

Date: 8/11/2025 11:44:13 AM

Master Bill Of Lading

Page 1 of 5

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: 06757168001525373



929695389-0



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
 Trailer number: 14099
 Seal number(s): _____
 SCAC: FXFE
 Pro Number: 9296953890

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: _____
 Address: _____
 City/State/Zip: _____

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

SPECIAL INSTRUCTIONS:
 Load #: 00052449929S

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

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 (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
			BOL#	DC#	Supplier#		
1942034	2	22.90	Y	N	06757168001523614	HA	
1943508	7	33.11	Y	N	06757168001523553	AZ	
1941594	1	13.21	Y	N	06757168001523669	TM	
1943013	3	32.37	Y	N	06757168001523614	HA	
1943508	15	72.93	Y	N	06757168001523645	ST	
1940703	2	9.46	Y	N	06757168001523591	BA	
1942034	1	13.21	Y	N	06757168001523744	SC	
1943508	14	68.20	Y	N	06757168001523652	SW	
1943508	19	91.85	Y	N	06757168001523614	HA	
1940703	8	38.50	Y	N	06757168001523737	CL	
1941594	1	13.21	Y	N	06757168001523614	HA	
1943013	11	110.77	Y	N	06757168001523744	SC	
1943508	11	52.03	Y	N	06757168001523744	SC	

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.
[Signature] 8/11/25

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.
 246271 8-11-25
 [Signature] X14092

SHIP FROM		Master Bill of Lading Number: 06757168001525373	
Name: E & E COMPANY LTD			
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
SID#: _____ FOB: <input type="checkbox"/>			
SHIP TO		CARRIER NAME: Fedex Freight Priority	
Name: Macys Merge Center co Dynamic DC#: _____		Trailer number: 14099	
Address: 1124 Elon Place Div. _____		Seal number(s): _____	
City/State/Zip: High Point, NC 27260		SCAC: FXFE	
SID#: _____ FOB: <input type="checkbox"/>		Pro Number: 9296953890	
THIRD PARTY FREIGHT CHARGES BILL TO:		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	
SPECIAL INSTRUCTIONS: Load #: 00052449929S		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	
		AM PM	AM PM

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		ADDITIONAL SHIPPER INFO		
					BOL#	DC#	Supplier#
1941594	1	13.21	Y	N	06757168001523553	AZ	
1941594	9	112.95	Y	N	06757168001523737	CL	
1942034	1	11.45	Y	N	06757168001523652	SW	
1940703	1	4.73	Y	N	06757168001523652	SW	
1941594	8	91.38	Y	N	06757168001523645	ST	
1943013	4	37.88	Y	N	06757168001523720	CI	
1943508	15	72.93	Y	N	06757168001523683	TU	
1940703	6	29.04	Y	N	06757168001523720	CI	
1942034	4	40.30	Y	N	06757168001523645	ST	
1942034	2	26.42	Y	N	06757168001523689	TM	
1943013	4	43.16	Y	N	06757168001523652	SW	
1943508	23	111.43	Y	N	06757168001523737	CL	
1940208	1	13.21	Y	N	06757168001523768	CG	

<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>COD Amount \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>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 style="text-align: right;">Shipper Signature</p>
<p>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.</p>	<p>Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p> <p>Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>
<p>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.</p>	

Customer: MACYS HOME CHINA GROVE DC

Ship Date: 08/11/2025

SHIP FROM:

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

BILL TO:

MACY'S CFC 111 WHS
 7 W 7TH ST,
 CINCINNATI, OH 45202
 US

SHIP TO:

MACYS HOME CHINA GROVE DC
 475 NC 152 HWY
 CHINA GROVE, NC 28023
 US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
1940208	N/A	MCG51N-4774	194136475518	Egyptian Cotton Blanket	EA	2	2	1	2	1
1943684	N/A	MCG21-5354N	194145781563	CC 2 Pack Pillow Protector	EA	6	6	1	6	1
1943684	N/A	MCG21-5355N	194145781556	CC 2 Pack Pillow Protector	EA	6	12	2	12	2

Total Weight: 28.72
Total Quantity Ordered: 20
Total Cartons Ordered: 4
Total Quantity Shipped: 20
Total Cartons Shipped: 4



October 30, 2025

Dear Customer,

The following is the proof-of-delivery for tracking number: 9296953890

Delivery Information:

Status:	Delivered	Delivery date:	Aug 13, 2025 10:44
Signed for by:	** DRIVER SPOTTED **		
Service type:	FedEx Freight Priority		
Special Handling:			

Please see following page for Signature

Shipping Information:

Tracking number:	9296953890	Ship Date:	Aug 11, 2025
		Weight:	4456.0 LB/2023.02 KG
Recipient:		Shipper:	
HIGH POINT, NC, US,		PORT WENTWORTH, GA, US,	

Purchase Order

06757168001523737,06757168001523591,06757168001523614,1940703@0008#00039,1941594@0009#0013,1942034@0001#00012