

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001483451	
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: Schneider	
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: 18011 Seal number(s): 68293248 SCAC: SCNN Pro Number: 000	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		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 #: 00052392048M		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
		Appointment Time Actual Driver Arrival Time Driver Departure Time 12:00 <sup>AM</sup> 1:08 <sup>AM</sup> 3:00 <sup>PM</sup>	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	ADDITIONAL SHIPPER INFO			
				BOL#	DC#	Supplier#	
7652243	26	127.60	Y N	06757168001475586	AZ		
7652243	53	255.31	Y N	06757168001475593	BA		
7652243	30	149.16	Y N	06757168001475609	CI		
7652243	8	39.82	Y N	06757168001475616	CL		
7652243	4	20.24	Y N	06757168001475630	HA		
7652243	7	33.77	Y N	06757168001475647	JP		
7652243	119	583.33	Y N	06757168001475654	OK		
7652243	8	40.48	Y N	06757168001475661	SC		
7652243	16	80.30	Y N	06757168001475678	ST		
7652243	5	24.31	Y N	06757168001475685	SW		
7652243	1	5.39	Y N	06757168001475692	TM		
7652243	7	34.43	Y N	06757168001475708	TU		
7754037	21	101.97	Y N	06757168001475586	AZ		

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 rules, 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;"><b>Shipper Signature</b></div>	
<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. LC 6/4/25	<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. M. Fulcher 6/4/25		

Date: 6/4/2025 3:02:43 PM

# Master Bill Of Lading

**SHIP FROM**  
 Name: **E & E COMPANY LTD**  
 Address: **311 International Trade Pkwy**  
 City/State/Zip: **Port Wentworth, GA 31407**  
 SID#: \_\_\_\_\_ FOB:

Master Bill of Lading Number: **06757168001483451**

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

CARRIER NAME: **Schneider**  
 Trailer number: **18011**  
 Seal number(s): **68293248**

SCAC: **SCNN**  
 Pro Number: **000**

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

Freight Charge Terms:  
 Prepaid:  Collect:  3rd Party:

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

**SPECIAL INSTRUCTIONS:**  
 Load #: **00052392048M**

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)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
7754037	69	340.23	Y	N	06757168001475593	BA	
7754037	17	83.71	Y	N	06757168001475609	CI	
7754037	12	58.08	Y	N	06757168001475616	CL	
7754037	8	38.50	Y	N	06757168001475630	HA	
7754037	5	23.65	Y	N	06757168001475647	JP	
7754037	70	340.34	Y	N	06757168001475654	OK	
7754037	10	49.28	Y	N	06757168001475661	SC	
7754037	24	118.80	Y	N	06757168001475678	ST	
7754037	7	33.11	Y	N	06757168001475685	SW	
7754037	3	15.51	Y	N	06757168001475692	TM	
7754037	8	38.50	Y	N	06757168001475708	TU	
7867183	99	484.77	Y	N	06757168001475586	AZ	
7867183	36	172.26	Y	N	06757168001475593	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 dunnaged, 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:** 06/04/2025

**SHIP FROM:**

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

**BILL TO:**

MACYS 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
7652243	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	24	4	24	4
7652243	N/A	MCG21-5355N	194145781556	CC 2 Pack Pillow Protector	EA	6	24	4	24	4
7754037	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	42	7	42	7
7754037	N/A	MCG21-5355N	194145781556	CC 2 Pack Pillow Protector	EA	6	18	3	18	3
7867183	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	66	11	66	11
7867183	N/A	MCG21-5355N	194145781556	CC 2 Pack Pillow Protector	EA	6	24	4	24	4

**Total Weight:** 163.35  
**Total Quantity Ordered:** 198  
**Total Cartons Ordered:** 33  
**Total Quantity Shipped:** 198  
**Total Cartons Shipped:** 33