

Date: 1/6/2025 1:33:56 PM

# Master Bill Of Lading

**SHIP FROM**

Name: **E & E COMPANY LTD**  
 Address: **311 International Trade Pkwy**  
 City/State/Zip: **Port Wentworth, GA 31407**

Master Bill of Lading Number: **06757168001366525**

**SHIP TO**

Name: **Macys Merge Center co Dynamic** DC#:   
 Div.   
 Address: **1124 Elon Place**  
 City/State/Zip: **High Point, NC 27260**

CARRIER NAME: **FedEx Freight Economy**

Trailer number: **973365**  
 Seal number(   
 SCAC: **FXNI**  
 Pro Number: **817474420-0**



**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name:   
 Address:   
 City/State/Zip:   
 SID#:   
 FOB:

Freight Charge Terms:

Prepaid:  Collect:  3rd Party:

(check box) **MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING**

**SPECIAL INSTRUCTIONS:**  
 Load #: 00052244412S

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

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
5592251	24	250.16	Y	N	06757168001361773	BA	
5463331	3	36.11	Y	N	06757168001358889	SC	
5590359	57	286.77	Y	N	06757168001361865	SC	
5463331	3	37.87	Y	N	06757168001358902	SW	
5592251	14	126.42	Y	N	06757168001361858	OK	
5590359	8	40.48	Y	N	06757168001361759	AZ	
5590359	32	161.92	Y	N	06757168001361834	HA	
5591888	2	20.48	Y	N	06757168001361797	CI	
5468160	3	31.27	Y	N	06757168001358896	ST	
5463331	9	105.25	Y	N	06757168001358896	ST	
5590359	39	197.01	Y	N	06757168001361902	SW	
5590359	74	370.48	Y	N	06757168001361872	ST	
5591888	1	9.03	Y	N	06757168001361773	BA	

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.

*[Signature]* 1/6/25

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.

*[Signature]* 1-6-25

Date: 1/6/2025 1:33:56 PM

# Master Bill Of Lading

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001366525
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	
SID#:	FOB: <input type="checkbox"/>	

<b>SHIP TO</b>		CARRIER NAME: FedEx Freight Economy
Name:	Macys Merge Center co Dynamic	Trailer number: 973365
DC#:	Div.	Seal number(s):
Address:	1124 Elon Place	SCAC: FXNL
City/State/Zip:	High Point, NC 27260	Pro Number: 8174744200
SID#:	FOB: <input type="checkbox"/>	

<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		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 UNDERLYING BILLS OF LANDING (check box)	
SPECIAL INSTRUCTIONS: Load #: 00052244412S		Appointment Time AM PM	Actual Driver Arrival Time AM PM
		Driver Departure Time AM PM	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
5590359	72	359.70	Y	N	06757168001361803	CL	
5590359	33	162.03	Y	N	06757168001361841	JP	
5591888	1	13.21	Y	N	06757168001361810	CL	
5590359	70	350.90	Y	N	06757168001361780	CI	
5591888	2	24.66	Y	N	06757168001361896	ST	
5590359	34	166.76	Y	N	06757168001361766	BA	
<b>Grand Total</b>		481	2750.51				

CARRIER INFORMATION						LTL ONLY	
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE			NMFC #	CLASS
1	Pallet			850.00			70
		50	ctns	495.94			
		419	ctns	2096.05		49260-3	250

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 _____"	<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> 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.
--	--	--	---

**Customer:** MACYS HOME STONE MOUNTAIN DC

**Ship Date:** 01/06/2025

**SHIP FROM:**

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

**BILL TO:**

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

**SHIP TO:**

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

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
5591888	N/A	MCG51N-4767	194136475570	Egyptian Cotton Blanket	EA	2	2	1	2	1
5591888	N/A	MCG51N-4768	194136475532	Egyptian Cotton Blanket	EA	2	2	1	2	1

---

<b>Total Weight:</b>	<b>24.66</b>
<b>Total Quantity Ordered:</b>	<b>4</b>
<b>Total Cartons Ordered:</b>	<b>2</b>
<b>Total Quantity Shipped:</b>	<b>4</b>
<b>Total Cartons Shipped:</b>	<b>2</b>