

### Consolidated Bill of Lading Recap

PICKUP DATE: \_\_\_\_\_

**CARRIER LOAD/PRO#**  
DIL1887590/00000

**SHIP FROM**

**NAME:** E & E COMPANY LTD  
**ADDRESS:** 311 International Trade Pkwy  
**CITY/ST/ZIP:** Port Wentworth, GA 31407

Dillard's Load ID (REQUIRED):  
**DIL** \_\_\_\_\_  
Master Bill of Lading# (OPTIONAL); If BOL# Not Listed  
Then Use Load ID:  
**BOL#:** 06757168001489415

**CONSOLIDATION SHIP TO**

**NAME:** FORT WORTH CONSOLIDATION  
**ADDRESS:** 4501 N Beach St.  
**CITY/ST/ZIP:** Fort Worth, TX 76137

**Carrier Name:** EOS INC  
**Carrier SCAC:** EOSA  
**Carrier Trailer:** 87675  
**Seal Number:** 11983623

**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
Olathe, KS, DC#0023	06757168001479355	800147935	229	967.18
Olathe, KS, DC#0023	06757168001479386	800147938	239	1719.64
Mabelvale, AR, DC#0024	06757168001479348	800147934	299	1239.83
Mabelvale, AR, DC#0024	06757168001479379	800147937	356	2517.81
Gilbert, AZ, DC#0029	06757168001479362	800147936	20	248.80
Gilbert, AZ, DC#0029	06757168001479331	800147933	277	1171.84
<b>TOTALS</b>			1420	7865.10

Date: 6/13/2025 4:59:42 PM

**BILL OF LADING**

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

Bill of Lading Number: 06757168001479355  
  
 (402)06757168001479355

**SHIP TO**  
 Name: Dillard's Olathe D.C. Location #: 0023  
 Address: 700 E. 151st Street  
 City/State/Zip: Olathe, KS 66062  
 CID#: DIL1887590 FOB:

**CARRIER NAME:** EOS INC  
 Trailer number: 87675  
 Seal number(s): 11983623  
**SCAC:** EOSA  
**Pro Number:** 00000

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name:  
 Address:  
 City/State/Zip:  
 SPECIAL INSTRUCTIONS: Load #: DIL1887590  
 DIL1887590

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  
 Prepaid: \_\_\_\_\_ Collect:  3rd Party: \_\_\_\_\_  
 Master Bill of Lading: with attached  
 (check box) underlying Bills of Lading  

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
3109787203	229	967.18	Y	N	
<b>Grand Total</b>	<b>229</b>	<b>967.18</b>			

CARRIER INFORMATION						LTL ONLY		
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 300</small>	NMFC #	CLASS
QTY	TYPE	QTY	TYPE					
2	Pallet			100.00		Pallet		
		229	ctns	967.18		Comforters, Bedspreads	49017	200
2		229		1067.18		<b>Grand Total</b>		

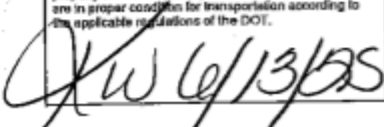
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:  
 \*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_

**COD Amount:** \$ \_\_\_\_\_  
**Fee Terms:** Collect:  Prepaid:   
 Customer check acceptable:

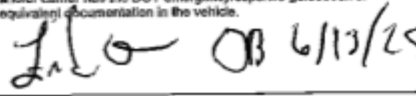
**NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).**

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 classified, 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 sold 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.  


\*\*\*PACKING LIST\*\*\*

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Order No.: 71315017 Order Date: 08/12/2024 Customer: DILLARD'S OLATHE D.C. Customer PO No.: 3109787203

<b>SHIP FROM:</b> E & E COMPANY LTD 311 INTERNATIONAL TRADE PKWY PORT WENTWORTH, GA 31407	<b>BILL TO:</b> DILLARD'S INC. 111 WHS P.O. BOX 8037 ATTN: INVOICE OFFICE LITTLE ROCK, AR 72203 US	<b>SHIP TO:</b> DILLARD'S OLATHE D.C. 700 E. 151ST STREET OLATHE, KS 66062 US	<b>Shipping Date:</b> 06/13/2025  <b>Shipment No.:</b> 800147935
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
1940041	DL11-1208	022164482973	STD Benton Sham	EA	2	4	2	4	2
1940042	DL11-1209	022164482980	K Benton Sham	EA	2	4	2	4	2
1940043	DL11-1210	022164482997	Benton Euro Sham	EA	2	4	2	4	2
1940039	DL13-1206	022164482959	F/Q Benton Coverlet	EA	2	2	1	2	1
1940040	DL13-1207	022164482966	K Benton Coverlet	EA	2	2	1	2	1

<b>Total Weight:</b>	<b>34.11</b>
<b>Total Quantity Ordered:</b>	<b>16</b>
<b>Total Cartons Ordered:</b>	<b>8</b>
<b>Total Quantity Shipped:</b>	<b>16</b>
<b>Total Cartons Shipped:</b>	<b>8</b>