

SHIP FROM		Master Bill of Lading Number: 06757168001465211
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: Fedex Freight Priority
Name: Macys Merge Center co Dynamic DC#: _____ Div. _____ Address: 1124 Elon Place City/State/Zip: High Point, NC 27260 SID#: _____ FOB: <input type="checkbox"/>	Trailer number: 974078 Seal number(s): _____ SCAC: FXFE Pro Number: 00101929772893459509	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:		
Name: _____ Address: _____ City/State/Zip: _____	Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>			
SPECIAL INSTRUCTIONS: Load #: 00052361925S		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING		
		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			Supplier#
				BOL#	DC#		
7091265	1	51.54	Y N	06757168001457582	RF		
7538833	92	979.92	Y N	06757168001457568	SW		
7752827	6	68.70	Y N	06757168001457995	OK		
7753289	1	11.45	Y N	06757168001458183	TM		
7219250	1	95.70	Y N	06757168001457599	RF		
7535918	1	11.45	Y N	06757168001457568	SW		
7411013	64	311.96	Y N	06757168001457544	AZ		
7411013	44	214.06	Y N	06757168001457551	OK		
7411013	4	18.92	Y N	06757168001457568	SW		
7753289	2	22.90	Y N	06757168001458138	CL		
7753289	1	11.45	Y N	06757168001458145	DV		
7536468	12	137.40	Y N	06757168001457575	OK		
7536930	35	174.79	Y N	06757168001457551	OK		

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>	
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 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
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		Master Bill of Lading Number: 06757168001465211	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: Fedex Freight Priority	
Name: Macys Merge Center co Dynamic DC#: _____ Div. _____ Address: 1124 Elon Place City/State/Zip: High Point, NC 27260 SID#: _____ FOB: <input type="checkbox"/>		Trailer number: 974078 Seal number(s): _____ SCAC: FXFE Pro Number: 00101929772893459509	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 00052361925S		<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)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
7536930	104	514.36	Y	N	06757168001457544	AZ	
7538833	59	653.55	Y	N	06757168001457544	AZ	
7750473	1	11.45	Y	N	06757168001458138	CL	
7537810	2	22.90	Y	N	06757168001457568	SW	
7750473	1	11.45	Y	N	06757168001458114	BA	
7753289	5	57.25	Y	N	06757168001458176	ST	
7750473	3	31.93	Y	N	06757168001458176	ST	
7753289	7	80.15	Y	N	06757168001458121	CI	
7753289	2	22.90	Y	N	06757168001458152	HA	
7417569	18	201.92	Y	N	06757168001457568	SW	
7417767	1	11.45	Y	N	06757168001457544	AZ	
7750473	3	31.93	Y	N	06757168001458152	HA	
7753289	1	11.45	Y	N	06757168001458190	TU	

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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>		
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.	<table style="width:100%;"> <tr> <td style="width: 50%;"> Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver </td> <td style="width: 50%;"> Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces </td> </tr> </table>	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
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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 MINOOKA DC

Ship Date: 05/12/2025

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 MINOOKA DC
601 MIDPOINT RD.
MINOOKA, IL 60447
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
7750473	N/A	MCG51N-4773	194136475556	Egyptian Cotton Blanket	EA	2	2	1	2	1
7753289	N/A	MCG51N-4764	194136475563	Egyptian Cotton Blanket	EA	2	2	1	2	1
7753289	N/A	MCG51N-4773	194136475556	Egyptian Cotton Blanket	EA	2	2	1	2	1

Total Weight: 34.35
Total Quantity Ordered: 6
Total Cartons Ordered: 3
Total Quantity Shipped: 6
Total Cartons Shipped: 3