

Date: 7/29/2025 11:49:49 AM

# Master Bill Of Lading

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<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001519334	
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"/>			
<b>SHIP TO</b>		CARRIER NAME: Knight Transportation	
Name: <b>Macy's 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"/>		Trailer number: 220716 Seal number(s): <del>08160015</del> <b>69480812</b> SCAC: KNIG Pro Number: 0000	
<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"/> <input checked="" type="checkbox"/> (check box) MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
<b>SPECIAL INSTRUCTIONS:</b> Load #: 00052435877M		Appointment Time: <b>10:00 AM</b> Actual Driver Arrival Time: <b>11:32 AM</b> Driver Departure Time: <b>12:23 PM</b>	

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO	
			Y	N		DC#	Supplier#
1684656	7	88.95	Y	N	06757168001514513	CI	
1684656	3	34.35	Y	N	06757168001514520	CL	
1684656	3	36.11	Y	N	06757168001514551	HA	
1684656	3	33.69	Y	N	06757168001514582	SC	
1684656	2	24.66	Y	N	06757168001514605	SW	
1684656	1	13.21	Y	N	06757168001514636	TU	
1684733	22	111.32	Y	N	06757168001514643	AZ	
1684733	9	48.51	Y	N	06757168001514667	BA	
1684733	8	39.16	Y	N	06757168001514674	CG	
1684733	20	96.58	Y	N	06757168001514681	OK	
1685965	30	335.58	Y	N	06757168001514643	AZ	
1685965	48	500.96	Y	N	06757168001514667	BA	
1685965	42	461.10	Y	N	06757168001514681	OK	

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 / 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.		SHIPPER SIGNATURE 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.	
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 said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE 7/29	

Date: 7/29/2025 11:49:49 AM

## Master Bill Of Lading

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SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO:		CUSTOMER ORDER INFORMATION	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 SID#: _____ FOB: <input type="checkbox"/>		Name: Macys Merge Center co Dynamic DC#: _____ Address: 1124 Elon Place Div. _____ City/State/Zip: High Point, NC 27260 SID#: _____ FOB: <input type="checkbox"/>		Name: _____ Address: _____ City/State/Zip: _____		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM	
Master Bill of Lading Number: 06757168001519334		CARRIER NAME: Knight Transportation Trailer number: 220716 Seal number(s): 69480813 SCAC: KNIG Pro Number: 0000		Freight Charge Terms: Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM	
SPECIAL INSTRUCTIONS: Load #: 00052435877M		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		Appointment Time AM PM Actual Driver Arrival Time AM PM Driver Departure Time AM PM	
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#	
1687373	15	173.95	Y N	06757168001514544	DV		
1687373	41	468.35	Y N	06757168001514551	HA		
1687373	33	375.87	Y N	06757168001514568	JP		
1687373	58	637.04	Y N	06757168001514582	SC		
1687373	99	1133.99	Y N	06757168001514599	ST		
1687373	40	444.36	Y N	06757168001514605	SW		
1687373	66	764.94	Y N	06757168001514629	TM		
1687373	54	604.86	Y N	06757168001514636	TU		
1687659	3	39.63	Y N	06757168001514490	BA		
1687659	2	26.42	Y N	06757168001514551	HA		
1687659	1	13.21	Y N	06757168001514582	SC		
1687659	4	52.84	Y N	06757168001514599	ST		
1687659	1	11.45	Y N	06757168001514629	TM		

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 \_\_\_\_\_ 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 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.

Date: 10/18/2025 9:46:46 PM

# Master Bill Of Lading

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001519334	
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: Knight Transportation	
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: 220716 Seal number(s): 69480813 SCAC: KNIG Pro Number: 0000	
<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 #: 00052435877M		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING	
		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#
1687285	7	33.77	Y N	06757168001514599	ST	
1687373	58	637.04	Y N	06757168001514582	SC	
1688495	5	56.15	Y N	06757168001514605	SW	
1685965	46	500.96	Y N	06757168001514667	BA	
1687285	3	14.19	Y N	06757168001514568	JP	
1687373	88	1007.82	Y N	06757168001514520	CL	
1687373	15	173.95	Y N	06757168001514544	DV	
1687373	33	375.87	Y N	06757168001514568	JP	
1687373	54	604.88	Y N	06757168001514636	TU	
1688495	17	191.79	Y N	06757168001514551	HA	
1688495	20	213.38	Y N	06757168001514582	SC	
1688495	9	104.81	Y N	06757168001514599	ST	
1684656	7	88.95	Y N	06757168001514513	CI	

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>
<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.	<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver
<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets sold 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.

**Customer:** MACYS HOME SECAUCUS DC

**Ship Date:** 07/29/2025

**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
1684656	N/A	MCG51N-4766	194136475617	Egyptian Cotton Blanket	EA	2	2	1	2	1
1684656	N/A	MCG51N-4767	194136475570	Egyptian Cotton Blanket	EA	2	2	1	2	1
1684656	N/A	MCG51N-4774	194136475518	Egyptian Cotton Blanket	EA	2	2	1	2	1
1686944	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	54	9	54	9
1686944	N/A	MCG21-5355N	194145781556	CC 2 Pack Pillow Protector	EA	6	12	2	12	2
1687285	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	24	4	24	4
1687373	100202727TW	MCG51-5627	194137249729	T Blanket	EA	2	2	1	2	1
1687373	100202727TW	MCG51-5628	194137249644	F/Q Blanket	EA	2	24	12	24	12
1687373	100202727TW	MCG51-5629	194137249682	K Blanket	EA	2	22	11	22	11
1687373	100202727TW	MCG51-5631	194137249637	F/Q Blanket	EA	2	28	14	28	14
1687373	100202727TW	MCG51-5633	194137249743	T Blanket	EA	2	2	1	2	1
1687373	100202727TW	MCG51-5634	194137249668	F/Q Blanket	EA	2	20	10	20	10
1687373	100202727TW	MCG51-5637	194137249651	F/Q Blanket	EA	2	10	5	10	5
1687373	100202727TW	MCG51-5638	194137249699	K Blanket	EA	2	8	4	8	4
1687659	N/A	MCG51N-4768	194136475532	Egyptian Cotton Blanket	EA	2	2	1	2	1
1688495	100202727TW	MCG51-5628	194137249644	F/Q Blanket	EA	2	6	3	6	3
1688495	100202727TW	MCG51-5629	194137249682	K Blanket	EA	2	4	2	4	2
1688495	100202727TW	MCG51-5631	194137249637	F/Q Blanket	EA	2	4	2	4	2
1688495	100202727TW	MCG51-5633	194137249743	T Blanket	EA	2	4	2	4	2
1688495	100202727TW	MCG51-5634	194137249668	F/Q Blanket	EA	2	12	6	12	6
1688495	100202727TW	MCG51-5635	194137249705	K Blanket	EA	2	2	1	2	1
1688495	100202727TW	MCG51-5636	194137249736	T Blanket	EA	2	2	1	2	1
1688495	100202727TW	MCG51-5637	194137249651	F/Q Blanket	EA	2	2	1	2	1
1688495	100202727TW	MCG51-5638	194137249699	K Blanket	EA	2	4	2	4	2

**Total Weight:** 969.59  
**Total Quantity Ordered:** 254  
**Total Cartons Ordered:** 97  
**Total Quantity Shipped:** 254  
**Total Cartons Shipped:** 97