

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001468113
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: WORLD LOGISTICS INC
Name:	Macys Merge Center co Dynamic	DC#: Div.
Address:	1124 Elon Place	Trailer number: 77
City/State/Zip:	High Point, NC 27260	Seal number(s): 68293236
SID#:		SCAC: WLOD
		Pro Number:
		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"/> 3rd Party: <input type="checkbox"/>
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED
City/State/Zip:		(check box) UNDERLYING BILLS OF LANDING
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time Actual Driver Arrival Time Driver Departure Time
Load #: 00052377099M		7:00 AM (PM) 10:28 AM (PM) 11:06 AM (PM)

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
7984652	1	11.45	Y	N	06757168001466546	TU	
7985400	2	21.58	Y	N	06757168001466362	DV	
7985400	5	55.05	Y	N	06757168001466485	SW	
7984652	1	11.45	Y	N	06757168001466263	AZ	
7985653	1	11.45	Y	N	06757168001466270	BA	
7985653	3	31.93	Y	N	06757168001466393	HA	
7985400	5	56.15	Y	N	06757168001466454	ST	
7986203	9	44.55	Y	N	06757168001466423	JP	
7985653	2	22.90	Y	N	06757168001466454	ST	
7984652	1	11.45	Y	N	06757168001466270	BA	
7984652	2	22.90	Y	N	06757168001466324	CL	
7984652	5	57.25	Y	N	06757168001466454	ST	
7984652	2	22.90	Y	N	06757168001466393	HA	

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> 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
<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. <i>HC 5/20/25</i>	<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 OOT emergency response guidebook or equivalent documentation in the vehicle. <i>A-L 5-20-25</i>

<p align="center"><b>SHIP FROM</b></p> <p>Name: <b>E &amp; E COMPANY LTD</b>          Address: <b>311 International Trade Pkwy</b>          City/State/Zip: <b>Port Wentworth, GA 31407</b>          SID#: _____ FOB: <input type="checkbox"/></p>	<p>Master Bill of Lading Number: <b>06757168001468113</b></p>
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<p align="center"><b>SHIP TO</b></p> <p>Name: <b>Macys Merge Center co Dynamic</b> DC#: _____          Div. _____          Address: <b>1124 Elon Place</b>          City/State/Zip: <b>High Point, NC 27260</b>          SID#: _____ FOB: <input type="checkbox"/></p>	<p>CARRIER NAME: <b>WORLD LOGISTICS INC</b></p> <p>Trailer number: <b>77</b>          Seal number(s): <b>68293236</b></p> <p>SCAC: <b>WLOD</b>          Pro Number: _____</p>
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<p align="center"><b>THIRD PARTY FREIGHT CHARGES BILL TO:</b></p> <p>Name: _____          Address: _____          City/State/Zip: _____</p> <p><b>SPECIAL INSTRUCTIONS:</b>          Load #: <b>00052377099M</b></p>	<p>Freight Charge Terms:</p> <p>Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/></p> <p align="center"><input checked="" type="checkbox"/> <b>MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING</b> (check box)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td align="center">AM PM</td> <td align="center">AM PM</td> <td align="center">AM PM</td> </tr> </table>	Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM PM	AM PM	AM PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time					
AM PM	AM PM	AM PM					

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
7984652	4	45.80	Y	N	06757168001466416	JP	
7986203	17	82.39	Y	N	06757168001466355	CL	
7985653	3	29.51	Y	N	06757168001466515	TM	
7986203	1	5.39	Y	N	06757168001466287	BA	
7986203	8	38.50	Y	N	06757168001466492	SW	
7985400	6	68.04	Y	N	06757168001466324	CL	
7985400	6	65.40	Y	N	06757168001466546	TU	
7986203	14	69.52	Y	N	06757168001466461	ST	
7984652	1	11.45	Y	N	06757168001466362	DV	
7985400	7	76.19	Y	N	06757168001466270	BA	
7985400	11	123.09	Y	N	06757168001466430	SC	
7984652	6	68.70	Y	N	06757168001466430	SC	
7985400	9	100.41	Y	N	06757168001466416	JP	

<p>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 _____</p>	<p><b>COD Amount \$</b> _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p align="center">Customer check acceptable: <input type="checkbox"/></p>
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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).**

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p align="right"><b>Shipper Signature</b></p>	
<p><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.</p>	<p><b>Trailer Loaded:</b>  <input type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver</p> <p><b>Freight Counted:</b>  <input type="checkbox"/> By Shipper  <input type="checkbox"/> By Driver/pallets said to contain  <input type="checkbox"/> By Driver/Pieces</p>	<p><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.</p>

**Customer:** MACYS HOME SECAUCUS DC

**Ship Date:** 05/20/2025

**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 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
7984641	100202727TW	MCG51-5637	194137249651	F/Q Blanket	EA	2	2	1	2	1
7984652	N/A	MCG51N-4764	194136475563	Egyptian Cotton Blanket	EA	2	4	2	4	2
7984652	N/A	MCG51N-4770	194136475549	Egyptian Cotton Blanket	EA	2	4	2	4	2
7984652	N/A	MCG51N-4773	194136475556	Egyptian Cotton Blanket	EA	2	4	2	4	2
7985400	100202727TW	MCG51-5628	194137249644	F/Q Blanket	EA	2	6	3	6	3
7985400	100202727TW	MCG51-5629	194137249682	K Blanket	EA	2	6	3	6	3
7985400	100202727TW	MCG51-5631	194137249637	F/Q Blanket	EA	2	6	3	6	3
7985400	100202727TW	MCG51-5632	194137249675	K Blanket	EA	2	2	1	2	1
7985400	100202727TW	MCG51-5637	194137249651	F/Q Blanket	EA	2	2	1	2	1

**Total Weight:** 202.58  
**Total Quantity Ordered:** 36  
**Total Cartons Ordered:** 18  
**Total Quantity Shipped:** 36  
**Total Cartons Shipped:** 18