

Consolidated Bill of Lading Recap

PICKUP DATE: 6/6/25

CARRIER LOAD/PRO#
DIL1886581

SHIP FROM
NAME: E & E COMPANY LTD
ADDRESS: 221 Hanson Way
CITY/ST/ZIP: Woodland, CA 95776

Dillard's Load ID (REQUIRED):
DIL 1886581
Master Bill of Lading# (OPTIONAL); If BOL# Not Listed
Then Use Load ID:
BOL#: 06757163001027377

CONSOLIDATION SHIP TO
NAME: PERFORMANCE TEAM LLC
ADDRESS: 12816 SHOEMAKER AVE
CITY/ST/ZIP: SANTA FE SPRINGS, CA 90670

Carrier Name: US Xpress
Carrier SCAC: USXI
Carrier Trailer: 610640
Seal Number: 63589726

The individual bills of ladings must be attached to this manifest and presented to driver at time of pickup.

Destination	BOL Number(s)	Dillard's Shipment ID#	Cartons	Weight
Salisbury, NC, DC#0021	06757163001027315	300102731	25	289.75
Valdosta, GA, DC#0022	06757163001027322	300102732	44	510.14
Olathe, KS, DC#0023	06757163001027339	300102733	19	221.89
Mabelvale, AR, DC#0024	06757163001027346	300102734	65	755.15
Fort Worth, TX, DC#0027	06757163001027353	300102735	162	1884.72
Gilbert, AZ, DC#0029	<u>06757163001027360</u>	300102736	47	544.07
TOTALS			362	4205.72

Please Note: *This Recap is for reference only as driver MUST sign ALL attached bills of lading*

Date: 6/6/2025 10:27:27 AM

BILL OF LADING

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SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO:	
Name:	E & E COMPANY LTD	Name:	Dillard's Gilbert D.C. Location #: 0029	Name:	
Address:	221 Hanson Way	Address:	395 N. William Dillard Drive	Address:	
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Gilbert, AZ 85233	City/State/Zip:	
SID#:		CID#:	DIL1886581		
FOB: <input type="checkbox"/>		FOB: <input type="checkbox"/>			
Bill of Lading Number: 06757163001027360		CARRIER NAME: US Xpress		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Trailer number: 610649		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
(402)06757163001027360		Seal number(s): 63589728		<input type="checkbox"/> Master Bill of Lading with attached	
SCAC: USXI		Pro Number:		<input type="checkbox"/> (check box) underlying Bills of Lading	
Appointment Time		Actual Driver Arrival Time		Driver Departure Time	
AM PM		AM PM		AM PM	
SPECIAL INSTRUCTIONS: Load #: DIL1886581					
DIL1886581					

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
3126781506	47	544.07	Y N	
Grand Total	47	544.07		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged so to ensure safe transportation with ordinary care. (See Section 20) of NMFC Item 200</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallet			100.00		Pallet		
		47	ctns	544.07		Comforters, Bedspreads	49017	200
2		47		644.07		Grand Total		

When 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 _____	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. Shipper Signature _____
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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. <i>Antonia O</i> 6/6/25	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold to carrier <input type="checkbox"/> By Driver/Placem	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and requirements. Carrier certifies emergency response information is made available and/or carrier has the DOT emergency response information at equivalent documentation in the vehicle. <i>Jeanelle with 6-6-25</i>
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Order No.: 73910012 Order Date: 05/08/2025 Customer: DILLARD'S GILBERT D.C. Customer PO No.: 3126781506

SHIP FROM:
E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:
DILLARD'S INC. 111 WHS
P.O. BOX 8037
ATTN: INVOICE OFFICE
LITTLE ROCK, AR 72203
US

SHIP TO:
DILLARD'S GILBERT D.C.
396 N. WILLIAM DILLARD DRIVE
GILBERT, AZ 85233
US

Shipping Date:
06/06/2025

Shipment No.:
300102736

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
2472841	NN10-0212	022164520910	F/Q Eternal Blossom Comforter	EA	1	3	3	3	3
2472842	NN10-0213	022164520927	C/CK Eternal Blossom Comforter	EA	1	3	3	3	3

Total Weight: 69.36
Total Quantity Ordered: 6
Total Cartons Ordered: 6
Total Quantity Shipped: 6
Total Cartons Shipped: 6

Wholesale Order Changes Report

Customer PO No. Start:	<input type="text" value="3126781506"/>	Customer PO No. End:	<input type="text" value="3126781506"/>	Date Type:	<input type="text" value=""/>
E&E SO No. Start:	<input type="text" value=""/>	E&E SO No. End:	<input type="text" value=""/>	Start Date:	<input type="text" value=""/>
Customer:	<input type="text" value=""/>	Location:	<input type="text" value=""/>	End Date:	<input type="text" value=""/>
Dept. No.:	<input type="text" value=""/>	Batch No.:	<input type="text" value=""/>	Item No.:	<input type="text" value=""/>
Routing PO No.:	<input type="text" value=""/>	Multiple Cust. PO No.:	<input type="text" value=""/>		
User Operation:	<input type="text" value=""/>	Remark:	<input type="text" value=""/>	<input type="button" value="Search"/> <input type="button" value="All I"/>	

Items:1 Page number:1/1 Paginal:100 items

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Customer PO No.	E&E SO No.	Customer	EDI Order Type	Dept. No.	Ship To	Create Date	Shipping Date	Cancel After Date	In DC Date	Item No.	Description	Pattern	UPC	Cust. Item No.	Cust Line No.	Location	Batch No.	Routing PO No.	Case Pack Qty	Qty Ordered	Qty To Ship	Billing Only/Stage Bin	Updated Date	Updated By	OperationType
3126781506	73910007	DLSWHS		0774	0902	05/08/2025	06/02/2025	06/11/2025		NN10-0213	C/CK Eternal Blossom Comforter	Eternal Blossom	0221645209272472842	2001	WDC				1	3	2		05/26/2025 19:49:08	yefei@syncsoftinc.cn	Revise quantity to ship