

Date: 4/7/2025 1:50:38 PM

**Bill Of Lading**

Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 06757163001009151	
Name:	E & E COMPANY LTD	 (402)06757163001009151	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776	<b>CARRIER NAME:</b> ABF	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 553998	
VENDOR:	000074879	Seal number(s):	
	FOB: <input type="checkbox"/>	SCAC: ABF 	
<b>SHIP TO</b>		Pro Number: 155231972	
Name:	Kohls Dist. Center - #00840	155 231 972 	
Address:	2015 NE Jefferson Street	<small>Driver signature only acknowledges receipt of freight. Shipment is subject to applicable terms and conditions of Uniform Freight Bill of Lading and ABF's tariffs.</small>	
City/State/Zip:	Blue Spring (Grain Valley) D.C., 00840		
	Grain Valley, MO 64029		
CID#:	903454730		
	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 underlying Bills of Lading (check box)	
City/State/Zip:			
SPECIAL INSTRUCTIONS:			
Load #: 903454730			
Packing List is Attached			


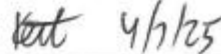
CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
15448380 Dept#: 115	11	164.21	Y N	
<b>Grand Total</b>	11	164.21		

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(s) of NMFC Item 340.</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
11	ctns			164.21		Shower curtain	49385	77.5
11				164.21		<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 _____	<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
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<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.  2/7/25	<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. Property described above is received in good order, except as noted.
			Appt Time: 12-14 In: 1:50 Out: 2:05 Driver Signature:  4/7/25



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Shipment Lookup #155231972

## Shipment #155231972

Picked Up

Transit Complete

At Destination Service Center

DELIVERED

**Mon, Apr 14**  
5:06 PM

**DELIVERY DELAYED**

CURRENT STATUS  
**Delivered**

PICKED UP ON  
**Mon, Apr 07**  
2:20 PM

STATUS DETAIL

Your shipment was delivered on 4/14/2025 at 5:06 PM CDT.

For questions or concerns, please call the LTL Team at [1-800-610-5544](tel:1-800-610-5544) or email [customerservice@arcb.com](mailto:customerservice@arcb.com)



Locations **Freight Information**

### Freight

PIECES  
**1**

WEIGHT (LBS)  
**195**

Order No.: 73597175 Order Date: 03/20/2025 Customer: KOHL'S DIST. CENTER - Customer PO No.: 15448380  
#00840

<b>SHIP FROM:</b> E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	<b>BILL TO:</b> KOHL'S, INC. N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051 US	<b>SHIP TO:</b> KOHLS DIST. CENTER - #00840 2015 NE JEFFERSON STREET BLUE SPRING (GRAIN VALLEY) D.C. GRAIN VALLEY, MO 64029 US	<b>Shipping Date:</b> 04/07/2025  <b>Shipment No.:</b> 300100915
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
N/A	KL70-3551	022164418521	Waffle Stripe	EA	12	12	1	12	1
N/A	KL70-3552	022164418538	Waffle Stripe	EA	12	12	1	12	1
51BOMFSSC08	KL70-3678	022164497083	Floral Print Shower Curtain	EA	12	48	4	48	4
51BOMFSSC10	KL70-3679	022164497090	Texture Shower Curtain	EA	12	12	1	12	1
51BOMFSSC05	KL70-3680	022164497106	Optical Peva Shower Curtain	EA	12	24	2	24	2
51BOMFSSC06	KL70-3681	022164497113	Frosted Peva Shower Curtain	EA	12	12	1	12	1
51BOMFSSC06	KL70-3682	022164497120	Frosted Peva Shower Curtain	EA	12	12	1	12	1

<b>Total Weight:</b>	<b>164.21</b>
<b>Total Quantity Ordered:</b>	<b>132</b>
<b>Total Cartons Ordered:</b>	<b>11</b>
<b>Total Quantity Shipped:</b>	<b>132</b>
<b>Total Cartons Shipped:</b>	<b>11</b>