

SHIP FROM		Master Bill of Lading Number: 06757163001056810
Name:	E & E COMPANY LTD	
Address:	221 Hanson Way	
City/State/Zip:	Woodland, CA 95776	
SID#:		FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME: GILBERT WEST
Name:	KOHL X-Dock Gilbert West	DC#:
Address:	701 Malaga St	Div.:
City/State/Zip:	Ontario, CA 91761	Trailer number: 18357
SID#:		Seal number(s): 69894030
	FOB: <input type="checkbox"/>	SCAC: GBWS
		Pro Number:

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:		
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS:		Appointment Time: 9:00 AM PM
ME# 910645383		Actual Driver Arrival Time: 9:00 AM PM
		Driver Departure Time: 10:30 AM PM


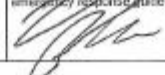
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
15545984	Dept#: 115	1	7.92	Y	N	06757163001056803 00816	
15778942	Dept#: 211	325	3644.11	Y	N	06757163001056773 00830	
15778942	Dept#: 211	278	3113.12	Y	N	06757163001056780 00840	
15778942	Dept#: 211	350	3958.04	Y	N	06757163001056797 00865	
Grand Total		954	10723.19				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	ctns			7.92		Bath Towel, Beach Towel	49260-4	175
953	ctns			10715.27		Comforters, Bedspreads	49017	200
954				10723.19		Grand Total		

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: <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.
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SHIPPER SIGNATURE / DATE <small>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.</small>  8/6/25	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 said to contain <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE <small>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.</small>  8-6-25
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Routing Sheet (R202507300651142)



Routing No.:	R202507300651142	Customer:	KOHLWHS	Location:	WDC
Ship To:	00830	Shipping Date:	08/04/2025	Cancel After Date/In DC Date:	08/09/2025
Total Cube:	988.65	Adjusted Percent(%):	20.00	Adjusted Cube:	1186.38
Total Ctns/Units:	325/325	Total Weight:	3644.11	Actual Ship Date:	08/04/2025
Estimated Pallet Count:	14	Estimated Pallet Weight(LB):	700.00	Routing:	
Carrier:		Freight Term:	Collect	Ship Method:	
Batch No.:	B20250721194709	Lane:		Customer PO No:	15778942
Instruction:	/00830				



Routing Sheet (R202507300651143)



Routing No.:	R202507300651143	Customer:	KOHLWHS	Location:	WDC
Ship To:	00840	Shipping Date:	08/04/2025	Cancel After Date/In DC Date:	08/09/2025
Total Cube:	845.54	Adjusted Percent(%):	20.00	Adjusted Cube:	1014.65
Total Ctns/Units:	278/278	Total Weight:	3113.12	Actual Ship Date:	08/04/2025
Estimated Pallet Count:	12	Estimated Pallet Weight(LB):	600.00	Routing:	
Carrier:		Freight Term:	Collect	Ship Method:	
Batch No.:	B20250721194709	Lane:		Customer PO No:	15778942
Instruction:	/00840				



Routing Sheet (R202507300651146)



Routing No.:	R202507300651146	Customer:	KOHLWHS	Location:	WDC
Ship To:	00865	Shipping Date:	08/04/2025	Cancel After Date/In DC Date:	08/09/2025
Total Cube:	1063.92	Adjusted Percent(%):	20.00	Adjusted Cube:	1276.70
Total Ctns/Units:	350/350	Total Weight:	3958.04	Actual Ship Date:	08/04/2025
Estimated Pallet Count:	15	Estimated Pallet Weight(LB):	750.00	Routing:	
Carrier:		Freight Term:	Collect	Ship Method:	
Batch No.:	B20250721194709	Lane:		Customer PO No:	15778942
Instruction:	/00865				



Late shipment for PO 1577894, shipped on 08-13-25, was for the DC's highlighted below. It has already been submitted by Kohl's, and validated, under CB2502324 in the amount of \$3,570.81.

Shipment No.	BOL No.	MBOL	Status	Customer	Location	Door	Ship To	Total Ctns	Ctns Palletized	Ctns With Tracking No.	Total Plts	Ship Date	Cust. PO No.	Carrier
<u>300105895</u>	06757163001058951	06757163001059040	Completed	KOHLWHS	WDC	138	00875	279	279	0	12	08/13/2025	15778942	GILBERT WEST
<u>300105894</u>	06757163001058944	06757163001059040	Completed	KOHLWHS	WDC	138	00855	205	205	0	9	08/13/2025	15778942	GILBERT WEST
<u>300105896</u>	06757163001058968	06757163001059040	Completed	KOHLWHS	WDC	138	00860	229	229	0	10	08/13/2025	15778942	GILBERT WEST