/A	MCG10-4327	194145786568	Microfiber Comforter	EA	2	540	270	540	270
3162340	N/A	MCG10-4328	194145786612	Microfiber Comforter	EA	2	326	163	326	163
3162340	N/A	MCG10-4330	194145786599	Microfiber Comforter	EA	2	124	62	124	62
3162340	N/A	MCG10-4331	194145786643	Microfiber Comforter	EA	2	134	67	134	67

Total Weight: 8094.78
 Total Quantity Ordered: 1516
 Total Cartons Ordered: 758
 Total Quantity Shipped: 1516
 Total Cartons Shipped: 758