

Date: 10/27/2025 1:13:40 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757163001089511	
Name:	E & E COMPANY LTD		
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:		FOB: <input type="checkbox"/>	
SHIP TO		CARRIER NAME: Performance Team	
Name:	Mega-Merge CA	DC#:	
	ConsolidationLocation	Div.	
Address:	12801 Excelsior Drive	Trailer number:	226476
		Seal number(s):	69894416
City/State/Zip:	Santa Fe Springs, CA 90670	SCAC:	GLTN
SID#:		Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING (check box)	
SPECIAL INSTRUCTIONS:		Appointment Time	Actual Driver Arrival Time
Load #: 55202685		13:00 ^{AM} _{PM}	12:00 ^{AM} _{PM}
		Driver Departure Time	13:15 ^{AM} _{PM}

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
3272693	310	6552.18	Y	N	06757163001089498	BA	
3272693	80	1685.26	Y	N	06757163001089504	CG	
3275234	22	474.47	Y	N	06757163001089443	BA	
3275234	65	1387.39	Y	N	06757163001089450	CL	
3275234	7	167.75	Y	N	06757163001089467	DV	
3275234	35	766.00	Y	N	06757163001089474	JP	
3275234	34	681.90	Y	N	06757163001089481	SW	
Grand Total		553	11714.95				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	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(e) of NMFC Item 300</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
32	Pallet			1600.00		Pallet		70
		553	ctns	11714.95		Mattress Pads	149265	100

<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).

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.

<p>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></p> <p><i>Atencio</i> 10/27/25</p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" 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 <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></p> <p><i>[Signature]</i> 10-27-25</p>
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Customer: MACYS HOME SOUTH WINDSOR DC

Ship Date: 10/27/2025

SHIP FROM:

E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:

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

SHIP TO:

MACYS HOME SOUTH WINDSOR DC
301 GOVERNORS HWY
SOUTH WINDSOR, CT 06074
US

Cust. PO No.	Cust. SKU No.	Item No.	UPC	Description	UO M	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
3275234	100202727TW	MCG16-5679	194137248463	T Waterproof Mattress Pad	EA	6	24	4	24	4
3275234	100202727TW	MCG16-5680	194137248470	TXL Waterproof Mattress Pad	EA	6	18	3	18	3
3275234	100202727TW	MCG16-5681	194137248432	F Waterproof Mattress Pad	EA	6	12	2	12	2
3275234	100202727TW	MCG16-5682	194137248456	Q Waterproof Mattress Pad	EA	6	54	9	54	9
3275234	100202727TW	MCG16-5683	194137248449	K Waterproof Mattress Pad	EA	6	24	4	24	4
3275234	100202727TW	MCG16-5685	194137247664	T Classic Mattress Pad	EA	6	24	4	24	4
3275234	100202727TW	MCG16-5687	194137247633	F Classic Mattress Pad	EA	6	12	2	12	2
3275234	100202727TW	MCG16-5688	194137247657	Q Classic Mattress Pad	EA	6	24	4	24	4
3275234	100202727TW	MCG16-5689	194137247640	K Classic Mattress Pad	EA	6	12	2	12	2

Total Weight: 681.9
Total Quantity Ordered: 204
Total Cartons Ordered: 34
Total Quantity Shipped: 204
Total Cartons Shipped: 34